E 1040 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.

Comparison of	Filing Status Check only one box.		Single Married filing jointly  u checked the MFS box, enter the na		ed filing separately (N					spou	fying survi se (QSS) name if the	Ü
## RAJTA ## If port return, spouse is first name and middle initial ## If port return, spouse is first name and middle initial ## If port return, spouse is first name and middle initial ## It port return, spouse is first name and middle initial ## It port return, spouse is first name and middle initial ## If port return, spouse is first name and middle initial ## It port return, spouse is first name and middle initial ## It port return, spouse is first name and middle initial ## It port return, spouse is first name and middle initial ## It port return, spouse is first name and middle initial ## It port return, spouse is first name and middle initial ## It port return, spouse is first name and middle initial ## It port return, spouse is first name and middle initial ## It port return, spouse is first name and middle initial ## It port return, spouse is first name and middle initial ## It port return, spouse is first name and middle initial ## It port return, spouse is first name and middle initial ## It port return, spouse is first name and middle initial ## It port return, spouse is first name and middle initial ## It port return, spouse is first name and middle initial ## It port return, spouse is first name and middle initial ## It port return, spouse is first name and middle initial ## It port return, spouse is first name and middle initial ## It port return name and middle initial name and middle initial name and entering initial name and		pers	on is a child but not your dependent	: ´								. , ,
If point truthm, spouse's first name and middle initial   Last name   Last n	Your first name and middle initial			Last nar	me				,	Your social security number		
MEGALATHA   DMAKANTHAN   123-45-1591   123	RADHA KRISHNAN			RAJA						137-23-4282		
Presidential Election Campaign   Spring   Spri	If joint return, sp	ouse's	first name and middle initial	Last nar	me				;	Spouse's social security number		
City, town, or post office. If you have a foreign address, also complete spaces below.  City town, or post office. If you have a foreign address, also complete spaces below.  City town, or post office. If you have a foreign address, also complete spaces below.  City town, or post office. If you have a foreign address, also complete spaces below.  City town, or post office. If you have a foreign address, also complete spaces below.  City town, or post office. If you have a foreign address, also complete spaces below.  City town, or post office. If you have a foreign address, also complete spaces below.  City town, or post office. If you have a foreign address, also complete spaces below.  City town or post office. If you have a foreign address, also complete spaces below.  City town or post office.  City town or post of the space and address, also complete spaces below.  City town or post office.  City town or post of the space and address, also complete spaces below.  City town or post of the space and address, also complete spaces below.  City town or post of or post of the space and address, also complete spaces below.  City town or post of or post of the space and address, also complete spaces below.  City town of the space and address, also complete spaces below.  City town or post of or found in the space in address of the space and address of the space and address of the space and address.  City town or post of or found you ward, or payment for property or services; or to break post of a digital asset or a financial interest in a digital asset)? See instructions.  City to more dependent.  City town or post of the space and address, and address of the space and address of the space and address.  City to more dependent.  City to more dep	MEGALATH	Α		UMAK.	ANTHAN					123-45-1591		
State   Standard   State   S	Home address (	numbe	r and street). If you have a P.O. box, see	instructio	ons.			Apt. no.		Presidential Election Campaign		
Digital Assets   At any time during 2022, did you: (a) receive (as a reward, award, or payment for property or services); or (b) self, exchange, gift, or otherwise dispose of a digital asset for a financial interest in a digital asset)   Assets	3178 PAW	NEE	WAY									
