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

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OMB No. 1545-0074

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

Filing Status Check only	s 🗌 S	Single X Married filing jointly	Marrie	ed filing separately (M	IFS)	Head of	household	(HOH	)		fying survi <sup>,</sup> se (QSS)	ving
one box.	-	u checked the MFS box, enter the na	-	our spouse. If you ch	eck	ed the HOH or	QSS box,	enter	the c	hild's ı	name if the	e qualifying
		on is a child but not your dependent							1,,			
				Last name						Your social security number		
				KARRI						126-41-5818		
If joint return, spouse's first name and middle initial										Spouse's social security number		
								738-19-8047				
								Presidential Election Campaign Check here if you, or your				
			mnlata si	naces helow	Stat	to I	ZIP code				f filing jointl	
To to							to go to this fund. Checking a box below will not change					
				Foreign province/state/county			~				or refund.	nange
Totalgh Country hame					otal coc	,0	You Spouse					
Digital	At an	y time during 2022, did you: (a) rece	eive (as	a reward award or r	navn	nent for prope	rty or servi	ices).	or (b)	sell		
Assets		ange, gift, or otherwise dispose of a						15.00			☐ Yes	⊠ No
Standard		eone can claim: You as a de	10			19 9		47		,		<del></del>
Deduction		Spouse itemizes on a separate return	n or you	were a dual-status a	lien							
Age/Blindness	You:	☐ Were born before January 2, 1	958	Are blind Spo	use:	: Was bor	n before J	anuar	v 2, 1	958	☐ Is blir	nd
Dependent				(2) Social security		(3) Relationsh	Im a	-			es for (see ir	nstructions):
If more		rst name Last name		number	4	to you		nild tax	credit	t C	Credit for other	er dependents
than four												]
dependents,												j
see instruction: and check	s –—											
here	]											]
Income	1a	Total amount from Form(s) W-2, be	ox 1 (see	e instructions)						1a	19	1,492.
	b	Household employee wages not re	ported	on Form(s) W-2						1b		
Attach Form(s) W-2 here. Also	C	Tip income not reported on line 1a	(see ins	structions)	٦.				100	1c		_
attach Forms	d	Medicaid waiver payments not rep	orted or	n Form(s) W-2 (see in	stru	ctions)			• 1	1d		_
W-2G and 1099-R if tax	е	Taxable dependent care benefits f	rom For	m 2441, line 26 .						1e	<del></del>	
was withheld.	f	Employer-provided adoption bene	fits from	Form 8839, line 29						1f		
If you did not	g	Wages from Form 8919, line 6 .							٠	1g		
get a Form W-2, see	h	Other earned income (see instructi					7		•	1h		0.
instructions.	i	Nontaxable combat pay election (s	ee instr	ructions)	•	<u>li</u>						
	Z	Add lines 1a through 1h							•	1z	19	1,492.
Attach Sch. B	2a		2a			axable interest			•	2b		
if required.	3a		3a	199.		rdinary divider			•	3b	+	413.
	4a	The state of the s	1a			axable amoun				4b	+	
Standard Deduction for —	5a		5a			axable amoun				5b	+	
Single or	6a		ôa			axable amoun			$\dot{\Box}$	6b	-	
Married filing separately,	C	If you elect to use the lump-sum e				5.		•	$\vdash$	7	4	1 000
\$12,950	7	Capital gain or (loss). Attach Sched							Ш	7	+	1,090.
Married filing jointly or	8	Other income from Schedule 1, lin		This is your total inc					•	8	1.0	0.
Qualifying surviving spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7,							•	9	+ 19	0,815.
\$25,900	10	Adjustments to income from Sche							•	10	10	0 015
Head of household,	11 12	Subtract line 10 from line 9. This is your adjusted gross income								11		0,815.
\$19,400 If you checked	13					 5-Δ				13	+ 2	5,900. 43.
any box under	14	Qualified business income deduction from Form 8995 or Form 8995-A							14	1	5,943.	
