E 1040 Department of the Treasury—Internal Revenue Service U.S. Individual Income Tax Return

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OMB No. 1545-0074

IRS Use Only-Do not write or staple in this space.

Filing Status	s 🔀 S	Single Married filing jointly	Marrie	ed filing separately (M	(IFS)	Head of	househ	old (HOF	H)		ying survi se (QSS)	ving		
Check only one box.	If yo	u checked the MFS box, enter the na	ame of y	our spouse. If you ch	necke	d the HOH or	QSS b	ox, ente	r the c			e qualifying		
	pers	on is a child but not your dependent	:											
Your first name	and mi	iddle initial	Last nar	Last name							Your social security number			
RAHUL REDDY LOTI				TLA						***-**-9657				
If joint return, spouse's first name and middle initial Last name				name					Sp	Spouse's social security number				
Home address	(numbe	er and street). If you have a P.O. box, see	instructio	ons			A	ot. no.	D.	ocidon	tial Electio	n Campaign		
2500 MERCHANTS ROW BLVD				91							ere if you, o			
City, town, or post office. If you have a foreign address, also TALLAHASSEE			complete spaces below. State			e.	ZIP code		sp	spouse if filing jointly, want \$3				
							323	011		to go to this fund. Checking a box below will not change				
Foreign country name			Foreign province/state/county			100 W 15 D 1.00	~		your tax or refund.					
	,						, c.c.g.				You	Spouse		
Digital	At ar	ny time during 2022, did you: (a) rec	eive (as	a reward, award, or	paym	ent for prope	rty or s	ervices)	; or (b)	sell,				
Assets	exch	ange, gift, or otherwise dispose of a	digital a	74 100			asset)?	(See in:	structi	ons.)	Yes	⊠ No		
Standard	Som	Someone can claim: You as a dependent Your spouse as a dependent												
Deduction		Spouse itemizes on a separate retur	n or you	were a dual-status	alien									
Age/Blindnes:	s You:	☐ Were born before January 2, 1	958	Are blind Spo	use:	☐ Was bor	n befo	re Janua	ıry 2, 1	958	Is blin	nd		
Dependent	s (see	instructions):		(2) Social security		(3) Relationsh	nip (4)	Check th	ne box i	f qualifie	es for (see i	nstructions):		
If more	(1) Fi	irst name Last name		number		to you		Child tax cre		redit Credit for other depe		er dependents		
than four												<u> </u>		
dependents, see instruction	s ——													
and check _							·					<u></u>		
here L														
Income	1a	Total amount from Form(s) W-2, b				·/ ·) · · ·				1a	7	6,671.		
Attack Farm(a)	b	Household employee wages not re	•		•					1b				
Attach Form(s) W-2 here. Also	С		reported on line 1a (see instructions)							1c				
attach Forms	d	Medicaid waiver payments not reported on Form(s) W-2 (see instructions)							1d					
W-2G and 1099-R if tax	е	Taxable dependent care benefits from Form 2441, line 26							1e					
was withheld.	f	Employer-provided adoption bene	tits from	Form 8839, line 29			•			1f				
If you did not	g	Wages from Form 8919, line 6 .	. ///							1g				
get a Form W-2, see	h	Other earned income (see instruct					i ·			1h		0.		
instructions.	i	Nontaxable combat pay election (s	see instr	uctions)	•	<u>1i</u>				4-	7	6 671		
A#	Z	Add lines 1a through 1h Tax-exempt interest	2a		h To					1z 2b	/	6,671.		
Attach Sch. B if required.	2a 3a		3a			xable interest dinary divider				3b				
	4a	y sales and a second se	4a	_		xable amount				4b				
tondord.	5a		5a			xable amount				5b				
Standard Deduction for—	6a		6a			xable amount				6b				
Single or Married filing	С									OD				
separately,	7	If you elect to use the lump-sum election method, check here (see instructions)								7	1			
\$12,950 Married filing	8	Other income from Schedule 1, line 10								8	_	7,177.		
jointly or	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income								9		9,494.		
Qualifying surviving spouse,	10	Adjustments to income from Sche								10		- ,		
\$25,900 Head of	11 /	Subtract line 10 from line 9. This is your adjusted gross income								11	6	9,494.		
household,	12	Standard deduction or itemized deductions (from Schedule A)								12		2,950.		
\$19,400 If you checked	13	Qualified business income deduct			15	5-A				13		_,,,,,,,		
any box under Standard	14	Add lines 12 and 13								14	1	2,950.		
Deduction,	15	Subtract line 14 from line 11. If zero or less, enter -0 This is your taxable income								15		6,544.		
see instructions.														

Form 1040 (2022	2)			Page 2	
Tax and	16	Tax (see instructions). Check if any from Form(s): 1 8814 2 4972 3	16	8,053.	
Credits	17	Amount from Schedule 2, line 3	17		
	18	Add lines 16 and 17	18	8,053.	
	19	Child tax credit or credit for other dependents from Schedule 8812	19		
	20	Amount from Schedule 3, line 8	20		
	21	Add lines 19 and 20	21		
	22	Subtract line 21 from line 18. If zero or less, enter -0	22	8,053.	
	23	Other taxes, including self-employment tax, from Schedule 2, line 21	23	0.	
	24	Add lines 22 and 23. This is your total tax	24	8,053.	
Payments	25	Federal income tax withheld from:			
	а	Form(s) W-2			
	b	Form(s) 1099			
	C	Other forms (see instructions)			
	d	Add lines 25a through 25c	25d	8,329.	
If you have a	26	2022 estimated tax payments and amount applied from 2021 return	26	>	
qualifying child, attach Sch. EIC.	27	Earned income credit (EIC)	Y		
	28	Additional child tax credit from Schedule 8812			
	29	American opportunity credit from Form 8863, line 8			
	30	Reserved for future use			
	31	Amount from Schedule 3, line 15			
	32	Add lines 27, 28, 29, and 31. These are your total other payments and refundable credits	32		
	33	Add lines 25d, 26, and 32. These are your total payments	33	8,329.	
Refund	34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid	34	276.	
	35a	Amount of line 34 you want refunded to you . If Form 8888 is attached, check here	35a	276.	
Direct deposit? See instructions.	b	Routing number * * * * * * * X X X X X C Type: Checking Savings			
	d	Account number * * * * * * * * *			
	36	Amount of line 34 you want applied to your 2023 estimated tax			
Amount You Owe	37	Subtract line 33 from line 24. This is the amount you owe . For details on how to pay, go to www.irs.gov/Payments or see instructions	37		
	38	Estimated tax penalty (see instructions)			
Third Party	Do	you want to allow another person to discuss this return with the IRS? See			
Designee		structions	oelow.	X No	
		signee's Phone Personal identi	fication		
	nai		Soften U.S.		
Sign		der penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to lief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which			
Here				nt you an Identity	
	10			IN, enter it here	
Joint return?		SOFTWARE ENGINEER (see	inst.)		
See instructions. Keep a copy for	Sp			nt your spouse an	
your records.			tity Prote inst.)	ection PIN, enter it here	
, ou. 10001401					
		one no. (334) 467-6322 Email address LRAHULREDDY.LOTLA@GMAIL.COM sparer's name Preparer's signature Date PTIN		Check if:	
Paid			2702	Self-employed	
Preparer	2				
Use Only	-		Phone no. (678) 965-9522 Firm's EIN **-**5487		
	1.00	III O GGGIOGO DE LO TROUTE DE LA DEROTRO METOTA DA COUTA DE LI FILITI	O LIIV	J40 /	