PLEASANTON   CA   945.8   box below will not change province/state/country name   Foreign province/state/country   Foreign provinc	City, town, or po	ost offic	ce. If you have a foreign address, also co	mplete sp	olete spaces below. State 2			ZIP code				
At any time during 2022, did you: (a) receive (as a reward, award, or payment for property or services); or (b) self, exchange, gift, or otherwise dispose of a digital asset (or a financial interest in a digital asset)? (See instructions).   Ves   No	PLEASANT	ON			CA			94588 box				
Digital Assets  At any time during 2022, did you: (a) receive (as a reward, award, or payment for property or services); or (b) self, assets  Standard Deduction  Someone can calmi: You as a dependent Your spouse as a dependent  Spouse itemizes on a separate return or you were a dual-status alien  Age/Blindness  You: Were born before January 2, 1958 Are blind  Spouse: Was born before January 2, 1958 Is blind  Dependents  (see instructions): (1) First name  Last name  (ARTHIKRAM RADHA KRISHNAN 987-85-4556 Son SURYA RADHA KRISHNAN 987-98-4654 Son SURYA RADHA KRISHNAN 987-98-4654 Son SURYA RADHA KRISHNAN 987-98-4654 Son Sutach Forms  V2. bero, Also  thousehold employee wages not reported on Form(s) W-2.  to Tip income not reported on line 1a (see instructions)  throughouts, see instructions  did dont get a Form  W-2, see  through the way withheld.  If you did not get a Form  W-2, see  instructions  a Taxable dependent care benefits from Form 8819, line 6  Taxable dependent care benefits from Form 8839, line 29  to Household employee wages not reported on Form(s) W-2 (see instructions)  to Household employee benefits from Form 8839, line 29  to Household employee benefits from Form 8839, line 29  to Household employee benefits from Form 8839, line 29  to Household employee benefits from Form 8839, line 29  to Household employee benefits from Form 8839, line 29  to Household employee benefits from Form 8839, line 29  to Household employee benefits from Form 8839, line 29  to Household employee benefits from Form 8839, line 29  to Household employee benefits from Form 8839, line 29  to Household employee benefits from Form 8839, line 29  to Household employee benefits from Form 8839, line 29  to Household employee benefits from Form 8839, line 29  to Household employee benefits from Form 8839, line 29  to Household employee benefits from Form 8839, line 29  to Household employee benefits from Form 8839, line 29  to Household employee benefits from Form 8839, line 29  to Household employee benefits from Form 8839, lin	Foreign country	name		F	Foreign province/state/county			Foreign postal code your ta		your tax	ur tax or refund.	
Assets  exchange, gift, or otherwise dispose of a digital asset (or a financial interest in a digital asset)? (See instructions.)											You	Spouse
Standard Deduction  Someone can claim:				,		•			,			<b>\</b>
Age/Blindness   You   Were born before January 2, 1958   Are blind   Spouse:   Was born before January 2, 1958   Is blind   Spouse:   Was born before January 2, 1958   Is blind   Spouse:   Was born before January 2, 1958   Is blind   Spouse:   Was born before January 2, 1958   Is blind   Spouse:   Was born before January 2, 1958   Is blind   Spouse:   Was born before January 2, 1958   Is blind   Was born before January 2, 1958   Was born before Jan	-							asset)? (See i	nstruc	tions.)	∐ Yes	No No
Dependents   (see instructions):   (1) First name			<del></del>	•								
If more	Age/Blindness	You:	☐ Were born before January 2, 1	958	Are blind Spo	use	: Was bor	n before Janu	ary 2,	1958	☐ Is blir	nd
If more than four than f	Dependents	(see i	instructions):		(2) Social security		(3) Relationsh	ip (4) Check	the box	if qualifi	es for (see ir	nstructions):
than four dependents, see instructions dependents, see instructions see instructions and defect here here.    Total amount from Form(s) W-2, box 1 (see instructions)	-					4	to you	Child	tax cre	dit	Credit for othe	er dependents
dependents, see instructions and check here   Income   In		KAR	THIKRAM RADHA KRISHN	AN	987-85-4556	5	Son				×	[
Income  Income  Income  Attach Form(s) W-2 here. Also Attach Forms W-2 here. Also Attach Forms W-2 here. Also Attach Forms W-2 and 1099-Ri if tax was withheld. If you did not get a Form W-2, see instructions.  Income to the carried income (see instructions)  Income to the carried i	dependents,	SUR			987-98-4654	4	Son				×	[
