La 1040		artment of the Treasury—Internal Revenue Servi S. Individual Income Tax		n 20 2 :	2	OMB No. 1545-	0074	IRS Use Only	—Do not w	rite or staple in this space	ce.
Filing Status Check only one box.	lf yo	☐ Single								ying	
Your first name	first name and middle initial Last name							Your social security number			
SURESH			KOTLI	KOTLIYAL					039-82-3815		
If joint return, spouse's first name and middle initial			Last name						Spouse's social security number		
MITHULA			MURAL	MURALIDHARAN					APPLIED FOR		
Home address	(numbe	er and street). If you have a P.O. box, see	instructions	5.			A	pt. no.	Preside	ntial Election Camp	aigr
12700 RI	DGEI	LINE BLVD					6	103	Check	nere if you, or your	-
-		ce. If you have a foreign address, also co	mplete spa	ces below.	Sta	te	ZIP c		•	if filing jointly, want	
CEDAR PARK			TX			786	13	0	this fund. Checking ow will not change	Ja	
Foreign country name			Foreign province/state/county			Foreig	n postal code		your tax or refund.		
Digital Assets		ny time during 2022, did you: (a) rec ange, gift, or otherwise dispose of a								🗌 Yes 🛛 No	
Standard	Som	eone can claim: 🗌 You as a de	pendent	Your spouse	as	a dependent					
Deduction		Spouse itemizes on a separate retur	n or you w	vere a dual-status a	alien						
		: 🗌 Were born before January 2, 1	958	Are blind Spo	use	: 🗌 Was bor		ore January 2		Is blind	
Dependents	s (see	instructions):		(2) Social security		(3) Relationsh	ip (4			fies for (see instructio	,
If more	(1) F	(1) First name Last name		number		to you		Child tax cr	edit	Credit for other depend	dents
than four dependents,								<u> </u>			
see instructions	s ——							<u> </u>			
and check											
here											
Income	1a	Total amount from Form(s) W-2, b	``	,							9.
	b	Household employee wages not reported on Form(s) W-2									
Attach Form(s) W-2 here. Also	С	Tip income not reported on line 1a					• •		. 10		
attach Forms	d	Medicaid waiver payments not reported on Form(s) W-2 (see instructions)							. 10		
W-2G and 1099-R if tax	е	Taxable dependent care benefits f			•				. <u>1</u> e		
was withheld.	f	Employer-provided adoption benefits from Form 8839, line 29							. <u>1</u> f		
If you did not	g	Wages from Form 8919, line 6 .					· ·		. <u>1</u> g		
get a Form W-2, see	h	Other earned income (see instruct	,			1	·		. <u>1</u> h		0.
instructions.	i	Nontaxable combat pay election (see instructions)									
	Z	Add lines 1a through 1h		1			· ·		. <u>1</u> z		9.
Attach Sch. B	2a	· -	2a			axable interest					
if required.	<u>3a</u>		3a			ordinary divider			. 3b		
	4a		4a			axable amount					
Standard Deduction for –	5a		5a			axable amount			. 5b		
Single or	6a	, _	6a			axable amount		· · ·	. 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		
 Married filing jointly or 	8	Other income from Schedule 1, line 10							. 8		
Qualifying spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income							. 9	63,50	9.
\$25,900	10	Adjustments to income from Schedule 1, line 26							. 10		
Head of household,	Head of Subtract line 10 from line 9. This is your adjusted gross income .						• •		. 11		
\$19,400	12	Standard deduction or itemized					• •		. 12		υ.
 If you checked any box under 	13	Qualified business income deduction from Form 8995 or Form 8995-A							. 13		
Standard	14	Add lines 12 and 13							. 14		
Deduction, see instructions.	15	Subtract line 14 from line 11. If zero or less, enter -0 This is your taxable income								37,60	9.

For Disclosure, Privacy Act, and Paperwork Reduction Act Notice, see separate instructions.

Form **1040** (2022)

Form 1040 (2022	2)									Page 2
Tax and	16	Tax (see instructions). Check	if any from Form	(s): 1 🗌 881	4 2 4972	3 🗌		16	4,	,104.
Credits	17	Amount from Schedule 2, lin	ie3					17		
	18	Add lines 16 and 17						18	4,	.104.
	19	Child tax credit or credit for	other dependen	ts from Sched	ule 8812			19		
	20	Amount from Schedule 3, lin	ie8					20		
	21	Add lines 19 and 20						21		
	22	Subtract line 21 from line 18	. If zero or less,	enter -0				22	4,	104.
	23	Other taxes, including self-e	mployment tax,	from Schedule	e 2, line 21 .			23		0.
	24	Add lines 22 and 23. This is	your total tax					24	4,	,104.
Payments	25	Federal income tax withheld								
	а	Form(s) W-2				25a 3	8,676.			
	b	Form(s) 1099				25b		-		
	с	Other forms (see instructions	s)			25c		-		
	d	Add lines 25a through 25c						25d	3,	676.
If you have a	26	2022 estimated tax payment	ts and amount a	pplied from 20	21 return .			26		
If you have a qualifying child, attach Sch. EIC.	27	Earned income credit (EIC)				27				
	28	Additional child tax credit from				28		-		
	29	American opportunity credit	from Form 8863	8, line 8		29		-		
	30	Reserved for future use .				30		1		
	31	Amount from Schedule 3, lin				31		1		
	32	Add lines 27, 28, 29, and 31	. These are your	total other pa	ayments and ref	undable credits		32		
	33	Add lines 25d, 26, and 32. These are your total payments						33	3,	,676.
Refund	34	If line 33 is more than line 24						34		
	35a	Amount of line 34 you want	refunded to you	J. If Form 8888	3 is attached, che	ck here	. 🗆	35a		
Direct deposit?	b	Routing number X								
See instructions.	d	Account number X X X X X X X X X X X X X X X X X X X								
	36	Amount of line 34 you want a				36				
Amount	37	Subtract line 33 from line 24	This is the amo	ount vou owe						
You Owe	•.	For details on how to pay, g						37		428.
	38	Estimated tax penalty (see in				38				
Third Party Designee	Do	you want to allow another	,			See				
		nstructions						below.	X No	
•		signee's		Phone			onal ident	fication		
	nai			no.			ber (PIN)			
Sign		der penalties of perjury, I declare t								
Here		belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which							,	0
	YO	ur signature	Date Your occupation					nt you an Ider 'IN, enter it he		
Joint return?					SOFTWARE ENGINEER			inst.)		
See instructions.	Sp	ouse's signature. If a joint return, I	Date Spouse's occupation					nt your spous		
Keep a copy for your records.						itity Prote inst.)	ection PIN, er	iter it here		
your rooordo.		IIOME MAKEN (<u> </u>			
		one no. (214) 301-999		Email address	SURESH.KOTL	IYAL@GMAIL.C				
Paid		eparer's name	Preparer's signat			Date	PTIN		Check if:	
Preparer		YAM PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA RAM SAGAR GUPTA TALLAM 01/24/2023 P02082						Self-err		
Use Only		m's name GLOBAL TAX							(678)965	
	Fir	m's address 245 ROONE	Y CT E BRU	NSWICK N	J 08816		Firm	i's EIN	88-21	
Go to www.irs.ge	ov/Forn	n1040 for instructions and the late	st information.		BAA	REV 01/14/23 PRO			Form 1(040 (2022)