## E1040 Department of the Treasury—Internal Revenue Service U.S. Individual Income Tax Return

2022

OMB No. 1545-007

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

Filing Status Check only	<b>S X S</b>	Single Married filing jointly	Marrie	ed filing separately	/ (MFS)	☐ Head of	household (HOI	H) [		fying survi se (QSS)	iving	
one box.	•	u checked the MFS box, enter the nation is a child but not your dependent	•	our spouse. If you	ı check	ed the HOH or	QSS box, ente	er the c		, ,	e qualifying	
Your first name and middle initial Last n.			Last nar	rt name						Your social security number		
ABHISHEK REDDY JIT			JITT.	ITTA					758-56-1613			
				st name					Spouse's social security number			
Home address (number and street). If you have a P.O. box, see instructions.  Apt. r							Apt. no.		Presidential Election Campaign			
1701 ROYAL LN				Towns In			7306	7300 en		Check here if you, or your pouse if filing jointly, want \$3		
City, town, or post office. If you have a foreign address, also			S. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.			ZIP code	to			Checking a		
DALLAS				TX					ox below will not change			
Foreign country nar			F	Foreign province/state/county			Foreign postal code yo		your tax or refund.  You Spouse			
Digital		y time during 2022, did you: (a) rec										
Assets		ange, gift, or otherwise dispose of a				28 8	asset)? (See in	struction	ons.)	Yes	⊠ No	
Standard Deduction		eone can claim: You as a de Spouse itemizes on a separate retur		_		a dependent					_	
Age/Blindness	You:	☐ Were born before January 2, 1	958	Are blind	Spouse	: Was bo	rn before Janua	ıry 2, 1	958	☐ Is bli	nd	
Dependent	s (see	instructions):		(2) Social secu	rity	(3) Relationsh	(4) Check th	ne box it	f qualifi	es for (see i	nstructions):	
If more	<b>(1)</b> Fi	rst name Last name		number		to you	Child tax cre		t (	Credit for oth	er dependents	
than four	_											
dependents, see instruction	s											
and check	,											
here									$\vdash$	L		
Income	1a	Total amount from Form(s) W-2, b							1a	5	1,534.	
A44(-)	b	Household employee wages not re		( )	•				1b 1c	1		
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)							1d	1		
W-2G and 1099-R if tax	e	Taxable dependent care benefits from Form 2441, line 26							1e	1		
was withheld.	f	Employer-provided adoption benefits from Form 8839, line 29								1		
If you did not	g	Wages from Form 8919, line 6 .		/					1g	1		
get a Form W-2, see	h	Other earned income (see instructions)							1h	_	0.	
instructions.	i									-	1 524	
AII	Z 200	Add lines 1a through 1h  Tax-exempt interest	20		 Ь Т	axable interes			1z 2b	+ - 3	1,534.	
Attach Sch. B if required.	2a 3a		2a   3a	39.		rdinary divide			3b		40.	
	4a		4a	33.		axable amoun			4b	1		
Standard	5a	Table 1	5a				t		5b			
Standard Deduction for— Single or Married filing	6a		6a				t		6b			
	С	If you elect to use the lump-sum e	1000000	nethod, check he								
separately,	7	Capital gain or (loss). Attach Schedule D if required. If not required, check here						. 🗖	7	1 -	2,703.	
\$12,950  Married filing jointly or Qualifying surviving spouse,	8	Other income from Schedule 1, lin							8		5,205.	
	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7							9	1	3,666.	
	10	Adjustments to income from Schedule 1, line 26						10				
\$25,900 • Head of	11	Subtract line 10 from line 9. This is your adjusted gross income							11	3	3,666.	
household, \$19,400	12	Standard deduction or itemized deductions (from Schedule A)									2,950.	
If you checked any box under Standard	13	Qualified business income deduct				5-A			13			
	14	Add lines 12 and 13							14	1	2,950.	
Deduction, see instructions.	15	Subtract line 14 from line 11. If zero or less, enter -0 This is your taxable income							15		0,716.	
- )												

Form 1040 (2022	2)			Page <b>2</b>	
Tax and	16	Tax (see instructions). Check if any from Form(s): 1  8814  2  4972  3	16	2,276.	
Credits	17	Amount from Schedule 2, line 3	17		
	18	Add lines 16 and 17	18	2,276.	
	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	2,276.	
	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	2,276.	
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	7,314.	
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			
	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	7,314.	
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	5,038.	
riorana	35a	Amount of line 34 you want <b>refunded to you</b> . If Form 8888 is attached, check here	35a	5,038.	
Direct deposit?	b	Routing number 0 5 1 0 0 0 0 1 7 c Type: X Checking Savings			
See instructions.	d	Account number 4 3 5 0 4 3 9 5 7 8 8 2			
	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 <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)			
Third Party	Do	you want to allow another person to discuss this return with the IRS? See			
Designee <sup>*</sup>	ins	structions	pelow.	<b>X</b> No	
	De	signee's Phone Personal identi me no. Personal identi 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	
		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 se	nt you an Identity	
			ection P inst.)	IN, enter it here	
Joint return? See instructions. Keep a copy for your records.		SOFTWARE ENGINEER		<u> </u>	
	Sp			nt your spouse an ection PIN, enter it here	
			inst.)		
	Ph	one no. (405) 423-3006 Email address SONU.JITTA@GMAIL.COM			
	Pre	eparer's name Preparer's signature Date PTIN		Check if:	
Paid	SYAN	I PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA RAM SAGAR GUPTA TALLAM 03/16/2023 P0208	2703	Self-employed	
Preparer			none no. (678) 965-9522		
Use Only			Firm's EIN 84-3171965		