E1040 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 one box.	If yo	u checked the MFS box, enter the n	ame of y	ed filing separately (Nour spouse. If you cl					spou	fying surv se (QSS) name if th	Ü	
		on is a child but not your dependent						1				
Your first name and middle initial			Last nai						Your social security number			
			KODU						654-33-3872			
If joint return, spouse's first name and middle initial Last			Last nai	ast name					Spouse's social security number			
Home address	(numbe	er and street). If you have a P.O. box, see	instructio	ons.			Apt. no.	Pı	esiden	tial Election	n Campaign	
2906 W ROYAL LANE,									Check here if you, or your			
City, town, or post office. If you have a foreign address, also comple				plete spaces below. State			ZIP code			spouse if filing jointly, want \$3 to go to this fund. Checking a		
IRVING			TX			75063			w will not			
Foreign country name			Foreign province/state/county			y	Foreign postal code yo		your tax or refund.			
										You Spouse		
Digital Assets		ny time during 2022, did you: (a) recange, gift, or otherwise dispose of a								Yes	⊠ No	
Standard		eone can claim: You as a de		<u></u>			, ,					
Deduction		Spouse itemizes on a separate retur	•	·								
Age/Blindness	s You:	☐ Were born before January 2, 1	958	Are blind Spo	ouse:	☐ Was bor	n before Janua	ary 2, 1	958	☐ Is bli	nd	
Dependent	s (see	instructions):		(2) Social security		(3) Relationsh	ip (4) Check to	ne box i	f qualifi	es for (see	instructions):	
If more	(1) Fi	rst name Last name		number	to you		Child t	ax credi	t (Credit for oth	ner dependents	
than four												
dependents, see instruction												
and check												
here]						[
Income	1a	Total amount from Form(s) W-2, b	ox 1 (se	e instructions) .					1a	12	21,370.	
	b	Household employee wages not reported on Form(s) W-2							1b			
Attach Form(s) W-2 here. Also	С	Tip income not reported on line 1a (see instructions)										
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 benefits from Form 8839, line 29										
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 (see instructions)										
	Z	Add lines 1a through 1h							1z	12	21,370.	
Attach Sch. B	2a	· -	2a			axable interes			2b			
if required.	<u>3a</u>		3a			rdinary divide			3b			
	4a		4a				t		4b			
Standard Deduction for—	5a	-	5a				t		5b			
Single or	6a	,	6a				t		6b			
Married filing separately,	_ C	If you elect to use the lump-sum election method, check here (see instructions)										
\$12,950	7	Capital gain or (loss). Attach Schedule D if required. If not required, check here							7	1		
 Married filing jointly or 	8	Other income from Schedule 1, line 10							9		0,927.	
Qualifying surviving spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income								+ ++	0,443.	
\$25,900	10	Adjustments to income from Schedule 1, line 26								1 1 1	0 442	
 Head of household, 	11	Subtract line 10 from line 9. This is your adjusted gross income									0,443.	
\$19,400 If you checked	12	Standard deduction or itemized deductions (from Schedule A)								+	2,950.	
any box under	13	Qualified business income deduction from Form 8995 or Form 8995-A								1	2 050	
Standard Deduction,	14 15								15		.2,950.	
see instructions.	13	Subtract line 14 from line 11. If zero or less, enter -0 This is your taxable income									97,493.	

Form 1040 (2022	2)							Page 2	
Tax and	16	Tax (see instructions). Check if any from For	m(s): 1 881	4 2 4972	3 🗌		16	17,230.	
Credits	17	Amount from Schedule 2, line 3					17		
	18	Add lines 16 and 17					18	17,230.	
	19	Child tax credit or credit for other depende	nts from Sched	lule 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	s, enter -0				22	17,230.	
	23	Other taxes, including self-employment tax	, from Schedul	e 2, line 21			23	0.	
	24	Add lines 22 and 23. This is your total tax					24	17,230.	
Payments	25	Federal income tax withheld from:			1				
	а	Form(s) W-2			25a 2	0,211.			
	b	Form(s) 1099			25b				
	С	Other forms (see instructions)			25c				
	d	Add lines 25a through 25c					25d	20,211.	
If you have a qualifying child,	26	2022 estimated tax payments and amount	applied from 20	021 return			26		
	27	Earned income credit (EIC)			27				
attach Sch. EIC.	28	Additional child tax credit from Schedule 88	12		28				
	29	American opportunity credit from Form 886	63, 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 you	ur total other p	ayments and refu	ındable credits		32		
	33	Add lines 25d, 26, and 32. These are your	total payments				33	20,211.	
Refund	34	If line 33 is more than line 24, subtract line	24 from line 33	. This is the amour	nt you overpaid		34	2,981.	
	35a	Amount of line 34 you want refunded to yo		3 is attached, chec	ck here	\square	35a	2,981.	
Direct deposit?	b	Routing number 1 2 1 0 0 0 3			Checking [Savings			
See instructions.	d	Account number 3 2 5 0 4 2 7 4 1 4 1 3							
	36	Amount of line 34 you want applied to you	r 2023 estimate	ed tax	36				
Amount You Owe	37	Subtract line 33 from line 24. This is the an For details on how to pay, go to www.irs.gu	•				37		
	38	Estimated tax penalty (see instructions) .			38				
Third Party Designee		you want to allow another person to distructions				Complete I	oelow.	X No	
		signee's	Phone	•		sonal identi	fication I		
		me	no.			nber (PIN)			
Sign Here	Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which								
Here	Yo	ur signature	Date	Date Your occupation				nt you an Identity	
				SQL BI DEVELOPER			ection Pl inst.)	N, enter it here	
Joint return? See instructions.	Sn	ouse's signature. If a joint return, both must sign.	Date	Spouse's occupation				nt your spouse an	
Keep a copy for your records.	opouse 3 signature. Ir a joint return, buil must sign.		Date				dentity Protection PIN, enter it here see inst.)		
	Ph	one no. (714) 360-9648	Email address	AKSHAYK.RD	B@GMAIL.C	OM			
Doid	Pre	eparer's name Preparer's sign	ature		Date	PTIN		Check if:	
Paid	SYAN	1 PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA	RAM SAGAR	GUPTA TALLAM	02/01/2023	P0208	2703	Self-employed	
Preparer	Fin	Firm's name GLOBAL TAXES LLC Pho						678) 965-9522	
Use Only	Fin	Firm's address 245 ROONEY CT E BRUNSWICK NJ 08816 Fir						88-2145487	
								1010	