Standard Deduction,	15								15		4,872.	
see instructions.	.5	Castactine 14 nomino 11. Il 26	0 01 1030	5, 5/10/ 5 . IIII5 15 ye	Jui L	andole moon				10	1 10	7,014.

a Form(s) W-2	Form 1040 (2022	2)								Р	age 2
Transmitter	Tax and	16	Tax (see instructions). Check i	f any from Form	(s): <b>1</b> 881	4 <b>2</b> 🗌 4972	3 🗌		16	27,49	92.
18		17						17			
20		18	Add lines 16 and 17						18	27,49	92.
21		19	Child tax credit or credit for c	other dependen	ts from Sched	ule 8812			19		
22   Subtract line 21 from line 18. If zero or less, enter -0 -   22   27, 490.		20	Amount from Schedule 3, line	98					20		2.
23		21	Add lines 19 and 20						21		2.
Payments		22	Subtract line 21 from line 18.	If zero or less,	enter -0				22	27,49	90.
Payments   25   Federal income tax withheld from:		23	Other taxes, including self-er	nployment tax,	from Schedule	e 2, line 21			23		0.
Payments   25   Federal income tax withheld from:		24	Add lines 22 and 23. This is y	our total tax					24	27,49	90.
a Form(s) W-2	Payments	25									
c Other forms (see instructions)		а	Form(s) W-2				<b>25a</b> 16	,056.			
Marchane   Common		b	Form(s) 1099				25b				
# 2022 estimated tax payments and amount applied from 2021 return  Earned income credit (EIC) . No 27  ### 27 Additional child tax credit from Schedule 8812 . 28  ### 28 Additional child tax credit from Form 8863, line 8 . 29  ### 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, 056.  ### 34 Add lines 25d, 26, and 32. These are your total payments . 33 16, 056.  ### 34 Add lines 25d, 26, and 32. These are your total payments . 33 16, 056.  ### 34 Add lines 27, 28, 29, and 31. These are your total payments . 33 16, 056.  ### 34 Add lines 27, 28, 29, and 31. These are your total payments . 33 16, 056.  ### 35 Add lines 27, 28, 29, and 31. These are your total payments . 33 16, 056.  ### 34 Add lines 27, 28, 29, and 31. These are your total payments . 33 16, 056.  ### 35 Add lines 27, 28, 29, and 31. These are your total payments . 33 16, 056.  ### 35 Add lines 27, 28, 29, and 31. These are your total payments . 33 16, 056.  ### 35 Add lines 27, 28, 29, and 31. These are your total payments . 33 16, 056.  ### 34 Add lines 27, 28, 29, and 31. These are your total payments . 33 16, 056.  ### 35 Add lines 27, 28, 29, and 31. These are your total payments . 33 16, 056.  ### 35 Add lines 27, 28, 29, and 31. These are your total payments . 34 28, 28, 28, 29, 29, 29, 29, 29, 29, 29, 29, 29, 29		С	Other forms (see instructions	)			25c				
If you have a qualifying child.   27   attach Sch. Elc.   28   Additional child tax credit from Schedule 8812   28   29   Additional child tax credit from Schedule 8812   28   29   Additional child tax credit from Schedule 8812   29   Additional child tax credit		d	Add lines 25a through 25c .						25d	16,05	56.
