E 1040 Department of the Treasury—Internal Revenue Service U.S. Individual Income Tax Return

2022	2
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OMB No. 1545-0074

IRS Use Only-Do not write or staple in this space.

Filing Status Check only	5 🗌 5	Single X Married filing jointly	Marrie	ed filing separately (M	IFS)	☐ Head of	househo	d (HOH)			ifying survi ise (QSS)	ving	
one box.		u checked the MFS box, enter the na on is a child but not your dependent		our spouse. If you ch	eck	ed the HOH or	r QSS bo	x, enter	the cl	nild's	name if the	e qualifying	
Your first name	our first name and middle initial Last name						Your social security number						
NIKHIL			TAMB	E					72	723-96-0772			
If joint return, spouse's first name and middle initial			Last na	me					Sp	Spouse's social security number			
PRIYANKA			SHEL	AR					14	146-65-6611			
Home address	(numbe	r and street). If you have a P.O. box, see	instruction	ons.			Apt	. no.	Pre	esider	ntial Electio	n Campaign	
							Check here if you, or your						
							spouse if filing jointly, want \$3 to go to this fund. Checking a						
SOMERSET	·		NJ			0887				box below will not change			
Foreign country name		Foreign province/state/county			Foreign postal code yo			ur tax	or refund.				
											You	Spouse	
Digital	At ar	ny time during 2022, did you: (a) rece	eive (as	a reward, award, or p	oayr	ment for prope	rty or se	rvices);	or (b)	sell,			
Assets	exch	ange, gift, or otherwise dispose of a	digital	asset (or a financial ir	nter	est in a digital	asset)?	See inst	ructio	ns.)	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	were a dual-status a	alien								
Age/Blindness	You:	Were born before January 2, 1	958	Are blind Spo	use	: Was bo	rn before	January	2, 19	958	☐ Is bli	nd	
Dependents	s (see	instructions):		(2) Social security		(3) Relationsh	1ip (4) (heck the	box if	qualif	ies for (see i	nstructions):	
If more	(1) Fi	rst name Last name		number		to you		Child tax			Credit for oth	er dependents	
than four	NAI	RA TAMBE		599-69-7716	5	Daughter		×					
dependents, see instructions	3]	
and check							4]	
here										\perp]	
Income	1a	Total amount from Form(s) W-2, bo							•	1a	12	2,669.	
	b	Household employee wages not re	-						•	1b			
Attach Form(s) W-2 here. Also	С	Tip income not reported on line 1a			-				•	1c	-		
attach Forms	d	Medicaid waiver 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	Employer-provided adoption benefits from Form 8839, line 29							7 C	1f			
If you did not	g	Wages from Form 8919, line 6 .			•				٠	1g			
get a Form W-2, see	h	Other earned income (see instruction						•	1h	-	0.		
instructions.	i	Nontaxable combat pay election (s	see instr	uctions)		<u>l</u> i				4-	1.0	2 ((0	
	<u>z</u>	Add lines 1a through 1h	0-		L T				100	1z	12	2,669.	
Attach Sch. B if required.	2a		2a			axable interes Ordinary divide			•	2b 3b		12	
	3a 4a		3a 4a			axable amoun			•	4b			
24	4 а 5а	Table 1	5a			axable amoun				5b			
Standard Deduction for—	6a		6a			axable amoun			10 (1	6b			
Single or			10.000						\Box	OD			
separately,								\Box	7				
\$12,950 Married filing	8	Other income from Schedule 1, line 10							ш	8	_1	3,329.	
jointly or	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income						•	9	1	9,352.		
Qualifying surviving spouse,	10	Adjustments to income from Schedule 1, line 26								10		1,600.	
\$25,900 Head of	11	Subtract line 10 from line 9. This is								11		7,752.	
household,	12	Standard deduction or itemized				1				12		5,900.	
\$19,400 If you checked	13	Qualified business income deducti				5-A .				13		<u> </u>	
any box under	14									14	2	5,900.	
Standard Deduction,	15							15		1,852.			
see instructions.	. •			., 5	٠. ١				•		1 0	-,002.	

Form 1040 (2022	2)			Page 2	
Tax and	16	Tax (see instructions). Check if any from Form(s): 1 8814 2 4972 3	16	9,414.	
Credits	17	Amount from Schedule 2, line 3	17		
0.000	18	Add lines 16 and 17	18	9,414.	
	19	Child tax credit or credit for other dependents from Schedule 8812	19	2,000.	
	20	Amount from Schedule 3, line 8	20	2,000.	
	21	Add lines 19 and 20	21	4,000.	
	22	Subtract line 21 from line 18. If zero or less, enter -0	22	5,414.	
	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	5,414.	
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	11,191.	
If you have a	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			
	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	11,191.	
Refund	34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid	34	5,777.	
neiuliu	35a	Amount of line 34 you want refunded to you . If Form 8888 is attached, check here	35a	5,777.	
Direct deposit?	b	Routing number X X X X X X X X X X X X C Type: Checking Savings			
See instructions.	d	Account number X X X X X X X X X			
	36	Amount of line 34 you want applied to your 2023 estimated tax			
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	ins	structions	elow.	X No	
		signee's Phone Personal identifume no. number (PIN)	ication		
Sign		der penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to			
Here	be	lief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which	prepar	er has any knowledge.	
TICIC	Yo			nt you an Identity	
1			inst.)	IN, enter it here	
Joint return? See instructions.	Sn	TROCORDINIT PHINTEEN		nt your spouse an	
Keep a copy for	Op	Ident	tity Prote	ection PIN, enter it here	
your records.		STUDENT (see	inst.)		
	Ph	one no. (312)818-9137 Email address FABS.NIKHIL.TAMBE@GMAIL.COM			
Paid	Pre	eparer's name Preparer's signature Date PTIN		Check if:	
Preparer Preparer	SYAN	M PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA RAM SAGAR GUPTA TALLAM 02/17/2023 P0208:	2703	Self-employed	
Use Only	Fir	m's name GLOBAL TAXES LLC Phor	hone no. (678) 965-9522		
OSE OILLY	Fin	m's address 245 ROONEY CT E BRUNSWICK NJ 08816	's FIN	84-3171965	