Income Attach Form(s) W-2 here. Also attach Forms W-2 here. Also attach Forms W-2 here. Also attach Forms W-2 mere. Also attach Forms W-2 mere	and check											
Attach Form(s) W-2 here. Also attach Forms W-2 mere. Also attach Forms W-2 (see instructions)  Medicaid waiver payments not reported on Form(s) W-2 (see instructions)  Medicaid waiver payments not reported on Form(s) W-2 (see instructions)  Id  West and 1099-R if tax associated from Form 8919, line 26  Employer-provided adoption benefits from Form 8839, line 29  Mages from Form 8919, line 6  Mages from Form 8919, line 6  Mages from Form 8919, line 6  Ig  Wages from Form 8919, line 6  Montaxable combat pay election (see instructions)  In Ontaxable combat pay election (see instructions)  In Ontaxable amount  It a 138,633.  Attach Sch. B  Tax-exempt interest  2a  Do Taxable interest  2b  Do Taxable amount  Montared fling separately. Str., 50  Married fling pointly or Qualifying surviving spouse. Str., 500  Married fling pointly or Qualifying surviving spouse. Str., 500  Married fling bloothed  Married fling pointly or Qualifying surviving spouse. Str., 500  Married fling bloothed  Married f	here $\square$											
Attach Form(s) W-2 here, Also attach Forms W-2 here, Also attach Forms W-2 here, Also attach Forms W-2 and 1099-Rif tax was withheld. If you did not get a Form W-2, see instructions.  Z Add lines 1 a through 1h Other earned income (see instructions)  I attach Sch. B if required.  Attach Sch. B if required.  Attach Sch. B if you get a form Bandard Beduction for-Single or Married filing separately, \$12,050  Standard Coulding separately, \$12,050  Standard Coulding speparately, \$12,050  Standard Separately, \$12,050  Standard Standard Standard Poeduction 11  Subtract line 10 from line 9. This is your adjusted gross income  11 113,694  Add lines 12 and 13  Subtract line 11 If year or less enter-0. This is your taxable income  15 Subtract line 11 If year or less enter-0. This is your taxable income  15 Subtract line 14 from line 11 If year or less enter-0. This is your taxable income  15 Subtract line 14 from line 11 If year or less enter-0. This is your taxable income  15 Subtract line 14 from line 11 If year or less enter-0. This is your taxable income  15 Subtract line 14 from line 11 If year or less enter-0. This is your taxable income  15 Subtract line 14 from line 11 If year or less enter-0. This is your taxable income  15 Subtract line 14 from line 11 If year or less enter-0. This is your taxable income  15 Subtract line 14 from line 11 If year or less enter-0. This is your taxable income  15 Subtract line 14 from line 11 If year or less enter-0. This	Income	1a	Total amount from Form(s) W-2, bo	ox 1 (see	e instructions)					1a	13	8,633.
W-2 here. Also attach Forms W-2G and 1099-R it tax was withheld. If you did not get a Form W-2, see instructions  W-2, see instructions.  Add lines 1a through 1h  Tax-exempt interest  Add lines 1a through 1h  Add lines 1a through 1h  Add lines 1a through 1h  Tax-exempt interest  Add lines 1a through 1h  Add line	moonic	b	Household employee wages not re	eported o	on Form(s) W-2					1b		
attach Forms W-2G and 1099-Ri rt tax was withheld. If you did not get a Form W-2, see instructions.  9 Wages from Form 8919, line 6  1099-Ri rt tax was withheld. If you did not get a Form W-2, see instructions.  1090-Ri rt tax was withheld. If you did not get a Form W-2, see instructions.  1090-Ri rt tax was withheld. If you did not get a Form W-2, see instructions.  1090-Ri rt tax was withheld. If you did not get a Form W-2, see instructions.  1000-Ri rt tax was withheld. If you did not get a Form W-2, see instructions.  1100	` '	С	Tip income not reported on line 1a	(see ins	structions)	₹.				1c		
1099-R if tax was withheld.  f Employer-provided adoption benefits from Form 8839, line 29  If you did not get a Form W-2, see instructions.  V-2, see instructions.  I Nontaxable combat pay election (see instructions)  I Nontaxable combat pay election (see instructions)  I Add lines 1a through 1h  Attach Sch. B 2a Tax-exempt interest 2a b Taxable interest 2b 23.  Add ulified dividends 3a 5.  Brandard Jeduction for Single or Married filing separately, \$12,950  Married filing separately, \$12,950  Married filing separately, \$12,950  Married filing sour filing sour filing surviving spouse, \$25,900  Married filing sour filing surviving spouse, \$25,900  Married filing surviving spouse, \$25,900  Married filing surviving spouse, \$25,900  Married filing sour filing surviving spouse, \$25,900  Married filing sour filing surviving spouse, \$25,900  Married filing surviving spouse, \$25,900  Married filing surviving spouse, \$25,900  Married filing sour filing surviving spouse, \$25,900  Married filing sour filing surviving spouse, \$25,900  Married filing surviving spouse, \$25,900		d	Medicaid waiver payments not reported on Form(s) W-2 (see instructions)						1d			