qualifying child, 27 attach Sch. El.C. 28 attach Sch. El.C. 29 attach Sc	16	26	2022 estimated tax payments	s and amount a	pplied from 20	21 return			26		
Additional child tax credit from Schedule 8812	qualifying child, attach Sch. EIC.	27	Earned income credit (EIC) .			No .	27				
Sign Here   See instructions		28	Additional child tax credit from	Schedule 8812			28				
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   16,056.		29	American opportunity credit to	from Form 8863	, line 8		29				
Add lines 27, 28, 29, and 31. These are your total other payments and refundable credits		30	Reserved for future use				30				
Refund 34 If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid 35a Amount of line 34 you want refunded to you. If Form 8888 is attached, check here 35a Amount of line 34 you want refunded to you. If Form 8888 is attached, check here 35a Amount of line 34 you want refunded to you. If Form 8888 is attached, check here 35a Amount of line 34 you want refunded to you. If Form 8888 is attached, check here 35a Amount of line 34 you want refunded to you. If Form 8888 is attached, check here 35a Amount of line 34 you want applied to your 2023 estimated tax 36 Amount of line 34 you want applied to your 2023 estimated tax 36 Amount of line 34 you want applied to your 2023 estimated tax 36 Amount of line 34 you want applied to your 2023 estimated tax 36 Amount of line 34 you want applied to your 2023 estimated tax 36 Amount of line 34 you want applied to your 2023 estimated tax 36 Amount of line 34 you want applied to your 2023 estimated tax 36 Amount of line 34 you want applied to your 2023 estimated tax 36 Amount of line 34 you want applied to your 2023 estimated tax 36 Amount of line 34 you want applied to your 2023 estimated tax 36 Amount of line 34 you want applied to your 2023 estimated tax 36 Amount of line 34 you want applied to your 2023 estimated tax 36 Amount of line 34 you want applied to your 2023 estimated tax 36 Amount of line 34 you want to line 34 you want applied to your 2023 estimated tax 36 Amount of line 34 you want applied to your 2023 estimated tax 36 Amount of line 34 you want applied to your 2023 estimated tax 36 Amount of line 34 you want applied to your 2023 estimated tax 36 Amount of line 34 you want applied to your 2023 estimated tax 36 Amount of line 34 you want applied to your 2023 estimated tax 36 Amount of line 34 you want to line 3		31	Amount from Schedule 3, line	e 15			31				
Refund   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   35a		32	Add lines 27, 28, 29, and 31.	These are your	total other pa	yments and refu	ndable credits		32		
Sign   Here   Doy of the partitions   Doy of the partition		33	Add lines 25d, 26, and 32. Th	nese are your to	tal payments				33	16,05	56.
See instructions:   See	Refund	34	If line 33 is more than line 24	, subtract line 2	4 from line 33.	This is the amoun	t you <b>overpaid</b>		34		
d Account number   X   X   X   X   X   X   X   X   X	neiuliu	35a	Amount of line 34 you want r	efunded to you	ı. If Form 8888	is attached, chec	k here		35a		
Amount You Owe  36 Amount of line 34 you want applied to your 2023 estimated xx	Direct deposit?	b	Routing number X X X	$X \mid X \mid X \mid X$	XX	c Type:	Checking S	Savings			
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.  38  Estimated tax penalty (see instructions)	See instructions.	d	Account number X X X	X X X X	X X X X	XXXXX	XX				
For details on how to pay, go to www.irs.gov/Payments or see instructions.  38 Estimated tax penalty (see instructions).  38 Do you want to allow another person to discuss this return with the IRS? See instructions.  39 Designee's Phone Personal identification number (PIN)  Designee's Phone Personal identification number (PIN)  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  For details on how to pay, go to www.irs.gov/Payments or see instructions.  A No  Personal identification number (PIN)  Protection PIN, enter it here (see inst.)  Spouse's signature. If a joint return, both must sign.  Spouse's signature. If a joint return, both must sign.  Date Soprtware Engineer  Software Engineer  Softwar		36	Amount of line 34 you want a	pplied to your	2023 estimate	d tax	36				
Third Party Designee  Do you want to allow another person to discuss this return with the IRS? See instructions	Amount You Owe	37							27	11 /13	2 /l
Third Party Designee  Do you want to allow another person to discuss this return with the IRS? See instructions  Designee's name  Designee's name  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. If the IRS sent you an Identity Protection PIN, enter it here (see inst.)  Spouse's signature. If a joint return, both must sign.  Date  Ponne no. (813) 428-1616  Preparer's name  Preparer's name  Preparer's signature  Preparer's name  Preparer's name  Preparer's signature  Preparer's name  GLOBAL TAXES LLC  Phone no. (678) 965-9522	roa owe	28					[		31	11,40	74.
