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

2022

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 (N	1FS)	Head of	household (HO	H)		fying surv se (QSS)	iving	
one box.	If yo	u checked the MFS box, enter the na	ame of y	our spouse. If you ch	neck	ed the HOH or	QSS box, ent	er the c	•	, ,	e qualifying	
	pers	on is a child but not your dependent	:									
Your first name and middle initial			Last nar	Last name						Your social security number		
KIRTI MATADIN			PATH	PATHARIYA						894-75-0936		
If joint return, s	pouse's	first name and middle initial	Last nar	ne				Sp	Spouse's social security number			
FNU			ROSH	AN RAJAN				8	873-18-0823			
Home address	(numbe	r and street). If you have a P.O. box, see	instructio	ons.			Apt. no.		Presidential Election Campaign			
_601 RIV	ERSII	DE AVE							Check here if you, or your			
City, town, or p	ost offi	ce. If you have a foreign address, also co	mplete sp	paces below.	Stat	te	ZIP code		spouse if filing jointly, want \$3 to go to this fund. Checking a			
JACKSON	/ILLI	<u> </u>	FL					box below will not change				
Foreign country name			Foreign province/state/county			Foreign postal c	Foreign postal code your			ur tax or refund.		
										You	Spouse	
Digital Assets		ny time during 2022, did you: (a) rece ange, gift, or otherwise dispose of a	,				,			Yes	⊠ No	
-		eone can claim: You as a de					asset): (See II	Structi	9113.)			
Standard Deduction		Spouse itemizes on a separate return				a dependent						
Age/Blindness	You:	Were born before January 2, 1	958	Are blind Spo	use:	: Was bor	n before Janua	ary 2, 1	958	☐ Is bli	nd	
Dependents	s (see	instructions):		(2) Social security		(3) Relationsh	ip (4) Check t	he box i	f qualifi	es for (see	nstructions):	
If more	•	rst name Last name		number	4	to you	Child t	ax credi	t C	Credit for oth	er dependents	
than four	IVA	AN ROSHAN		447-47-8840	0	Son		X				
dependents, see instruction												
and check												
here												
Income	1a	Total amount from Form(s) W-2, be	ox 1 (see	e instructions)					1a	5	1,068.	
	b	Household employee wages not re	eported	on Form(s) W-2					1b			
Attach Form(s) W-2 here. Also	С	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	fits from	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 instructions)							1h	-	0.	
instructions.	i	Nontaxable combat pay election (s	see instr	uctions)		<u>1i</u>				١.		
	<u>z</u>	Add lines 1a through 1h							1z	5	1,068.	
Attach Sch. B	2a		2a			axable interest			2b		313.	
if required.	3a		3a			rdinary divide			3b		22.	
	4a		4a			axable amoun			4b			
Standard Deduction for—	5a		5a			axable amoun			5b			
Single or	6a		6a			axable amoun			6b			
Married filing separately,	с 7	If you elect to use the lump-sum election method, check here (see instructions)							7		157.	
\$12,950 Married filing	8							. ⊔	8			
jointly or	9	Other income from Schedule 1, line 10							9	-	1,560.	
Qualifying surviving spouse,	10	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income								3	<u> </u>	
\$25,900 Head of	11	Subtract line 10 from line 9. This is your adjusted gross income								-	1,560.	
household,	12	Standard deduction or itemized deductions (from Schedule A)									5,900.	
\$19,400 If you checked	13	Qualified business income deducti		•	,	5-A			12	 	1.	
any box under	14	Add lines 12 and 13							14	7	5,901.	
Standard Deduction,	15	Subtract line 14 from line 11. If zero or less, enter -0 This is your taxable income							15		5,659.	
see instructions.	. •		_ 0. 1000	., 5 1 11110 10 y	•				-:-		5,055.	

Form 1040 (2022	2)			Page 2	
Tax and	16	Tax (see instructions). Check if any from Form(s): 1 8814 2 4972 3	16	2,664.	
Credits	17	Amount from Schedule 2, line 3	17		
0.00	18	Add lines 16 and 17	18	2,664.	
	19	Child tax credit or credit for other dependents from Schedule 8812	19	2,000.	
	20	Amount from Schedule 3, line 8	20	152.	
	21	Add lines 19 and 20	21	2,152.	
	22	Subtract line 21 from line 18. If zero or less, enter -0	22	512.	
	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	512.	
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	8,081.	
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			
	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	8,081.	
Refund	34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid	34	7,569.	
11010110	35a	Amount of line 34 you want refunded to you . If Form 8888 is attached, check here	35a	7,569.	
Direct deposit?	b	Routing number X X X X X X X X X X C Type: Checking Savings			
See instructions.	d	Account number X X X X X X X X X X X X X X X X X X X			
	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 amount you owe . 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 Designee		byou want to allow another person to discuss this return with the IRS? See structions	nelow	X No	
Doolgilloo		signee's Phone Personal identi			
	na				
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	Yo			nt you an Identity	
Joint return?			ection P inst.)	PIN, enter it here	
See instructions.	Sp	ouse's signature. If a joint return, both must sign. Date Spouse's occupation If the	f the IRS sent your spouse an		
Keep a copy for your records.				ection PIN, enter it here	
your records.		SERVICE	inst.)		
		one no. (904)514-5978 Email address KIRTI.PATHARIYA@GMAIL.COM		Ob a all if	
Paid		eparer's name Preparer's signature Date PTIN		Check if:	
Preparer		PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA RAM SAGAR GUPTA TALLAM 04/03/2023 P0208		Self-employed	
Use Only			Phone no. (678)965-9522		
- ,	Fir	m's address 245 ROONEY CT E BRUNSWICK NJ 08816 Firm	's EIN	84-3171965	