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

2022

OMB No. 1545-007

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

Filing Status Check only one box.	If yo	Single Married filing jointly u checked the MFS box, enter the non is a child but not your dependent	ame of y	ed filing separately (,	_		nold (HOF	,	spou	ifying survise (QSS) name if th	· ·
Your first name	and mi	ddle initial	Last nar	me					Y	our soc	cial securit	y number
SHUBHANGI			MANE						4	458-88-1185		
				me						Spouse's social security number		
Home address	(numbe	er and street). If you have a P.O. box, see	instruction	ons.			А	pt. no.	P	resider	ntial Election	on Campaign
444 WASI	HINGT	TON BLVD			_						ere if you,	
City, town, or p	ost offic	ce. If you have a foreign address, also co	omplete spaces below. State Z			ZIP co	ode		spouse if filing jointly, want \$3 to go to this fund. Checking a			
JERSEY (CITY		NJ			073	10		box below will not change			
Foreign country name			F	Foreign province/state/county Foreign			n postal co	de y	your tax or refund. You Spouse			
 Digital		ny time during 2022, did you: (a) rec	,	· · · · · · · · · · · · · · · · · · ·			•	, .	` '			
Assets	exch	ange, gift, or otherwise dispose of a		<u></u>	intere	est in a digital	asset)	? (See ins	tructi	ons.)	∐ Yes	⊠ No
Standard Deduction		eone can claim:	•			a dependent						
		Were born before January 2, 1		1	ouse:	☐ Was bor	rn befo	re Janua	rv 2. 1	958	☐ Is bl	ind
Dependent		<u> </u>		<u> </u>		(3) Relationsh	14					instructions):
If more	•	(1) First name Last name		(2) Social security number (3)		to you	(b) Helationship		Child tax credit		,	her dependents
than four												
dependents,											[
see instruction and check	S ——										[
here]											
Income	1a	Total amount from Form(s) W-2, b	ox 1 (see	e instructions) .						1a	11	16,986.
	b	Household employee wages not re	eported	on Form(s) W-2 .						1b		
Attach Form(s) W-2 here. Also	С	Tip income not reported on line 1a	a (see ins	structions)						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 bene	fits from	n Form 8839, line 29	٠.					1f		
If you did not	g	Wages from Form 8919, line 6 .								1g		
get a Form W-2, see	h	Other earned income (see instruct	ions) .				, .			1h		0.
instructions.	i	Nontaxable combat pay election (see instr	ructions)		<u>1i</u>	i					
	Z	Add lines 1a through 1h								1z	11	16,986.
Attach Sch. B	2a	'	2a			axable interest				2b		
if required.	<u>3a</u>		3a			rdinary divide				3b		
	4a	_	4a			axable amoun				4b		
Standard Deduction for—	5a	-	5a			axable amoun				5b		
Single or	6a	,	6a			axable amoun	it		·	6b		
Married filing separately,	c	If you elect to use the lump-sum e		,	`	,				_		
\$12,950	7	Capital gain or (loss). Attach Sche							Ш	7		
 Married filing jointly or 	8	Other income from Schedule 1, line 10							8	11	0.	
Qualifying surviving spouse,	9 10	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income								10	1 1	16,986.
\$25,900	11	Adjustments to income from Schedule 1, line 26							•	11	1 1 1	16,986.
Head of household,	12	Standard deduction or itemized deductions (from Schedule A)							•	12		12,950.
\$19,400 If you checked	13	Qualified business income deduct		•	,					13	1	<u> , , , , , , , , , , , , , , , , , ,</u>
any box under Standard	14	Add lines 12 and 13								14	1	12 , 950.
Deduction,	15	Subtract line 14 from line 11. If zer								15		04,036.
see instructions.				•								

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Tax and	16	Tax (see instructions). Check	if any from Form	(s): 1 881	4 2 🗌 4972	3 🗌		16	18,804.
Credits	17	Amount from Schedule 2, lin	те 3					17	
	18	Add lines 16 and 17						18	18,804.
	19	Child tax credit or credit for	other dependent	ts from Sched	ule 8812			19	
	20	Amount from Schedule 3, lin	ne 8					20	
	21	Add lines 19 and 20						21	
	22	Subtract line 21 from line 18	. If zero or less,	enter -0				22	18,804.
	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	18,804.
Payments	25	Federal income tax withheld							
-	а	Form(s) W-2				25a 21	,701.		
	b	Form(s) 1099							
	С	Other forms (see instructions	s)			25c			
	d	Add lines 25a through 25c						25d	21,701.
If you have a	26	2022 estimated tax paymen	ts and amount a	pplied from 20)21 return			26	
qualifying child,	27	Earned income credit (EIC)			No .	27			
attach Sch. EIC.	28	Additional child tax credit from	m Schedule 8812	2		28			
	29	American opportunity credit	from Form 8863	3, line 8		29			
	30	Reserved for future use .				30			
	31	Amount from Schedule 3, lin	ne 15			31			
	32	Add lines 27, 28, 29, and 31	32						
	33	Add lines 25d, 26, and 32. T	hese are your to	tal payments				33	21,701.
Refund	34	If line 33 is more than line 24						34	2,897.
neiuliu	35a	Amount of line 34 you want	refunded to you	یا. If Form 8888	3 is attached, che	ck here	. 🗆 🗎	35a	2,897.
Direct deposit?	b	Routing number X X X	XXXXX	XX	c Type:	Checking	Savings		
See instructions.	d	Account number X X X	$X \mid X \mid X \mid X$	XXXX	X X X X X	XXX			
	36	Amount of line 34 you want	applied to your	2023 estimate	ed tax	36			
Amount You Owe	37	Subtract line 33 from line 24						37	
	38	For details on how to pay, go to www.irs.gov/Payments or see instructions							
Third Party		you want to allow another							
Designee		structions	•				omplete b	elow.	X No
200.900	De	signee's		Phone		_	onal identifi		
	naı	me		no.		num	ber (PIN)		
Sign		der penalties of perjury, I declare tief, they are true, correct, and com			1 , 0		,		, ,
Here	Yo	Your signature		Date	Your occupation				nt you an Identity N, enter it here
Joint return?				DEVELOPER			(see in		
See instructions.	Sp	ouse's signature. If a joint return, I	Date				IRS sen	it your spouse an	
Keep a copy for your records.								ection PIN, enter it here	
your records.						(see ir	ist.)		
		one no. (716) 907-518		Email address	SMANE2@BU				
Paid		eparer's name	Preparer's signat			Date	PTIN		Check if:
Preparer	SYAM	PRIYA RAM SAGAR GUPTA TALLAM		RAM SAGAR	GUPTA TALLAM	1 02/24/2023	P02082		Self-employed
Use Only	Firm's name GLOBAL TAXES LLC Phone							678) 965-9522	
	Fin	m's address 245 ROONE	Y CT E BRU	NSWICK N	J 08816		Firm's	EIN	84-3171965
Go to www.irs.g	ov/Forn	n1040 for instructions and the late	st information.		BAA	REV 02/17/23 PRO			Form 1040 (2022)

