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

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

Filing Status	s 🔀 S	Single Married filing jointly	Marrie	ed filing separately (N	ЛFS)	Head of	househo	ld (HOF	H) [		fying survi	ving	
Check only	lf vo	u checked the MFS box, enter the n	omo of v	our angues If you o	hook	ad the UOU or	. OSS b.	v onto	r tha		se (QSS)	a u alifuina	
one box.		on is a child but not your dependent		our spouse. II you c	neck	ea the HOH of	ี นูออ มีเ	ix, ente	rtne	Crilia S i	iame ii me	qualitying	
Vour first name			Last na	me						/our soc	ial security	number	
										Your social security number			
SREEKAR REDDY PEDD  If joint return, spouse's first name and middle initial Last nar				SDDI st name						073-75-1339  Spouse's social security number			
ii joint return, s	pouses	s instructive and middle initial	Lastrial						`	pouse s	300iai 300i	inty number	
Home address	(numbe	er and street). If you have a P.O. box, see	instructio	ons.			Api	. no.	A F	Prosiden	tial Flaction	. Campaign	
5960 SIEGEN LN							1 '	10		Presidential Election Campaign Check here if you, or your			
City, town, or post office. If you have a foreign address, also complete space				paces below. State ZIP			ZIP cod	P code spo			spouse if filing jointly, want \$3		
BATON ROUGE				10 COMPANY OF THE TOTAL OF THE			- 10 35 35 35				to go to this fund. Checking a box below will not change		
						10.00	-			or refund.	nange		
· · · · · · · · · · · · · · · · · · ·	,			g p		,					You	Spouse	
Digital	At ar	ny time during 2022, did you: (a) rec	eive (as	a reward award or	pavr	ment for prope	erty or se	rvices):	or (h	o) sell			
Assets		ange, gift, or otherwise dispose of a								100	Yes	⊠ No	
Standard		eone can claim: You as a de					7	$\overline{\nabla}$		,,,,,			
Deduction	_	Spouse itemizes on a separate retur		_									
				The same that th					_				
		Were born before January 2, 1	958 _	Are blind Spo	ouse		1.0	-	,		☐ Is blir		
Dependent		see instructions):		(2) Social security		(3) Relationsh	hip (4) Check the bo			ox if qualifies for (see inst		•	
If more	(1) Fi	irst name Last name		number		to you			ax cred	dit C	Credit for othe	er dependents	
than four dependents,									4				
see instruction	s							L	_				
and check	,							L	┽			<u> </u>	
here	<u> </u>							L					
Income	1a	Total amount from Form(s) W-2, b						• •		1a	8	3,283.	
Attach Form(s)	b	Household employee wages not re								1b			
W-2 here. Also	С	Tip income not reported on line 1a							•	1c			
attach Forms	d	Medicaid waiver payments not rep			nstru	ictions)				1d			
W-2G and 1099-R if tax	e	Taxable dependent care benefits f								1e			
was withheld.	f	Employer-provided adoption bene								1f			
If you did not	g									1g			
get a Form W-2, see	h	Other earned income (see instruct					i .	•		1h		0.	
instructions.	i	Nontaxable combat pay election (s Add lines 1a through 1h	see msu	uctions)		<u>1i</u>				1-	Q	3 <b>,</b> 283.	
A#	2a		2a		 Ь Т	axable interest				1z 2b	0.	39.	
Attach Sch. B if required.	3a		3a	33.		ordinary divide				3b		33.	
	4a		4a	33.		axable amoun				4b			
Stondord	5a	1200	5a	,		axable amoun				5b			
Standard Deduction for—	6a		6a			axable amoun				6b			
Single or Married filing	C	If you elect to use the lump-sum e	2000000	method check here						OD			
separately,	7	Capital gain or (loss). Attach Sche								7		22.	
\$12,950 Married filing	8	Other income from Schedule 1, lin							. ш	8	_	9,418.	
jointly or	9									9	T	3,959.	
Qualifying surviving spouse,	10	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your <b>total income</b>								10	†	<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>	
\$25,900 Head of	11		obtract line 10 from line 9. This is your <b>adjusted gross income</b>							11	7	3 <b>,</b> 959.	
household,	12	Standard deduction or itemized deductions (from Schedule A)								12		2 <b>,</b> 950.	
\$19,400 If you checked	13	Qualified business income deduction from Form 8995 or Form 8995-A									1	<u>-,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>	
any box under Standard	14	Add lines 12 and 13									1	2 <b>,</b> 950.	
Deduction,	15	Subtract line 14 from line 11. If zero or less, enter -0 This is your <b>taxable income</b>							14		1,009.		
see instructions.				,			250					_,	

Form 1040 (2022	2)			Page <b>2</b>	
Tax and	16	Tax (see instructions). Check if any from Form(s): 1  8814  2  4972  3	16	9,037.	
Credits	17	Amount from Schedule 2, line 3	17		
	18	Add lines 16 and 17	18	9,037.	
	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	9,037.	
	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	9,037.	
Payments	25	Federal income tax withheld from:			
	а	Form(s) W-2			
	b	Form(s) 1099			
	С	Other forms (see instructions)			
	d	Add lines 25a through 25c	25d	11,090.	
If you have a qualifying child,	26	2022 estimated tax payments and amount applied from 2021 return	26		
	27	Earned income credit (EIC)			
attach Sch. EIC.	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	11,090.	
Refund	34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you <b>overpaid</b>	34	2,053.	
riorana	35a	Amount of line 34 you want <b>refunded to you</b> . If Form 8888 is attached, check here	35a	2,053.	
Direct deposit?	b	Routing number X X X X X X X X X X X C Type: Checking Savings			
See instructions.	d	Account number X X X X X X X X X X X X X X X X X X X			
	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 <b>amount you owe</b> .  For details on how to pay, go to <i>www.irs.gov/Payments</i> or see instructions	37		
	38	Estimated tax penalty (see instructions)			
Third Party Designee	Do	you want to allow another person to discuss this return with the IRS? See			
	ins	structions	elow.	× No	
		esignee's Phone Personal identii me no. Personal identii number (PIN)			
			Marie Lance		
Sign		nder 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? See instructions. Keep a copy for your records.		SOFTWARE DEVELOPER IT (see	inst.)		
	Sp			nt your spouse an	
			inst.)	ection PIN, enter it here	
	Ph	1.00			
		eparer's name Preparer's signature PSREEKARREDDY@GMAIL.COM		Check if:	
Paid		M PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA RAM SAGAR GUPTA TALLAM 04/14/2023 P0208:	2703	Self-employed	
Preparer					
Use Only			one no. (678) 965-9522 m's EIN 84-3171965		
	CLIIV	07 01/1200			