1040		artment of the Treasury—Internal Revenue Serv S. Individual Income Tax		urn 202	22	OMB No. 1545	-0074	IRS Use Only	—Do not wi	rite or staple in this space.
Filing Status Check only one box.	lf yo	Single X Married filing jointly u checked the MFS box, enter the n son is a child but not your dependent	ame of y					· · ·	spou	ifying surviving Ise (QSS) name if the qualifying
Your first name	and mi	ddle initial	Last na	me					Your so	cial security number
ARUN BATR			RA					123-45-7403		
If joint return, s	oouse's	s first name and middle initial	Last na	me					Spouse's	s social security number
SANJANA BEHL									123-4	15-9804
Home address	(numbe	er and street). If you have a P.O. box, see	instructio	ons.			A	Apt. no.	Presider	ntial Election Campaigr
921-RIGE	: FIH	ELD LANE								ere if you, or your
City, town, or p	ost offi	ce. If you have a foreign address, also co	mplete s	paces below.	Sta	ate	ZIP c	ode		if filing jointly, want \$3 this fund. Checking a
BUFFALO GROVE				IL			600	89		ow will not change
Foreign country name			F	Foreign province/state/county			Foreig	n postal code	your tax	or refund.
										You Spouse
Digital Assets		ny time during 2022, did you: (a) rec ange, gift, or otherwise dispose of a								🗌 Yes 🛛 No
Standard		eone can claim: 🗌 You as a de	-	_		_				
Deduction		Spouse itemizes on a separate retur	n or you	were a dual-status	s alier	1				
Age/Blindness	You:	Were born before January 2, 1	958	Are blind Sp	ouse	e: 🗌 Was bor	n befo	ore January 2	2, 1958	Is blind
Dependents	s (see	instructions):		(2) Social securi	ty	(3) Relationsh	ip (4) Check the bo	ox if qualif	ies for (see instructions):
If more	(1) F	irst name Last name		number		to you		Child tax cr	edit	Credit for other dependents
than four	SIM	IRAN BATRA		874-96-4596		Daughter				×
dependents, see instructions	SHF	RIYA BATRA		874-58-5323 Daughte		Daughter		X		
and check	, 									
here										
Income	1a	Total amount from Form(s) W-2, b	ox 1 (se	e instructions) .					. 1a	529,570.
incomo	b	Household employee wages not re							. 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 rep			instru	uctions)			. 1d	
W-2G and 1099-R if tax	е	Taxable dependent care benefits f							. 1e	
was withheld.	f	Employer-provided adoption bene		n Form 8839, line 29	э.				. 1f	
lf 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>	0.
instructions.	i	Nontaxable combat pay election (1 i			_	
	Z	Add lines 1a through 1h		· · · · · ·			• •		. 1z	529,570.
Attach Sch. B	2a	· · ·	2a			axable interes				126.
if required.	<u>3a</u>		3a			Ordinary divide				
	4a		4a	,		Taxable amoun				
Standard Deduction for – • Single or	5a		5a			axable amoun			. <u>5b</u>	
	6a	Social security benefits							. 6b	
Married filing separately,	c _	If you elect to use the lump-sum e								
\$12,950	7	Capital gain or (loss). Attach Sche	78	100 150						
 Married filing jointly or 	8	Other income from Schedule 1, line 10 . . .								192,150.
Qualifying surviving spouse,	9 10					e	• •		. 9	721,846.
\$25,900	10	Adjustments to income from Sche	. 10	1,995.						
 Head of household, 	I1 Subtract line 10 from line 9. This is your adjusted gross income .<						• •		. 11	719,851.
\$19,400	<u>12</u> 13	Qualified business income deduct				· · · ·	• •		. <u>12</u> . 13	25,900.
 If you checked any box under 	13 14		. 14	25 000						
Standard Deduction,	14 15	Subtract line 14 from line 11. If zer	· · ·		· ·	taxable incom	 16		. 15	<u>25,900.</u> 693,951.
see instructions.	.0		5 51 1633	o, ontor o . 1116 18	your				. 15	1 093,951.

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	191,311.
Credits	17	Amount from Schedule 2, line 3	17	
	18	Add lines 16 and 17	18	191,311.
	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	191,311.
	23	Other taxes, including self-employment tax, from Schedule 2, line 21	23	8,682.
	24	Add lines 22 and 23. This is your total tax	24	199,993.
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	66,260.
If you have a	26	2022 estimated tax payments and amount applied from 2021 return	26	
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 . <th.< th=""> . <th< td=""><td></td><td></td></th<></th.<>		
	32	Add lines 27, 28, 29, and 31. These are your total other payments and refundable credits	32	2,864.
	33	Add lines 25d, 26, and 32. These are your total payments	33	69,124.
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	
Direct deposit? See instructions.	b	Routing number 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 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 <i>www.irs.gov/Payments</i> or see instructions	37	135,311.
	38	Estimated tax penalty (see instructions)		
Third Party		you want to allow another person to discuss this return with the IRS? See tructions		× No
Designee		signee's Phone Personal identifi		
	nar			
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	ef, 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	.		t you an Identity
		SOFTWARE ENGINEER (see i		N, enter it here
Joint return? See instructions.	Sn	SOFTWARE ENGINEER	<i>'</i>	t your spouse an
Keep a copy for	op			ction PIN, enter it here
your records.		SOFTWARE (see i	nst.)	
	Ph	one no. (408)831-8386 Email address EBATRA_75@YAHOO.COM		
Daid	Pre	parer's name Preparer's signature Date PTIN		Check if:
Paid	SYAM	PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA RAM SAGAR GUPTA TALLAM 03/15/2023 P02082	2703	Self-employed
Preparer Use Only	Fin	n's name GLOBAL TAXES LLC Phon	e no. (678)965-9522
	Firi	n's address 245 ROONEY CT E BRUNSWICK NJ 08816 Firm'	s EIN	84-3171965
Go to www.irs.go	ov/Forn	1040 for instructions and the latest information. BAA REV 03/09/23 PRO		Form 1040 (2022)

BAA