1040		rtment of the Treasury–Internal Revenue Serv S. Individual Income Tax		turn	202	2	OMB No. 1545	-0074	IRS Use Only-	-Do not w	rite or staple	in this space.		
Filing Status Check only one box.	lf yo	Single X Married filing jointly [u checked the MFS box, enter the n on is a child but not your dependent	ame of						hold (HOH) [box, enter the	spou	use (QSS)	-		
Your first name and middle initial Last nam				ame	me							Your social security number		
SPANDANA K VUMM				MARASETTY						***-**-4612				
If joint return, sp	oouse's	first name and middle initial	Last n	ame						Spouse's social security number				
ATCHYUTA RAMAYYA VENNA				NA	A				***.		*-**-7460			
Home address	(numbe	r and street). If you have a P.O. box, see	instruct	tions.				A	Apt. no.	Presidential Election Campaign				
1584 ELL	PIPER CIR								Check here if you, or your					
City, town, or post office. If you have a foreign address, also complete sp					baces below. State					spouse if filing jointly, want \$3 to go to this fund. Checking a				
CLARKSVILLE				TN				370			ow will not			
Foreign country name				Foreign province/state/county			ty	Foreig	n postal code	your tax	or refund.			
											You	Spouse		
Digital Assets		ny time during 2022, did you: (a) rec ange, gift, or otherwise dispose of a									X Yes	No		
Standard	Som	eone can claim: 🗌 You as a de	pender	nt 🗌	Your spous	e as	a dependent							
Deduction		Spouse itemizes on a separate retur	n or yo	u were a	dual-status	alien	1							
Age/Blindness	You:	Were born before January 2, 1	958	Are b	lind Sp	ouse	: 🗌 Was bor	n befo	ore January 2	1958	🗌 Is bl	ind		
Dependents	(see	instructions):		(2) S	Social security	/	(3) Relationsh	ip (4) Check the bo	x if quali	fies for (see	instructions):		
If more	(1) Fi	rst name Last name		number to y			to you	Child tax cre		edit	Credit for ot	her dependents		
than four											[
dependents, see instructions											[
and check											[
here 🗌											[
Income	1 a	Total amount from Form(s) W-2, b	ox 1 (se	ee instruc	ctions) .		• • •			1 a	23	34 <u>,</u> 443.		
moonio	b	Household employee wages not re	eportec	on Form	n(s) W-2 .			· ·		1b	0			
Attach Form(s) W-2 here. Also	C	Tip income not reported on line 1a (see instructions)							1c					
attach Forms	d	Medicaid waiver payments not reported on Form(s) W-2 (see instructions)								1d	l)			
W-2G and	е	Taxable dependent care benefits	rom Fo	orm 2441,	line 26		• • • •			1e	0			
1099-R if tax was withheld.	f	Employer-provided adoption bene	fits from	m Form 8	839, line 29					1f				
If you did not	g	Wages from Form 8919, line 6 .						н.		1g				
get a Form	h	Other earned income (see instruct	ions)					ų .		1h	1	0.		
W-2, see instructions.	i	Nontaxable combat pay election (see inst	tructions)			1i							
	z	Add lines 1a through 1h								1z	23	34,443.		
Attach Sch. B	2a	Tax-exempt interest	2a			b T	axable interest			2b	0			
if required.	3a	Qualified dividends	3a			bC	Ordinary divider	nds .		3b				
	4a	IRA distributions ,	4a			bТ	axable amount			4b	0			
Standard	5a	Pensions and annuities	5a			bТ	axable amount			5b				
Deduction for-	6a	Social security benefits	6a			bТ	axable amount	i		6b				
Single or Married filing	С	If you elect to use the lump-sum e	lection	method.	check here	(see	instructions)		🗆					
separately,	7	Capital gain or (loss). Attach Schedule D if required. If not required, check here												
\$12,950Married filing	8	Other income from Schedule 1, lin								8		L2 , 319.		
jointly or Qualifying	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7								9		22,124.		
surviving spouse,	10	Adjustments to income from Schedule 1, line 26												
\$25,900 • Head of	11	Subtract line 10 from line 9. This is								10		22,124.		
household,	shold, 12 Standard deduction or itemized deductions (from Schedule A)							12		25,900.				
\$19,400 • If you checked	13	Qualified business income deduct					5-A .			13				
any box under	14							<u>.</u>		14		25,900.		
Standard Deduction,	15	Subtract line 14 from line 11. If zer				 /our t	taxable incom	 е		15		96,224.		
see instructions.			5 51 100		5.111010)	our				13				

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	34,765.
Credits	17	Amount from Schedule 2, line 3	17	
	18	Add lines 16 and 17	18	34,765.
	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	34,765.
	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	34,765.
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	38,156.
If you have a qualifying child,	26	2022 estimated tax payments and amount applied from 2021 return	26	
	27	Earned income credit (EIC)	D	
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	38,156.
Refund	34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid	34	3,391.
	35a	Amount of line 34 you want refunded to you. If Form 8888 is attached, check here	35a	3,391.
Direct deposit?	b	Routing number * * * 0 6 1 4 c Type: X Checking Savings		
See instructions.	d	Account number * * * * * 0 8 2 7		
	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 Designee		you want to allow another person to discuss this return with the IRS? See		_
		tructions		X No
	De	signee's Phone Personal identi ne no. number (PIN)	fication	
0:000		der penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to	the bor	t of my knowlodgo and
Sign		ief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which		
Here	Yo	ur signature Date Your occupation If the	e IRS ser	nt you an Identity
		Prot		N, enter it here
Joint return?		SOFTWARE ENGINEER	inst.)	
See instructions. Keep a copy for	Sp			nt your spouse an action PIN, enter it here
your records.			inst.)	Clion Pill, enter it here
	Ph			
Paid Preparer Use Only		one no. (832)315-2460 Email address KVSPANDANA@GMAIL.COM eparer's name Preparer's signature Date PTIN		Check if:
		I PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA RAM SAGAR GUPTA TALLAM 02/22/2023 *****	2703	Self-employed
	-			
	-		ne no. ('s EIN	678)965-9522 **-**1965
Cataurin			5 EIN	
GO TO WWW.Irs.go	JVIFOM	n1040 for instructions and the latest information. BAA REV 02/10/23 PRO		Form 1040 (2022)

irs.gov/Form1040 for instructions and t