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	S Single Married filing jointly Married filing separately (MFS) Head of household (HOH)								Qualifying surviving spouse (QSS)				
Check only one box.	•	u checked the MFS box, enter the nation is a child but not your dependent	•	our spouse. If you	check	ed the HOH or	QSS box, enter t			` ,	e qualifying		
Your first name and middle initial			Last nar	Last name						Your social security number			
SITARAMPRASAD				MEDASANI						893-08-1509			
If joint return, spouse's first name and middle initial				Last name						Spouse's social security number			
Home address (number and street). If you have a P.O. box, see				instructions. Apt. no.					Presidential Election Campaign				
416 RED							er		Check here if you, or your spouse if filing jointly, want \$3				
	ost offic	ce. If you have a foreign address, also co	mplete sp	M14 AS 4.0 COSS SCS 180% SEA111			ZIP code		to go to this fund. Checking a				
<u>IRVING</u>				TX						w will not o	change		
Foreign country	y name		F	oreign province/state	e/count	у	Foreign postal code yo		our tax or refund. You Spouse				
Digital		y time during 2022, did you: (a) rec							-				
Assets		ange, gift, or otherwise dispose of a				19 9	asset)? (See instr	uctions	s.)	Yes	⊠ No		
Standard Deduction		eone can claim: You as a de Spouse itemizes on a separate retur		_		a dependent							
Age/Blindness	s You:	☐ Were born before January 2, 1	958	Are blind Sp	ouse	: Was bo	n before January	2, 195	8	☐ Is blir	nd		
Dependent	s (see	nstructions):		(2) Social securi	ty	(3) Relationsh	ip (4) Check the I	oox if qu	Jalifie	s for (see i	nstructions):		
If more	(1) Fi	rst name Last name		number		to you	Child tax	credit	С	redit for other	er dependents		
than four	_												
dependents, see instruction	s								_				
and check	,								_	<u>_</u>			
here]								\bot	L			
Income	1a	a Total amount from Form(s) W-2, box 1 (see instructions)								11	1,016.		
Attach Form(s) W-2 here. Also	b								1b 1c	2-			
	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							1e 1f				
was withheld.	f	Employer-provided adoption benefits from Form 8839, line 29											
If you did not get a Form W-2, see	g	Wages from Form 8919, line 6 .		/					1g 1h				
	h	Other earned income (see instructions)									0.		
instructions.	i	Nontaxable combat pay election (see instructions)								11	1 016		
									1z	11	1,016.		
Attach Sch. B if required.	2a	ELECTRICAL PROPERTY OF THE PRO	2a			axable interes rdinary divide			2b 3b				
ii required.	3a		3a			· Partie			0.01				
	4a 5a	The state of the s	4a 5a			axable amoun	t t		4b 5b				
Standard Deduction for—	6a		6a				t	-	6b				
Single or	C		The Court of the C	nethod check here				<u>.</u>	OD				
Married filing separately,	7	If you elect to use the lump-sum election method, check here (see instructions)							7				
\$12,950 Married filing	8	Other income from Schedule 1, lin						- ⊢	8		0.		
jointly or	9	Other income from Schedule 1, line 10							9	11	1,016.		
Qualifying surviving spouse,	10	Add lines 12, 20, 30, 40, 50, 60, 7, and 8. This is your total income							10		<u> </u>		
\$25,900 • Head of	11	Subtract line 10 from line 9. This is your adjusted gross income								11	1,016.		
household,	12	Standard deduction or itemized deductions (from Schedule A)									2,950.		
\$19,400 If you checked	13	Qualified business income deduction from Form 8995 or Form 8995-A									<u>~, , , , , , , , , , , , , , , , , , , </u>		
any box under Standard	14	Add lines 12 and 13								1	2,950.		
Deduction,	15										8,066.		
see instructions.	Subtractime 14 normine 11. Il 2010 of less, enter -0 This is your taxable income										-,		

Form 1040 (2022	2)			Page 2		
Tax and	16	Tax (see instructions). Check if any from Form(s): 1 8814 2 4972 3	16	17,374.		
Credits	17	Amount from Schedule 2, line 3	17			
	18	Add lines 16 and 17	18	17,374.		
	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	17,374.		
	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	17,374.		
Payments	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	17,287.		
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				
	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	17,287.		
Refund Direct deposit? See instructions.	34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid	34			
	35a	Amount of line 34 you want refunded to you . If Form 8888 is attached, check here	35a			
	b	Routing number X X X X X X X X X X X C Type: Checking Savings				
	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				
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	87.		
	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	structions		X No		
	De nai	signee's Phone Personal identi me no. number (PIN)				
Sign		der penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to	the bes	st of my knowledge and		
Here	bel	ief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which	n prepar	er has any knowledge.		
Here	Yo			nt you an Identity		
			Protection PIN, enter it here (see inst.)			
Joint return? See instructions.	Sp		If the IRS sent your spouse an			
Keep a copy for	- P	lden	tity Prote	ection PIN, enter it here		
your records.		(see	inst.)			
		one no. (571)485-6956 Email address MEDASANI9999@GMAIL.COM				
Paid		eparer's name Preparer's signature Date PTIN		Check if:		
Paid Preparer	SYAM	PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA RAM SAGAR GUPTA TALLAM 01/24/2023 P0208	2703	Self-employed		
Use Only	Fire		Phone no. (678) 965-9522			
	Fire	m's address 245 ROONEY CT E BRUNSWICK NJ 08816 Firm	Firm's EIN 88-2145487			