

Filing Status [] Single [] Married filing jointly [X] Married filing separately (MFS) [] Head of household (HOH) [] Qualifying surviving spouse (QSS)
Check only one box. If you checked the MFS box, enter the name of your spouse. If you checked the HOH or QSS box, enter the child's name if the qualifying person is a child but not your dependent: CHOTIGA KLINMALEE

Your first name and middle initial: ARJUN; Last name: JUJJURI; Your social security number: ***-**-4238
If joint return, spouse's first name and middle initial: ; Last name: ; Spouse's social security number: ***-**-4470
Home address (number and street): 4400 W UNIVERSITY BLVD; Apt. no.: 14105; City, town, or post office: DALLAS; State: TX; ZIP code: 75209

Digital Assets At any time during 2022, did you: (a) receive (as a reward, award, or payment for property or services); or (b) sell, exchange, gift, or otherwise dispose of a digital asset (or a financial interest in a digital asset)? (See instructions.) [] Yes [X] No

Standard Deduction Someone can claim: [] You as a dependent [] Your spouse as a dependent [] Spouse itemizes on a separate return or you were a dual-status alien

Age/Blindness You: [] Were born before January 2, 1958 [] Are blind Spouse: [] Was born before January 2, 1958 [] Is blind

Table with 5 columns: (1) First name, Last name, (2) Social security number, (3) Relationship to you, (4) Check the box if qualifies for (see instructions): Child tax credit, Credit for other dependents

Income section table with columns 1a-1z and 1a-1z. 1a Total amount from Form(s) W-2, box 1 (see instructions) 109,821. 1z Add lines 1a through 1h 109,821.

Table with columns 2a-2b, 3a-3b, 4a-4b, 5a-5b, 6a-6b. 2a Tax-exempt interest 2a Taxable interest 2b Taxable interest 2b Ordinary dividends 3b Ordinary dividends 3b Taxable amount 4b Taxable amount 4b Taxable amount 5b Taxable amount 5b Taxable amount 6b Taxable amount 6b Taxable amount

Table with columns 7-15. 7 Capital gain or (loss). Attach Schedule D if required. If not required, check here [] 7 8 Other income from Schedule 1, line 10 -10,065. 9 Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income 99,756. 10 Adjustments to income from Schedule 1, line 26 10 11 Subtract line 10 from line 9. This is your adjusted gross income 99,756. 12 Standard deduction or itemized deductions (from Schedule A) 12 12,950. 13 Qualified business income deduction from Form 8995 or Form 8995-A 13 14 Add lines 12 and 13 14 12,950. 15 Subtract line 14 from line 11. If zero or less, enter -0-. This is your taxable income 86,806.

Tax and Credits	16	Tax (see instructions). Check if any from Form(s): 1 <input type="checkbox"/> 8814 2 <input type="checkbox"/> 4972 3 <input type="checkbox"/> _____	16	14,719.
	17	Amount from Schedule 2, line 3	17	
	18	Add lines 16 and 17	18	14,719.
	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	14,719.
	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	14,719.

Payments	25	Federal income tax withheld from:		
	a	Form(s) W-2	25a	16,930.
	b	Form(s) 1099	25b	
	c	Other forms (see instructions)	25c	
	d	Add lines 25a through 25c	25d	16,930.
	26	2022 estimated tax payments and amount applied from 2021 return	26	
	27	Earned income credit (EIC)	27	
	28	Additional child tax credit from Schedule 8812	28	
	29	American opportunity credit from Form 8863, line 8	29	
	30	Reserved for future use	30	
	31	Amount from Schedule 3, line 15	31	
	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	16,930.

Refund	34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid	34	2,211.
	35a	Amount of line 34 you want refunded to you . If Form 8888 is attached, check here <input type="checkbox"/>	35a	2,211.
Direct deposit? See instructions.	b	Routing number: * * * * * 0 3 5 8	c Type:	<input checked="" type="checkbox"/> Checking <input type="checkbox"/> Savings
	d	Account number: * * * * * * * * 5 2 5 3		
	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 amount you owe . For details on how to pay, go to www.irs.gov/Payments or see instructions	37	
	38	Estimated tax penalty (see instructions)	38	

Third Party Designee Do you want to allow another person to discuss this return with the IRS? See instructions **Yes**. Complete below. **No**

Designee's name _____ Phone no. _____ Personal identification number (PIN) _____

Sign Here Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Your signature	Date	Your occupation	If the IRS sent you an Identity Protection PIN, enter it here (see inst.)
		SOFTWARE ENGINEER	_____
Spouse's signature. If a joint return, both must sign.	Date	Spouse's occupation	If the IRS sent your spouse an Identity Protection PIN, enter it here (see inst.)

Phone no. (254) 979-1900 Email address ARJUN.JUJJURI@GMAIL.COM

Paid Preparer Use Only

Preparer's name	Preparer's signature	Date	PTIN	Check if:
SYAM PRIYA RAM SAGAR GUPTA TALLAM	SYAM PRIYA RAM SAGAR GUPTA TALLAM	03/20/2023	*****2703	<input type="checkbox"/> Self-employed
Firm's name	Firm's address		Phone no.	Firm's EIN
GLOBAL TAXES LLC	245 ROONEY CT E BRUNSWICK NJ 08816		(678) 965-9522	** - ** 1965