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.

	s 🗌 S	Single X Married filing jointly	Marrie	ed filing separately (M	1FS)	Head of I	househ	old (HOF	l) [iving	
Check only one box.	If vo	u checked the MFS box, enter the na	ame of v	our spouse. If you ch	neck	ed the HOH or	OSS h	ox. ente	r the o	•	se (QSS) name if the	e qualifying	
0110 20%.		on is a child but not your dependent		our opouco. Il you or	10010	.54 1.15 1.1511.51	QUU L	ж, отто	1 1110	/ ma 0 1	iamo ir tiri	5 quamying	
Your first name			Last nar	me					Y	our soc	ial security	number	
DHANAJI			THOR	THORAT							***-**-2198		
	pouse's	s first name and middle initial	Last nar								Spouse's social security number		
				IORAT						***-**-2139			
	(numbe	er and street). If you have a P.O. box, see					A	ot. no.	-	_	-	n Campaign	
	•	AN BEAUTY LN,					'				ere if you,		
		ce. If you have a foreign address, also co	mplete si	paces below.	Sta	te	ZIP co	de	s	ouse if	filing joint	tly, want \$3	
COLUMBUS		,		·				12212		to go to this fund. Checking a box below will not change			
			Foreign province/state/county						your tax or refund.				
. o.o.g., ood.,	,			or orgin provinted, otato, o	, , , , , ,	.,	. 0.0.9.	. poota: 00			You	Spouse	
Digital	At an	ny time during 2022, did you: (a) rec	oive (ac	a reward award or i	navr	ment for proper	rty or s	ervices):	or (b)	coll			
Assets		ange, gift, or otherwise dispose of a					-				Yes	X No	
Standard		eone can claim: You as a de						(000		4 ,			
Deduction	_	Spouse itemizes on a separate retur		•									
		·		_	211011	_			-				
Age/Blindness	You:	Were born before January 2, 1	958 _	Are blind Spo	use	: Was bor					☐ Is bli		
Dependents	s (see	instructions):		(2) Social security		(3) Relationsh	ip (4)	Check th	e box i	f qualifie	es for (see i	instructions):	
If more	(1) Fi	rst name Last name		number		to you		Child tax cr		t C	redit for oth	er dependents	
than four	RID	DDHI THORAT		***-**-4020	0	Daughter		>				<u> </u>	
dependents, see instruction	s TAN	ANISH THORAT		***-**-5299		Son		×					
and check _							,						
here											L		
Income	1a	Total amount from Form(s) W-2, b	ox 1 (see	e instructions)	7					1a	14	0,776.	
	b	Household employee wages not re	eported	on Form(s) W-2						1b			
Attach Form(s) W-2 here. Also	С	·	o income not reported on line 1a (see instructions)							1c			
attach Forms	d		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	L . 2 . L											
If you did not	g	Wages from Form 8919, line 6 .								1g			
get a Form W-2, see	h	Other earned income (see instruct								1h		0.	
instructions.	i	Nontaxable combat pay election (s	see instr	uctions)		<u>li</u>					ļ		
	Z	Add lines 1a through 1h								1z	14	0,776.	
Attach Sch. B	2 a	Tax-exempt interest	2a			axable interest				2b		1.	
if required.	3a		3a			rdinary divider				3b		881.	
	4a		4a		b T	axable amount	t			4b			
Standard	5a		5a			axable amount				5b			
Deduction for— Single or	6a		6a			axable amount	t			6b			
Married filing separately,	С	If you elect to use the lump-sum e				,			. 📙		l		
\$12,950	7	Capital gain or (loss). Attach Schee		required. If not requ	ired.	, check here			. Ш	7		5,627.	
Married filing jointly or	8	Other income from Schedule 1, line 10								8		9,935.	
Qualifying	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income								9	13	7,350.	
surviving spouse, \$25,900	10	Adjustments to income from Schedule 1, line 26								10			
Head of Subtract line 10 from line 9. This is your adjusted gi										11		7,350.	
household, \$19,400	12	Standard deduction or itemized		,	,					12	2	5,900.	
If you checked any box under	13	Qualified business income deduction from Form 8995 or Form 8995-A								13		7.	
Standard	14								14		5,907.		
Deduction, see instructions.	15	Subtract line 14 from line 11. If zer	o or less	s, enter -0 This is y	our t	taxable incom	ie .			15	11	1,443.	

Form 1040 (2022	2)			Page 2		
Tax and	16	Tax (see instructions). Check if any from Form(s): 1 8814 2 4972 3	16	15,695.		
Credits	17	Amount from Schedule 2, line 3	17			
0.00.10	18	Add lines 16 and 17	18	15,695.		
	19	Child tax credit or credit for other dependents from Schedule 8812	19	4,000.		
	20	Amount from Schedule 3, line 8	20			
	21	Add lines 19 and 20	21	4,000.		
	22	Subtract line 21 from line 18. If zero or less, enter -0	22	11,695.		
	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	11,695.		
Payments	25	Federal income tax withheld from:				
,	а	Form(s) W-2				
	b	Form(s) 1099				
	С	Other forms (see instructions)	7			
	d	Add lines 25a through 25c	25d	25,926.		
	26	2022 estimated tax payments and amount applied from 2021 return	26			
If you have a 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	4			
	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	25,926.		
Defund	34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid	34	14,231.		
Refund	35a	Amount of line 34 you want refunded to you . If Form 8888 is attached, check here	35a	14,231.		
Direct deposit?	b	Routing number * * * * * * 0 0 1 7 c Type: X Checking Savings				
See instructions.	d	Account number * * * * * * * 0 7 5 1				
	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	Do	you want to allow another person to discuss this return with the IRS? See				
Designee		structions	below.	X No		
		signee's Phone Personal identi	fication			
		me no. number (PIN)				
Sign	Un bel	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) the bes	st of my knowledge and		
Here				nt you an Identity		
	10		ection PIN, enter it here			
Joint return?		SOFTWARE ENGINEER (see	inst.)			
See instructions. Keep a copy for	Sp		e IRS sent your spouse an			
your records.			itity Prote inst.)	ection PIN, enter it here		
you. recerue.		SOFTWARE ENGINEER				
		one no. (630)730-5482 Email address DHANAJIT@GMAIL.COM eparer's name Preparer's signature Date PTIN		Check if:		
Paid			2702	Self-employed		
Preparer		1 PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA RAM SAGAR GUPTA TALLAM 03/17/2023 *****				
Use Only			one no. (678)965-9522 n's FIN **-**1965			
-	⊢ır	mis address 2.47 KUUNIET C.E. BKUNSWICK NJ. UBBID - I FIRM	SHIN	^ ^ _ ^ * * 465		