1040		rtment of the Treasury—Internal Revenue Servi 5. Individual Income Tax		rn 202	22	OMB No. 1545	-0074	IRS Use Only-	–Do not w	rite or staple ir	ι this space.
Filing Status Check only one box.	lf yo	Single D Married filing jointly D warried filing jointly D warried filing jointly D warried filing jointly D warried filing jointly and the second se	ame of yo	d filing separately our spouse. If you	```			()	spou	lifying survi use (QSS) name if the	U
Your first name		on is a child but not your dependent ddle initial	: Last nam	10					Your so	cial security	v number
NAVYA BH			ALLA						108-67-4119		
		first name and middle initial	Last nam	ne							, urity number
		r and street). If you have a P.O. box, see	instruction	ns.			A	pt. no.		ntial Electio	n Campaign
14 MADDE										if filing joint	
City, town, or post office. If you have a foreign address, also complete sp EDISON							088		to go to this fund. Checking a box below will not change		
		Fo	Foreign province/state/county				n postal code		or refund.	nange	
										You	Spouse
Digital Assets		ny time during 2022, did you: (a) rec ange, gift, or otherwise dispose of a								Yes	X No
Standard		eone can claim: You as a de	-				assel	r (See Instru	0115.)		
Deduction		Spouse itemizes on a separate retur	n or you	were a dual-status	s alier						
Age/Blindness	You:	Were born before January 2, 1	958	Are blind	ouse	: 🗌 Was bo	rn befo	ore January 2	, <mark>19</mark> 58	🗌 Is blii	nd
Dependents	s (see	instructions):		(2) Social securi	ty	(3) Relationsh	nip (4) Check the bo	x if qualit		,
If more	(1) Fi	rst name Last name		number	_	to you		Child tax cr	edit	Credit for oth	er dependents
than four dependents,										L	
see instructions	s									L	
and check here										L	
	1a	Total amount from Form(s) W-2, b	ox 1 (see	instructions)					1a		2,790.
Income	b	Household employee wages not re							1b		<u></u>
Attach Form(s)	С	Tip income not reported on line 1a (see instructions)							1c		
W-2 here. Also attach Forms	d	Medicaid waiver payments not rep	orted on	Form(s) W-2 (see	instru	uctions)			1d		
W-2G and	е	Taxable dependent care benefits f	rom Forn	n 2441, line 26					1e		
1099-R if tax was withheld.	f	Employer-provided adoption bene	fits from	Form 8839, line 2	9.				1f		
If you did not	g	Wages from Form 8919, line 6 .							1g		_
get a Form	h	Other earned income (see instruct	ions) .				·, ·		1h		0.
W-2, see instructions.	i	Nontaxable combat pay election (see instru	ictions)		1					
	Z	Add lines 1a through 1h	· · ·						1z	9	2,790.
Attach Sch. B	2a	Tax-exempt interest	2a		bΤ	axable interes	t.		2b		
if required.	3a	Qualified dividends	3a		b	Ordinary divide	nds .		3b	1	_
	4a	IRA distributions	4a		bΤ	axable amoun	t		4b		
Standard	5a		5a		b T	axable amoun	t		5b	1	
 Deduction for — Single or 	6a		6a			axable amoun	t	· · · <u>-</u>	6b		
Married filing separately,	С	If you elect to use the lump-sum e					• •	· · ·			
\$12,950	7	Capital gain or (loss). Attach Schedule D if required. If not required, check here							7		
 Married filing jointly or 	8	Other income from Schedule 1, line 10						8		9,923.	
Qualifying spouse,	9 Add lines 12, 20, 30, 40, 50, 60, 7, and 8. This is your total income							9		2,867.	
\$25,900	10	Adjustments to income from Sche				•••••	• •		10 11		0.067
Head of household, 11 Subtract line 10 from line 9. This is your adj Standard doduction on iterational doduction				-							2,867.
\$19,400	12	Standard deduction or itemized					· ·		12		2,950.
 If you checked any box under 	13	Qualified business income deduct				ю-А.,	• •		13		0.050
Standard Deduction,	14 15	Add lines 12 and 13 Subtract line 14 from line 11. If zer				taxable incom			14	_	2,950.
see instructions.	15		U UI IESS	, enter -0 This is	your				15	6	9,917.

For Disclosure, Privacy Act, and Paperwork Reduction Act Notice, see separate instructions.

Form **1040** (2022)

Form 1040 (2022	2)			Page 2						
Tax and	16	Tax (see instructions). Check if any from Form(s): 1 8814 2 4972 3 .	16	11,001.						
Credits	17	Amount from Schedule 2, line 3	17							
	18	Add lines 16 and 17	18	11,001.						
	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	11,001.						
	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	11,001.						
Payments	25	Federal income tax withheld from:								
	a	Form(s) W-2	· .	<u> </u>						
	b	Form(s) 1099								
	С	Other forms (see instructions)								
	d	Add lines 25a through 25c	25d	12,239.						
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	12,239.						
Refund	34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid	34	1,238.						
	35a	Amount of line 34 you want refunded to you. If Form 8888 is attached, check here	35a	1,238.						
Direct deposit?	b	Routing number X	s							
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 36								
Amount	37	Subtract line 33 from line 24. This is the amount you owe .								
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	ins	tructions	e below.	X No						
	De	signee's Phone Personal ide ne no. Public Personal ide								
			,							
Sign	Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete, Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.									
Here	Yo	ur signature Date Your occupation If	the IRS ser	nt you an Identity						
		Pi	rotection P	IN, enter it here						
Joint return?		SOFTWARE DEVELOPER (S	ee inst.)							
See instructions. Keep a copy for	Sp			nt your spouse an						
your records.			ee inst.)	ection PIN, enter it here						
	Ph		,							
Paid		one no. (203) 892-2725 Email address NAVYAREDDY.ALLA@GMAIL.COM eparer's name Preparer's signature Date PTIN		Check if:						
			2082703 Self-employed							
Preparer										
Use Only										
			III S EIN	84-3171965						
Go to www.irs.gov/Form1040 for instructions and the latest information. BAA REV 03/22/23 PRO Form 1040 (2022)										