E 1040 Department of the Treasury—Internal Revenue Service U.S. Individual Income Tax Return

2022
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OMB No. 1545-0074

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

Filing Status Check only	$\mathbf{X}$	Single Married filing jointly	Married	filing separately (N	MFS)	☐ Head of	household (	HOH)		ifying surv ıse (QSS)	iving		
one box.		u checked the MFS box, enter the nation is a child but not your dependent		ur spouse. If you c	hecke	d the HOH or	QSS box,	enter th	e child's	name if th	e qualifying		
Your first name and middle initial La				ast name							Your social security number		
NIHARIKA MA				ALIREDDI						***-**-5034			
If joint return, spouse's first name and middle initial Last n				ot name						Spouse's social security number			
Home address (	numbe	er and street). If you have a P.O. box, see	instruction	S.			Apt. no	).	Preside	ntial Election	on Campaign		
3695 ANDOVER ST							Check here if you, or your spouse if filing jointly, want \$3						
City, town, or post office. If you have a foreign address, also complete			mplete spa	ete spaces below. State 2			ZIP code				tly, want \$3 Checking a		
CUMMING				GA			30028			ow will not			
Foreign country name			Fo	Foreign province/state/county			Foreign postal code yo		your tax	your tax or refund.			
										You	Spouse		
Digital		ny time during 2022, did you: (a) rece						_			<b>S</b>		
Assets		ange, gift, or otherwise dispose of a				$\overline{}$	asset)? (Se	e instru	ictions.)	Yes	⊠ No		
Standard Deduction		eone can claim:	-	∐ Your spous vere a dual-status		dependent							
Age/Blindness	You:	☐ Were born before January 2, 1	958	Are blind Spo	ouse:	☐ Was bor	n before Ja	inuary 2	2, 1958	☐ Is bli	ind		
Dependents	(see	instructions):		(2) Social security	,	(3) Relationsh	ip (4) Che	ck the b	ox if qualit	ies for (see	instructions):		
If more		rst name Last name		number to you				Child tax credi		edit Credit for other dependent			
than four	2												
dependents, see instructions													
and check													
here										[			
Income	1a	Total amount from Form(s) W-2, bo	ox 1 (see	instructions) .		./.)			. 1a	10	1,916.		
	b	Household employee wages not re	• • • • • • • • • • • • • • • • • • • •						. 1b	1			
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					
W-2G and 1099-R if tax	е	Taxable dependent care benefits from Form 2441, line 26						. 1e					
was withheld.	f	Employer-provided adoption bene		Form 8839, line 29					. 1f				
If you did not	g	Wages from Form 8919, line 6.							. 1g				
get a Form W-2, see	h	Other earned income (see instructi					1		. 1h		0.		
instructions.	i	Nontaxable combat pay election (s	see instru	ctions)	•	<u>1i</u>				1.0	1 016		
		Add lines 1a through 1h			 	· · · ·			. 1z		01,916.		
Attach Sch. B if required.	2a	The state of the s	2a			xable interest			. 2b				
	3a		3a			dinary divide			. 3b				
Ct dd	4a 5a		4a 5a			xable amoun xable amoun			. 4b				
Standard Deduction for—	6a		6a			xable amoun			. 6b				
Single or     Married filing	C	If you elect to use the lump-sum el		athod check here					. 05				
Married filing separately,	7	Capital gain or (loss). Attach Scheo			,				7				
\$12,950 • Married filing	8	Other income from Schedule 1, line							. 8		9,181.		
jointly or	9	Other income from Schedule 1, line 10							. 9		92,735.		
Qualifying spouse,	10	Adjustments to income from Schedule 1, line 26									_,,,,,,,,		
\$25,900 • Head of	11	Subtract line 10 from line 9. This is							. 10 . 11		92,735.		
household,	12		adard deduction or itemized deductions (from Schedule A)								12,950.		
\$19,400 • If you checked	13	Qualified business income deducti				-A			. 12 . 13	†	,		
any box under Standard	14	Add lines 12 and 13							. 14	1	12,950.		
Deduction,	15	Subtract line 14 from line 11. If zero or less, enter -0 This is your <b>taxable income</b>							. 15		79,785.		
see instructions.													

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	13,168.		
Credits	17	Amount from Schedule 2, line 3	17			
	18	Add lines 16 and 17	18	13,168.		
	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	13,168.		
	23	Other taxes, including self-employment tax, from Schedule 2, line 21	23	0.		
	24	Add lines 22 and 23. This is your <b>total tax</b>	24	13,168.		
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	11,950.		
If you have a	26	2022 estimated tax payments and amount applied from 2021 return	26			
qualifying child,	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	2			
	30	Reserved for future use	4			
	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	11,950.		
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			
	35a	Amount of line 34 you want <b>refunded to you</b> . If Form 8888 is attached, check here	35a			
Direct deposit? See instructions.	b	Routing number * * * * * * X X X X C Type: Checking Savings	3			
	a	Account number   *   *   *   *   *   *   *   *   *				
	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> .	07	1 210		
rou Owe	20	For details on how to pay, go to www.irs.gov/Payments or see instructions	37	1,218.		
	38	Estimated tax penalty (see instructions)				
Third Party Designee		byou want to allow another person to discuss this return with the IRS? See structions	e helow	× No		
Designee		signee's Phone Personal ider				
	nai					
Sign		der penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and				
Here	bel	ief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of whi	ich prepare	er has any knowledge.		
TICIC	Yo			nt you an Identity IN, enter it here		
Joint return?			ee inst.)	III, enter it liere		
See instructions.	Sp		If the IRS sent your spouse an			
Keep a copy for your records.		lde	•	ection PIN, enter it here		
your records.	1		ee inst.)			
		one no. (603) 560-5313 Email address NIHA9REDDY@GMAIL.COM				
Paid		eparer's name Preparer's signature Date PTIN		Check if:		
Preparer	19		*2703	Self-employed		
Use Only				one no. (678) 965-9 <u>522</u>		
	Fin	m's address 245 ROONEY CT E BRUNSWICK NJ 08816 Fir	m's EIN	**-** <u>5</u> 487		