Designee  instructions  Designee's name    Designee's name   Phone no.   Personal identification number (PIN)	Third Door										
Designee's name  Personal identification number (PIN)  Date Designee's name on the best of my knowledge and accompanying schedules and statements, and to the best of my knowledge and score in the last of my knowledge.  Firm's name  Population  Proparer (other than taxpayer) is based on all information of which preparer has any knowledge.  Firm's name  Population  Software Engineer  S					uss this retui			mplete b	elow.	X No	
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.)  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. (813) 428-1616  Email address KIRANMAYIKARRI1@GMAIL.COM  Preparer's name  Preparer's signature  Preparer's signature  Date PTIN Check if:  SYAM PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA RAM SAGAR GUPTA TALLAM 02/28/2023 P02082703 Self-employed  Firm's name GLOBAL TAXES LLC  Phone no. (678) 965-9522	_ 00.g00	De	Designee's								
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  From the interior of the interior 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.)  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. (813) 428-1616  Email address KIRANMAYIKARRI1@GMAIL.COM  Preparer's name  Preparer's signature  Preparer's signature  SYAM PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA RAM SAGAR GUPTA TALLAM 02/28/2023 P02082703 Self-employed  Firm's name  GLOBAL TAXES LLC  Phone no. (678) 965-9522		na	ne		no.		numb	er (PIN)			
Joint return? See instructions. Keep a copy for your records.  Spouse's signature. If a joint return, both must sign.  Date  Software Engineer  So	Sign										
Joint return? See instructions. Keep a copy for your records.  Phone no. (813) 428-1616 Email address KIRANMAYIKARRI1@GMAIL.COM  Preparer's name Preparer's signature  SOFTWARE ENGINEER (see inst.) If the IRS sent your spouse an Identity Protection PIN, enter it here (see inst.)	Here	Yo	ur signature		Date	Your occupation		If the	IRS ser	nt you an Identity	/
Spouse's signature. If a joint return, both must sign.  Spouse's signature. If a joint return, both must sign.  Spouse's signature. If a joint return, both must sign.  Spouse's signature. If a joint return, both must sign.  Spouse's signature. If a joint return, both must sign.  Spouse's signature. If a joint return, both must sign.  Spouse's signature. If a joint return, both must sign.  Software engineer  S									and the same of the same of	IN, enter it here	
Keep a copy for your records.  Phone no. (813) 428–1616		_									Ш
your records.  Phone no. (813) 428-1616		Sp	Spouse's signature. If a joint return, <b>both</b> must sign.		Date	Spouse's occupation					
Phone no.         (813) 428-1616         Email address         KIRANMAYIKARRI1@GMAIL.COM           Paid         Preparer's name         Preparer's signature         Date         PTIN         Check if:           SYAM PRIYA RAM SAGAR CUPTA TALLAM         SYAM PRIYA RAM SAGAR CUPTA TALLAM         SYAM PRIYA RAM SAGAR GUPTA TALLAM         SYAM PRIYA RAM SAGAR GUPTA TALLAM         PDIN         Check if:           Firm's name         GLOBAL TAXES LLC         Phone no. (678) 965-9522	your records.					SOFTWARE E	NGINEER			JOHN III, CIRCI	
Preparer's name   Preparer's signature   Date   PTIN   Check if:  SYAM PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA RAM SAGAR GUPTA TALLAM   02/28/2023   P02082703   Self-employed    Firm's name   GLOBAL TAXES   LLC   Phone no. (678) 965-9522		Phone no. (813) 428–1616									
Paid Preparer Use Only  Prim's name GLOBAL TAXES LLC  SYAM PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA RAM SAGAR GUPTA TALLAM 02/28/2023 P02082703 Self-employed Phone no. (678) 965-9522			(010) 120 1010			TITION INTERNAL				Check if:	
Preparer Use Only  Firm's name GLOBAL TAXES LLC  Phone no. (678) 965-9522				,					2703		yed
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