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 one box.		Single Married filing jointly uchecked the MFS box, enter the n		ed filing separately (Nour spouse. If you ch				spou	ifying sunuse (QSS) name if th	· ·	
	-	on is a child but not your dependent	-	,						, , ,	
Your first name and middle initial				me				Your social security number			
AKHIL				A				***-**-7737			
If joint return, s	pouse's	first name and middle initial	Last nar	st name					Spouse's social security number		
Home address	(numbe	er and street). If you have a P.O. box, see	instruction	ons.			Apt. no.	Presidential Election Campaign			
1125 PREWITT RANCH DR								Check here if you, or your			
City, town, or p	ost offi	ce. If you have a foreign address, also co	omplete sp	lete spaces below. State Z			ZIP code		ouse if filing jointly, want \$3 go to this fund. Checking a		
HOLLY SPRINGS				NC			27540		ox below will not change		
Foreign country name			Foreign province/state/county			i.	Foreign postal code yo		our tax or refund.		
									You	Spouse	
Digital Assets		ny time during 2022, did you: (a) rec ange, gift, or otherwise dispose of a							Yes	⊠ No	
Standard		eone can claim: You as a de									
Deduction		Spouse itemizes on a separate retur									
	You:	Were born before January 2, 1	958	Are blind Spo	ouse: W	as born	before January 2	, 1958	_ Is bl	ind	
Dependents	s (see	instructions):		(2) Social security	(3) Re	lationship	(4) Check the bo	x if qualif	ies for (see	instructions):	
If more	(1) F	rst name Last name		number	to	you	Child tax cr	edit	Credit for ot	her dependents	
than four											
dependents, see instruction	s										
and check	. —										
here											
Income	1a	Total amount from Form(s) W-2, b	ox 1 (see	e instructions)				1a	1:	32,476.	
	b	Household employee wages not reported on Form(s) W-2						1b	١ .		
Attach Form(s) W-2 here. Also	C	Tip income not reported on line 1a (see instructions)									
attach Forms	d	Medicaid waiver payments not reported on Form(s) W-2 (see instructions)									
W-2G and 1099-R if tax	е	Taxable dependent care benefits from Form 2441, line 26									
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 instr	uctions)		1 i					
	Z	Add lines 1a through 1h						1z		32,476.	
Attach Sch. B	2a		2a		b Taxable i			2b			
if required.	3a		3a		b Ordinary			3b	_	10.	
	4a		4a		b Taxable			4b			
Standard Deduction for—	5a		5a		b Taxable			5b	_		
Single or	6a		6a		b Taxable			6b			
Married filing separately,	C	If you elect to use the lump-sum election method, check here (see instructions)								1 700	
\$12,950	7							7		<u>-1,760.</u>	
 Married filing jointly or 	8	Other income from Schedule 1, lin		This is your total inc				9		9,934.	
Qualifying surviving spouse,	10	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income								20,792.	
\$25,900	11	Subtract line 10 from line 9. This is						10		20 702	
 Head of household, 	12	Standard deduction or itemized						12		20,792.	
\$19,400 If you checked	13							13		12,950.	
any box under	14	Qualified business income deduction from Form 8995 or Form 8995-A								12 950	
Standard Deduction,	15	Add lines 12 and 13								12,950. 07,842.	
see instructions.		Subtract line 14 from line 11. If zero or less, enter -U This is your taxable income								11,042.	

Form 1040 (2022	2)			Page 2	
Tax and	16	Tax (see instructions). Check if any from Form(s): 1 8814 2 4972 3	16	19,717.	
Credits	17	Amount from Schedule 2, line 3	17		
	18	Add lines 16 and 17	18	19,717.	
	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	19,717.	
	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	19,717.	
Payments	25	Federal income tax withheld from:			
	а	Form(s) W-2			
	b	Form(s) 1099			
	C	Other forms (see instructions)			
	d	Add lines 25a through 25c	25d	24,731.	
If you have a qualifying child, attach Sch. EIC.	26	2022 estimated tax payments and amount applied from 2021 return	26		
	27	Earned income credit (EIC)	Y		
	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	24,731.	
Refund	34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid	34	5,014.	
	35a	Amount of line 34 you want refunded to you . If Form 8888 is attached, check here	35a	5,014.	
Direct deposit?	b	Routing number * * * * * * 0 6 1 4 c Type: X Checking Savings			
See instructions.	d	Account number * * * * 0 9 9 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	Do	you want to allow another person to discuss this return with the IRS? See			
Designee	ins	structions	elow.	× No	
	De nai	signee's Phone Personal identif me no. number (PIN)	ication		
<u> </u>			41	t of man longuidades and	
Sign		der penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to lief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which			
Here	Yo	ur signature Date Your occupation If the	IRS ser	nt you an Identity	
		Prote	ection Pl	N, enter it here	
Joint return?		JAVA DEVELOPER (see	nst.)		
See instructions. Keep a copy for	Sp		the IRS sent your spouse an entity Protection PIN, enter it here		
your records.		(see	,	ection Fire, enter it here	
	Ph	one no. (916)397-5013 Email address AKHILBITRA0101@GMAIL.COM			
		eparer's name Preparer's signature Date PTIN		Check if:	
Paid		I PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA RAM SAGAR GUPTA TALLAM 02/09/2023 *****2	100 C		
Preparer	(P		ne no. (678) 965-9522		
Use Only			m's EIN **-**1965		