E1040		artment of the Treasury-Internal Revenue Servi 5. Individual Income Tax		urn	202	2	OMB No. 1545	-0074	IRS Use Only	—Do not w	rite or staple i	n this space.	
Filing Status Check only one box.	lf yo	Single X Married filing jointly u checked the MFS box, enter the n on is a child but not your dependent	ame of y				Head of Eed the HOH or			spoi	lifying surv use (QSS) name if th	0	
Your first name and middle initial Last name				name							Your social security number		
ASHISH J				JAIN							324-11-6471		
If joint return, spouse's first name and middle initial				Last name						Spouse's social security numbe			
_DEEPIKA JAIN				1						345-45-2124			
Home address (numbe	r and street). If you have a P.O. box, see	instructi	ons.				A	pt. no.	Presidential Election Campaign			
<u>16824 SW</u>	BIF	RDSONG ST								Check here if you, or your spouse if filing jointly, want \$3			
City, town, or post office. If you have a foreign address, also complete sp				baces below. State			ZIP co	ode	to go to this fund. Checking a				
BEAVERTON								970	07	box below will not change			
Foreign country name				Foreign province/state/county			Foreign postal code y		your tax	c or refund.			
											You	Spouse	
Digital Assets	exch	ny time during 2022, did you: (a) reco ange, gift, or otherwise dispose of a	a digital	asset (or a	financial ir	nter	est in a digital	-			Yes	X No	
Standard Deduction	_	eone can claim: U You as a de Spouse itemizes on a separate retur	•		-		a dependent						
Age/Blindness		Were born before January 2, 1		Are blind				n befo	ore January 2	2, 1958	🗌 ls bli	nd	
Dependents	(see	instructions):		(2) Soc	cial security		(3) Relationsh	ip (4) Check the b	ox if quali	fies for (see	instructions):	
If more	(1) Fi	rst name Last name		nu			to you		Child tax c	redit	Credit for oth	ner dependents	
than four											[
dependents, see instructions													
and check													
here													
Income	1a	Total amount from Form(s) W-2, b	ox 1 (se	e instructio	ons)					. 1 a	19	94,057.	
	b	Household employee wages not reported on Form(s) W-2								. 1b)		
Attach Form(s) W-2 here. Also	С	Tip income not reported on line 1a (see instructions)							. 1c	;			
attach Forms	d	Medicaid waiver payments not rep				Istru	ictions)			. 1d			
W-2G and 1099-R if tax	е	Taxable dependent care benefits f				•				. 1e			
was withheld.	f	Employer-provided adoption bene				•				. 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						· ·		. <u>1h</u>	1	2,870.	
instructions.	i	Nontaxable combat pay election (s		ructions) .		•	1 i			_			
	<u>z</u>	Add lines 1a through 1h			· · ·	· ·		• •		. 1z		96,927.	
Attach Sch. B	2a		2a	2			axable interest			. 2b		320.	
if required.	<u>3a</u>		3a	3			Ordinary divide			. 3b		360.	
	4a	-	4a				axable amoun						
Standard Deduction for –	5a		5a				axable amoun			. 5b			
Single or	6a	Social security benefits . 6a b Taxable amount								. 6b)		
Married filing separately,	c 7	If you elect to use the lump-sum election method, check here (see instructions)										FF	
\$12,950	50 7 Capital gain or (loss). Attach Schedule D if required. If not required									1	55.		
jointly or	ointly or				is is your total income					. <u>8</u> . 9		<u>4,299.</u>	
Qualifying spouse,	9 10											33,363.	
\$25,900	10									. <u>10</u> . 11		2 262	
 Head of household, 	12	Subtract line 10 from line 9. This is your adjusted gross income							· 11		<u>33,363.</u> 25 900		
\$19,400 • If you checked								· 12		<u>25,900.</u> 2.			
any box under	under da Addutionen 10 mod 10							. 14		<u>2.</u> 25,902.			
Deduction, 15 Subtract line 14 from line 11. If zero or less enter -0- This is your taxable incom						 е		. 15		57,461.			
see instructions.			2 0. 100	_,								,, 101.	

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 8814 2 4972 3 . .	16	25,848.
Credits	17	Amount from Schedule 2, line 3	17	
	18	Add lines 16 and 17	18	25,848.
	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	25,848.
	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	25,848.
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	27,204.
If you have a qualifying child, attach Sch. EIC.	26	2022 estimated tax payments and amount applied from 2021 return	26	
	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	27,204.
Refund	34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid	34	1,356.
	35a	Amount of line 34 you want refunded to you . If Form 8888 is attached, check here	35a	1,356.
Direct deposit? See instructions.	b	Routing number X X X X X X X X C Type: C Checking Savings		
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 applied to your 2023 estimated tax 36		
Amount	37	Subtract line 33 from line 24. This is the amount you owe.		
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		you want to allow another person to discuss this return with the IRS? See		
Designee		structions		X No
	nar	signee's Phone Personal identif ne no. Personal identif		
Sign	Un	der penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to	the best	of my knowledge and
Here	bel	ief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which	prepare	r has any knowledge.
nere	Yo	5		t you an Identity
Joint return? See instructions.			_	N, enter it here
	Sn	SQL SERVER DEVELOPER	,	t your spouse an
Keep a copy for	op			ction PIN, enter it here
your records.		BUSINESS SYSTEMS ANALYST (see i	nst.)	
	Ph	one no. (773)543-3753 Email address ASHISH.JAIN.CS@GMAIL.COM		
Daid	Pre	eparer's name Preparer's signature Date PTIN		Check if:
Paid	SYAM	PRIYA RAM SAGAR CUPTA TALLAM SYAM PRIYA RAM SAGAR GUPTA TALLAM 02/28/2023 P02082	2703	Self-employed
Preparer	Fin	n's name GLOBAL TAXES LLC Phon	e no. (678)965-9522
Use Only	Fin	m's address 245 ROONEY CT E BRUNSWICK NJ 08816 Firm'	s EIN	84-3171965
Go to www.irs.go	ov/Forn	n1040 for instructions and the latest information. BAA REV 02/24/23 PRO		Form 1040 (2022)