1040		artment of the Treasury-Internal Revenue Servi S. Individual Income Tax		urn	202	2	OMB No. 1545	-0074	IRS Use Only	—Do not w	rite or staple i	n this space.	
Filing Status Check only one box.	lf yo	Single X Married filing jointly u checked the MFS box, enter the nation is a child but not your dependent	ame of y	Ũ	eparately (ise. If you c	,			. ,	spou	lifying surv use (QSS) a name if th	0	
Your first name	Your first name and middle initial Last name								Your social security number				
RAJENDRA REDDY PIT				TTU						***-	***-**-7604		
				ast name						Spouse'	Spouse's social security numbe		
fdbdf PITI				ĽU						***-	***-**-8559		
									ntial Electio	on Campaign			
4137 ST CHARLES BAY											nere if you,		
City, town, or post office. If you have a foreign address, also complete				spaces below. State Z								tly, want \$3	
SAN ANTONIO				TX					29		to go to this fund. Checking a box below will not change		
Foreign country name			F	Foreign province/state/county				Foreig			your tax or refund.		
											You	Spouse	
Digital	At ar	ny time during 2022, did you: (a) rece	eive (as	a reward	, award, or	payr	ment for prope	rty or	services); or	(b) sell,			
Assets	exch	ange, gift, or otherwise dispose of a	digital a	asset (or	a financial	inter	est in a digital	asset)	? (See instru	ictions.)	Yes	X No	
Standard	Som	eone can claim: 🗌 You as a de	pendent		Your spous	e as	a dependent						
Deduction		Spouse itemizes on a separate return	n or you	were a c	dual-status	alien	l.						
Age/Blindness	Vou	Were born before January 2, 1	58	Are bli	nd Sn	ouse		n hofe	ore January 2	1058	Is bli	ind	
		· · ·	500 L					1.	Check the b	12			
Dependents		instructions): irst name Last name		(2) 5	ocial securit number	У	(3) Relationsh to you	ID 17	Child tax c			ner dependents	
lf more than four				+++	-**-613	2				eun		X	
dependents,	ffc						Daughter					<u>×</u>	
see instructions	DIC	lbfdb PITTU		~ ~ ~ ~	-**-856	2	Daughter				L	<u> </u>	
and check here											L	<u> </u>	
	1a	Total amount from Form(s) W-2, bo	ov 1 (see	e instruc	tions)					. 1 a	-		
Income	b	Household employee wages not re								. 1b		5,052.	
Attach Form(s)	c	Tip income not reported on line 1a				· ·	· · · ·	• •		. 1c			
W-2 here. Also	d	Medicaid waiver payments not rep				instri	ictions)			. 1d			
attach Forms W-2G and	e	Taxable dependent care benefits f				in lotine				. 1e			
1099-R if tax	f	Employer-provided adoption bene								. 1f			
was withheld.	g	Wages from Form 8919, line 6.								. 1g			
lf you did not get a Form	h	Other earned income (see instructi	ons)							. 1h		0.	
W-2, see	i	Nontaxable combat pay election (s		uctions)			11	1 î					
instructions.	z	Add lines 1a through 1h								. 1z	5	73,852.	
Attach Sch. B	2a		2a			b T	axable interest	t .		. 2b	6		
if required.	3a		Ba			bC	ordinary divider	nds .		. 3b			
	4a	IRA distributions	la			bТ	axable amoun	t		. 4b	0		
Standard	5a	Pensions and annuities	5a				axable amoun			. 5b	6		
Deduction for—	6a	Social security benefits	ba 🛛			bТ	axable amoun	t		. 6b	0		
Single or Married filing	С	If you elect to use the lump-sum el	ection r	nethod, o	check here	(see	instructions)		[
separately, \$12,950	7	Capital gain or (loss). Attach Sched	lule D if	required	I. If not req	uired	, check here		[7			
 Married filing 	8	Other income from Schedule 1, line	e 10 .							. 8	-	8,083.	
jointly or Qualifying	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7,	and 8.	This is yo	our total in	com	e			. 9		55,769.	
surviving spouse, \$25,900	10	Adjustments to income from Scher	dule 1, li	ine 26						. 10			
Head of	11	Subtract line 10 from line 9. This is	your ac	djusted g	gross inco	me	1 1 1 1			. 11	6	5 <mark>5,7</mark> 69.	
household, \$19,400	12	Standard deduction or itemized	deducti	ons (fror	n Schedule	e A)				. 12		25,900.	
If you checked	13	Qualified business income deducti	on from	Form 89	95 or Forn	n 899	5-A			. 13			
any box under Standard	14	Add lines 12 and 13								. 14	2	25,900.	
Deduction, see instructions.	15	Subtract line 14 from line 11. If zer	o or less	s, enter -	0 This is	our	taxable incom	e.		. 15	3	39, <mark>869.</mark>	

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	4,374.
Credits	17	Amount from Schedule 2, line 3	17	
	18	Add lines 16 and 17	18	4,374.
	19	Child tax credit or credit for other dependents from Schedule 8812	19	1,000.
	20	Amount from Schedule 3, line 8	20	
	21	Add lines 19 and 20	21	1,000.
	22	Subtract line 21 from line 18. If zero or less, enter -0	22	3,374.
	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	3,374.
Payments	25	Federal income tax withheld from:		
. aj monto	а	Form(s) W-2		
	b	Form(s) 1099		
	С	Other forms (see instructions)		
	d	Add lines 25a through 25c	25d	7,359.
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	7	
	30	Reserved for future use		
	31	Amount from Schedule 3, line 15	1	
	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	7,359.
Refund	34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid	34	3,985.
	35a	Amount of line 34 you want refunded to you. If Form 8888 is attached, check here	35a	3,985.
Direct deposit?	b	Routing number * * * * * 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	37	Subtract line 33 from line 24. This is the amount you owe .		
You Owe	01	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	below.	× No
U	De	signee's Phone Personal identi	fication r	
	nar	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		ief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which		-
	Yo			it you an Identity N, enter it here
Joint return? See instructions.			inst.)	
	Sp	ouse's signature. If a joint return, both must sign. Date Spouse's occupation If the		t your spouse an
Keep a copy for your records.				ction PIN, enter it here
your records.			inst.)	
		one no. (512)708-9090 Email address RAJAPSOFT@GMAIL.COM		
Paid Preparer Use Only		eparer's name Preparer's signature Date PTIN		Check if:
	SYAM	1 PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA RAM SAGAR GUPTA TALLAM 02/02/2023 *****:	2703	Self-employed
	Fin		ne no. (678)965-9522
	Firi	m's address 245 ROONEY CT E BRUNSWICK NJ 08816 Firm	's EIN	**-**5487
Go to www.irs.go	ov/Forn	n1040 for instructions and the latest information. BAA REV 01/28/23 PRO		Form 1040 (2022)

irs.gov/Form1040 for instructions and t