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.

		Single 🛛 Married filing jointly	Marrie	d filing separately (N	/IFS)	Head of I	nousehold	(HOH)		lifying surviving use (QSS)		
Check only one box.	If yo	u checked the MFS box, enter the na	ame of v	our spouse. If you cl	heck	ed the HOH or	QSS box.	enter th	•	, ,		
	-	on is a child but not your dependent	-	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			,					
Your first name	ur first name and middle initial Last n				st name							
SHRUTHIN REDDY CHIN				NNI						***-**-8442		
If joint return, sp	ouse's	first name and middle initial	Last nan							Spouse's social security number		
VINITHA									***_	**-7311		
Home address (	numbe	r and street). If you have a P.O. box, see	instructio	ns.			Apt. n	0.	Preside	ntial Election Campaig		
									nere if you, or your			
City, town, or post office. If you have a foreign address, also complete spa				paces below. State			ZIP code			if filing jointly, want \$3 this fund. Checking a		
CONCORD				NC						ow will not change		
Foreign country name F			F	Foreign province/state/county			Foreign postal code y			or refund.		
										You Spous		
Digital	At ar	ny time during 2022, did you: (a) rece	eive (as a	a reward, award, or	payn	nent for prope	ty or servi	ces); or	(b) sell,			
Assets		ange, gift, or otherwise dispose of a								Yes X No		
Standard	Som	eone can claim:	pendent	☐ Your spouse	e as	a dependent						
<b>Deduction</b>		Spouse itemizes on a separate retur	n or you	were a dual-status	alien							
Ago/Blindness	Vau	Were born before January 2, 1	050	Are blind Spo	ouse	. □ Was ber	n before J	anuani	2 1050	☐ Is blind		
	-		936 _			(3) Relationsh				fies for (see instructions		
Dependents		rst name Last name		(2) Social security number		to you				Credit for other depender		
If more than four		\$5 - 1800 Brought April 20 - 40 40 10 - 40 4		***-**-800				Child tax cred				
dependents,	2	A REDDY CHINNI		***-**-800	5	Son						
see instructions								౼				
and check here	9					10.		ᅮ				
	1a	Total amount from Form(s) W-2, b	ox 1 (see	instructions) .					. 1a	253,671.		
Income	b	Household employee wages not re							. 1b			
Attach Form(s)	C	Tip income not reported on line 1a							. 10	_		
W-2 here. Also	d	Medicaid waiver payments not rep			netru				. 1d			
attach Forms W-2G and	e	Taxable dependent care benefits f			istru	Ctions)			. 1e			
1099-R if tax	f	Employer-provided adoption bene	-						. 16			
was withheld.	g	Wages from Form 8919, line 6.							. 1g			
If you did not get a Form	h	Other earned income (see instruct							. 1h			
W-2, see	i	Nontaxable combat pay election (s				1 1i	i			Ŭ.		
instructions.	z	Add lines 1a through 1h	SCC IIISUC	(10113)					. 1z	253,671.		
Attach Sch. B	2a		2a		h Ta	axable interest			. 2b			
if required.	3a		3a			rdinary divider			. 3b			
	4a		4a			axable amount			. 4b			
Standard	5a		5a			axable amount			. 5b			
Deduction for—	6a		6a			axable amount			. 6b			
Single or Married filing	С	If you elect to use the lump-sum e							. J			
separately,	7	Capital gain or (loss). Attach Schee	7									
\$12,950 Married filing	8	Other income from Schedule 1, line 10								-9,844.		
jointly or	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your <b>total income</b>								243,827.		
Qualifying surviving spouse,	10	Adjustments to income from Sche	. 9	-								
\$25,900 • Head of	11	Subtract line 10 from line 9. This is	. 11									
household,	12	Standard deduction or itemized							. 12			
\$19,400 If you checked	13	Qualified business income deduct				5-A			. 13			
any box under Standard	14								. 14			
Deduction,	15	Subtract line 14 from line 11. If zer							. 15			
see instructions.				,				•				

Form 1040 (202	2)			Page <b>2</b>
Tax and	16	Tax (see instructions). Check if any from Form(s): 1  8814  2  4972  3	16	39,973.
Credits	17	Amount from Schedule 2, line 3	17	
	18	Add lines 16 and 17	18	39,973.
	19	Child tax credit or credit for other dependents from Schedule 8812	19	2,000.
	20	Amount from Schedule 3, line 8	20	
	21	Add lines 19 and 20	21	2,000.
	22	Subtract line 21 from line 18. If zero or less, enter -0	22	37,973.
	23	Other taxes, including self-employment tax, from Schedule 2, line 21	23	110.
	24	Add lines 22 and 23. This is your total tax	24	38,083.
<b>Payments</b>	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	40,748.
If you have a qualifying child, attach Sch. EIC.	26	2022 estimated tax payments and amount applied from 2021 return	26	
	27	Earned income credit (EIC)		
	28	Additional child tax credit from Schedule 8812		
	29	American opportunity credit from Form 8863, line 8	1	
	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	40,748.
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	2,665.
	35a	Amount of line 34 you want <b>refunded to you</b> . If Form 8888 is attached, check here	35a	2,665.
Direct deposit? See instructions.	b	Routing number * * * * * * X X X X C Type: Checking Savings		
See instructions.	a	Account number * * * * * * * * * * * * * * * * * X X X X		
	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 <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)		
<b>Third Party</b>	Do	you want to allow another person to discuss this return with the IRS? See		
Designee	ins	structions	elow.	X No
	De nar	signee's Phone Personal identif me no. number (PIN)	ication	
<u> </u>			Alex Issa	A of very longer day and
Sign		der penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to ief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which		
Here				nt you an Identity
		Prote	ection P	N, enter it here
Joint return?		SOFTWARE ENGINEER (see	,	
See instructions. Keep a copy for	Sp			nt your spouse an ection PIN, enter it here
your records.		SOFTWARE ENGINEER (see	,	ection First, enter it here
	Ph	one no. (937) 931-4777 Email address SHRUTHINREDDY@GMAIL.COM		
		eparer's name Preparer's signature Date PTIN		Check if:
Paid		PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA RAM SAGAR GUPTA TALLAM 03/21/2023 *****2	2703	Self-employed
Preparer	17			678) 965-9522
Use Only			s EIN	**-***1965