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

2022

OMB No. 1545-0074

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

Filing Status Check only one box.		Single Married filing jointly uchecked the MFS box, enter the n	_	d filing separately (N	ŕ	_	nousehold (HO	,	spous	ying surviv e (QSS)	Ü
OHO DOX.	-	on is a child but not your dependent	-	our spouse. It you c	TICORCC		QOO DOX, CITE	.ci tiic ci	ilia 3 il	arric ii tric	quantynig
Your first name	and mi	ddle initial	Last nar	me				Yo	ur soci	al security	number
JASWANTH RAI KOTN				NI					***-**-9588		
If joint return, s	pouse's	first name and middle initial	Last nar	me				Sp	ouse's	social secu	rity number
Home address	(numbe	er and street). If you have a P.O. box, see	instructio	ons.			Apt. no.	Pr	esident	ial Election	Campaign
600 WESTINGHOUSE RD						1203	CF	Check here if you, or your			
	7.1 1912/191	ce. If you have a foreign address, also co	mplete sp	paces below.	State		ZIP code			filing jointly	
GEORGETOWN				TX 7			78626			his fund. Ch v will not ch	
			Foreign province/state/county Fo			Foreign postal of	ode yo	our tax or refund.			
										You	Spouse
Digital Assets		ny time during 2022, did you: (a) rec ange, gift, or otherwise dispose of a		THE RESIDENCE OF THE PROPERTY OF THE PARTY.		2000-00-00-00-00-00-00-00-00-00-00-00-00				Yes	⊠ No
Standard		eone can claim: You as a de									
Deduction		Spouse itemizes on a separate retur									
Age/Blindness	You:	☐ Were born before January 2, 1	958	Are blind Spo	ouse:	☐ Was bor	n before Janu	•		☐ Is bline	
Dependents	s (see	instructions):		(2) Social security	/	(3) Relationsh	ip (4) Check t	the box if	° 1	s for (see in	
If more	(1) Fi	rst name Last name		number		to you	Child	tax credit	: C	redit for other	dependents
than four	2										
dependents, see instruction:	s ——										
and check						UP		Ц			
here											
Income	1a	Total amount from Form(s) W-2, b							1a 1b	108	3,323.
	b	Household employee wages not reported on Form(s) W-2									
Attach Form(s) W-2 here. Also	C	Tip income not reported on line 1a (see instructions)									
attach Forms	d	Medicaid waiver payments not reported on Form(s) W-2 (see instructions)									
W-2G and 1099-R if tax	е	Taxable dependent care benefits from Form 2441, line 26									
was withheld.	f	Employer-provided adoption bene		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					1		1h		0.
instructions.	I -	Nontaxable combat pay election (see instru	uctions)	• •	<u>1i</u>			4_	100	222
AII	Z	Add lines 1a through 1h	0-		 h To:				1z	100	3,323.
Attach Sch. B if required.	2a		2a 3a			able interest Iinary divider			2b 3b		
	3a 4a		4a			able amount			4b		
Standard	5a		5a						5b		
Deduction for—	6a		6a						6b		
Single or Married filing	C	_		nethod check here					O.D		
separately,	7	If you elect to use the lump-sum election method, check here (see instructions)									
\$12,950 Married filing	8	Other income from Schedule 1, line 10							8	-8	3,060.
jointly or	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income							9		,263.
Qualifying surviving spouse,	10	Adjustments to income from Sche		10	100	, _ 55 .					
\$25,900 Head of	11	Adjustments to income from Schedule 1, line 26								100	,263.
household,	12	Standard deduction or itemized deductions (from Schedule A)									2,950.
\$19,400 If you checked any box under Standard	13	Qualified business income deduction from Form 8995 or Form 8995-A									, - 5 5 6
	14	Add lines 12 and 13								12	2,950.
Deduction,	15										,313.
see instructions.									15		

Form 1040 (2022	2)			Page 2	
Tax and	16	Tax (see instructions). Check if any from Form(s): 1 8814 2 4972 3	16	14,829.	
Credits	17	Amount from Schedule 2, line 3	17		
	18	Add lines 16 and 17	18	14,829.	
	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	14,829.	
	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	14,829.	
Payments	25	Federal income tax withheld from:			
	a	Form(s) W-2			
	b	Form(s) 1099			
	C	Other forms (see instructions)			
	d	Add lines 25a through 25c	25d	16,847.	
	26	2022 estimated tax payments and amount applied from 2021 return	26		
If you have a qualifying child,	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	5		
	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	16,847.	
Refund	34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid	34	2,018.	
neiuna	35a	Amount of line 34 you want refunded to you . If Form 8888 is attached, check here	35a	2,018.	
Direct deposit?	b	Routing number * * * * * * * X X X X X C Type: Checking Savings			
See instructions.	d	Account number * * * * * * * * *			
	36	Amount of line 34 you want applied to your 2023 estimated tax 36			
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)	37		
Third Party	7-10-1	by you want to allow another person to discuss this return with the IRS? See			
Designee		structions	below.	⋉ No	
	De	signee's Phone Personal ident			
	nai	me no. number (PIN)			
Sign		der penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to			
Here		lief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of whic		-	
	Yo			nt you an Identity IN, enter it here	
Joint return?			inst.)	T T T T T T	
See instructions.	Sp		the IRS sent your spouse an		
Keep a copy for your records.			•	ection PIN, enter it here	
your records.	-		inst.)		
		one no. (571)842-2563 Email address JASWANTHKOTNI@GMAIL.COM		0, 1, "	
Paid		eparer's name Preparer's signature Date PTIN		Check if:	
Preparer	SYAM	M PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA RAM SAGAR GUPTA TALLAM 02/09/2023 *****		Self-employed	
Use Only	-		one no. (678) 965-9 <u>522</u>		
	Fin	m's address 245 ROONEY CT E BRUNSWICK NJ 08816 Firm	n's EIN	**-***1965	