was withheld. If you did not get a Form W-2, see instructions.  Attach Sch. B if required.  3a Qualified dividends . 3a Qualified fling separately, \$12,950 related fling jointly or Qualifying surviving spouse, \$25,900 related of household, \$19,400 related and possible and possi		е	Taxable dependent care benefits from Form 2441, line 26						1e			
gy Wages from Form 8919, line 6  Other earned income (see instructions)  Nontaxable combat pay election (see instructions)  Add lines 1a through 1h  Tax-exempt interest  Qualified dividends  Raddeuction for Single or Married filing separately, \$12,950  Married filing separately, \$12,950  Married filing some filing lointly or Qualifying Surviving spouse, \$25,900  Head of household, \$19  Wages from Form 8919, line 6  Other earned income (see instructions)  11  12  138,633  15  b Taxable interest  2b  23  b Taxable interest  2b  23  b Taxable amount  4b  Standard  Deduction for Single or Married filing separately, \$12,950  Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income  9 Other income from Schedule 1, line 10  8 Other income from Schedule 1, line 26  Subtract line 10 from line 9. This is your adjusted gross income  10 Qualifying Standard deduction or itemized deductions (from Schedule A)  12 Standard deduction or itemized deductions (from Schedule A)  13 Qualified business income deduction from Form 8995 or Form 8995-A  15 Subtract line 14 from line 11 fr zero or less enter for This is your taxable income  15 Qualifying Surviving spouse, \$15,900  16 Qualified business income deduction from Form 8995 or Form 8995-A  18 Qualified business income deduction from Form 8995 or Form 8995-A  19 Qualified business income deduction from Form 8995 or Form 8995-A  19 Qualified business income deduction from Form 8995 or Form 8995-A  19 Qualified business income deduction from Form 8995 or Form 8995-A  19 Qualified business income deduction from Form 8995 or Form 8995-A  10 Subtract line 14 from line 11 fr zero or less enter for This is your taxable income  15 Qualified business income  15 Qualified business income  15 Qualified promise income from Schedule forms form schedule forms form 8995 or Form 8995-A  19 Qualified business income form Schedule forms form 8995 or Form 8995-A  19 Qualified business income form Schedule forms form 8995 or Form 8995-A  19 Qualified business income form 8995 or Form 89		f	Employer-provided adoption bene	fits from	Form 8839, line 29					1f		
W-2, see instructions.  i Nontaxable combat pay election (see instructions)  a Add lines 1a through 1h  Attach Sch. B  if required.  3a Qualified dividends  4a IRA distributions  4a IRA distributions  4a IRA distributions  4a IRA distributions  5a Pensions and annuities  6a Social security benefits  6a Social security benefits  6a Social security benefits  6a Social security benefits  7 Capital gain or (loss). Attach Schedule D if required, there (see instructions)  8 Other income from Schedule 1, line 10  9 Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income  10 Adjustments to income from Schedule 1, line 26  11 Standard deduction or itemized deduction from Schedule A)  12 138, 633.  12 138, 633.  13 138, 633.  14 138, 633.  15 b Taxable interest  2b 23.  15 D Taxable amount  4b D Taxable amount  5b D Taxable amount  5b D Taxable amount  6b Standard beduction or itemized deduction method, check here (see instructions)  7 Capital gain or (loss). Attach Schedule D if required, there (see instructions)  8 Other income from Schedule 1, line 10  9 Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income  9 119, 694.  11 Standard deduction or itemized deductions (from Schedule A)  12 25, 900.  13 Qualified business income deduction from Form 8995 or Form 8995-A  13 Unitract line 10 from line 11 If zero or less enter -0. This is your taxable income  15 87, 794.		g	Wages from Form 8919, line 6 .							1g		
Instructions.  Instru	get a Form	h	Other earned income (see instruction	ons) .						1h		0.
