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.

Check only one box. If you checked the MFS box, enter the name of your spouse. If you checked the MFS box, enter the name of your spouse.	hacked the HOH or	OSS have antar		ouse (QSS)		
		USS DOX. HITEL	the child'	s name if the qualifying		
person is a child but not your dependent:		QCC BOX, CITICI	tilo omia	o namo ir tho qualifying		
/our first name and middle initial Last name			Your s	Your social security number		
OUSTHUB MAHENDRA				***-**-2539		
If joint return, spouse's first name and middle initial Last name				Spouse's social security number		
RAVEENA ARASIKERE RAKESH			1 '	***-**-2905		
Home address (number and street). If you have a P.O. box, see instructions.	<u>.</u>	Apt. no.		ential Election Campaign		
				here if you, or your		
City, town, or post office. If you have a foreign address, also complete spaces below. State ZIP code			spouse if filing jointly, want \$3			
DURHAM	NC 27703			o this fund. Checking a low will not change		
	Foreign province/state/county Fo			x or refund.		
			You Spouse			
Digital At any time during 2022, did you: (a) receive (as a reward, award, or	navment for prope	rty or services):	or (b) sell			
Assets exchange, gift, or otherwise dispose of a digital asset (or a financial						
	e as a dependent					
Deduction ☐ Spouse itemizes on a separate return or you were a dual-status	•					
Age/Blindness You: Were born before January 2, 1958 Are blind Spo	ouse:	n before Januar		Is blind		
Dependents (see instructions): (2) Social security		ip (4) Check the	box if qua	lifies for (see instructions):		
If more (1) First name Last name number	to you	Child tax	credit	Credit for other dependents		
than four dependents,						
see instructions						
and check		<u> </u>				
here						
Income 1a Total amount from Form(s) W-2, box 1 (see instructions) .			. 1	a 82,019.		
b Household employee wages not reported on Form(s) W-2.			. 11			
Attach Form(s) c Tip income not reported on line 1a (see instructions)			. 10			
attach Forms d Medicaid waiver payments not reported on Form(s) W-2 (see i	nstructions)		. 10			
W-2G and e Taxable dependent care benefits from Form 2441, line 26			. 10			
was withheld. f Employer-provided adoption benefits from Form 8839, line 29			. 1			
If you did not g Wages from Form 8919, line 6			. 19			
get a Form h Other earned income (see instructions)			. 11	h 0.		
instructions.	<u> 1i</u>			00.010		
z Add lines 1a through 1h			. 1			
Attach Sch. B 2a Tax-exempt interest 2a	b Taxable interest		. 21			
if required. 3a Qualified dividends 3a	b Ordinary divide		. 31			
4a IRA distributions 4a	b Taxable amoun		. 41			
Standard 5a Pensions and annuities 5a Second account to be second ac	b Taxable amoun		. 51			
Single or	b Taxable amoun	t	. 61	0		
Married filing c If you elect to use the lump-sum election method, check here separately,			H F.	1 2 1		
\$12,950 To Capital gain or (loss). Attach Schedule Dil required. Il not requ	To Capital gam of (loss). Attach Schedule D if required, if not required, check here			-131.		
Married filing jointly or			. 8			
9 Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total inconviving spouse,			. 9			
\$25,900 Adjustments to income from Schedule 1, line 20			. 10			
household	Subtract line 10 from line 9. This is your adjusted gross income					
\$19,400 Tandard deduction or itemized deductions (from Schedule	•		. 12			
If you checked any box under any box under			. 1			
Standard 14 Add lines 12 and 13			. 14			
Deduction, see instructions. 15 Subtract line 14 from line 11. If zero or less, enter -0 This is y	our taxable incom	ie	. 1	56,048.		

Form 1040 (2022	2)			Page 2
Tax and	16	Tax (see instructions). Check if any from Form(s): 1 8814 2 4972 3	16	6,312.
Credits	17	Amount from Schedule 2, line 3	17	
	18	Add lines 16 and 17	18	6,312.
	19	Child tax credit or credit for other dependents from Schedule 8812	19	
	20	Amount from Schedule 3, line 8	20	1,159.
	21	Add lines 19 and 20	21	1,159.
	22	Subtract line 21 from line 18. If zero or less, enter -0	22	5,153.
	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	5,153.
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	6,181.
K	26	2022 estimated tax payments and amount applied from 2021 return	26	
If you have a qualifying child,	27	Earned income credit (EIC)	Y	
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	1	
	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	6,181.
Refund	34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid	34	1,028.
	35a	Amount of line 34 you want refunded to you . If Form 8888 is attached, check here	35a	1,028.
Direct deposit?	b	Routing number * * * * * * 0 1 9 6 c Type: X Checking Savings		
See instructions.	d	Account number * * * * * * * * 7 0 7 2		
	36	Amount of line 34 you want applied to your 2023 estimated tax 36		
Amount	37	Subtract line 33 from line 24. This is the amount you owe .		
You Owe		For details on how to pay, go to www.irs.gov/Payments or see instructions	37	
	38	Estimated tax penalty (see instructions)		
Third Party Designee	Do	you want to allow another person to discuss this return with the IRS? See		
	ins	structions	elow.	X No
	De: nar	signee's Phone Personal identii me no. number (PIN)	ication	
<u> </u>			41 1	A = f === .
Sign		der penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to ief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which		
Here				nt you an Identity
		Prote	ection P	IN, enter it here
Joint return?		FROUECT ENGINEER II	inst.)	
See instructions. Keep a copy for	Sp			nt your spouse an ection PIN, enter it here
your records.			inst.)	ection Pily, enter it here
	————			
		pone no. (919)986-4676 Email address KOUSTHUBMAHENDRA@GMAIL.COM paparer's name Preparer's signature Date PTIN		Check if:
Paid		Tilly States of		Self-employed
Preparer		m's name GLOBAL TAXES LLC Phor	ne no.	
Use Only			's EIN	
Co to warner inc =			3 LIIV	Form 1040 (2022)
GO TO WWW.IIS.g	JV/FOM	n1040 for instructions and the latest information. BAA REV 01/28/23 PRO		FORM 1040 (2022)