SCHEDULE 1 (Form 1040)

Additional Income and Adjustments to Income

OMB No. 1545-0074

2022
Attachment Sequence No. 01

Department of the Treasury Internal Revenue Service

Attach to Form 1040, 1040-SR, or 1040-NR.

Go to www.irs.gov/Form1040 for instructions and the latest information.

Name(s) shown on Form 1040, 1040-SR, or 1040-NR	Your so	Your social security number			
SHUBHANGI MANE			458-88-1185		
Part I Additional Income	·				
1 Taxable refunds, credits, or offsets of state and local income taxes		1			
2a Alimony received		2a			

1	Taxable refunds, credits, or offsets of state and local income taxes		1	
2a	Alimony received		2a	
b	Date of original divorce or separation agreement (see instructions):			
3	Business income or (loss). Attach Schedule C		3	
4	Other gains or (losses). Attach Form 4797		4	
5	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Atta	ch Schedule E .	5	0.
6	Farm income or (loss). Attach Schedule F		6	
7	Unemployment compensation		7	
8	Other income:			
а	Net operating loss	8a ()		
b		8b		
С	Cancellation of debt	8c		
d	<u> </u>	8d (
е	Income from Form 8853	8e		
f	Income from Form 8889	8f		
g	Alaska Permanent Fund dividends	8g		
h	Jury duty pay	8h		
i	Prizes and awards	8i		
j	Activity not engaged in for profit income	8j		
k	Stock options	8k		
ı	Income from the rental of personal property if you engaged in the rental			
	for profit but were not in the business of renting such property	81		
m	Olympic and Paralympic medals and USOC prize money (see			
	,	8m		
n	·	8n		
0		80		
р		8p		
q	Taxable distributions from an ABLE account (see instructions)	8q		
r	Scholarship and fellowship grants not reported on Form W-2	8r		
S	Nontaxable amount of Medicaid waiver payments included on Form			
	1040, line 1a or 1d	8s ()		
t	Pension or annuity from a nonqualifed deferred compensation plan or			
	a nongovernmental section 457 plan	8t		
u		8u		
Z				
•		8z		
9	Total other income. Add lines 8a through 8z		10	
10	Compline lines Timrollan / and 9 Enter here and on Form 1040-1040-SR	or 1040-NB line 8	10	Λ

Schedule 1 (Form 1040) 2022 Page **2**

Par	II Adjustments to Income			
11	Educator expenses		11	
12	Certain business expenses of reservists, performing artists, and fee-b			
	officials. Attach Form 2106		12	
13	Health savings account deduction. Attach Form 8889		13	
14	Moving expenses for members of the Armed Forces. Attach Form 3903 .		14	
15	Deductible part of self-employment tax. Attach Schedule SE		15	
16	Self-employed SEP, SIMPLE, and qualified plans		16	
17	Self-employed health insurance deduction		17	
18	Penalty on early withdrawal of savings		18	
19a	Alimony paid		19a	
b	Recipient's SSN			
С	Date of original divorce or separation agreement (see instructions):			
20	IRA deduction		20	
21	Student loan interest deduction		21	
22	Reserved for future use		22	
23	Archer MSA deduction		23	
24	Other adjustments:			
а	, , , , , , , , , , , , , , , , , , ,	4a		
b	Deductible expenses related to income reported on line 8l from the			
		4b		
С	Nontaxable amount of the value of Olympic and Paralympic medals			
	·	4c		
d		4d		
е	Repayment of supplemental unemployment benefits under the Trade			
		4e		
f		24f		
g	, , , , , , , , , , , , , , , , , , , ,	4g		
h	Attorney fees and court costs for actions involving certain unlawful			
	,	4h		
i	Attorney fees and court costs you paid in connection with an award			
	from the IRS for information you provided that helped the IRS detect			
		24i	_	
J		24j		
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form	41-		
_	,	4k	_	
Z	Other adjustments. List type and amount:	4z		
25			05	
25 26	Total other adjustments. Add lines 24a through 24z		25	
26	Add lines 11 through 23 and 25. These are your adjustments to income . E		26	
	Form 1040 or 1040-SR, line 10, or Form 1040-NR, line 10a	<u> </u>		