Attach Sch. B Attach Sch. B Attach Sch. B Attach Sch. B If required.  2a		i	Nontaxable combat pay election (s	ee instr	uctions)		<u>1i</u>					
If required.  3a Qualified dividends . 3a 5. b Ordinary dividends . 4b  1RA distributions . 4a b Taxable amount		Z	Add lines 1a through 1h							1z	13	8,633.
4a IRA distributions	Attach Sch. B	2a	Tax-exempt interest	2a		b T	axable interest	t		2b		
Standard Deduction for—Single or Married filing separately, \$12,950  Married filing jointly or Qualifying sourviving spouse, \$25,900  Head of household, \$19,400  If you checked any box under standard Deduction, \$2000 Deduction,	if required.	3a	Qualified dividends	3a	5.	<b>b</b> O	rdinary divide	nds		3b		5.
Comparison of Comparison of Comparison of Comparison of Comparison of Married filing separately, \$12,950   To Capital gain or (loss). Attach Schedule D if required. If not required, check here   To Comparison of Comparison o		4a	IRA distributions	4a		b T	axable amoun	t		4b		
Single or Married filing separately, \$12,950  Married filing jointly or Qualifying surviving spouse, \$25,900  Head of household, \$19,400  If you checked any box under Standard Deduction, \$20,000.  Add lines 12 and 13  Social security benefits . 6a	Standard	5a	Pensions and annuities	5a		b T	axable amoun	t		5b		
Married filing separately, 7 Single filing separately, 7 Married filing separately, 7 Married filing separately, 7 Married filing jointly or Qualifying spouse, \$25,900  Married filing jointly or Qualifying spouse, \$25,900  Mad lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income		6a	Social security benefits	6a		b T	axable amoun	t	· <u>·</u>	6b		
\$12,950  Married filing jointly or Qualifying surviving spouse, \$25,900  Head of household, \$19,400  If you checked any box under Standard Deduction, Deduction, Deduction, Deduction, Deduction, Deduction, Description of the position of th	Married filing	С	_									
jointly or Qualifying Surviving spouse, \$25,900 Head of household, \$19,400 If you checked any box under Standard Deduction, Deduction, Deduction, Deduction, 15 Subtract line 14 from line 11 If zero or less enter -0- This is your total income.  9 119,694 10 6,000 11 119,694 11 113,694 11 113,694 12 25,900 11 113,694 12 25,900 11 11 113,694 12 25,900 13 14 25,900 15 Subtract line 14 from line 11 If zero or less enter -0- This is your taxable income.		7	Capital gain or (loss). Attach Schedule D if required. If not required, check here									
Qualifying surviving spouse, \$25,900       4dd lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income       9       119,694.         Head of household, \$19,400       11       Subtract line 10 from line 9. This is your adjusted gross income       11       113,694.         Standard deduction or itemized deductions (from Schedule A)       12       25,900.         If you checked any box under Standard Padduction.       14       25,900.         Deduction, Deduction,       15       Subtract line 14 from line 11 If zero or less enter -0- This is your taxable income       15	Married filing	8	Other income from Schedule 1, line 10							8		
Standard deduction or itemized deduction from Form 8995 or Form 8995-A  13  Qualified business income deduction from Form 8995 or Form 8995-A  14  Add lines 12 and 13  Subtract line 10 from line 9. This is your adjusted gross income  12  25,900  12  13  Qualified business income deduction from Form 8995 or Form 8995-A  14  25,900  15  Subtract line 14 from line 11 If zero or less enter -0- This is your taxable income	Qualifying	9				ome				9		
Head of household, \$19,400  If you checked any box under Standard Deduction, Deduction, Deduction, \$19,000  If you checked any box under Standard Deduction, Poduction, Deduction, Deduction, \$10,000								10		6,000.		
