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.

	\mathbf{X}	Single Married filing jointly	Marrie	ed filing separately (N	ЛFS)	Head of	househ	old (HOI	H) [ifying surv	iving	
Check only one box.	If vo	u checked the MFS box, enter the n	ame of v	our spouse. If you d	hecke	d the HOH or	r OSS h	ox ente	r the		ise (QSS) name if th	e qualifying	
one box.		on is a child but not your dependent		our spouse. If you or	ricono		QUUL	ox, onc	,, (110	ornia 5	namo ii tii	o qualityilig	
Your first name and middle initial Last				ast name							Your social security number		
TRIDAYA CHANDANA KARU				RUTURI							***-**-4392		
If joint return, spouse's first name and middle initial Last na										Spouse's social security number			
Home address	(numbe	er and street). If you have a P.O. box, see	instructio	ons.			A	ot. no.		Presiden	ntial Election	on Campaign	
1223 GRE									Check here if you, or your				
City, town, or post office. If you have a foreign address, also complete sp				e spaces below. State ZI			ZIP co	de				tly, want \$3	
PITTSBURGH				PA			152				w will not	Checking a change	
Foreign country name			F	Foreign province/state/county					your tax or refund.				
											You	Spouse	
Digital	At ar	ny time during 2022, did you: (a) rec	eive (as a	a reward, award, or	paym	ent for prope	erty or s	ervices)	; or (l	o) sell,			
Assets	exch	ange, gift, or otherwise dispose of a	a digital a	asset (or a financial i	interes	st in a digital	asset)?	(See in	struc	tions.)	Yes	X No	
Standard	Som	eone can claim:	pendent	Your spouse	e as a	dependent							
Deduction		Spouse itemizes on a separate retur	n or you	were a dual-status	alien								
Age/Blindness	You	Were born before January 2, 1	958	Are blind Spo	ouse:	Was bor	rn hefo	re Janua	ry 2	1958	☐ Is bli	nd	
Dependents				(2) Social security		(3) Relationsh	(4)	_	•			instructions):	
If more		irst name Last name		number		to you	"P	Child ta		· 1		ner dependents	
than four											Г	7	
dependents,	9							Ī	_				
see instructions and check							>	Ī	_				
here \square	9					12						<u> </u>	
Income	1a	Total amount from Form(s) W-2, b	ox 1 (see	e instructions)						1a	8	88,221.	
IIICOIIIE	b	Household employee wages not re	eported o	on Form(s) W-2 .		V				1b			
Attach Form(s)	C	Tip income not reported on line 1a (see instructions)						1c					
W-2 here. Also attach Forms	d							1d					
W-2G and	е	Taxable dependent care benefits from Form 2441, line 26						1e					
1099-R if tax 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	h	Other earned income (see instruct	ions) .				, a			1h		0.	
W-2, see instructions.	i	Nontaxable combat pay election (s	see instru	uctions)		<u>1</u> i	i						
	Z	Add lines 1a through 1h		, .						1z	8	88,221.	
Attach Sch. B	2a	Tax-exempt interest	2a		b Tax	kable interest	t.			2b			
if required.	3a	A SOCIETATION OF THE PARTY OF T	3a			dinary divide				3b			
	4a	IRA distributions	4a		b Tax	kable amoun	it			4b			
Standard Deduction for—	5a		5a			kable amoun				5b			
• Single or	6a		6a			kable amoun				6b	-		
Married filing separately,	С	If you elect to use the lump-sum e			,				. 느				
\$12,950	7	Capital gain or (loss). Attach Sche							. L	7	+	0.00	
 Married filing jointly or 	8	Other income from Schedule 1, line 10								8		8,006.	
Qualifying surviving spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7		and the second						9	8	30,215.	
\$25,900	10	Adjustments to income from Schedule 1, line 26											
 Head of household, 	11	Subtract line 10 from line 9. This is								11		30,215.	
\$19,400	12	Standard deduction or itemized								12	1	2,950.	
 If you checked any box under 	13	Qualified business income deduct						• •		13	-	0.050	
Standard Deduction,	14	Add lines 12 and 13							14		2,950.		
see instructions.	15	Subtract line 14 from line 11. If zer	o or less	s, enter -u This is y	our ta	vanie iucom	ю.			15	1 6	57,265.	

Form 1040 (2022	2)			Page 2		
Tax and	16	Tax (see instructions). Check if any from Form(s): 1 8814 2 4972 3	16	10,418.		
Credits	17	Amount from Schedule 2, line 3	17			
0.00.10	18	Add lines 16 and 17	18	10,418.		
	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	10,418.		
	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	10,418.		
Payments	25	Federal income tax withheld from:				
	a	Form(s) W-2				
	b	Form(s) 1099				
	C	Other forms (see instructions)				
	d	Add lines 25a through 25c	25d	12,197.		
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)				
	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	12,197.		
Refund	34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid	34	1,779.		
	35a	Amount of line 34 you want refunded to you . If Form 8888 is attached, check here	35a	1,779.		
Direct deposit? See instructions.	b	Routing number * * * * * * * 0 1 3 7 c Type: X Checking Savings				
	d	Account number * * * * * 2 8 3 5				
	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		you want to allow another person to discuss this return with the IRS? See				
Designee		structions		× No		
	De	signee's Phone Personal identime number (PIN)	ication			
Sign	Un	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				nt you an Identity		
		Prote	ection P	N, enter it here		
Joint return?		CONSULTANT	(see inst.)			
See instructions. Keep a copy for your records.	Sp	Ident	he IRS sent your spouse an entity Protection PIN, enter it here he inst.)			
	Ph	one no. (412)559-9118 Email address TRIDAYACHANDANAK@GMAIL.COM				
		eparer's name Preparer's signature Date PTIN		Check if:		
Paid				Self-employed		
Preparer	Fir	m's name GLOBAL TAXES LLC Phor	ne no.			
Use Only			's EIN			