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.

Filing Status Check only	X 5	Single Married filing jointly	Marrie	ed filing separately (M	/IFS)	Head of	house	ehold (HOH)		fying survi se (QSS)	ving	
one box.	If yo	u checked the MFS box, enter the n	ame of y	our spouse. If you ch	hecke	d the HOH or	QSS	box, enter	the c			e qualifying	
	pers	on is a child but not your dependen	t:										
Your first name and middle initial Last name							Your social security number						
VINAY KUMAR DUVV			DUVV	JVVA						***-**-3827			
If joint return, spouse's first name and middle initial Last name				me	ne					Spouse's social security number			
Home address	(numbe	r and street). If you have a P.O. box, see	instruction	ons.				Apt. no.	Pro	esiden	tial Election	n Campaign	
							Check here if you, or your						
							spouse if filing jointly, want \$3 to go to this fund. Checking a						
CHARLOTTE			NC 2			28	8262 bo			w will not o			
Foreign country name			F	Foreign province/state/county Foreign			eign postal code you		ur tax	or refund.	_		
											You	Spouse	
Digital Assets		y time during 2022, did you: (a) rec ange, gift, or otherwise dispose of a					-				Yes	X No	
Standard		eone can claim: You as a de		<u></u>			4330	1): (000 1118	illuotic	<i>j</i> 113. <i>j</i>			
Deduction	_	Spouse itemizes on a separate return	•	•		Соронаст							
Age/Blindness	You:	☐ Were born before January 2, 1	958	Are blind Spo	use:	☐ Was bor	n bet	fore Januar	y 2, 19	958	☐ Is blir	nd	
Dependents	s (see	nstructions):		(2) Social security	,	(3) Relationsh	ip	4) Check the	e box if	qualifi	es for (see ii	nstructions):	
If more	(1) Fi	First name Last name		number		to you		Child tax cre		: (Credit for othe	er dependents	
than four]				
dependents, see instructions	s ——												
and check							·						
here						1				\perp	L		
Income	1a	Total amount from Form(s) W-2, b	,	,			-			1a	9	9,923.	
Attach Form(s)	b	Household employee wages not r	•						٠	1b			
W-2 here. Also	C	·	reported on line 1a (see instructions)						٠	1c			
attach Forms	d	Medicaid waiver payments not reported on Form(s) W-2 (see instructions)						1d	-				
W-2G and 1099-R if tax	e	Taxable dependent care benefits from Form 2441, line 26							1e				
was withheld.	f	Employer-provided adoption benefits from Form 8839, line 29								1f			
If you did not get a Form	g	Wages from Form 8919, line 6 .					•		•	1g			
W-2, see	h :	Other earned income (see instructions)							1h		0.		
instructions.	i	Nontaxable combat pay election (see instructions)								1z	٩	9,923.	
Attach Sch. B	z 2a		2a		 h Та	 xable interest			•	2b		7,723.	
if required.	3a	Qualified dividends	3a			dinary divider			•	3b			
	4a	IRA distributions	4a			xable amoun			•	4b			
Standard	5a		5a			xable amoun			•	5b			
Deduction for—	6a		6a			xable amoun			·	6b			
Single or Married filing	С	If you elect to use the lump-sum election method, check here (see instructions)											
separately,	7	Capital gain or (loss). Attach Schedule D if required. If not required, check here							7	1			
\$12,950 Married filing	8	Other income from Schedule 1, line 10							_	8			
jointly or Qualifying	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income							9	9	9,923.		
surviving spouse,	10	Adjustments to income from Schedule 1, line 26							10	1	,		
\$25,900 • Head of	11 Subtract line 10 from line 9. This is your adjusted gross income						11	9	9,923.				
household, \$19,400	12	Standard deduction or itemized	•							12		2,950.	
If you checked	13	Qualified business income deduction from Form 8995 or Form 8995-A								13	1		
any box under Standard	14	Add lines 12 and 13							14	12,950.			
Deduction, see instructions.	15	Subtract line 14 from line 11. If ze	ro or less	s, enter -0 This is y	our ta	xable incom	ie .			15			
300 11311 40110113.													

Form 1040 (2022	2)			Page 2		
Tax and	16	Tax (see instructions). Check if any from Form(s): 1 8814 2 4972 3	16	14,752.		
Credits	17	Amount from Schedule 2, line 3	17			
	18	Add lines 16 and 17	18	14,752.		
	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	14,752.		
	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	14,752.		
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	15,235.		
If you have a	26	2022 estimated tax payments and amount applied from 2021 return	26			
qualifying child, attach Sch. EIC.	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	15,235.		
Refund	34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid	34	483.		
11010111	35a	Amount of line 34 you want refunded to you . If Form 8888 is attached, check here	35a	483.		
Direct deposit?	b	Routing number * * * * * 0 1 3 8 c Type: X Checking Savings				
See instructions.	d	Account number * * * * * * * * 3 5 5 5				
	36	Amount of line 34 you want applied to your 2023 estimated tax 36				
Amount You Owe	37	Subtract line 33 from line 24. This is the amount 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		by you want to allow another person to discuss this return with the IRS? See structions	below.	X No		
3	De	signee's Phone Personal ident	ification			
	naı	me no. number (PIN)				
Sign Here		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 whic				
Here	Yo			nt you an Identity		
			ection P inst.)	IN, enter it here		
Joint return? See instructions.	Sn	DEVOES/CLOOD ENGINEER V	f the IRS sent your spouse an			
Keep a copy for	Ор			ection PIN, enter it here		
your records.		(see	inst.)			
		one no. (612)300-6261 Email address VINAYKUMAR.DUVVA@GMAIL.COM				
Paid	Pre	eparer's name Preparer's signature Date PTIN		Check if:		
Preparer	SYAM	I PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA RAM SAGAR GUPTA TALLAM 04/03/2023 *****	2703	Self-employed		
Use Only	Fir	m's name GLOBAL TAXES LLC Pho	Phone no. (678)965-9522			
USE Office	Fin	m's address 245 ROONEY CT E BRUNSWICK NJ 08816 Firm	ı's EIN	**-***1965		