\$19,400 12 Standard deduction or itemized deductions (from Schedule A)	Head of	ad of Subtract line 10 from line 9. This is your adjusted gross income						11				
any box under Standard  14 Add lines 12 and 13		12			•	,				12	2	5,900.
Standard         14         Add lines 12 and 13	If you checked	13	Qualified business income deduction from Form 8995 or Form 8995-A							13	1	
	Standard		F							14		
		15	Subtract line 14 from line 11. If zero or less, enter -0 This is your <b>taxable income</b>								8	7,794.

Transmit from Schedule 2, line 3	Form 1040 (2022	2)			Page <b>2</b>			
18	Tax and	16	Tax (see instructions). Check if any from Form(s): 1 8814 2 4972 3	16	10,545.			
18	Credits	17	Amount from Schedule 2, line 3	17	4,220.			
20		18	Add lines 16 and 17	18	14,765.			
21		19	Child tax credit or credit for other dependents from Schedule 8812	19	1,000.			
22   13,67		20	Amount from Schedule 3, line 8	20	92.			
23   Other taxes, including self-employment tax, from Schedule 2, line 21   23   24   13,67		21	Add lines 19 and 20	21	1,092.			
Add lines 22 and 23. This is your total tax   24   13,67		22	Subtract line 21 from line 18. If zero or less, enter -0	22	13,673.			
Payments   25		23	Other taxes, including self-employment tax, from Schedule 2, line 21	23	0.			
Payments 25 Federal income tax withheld from: a Form(s) W-2		24	Add lines 22 and 23. This is your total tax	24	13,673.			
a Form(s) W-2	<b>Payments</b>	25						
c Other forms (see instructions) d Add lines 25a through 25c 26 (222 estimated tax payments and amount applied from 2021 return 27 (28 additional child tax credit from Schedule 8812 28 29 4 Additional child tax credit from Form 8863, line 8 29 4 4 Acduta	-	а	Form(s) W-2					
Machine   Add lines   25at through   25c   2022 estimated tax payments and amount applied from 2021 return   26   26   262 estimated tax payments and amount applied from 2021 return   26   27   28   28   29   29   29   29   29   29		b	Form(s) 1099					
26   2022 estimated tax payments and amount applied from 2021 return   26   27   28   29   29   29   29   29   29   29		С	Other forms (see instructions)					
If you have a qualifying chid, attach Sch. EIC.   28   Additional child tax credit from Schedule 8812   28   Additional child tax credit from Form 8863, line 8   29   American opportunity credit from Form 8863, line 8   29   American opportunity credit from Form 8863, line 8   29   American opportunity credit from Form 8863, line 8   29   American opportunity credit from Form 8863, line 8   29   American opportunity credit from Form 8863, line 8   29   American opportunity credit from Form 8863, line 8   29   American opportunity credit from Form 8863, line 8   29   Amount of line 34 part of the search opportunity opport		d	Add lines 25a through 25c	25d	8,841.			
Comparison of the comparison	If you have a	26	2022 estimated tax payments and amount applied from 2021 return	26				
28 Additional child tax credit from Schedule 8812 . 28  29 American opportunity credit from Form 8863, line 8 . 29  30 Reserved for future use . 30  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 27, 28, 29, and 31. These are your total payments	qualifying child,	27	Earned income credit (EIC)					
30   Reserved for future use   30   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   8, 84	attach Sch. EIC.	28	Additional child tax credit from Schedule 8812					
Amount from Schedule 3, line 15   31   32   34   32   34   32   34   34   35   35   36   34   35   36   35   36   35   36   35   36   36		29	American opportunity credit from Form 8863, line 8					
Add lines 27, 28, 29, and 31. These are your total other payments and refundable credits		30	Reserved for future use					
Refund  34		31	Amount from Schedule 3, line 15					
Refund   34   If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid   34   35a   Amount of line 34 you want refunded to you. If Form 8888 is attached, check here   35a   35a		32	Add lines 27, 28, 29, and 31. These are your total other payments and refundable credits	32				
Sign   Here   Sign   Here   Sign   Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge lief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer as any knowledge a copy for your records.    Sign   Phone no.   Preparer's name   Preparer's signature   Preparer's signature   Preparer's signature   Preparer's signature   Preparer's signature   Preparer's signature   Phone no. (678) 965-955		33	Add lines 25d, 26, and 32. These are your total payments	33	8,841.			
Sign Here   Sign	Refund	34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you <b>overpaid</b>	34				
Amount You Owe  37 Subtract line 34 you want applied to your 2023 estimated tax 36  Amount You Owe  38 Estimated tax penalty (see instructions)	11010111	35a		35a				
Amount 7 you Owe  36				s				
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	See instructions.	d	Account number X X X X X X X X X X X X X X X X X X X					
For details on how to pay, go to www.irs.gov/Payments or see instructions.    37   4,97		36	Amount of line 34 you want applied to your 2023 estimated tax 36					
Third Party Designee  Do you want to allow another person to discuss this return with the IRS? See instructions Designee's name  Personal identification number (PIN)  Designee's name  Personal identification number (PIN)  Designee's name  Personal identification number (PIN)  Designee's name  Popular to the best of my knowledge sand statements, and to the best of my kno		37		37	4,971.			
Designee instructions Designee's name  Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge belief, they are true, correct, and to the best of my knowledge belief, they are true, correct, and to the best of my knowledge belief, they are true, correct, and to the best of my knowledge belief, they are true, correct, and to the best of my knowledge belief, they are true, correct, and to the best of my knowledge belief, they are true, correct for my knowledge belief, they are true, correct for my knowledge belief, they are true, correct for my kno		38	Estimated tax penalty (see instructions)					
Designee's name  No.  Phone no.  Personal identification number (PIN)  Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge belief, they are true, correct, and to the best of my knowledge belief, they are true, correct, and to the best of my knowledge belief, they are true, correct, and to the best of my knowledge belief, they are true, correct, and to the best of my knowledge belief, they are true, correct, and to the best of my knowledge belief, they are true, correct, and to the best of my knowledge belief, they are true, correct, and to the best of my knowledge belief, they are true, correct has any knowl				e below	X No			
Name   No.   Number (PIN)	Designee			·				
belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowled Your signature    Date								
Joint return? See instructions. Keep a copy for your records.  Spouse's signature. If a joint return, both must sign.  Date  Software Engineer  So	_							
Joint return? See instructions. Keep a copy for your records.  Phone no.  Preparer's name Preparer  Use Only  Spouse's signature. If a joint return, both must sign.  Date Spouse's occupation Spouse's occupa	Here	Yo			, ,			
Keep a copy for your records.  Phone no.  Preparer's name VENKATA SAI PAVAN KUMAR DUDIPALLI Firm's name GLOBAL TAXES LLC  SOFTWARE ENGINEER    Identity Protection PIN, enter it (see inst.)					IN, enter it here			
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Paid Preparer Use Only  VENKATA SAI PAVAN KUMAR DUDIPALLI VENKATA SAI PAVAN KUMAR DUDIPALLI 03/08/2023 P02470833 Self-employ Phone no. (678)965-95					Check if:			
Preparer Use Only  Firm's name GLOBAL TAXES LLC  Phone no. (678)965-95				70833	Self-employed			
Use Univ								
Firm's address \ 245 ROONEY CT E BRUNSWICK NJ 08816   Firm's EIN 88-21454	Use Only				88-2145487			