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.

-		Single X Married filing jointly	Marrie	ed filing separately (M	/IFS)	Head of	hous	ehold (HOH)			fying survi	ving
Check only one box.	If vo	u checked the MFS box, enter the n	ame of v	vour spouse. If you ch	neck	ed the HOH or	COSS	S box. enter	the c	•	se (QSS) name if the	e qualifying
one box.	-	on is a child but not your dependent		your opouce. If you of	10011	04 110 11011 01	QU	o box, onto		ııııd o	namo n un	y quamymig
Your first name	and mi	ddle initial	Last na	me					Yo	ur soc	ial security	number
DEBASHIS	SH		ROY								- 31-1094	
If joint return, s	me						Spouse's social security numbe					
SHREYASO			ROY						'			•
		er and street). If you have a P.O. box, see		ons.				Apt. no.	Pro	esider	tial Electio	n Campaign
4855 ARI	· ·	JAY						303			ere if you,	
	ce. If you have a foreign address, also co	e spaces below. State ZIF			ZIP	code				ly, want \$3		
SAN DIE		CA 9			92				this fund. C w will not d			
Foreign country			1	Foreign province/state/o	count	y	_	eign postal cod			or refund.	mango
											You	Spouse
Digital	At an	ny time during 2022, did you: (a) rec	eive (as	a reward, award, or	pavn	nent for prope	rtv o	r services):	or (b)	sell.		
Assets		ange, gift, or otherwise dispose of a					-				Yes	⊠ No
Standard		eone can claim: You as a de		<u>-</u> _								
Deduction	_	Spouse itemizes on a separate retur	•	•	alien							
A /Diil		□ Ware have before leaves 0.1	٥٥٥ ٦	And Indicate Cons		- D W 4-		£ (. 0 1	250		
		Were born before January 2, 1	958 [use		$\overline{}$	fore January			ls bli	
Dependents			(2) Social security number			(3) Relationship to you		(4) Check the box if que Child tax credit		· 1	•	•
If more than four	· ·	rst name Last name		Tiditibol				Child tax credi		· '	reall for oth	er dependents
dependents,	DE∨	VANSH ROY				Son						
see instructions	s ——											
and check here											L	
	1a	Total amount from Form(s) W-2, b	ov 1 (co	e instructions)						1a	27	 6,757.
Income	b						•		•	1b	27	0,737.
Attach Form(s)	C	Household employee wages not reported on Form(s) W-2								1c		
W-2 here. Also	d	Medicaid waiver payments not rep	•			ctions)	•		•	1d		
attach Forms W-2G and	e	Taxable dependent care benefits f	4		iotia	otiono,	•		•	1e		
1099-R if tax	f	Employer-provided adoption bene			•		•		•	1f		
was withheld.	g g	Wages from Form 8919, line 6.			•		•		•	1g		
If you did not get a Form	h	Other earned income (see instruct			•		•		•	1h		0.
W-2, see	i	Nontaxable combat pay election (s			•	1 _{1i}	i		•			
instructions.	z	Add lines 1a through 1h								1z	27	6,757.
Attach Sch. B	2a	Tax-exempt interest 2a b Taxable interest							2b		9.	
if required.	3a	Qualified dividends 3a 354. b Ordinary dividends								3b		374.
	4a		4a			axable amoun				4b		
Standard	5a		5a	·		axable amoun				5b		
Deduction for—	6a	Social security benefits 6a b Taxable amount								6b		
Single or Married filing	С	If you elect to use the lump-sum election method, check here (see instructions)										
separately, \$12,950	7	Capital gain or (loss). Attach Schedule D if required. If not required, check here								7		331.
Married filing	8	Other income from Schedule 1, line 10								8	-1	7,981.
jointly or Qualifying	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income								9		9,490.
surviving spouse, \$25,900	10	Adjustments to income from Schedule 1, line 26								10		
Head of	11	Subtract line 10 from line 9. This is your adjusted gross income								11	25	9,490.
household, \$19,400	12	Standard deduction or itemized								12		5,900.
If you checked	13	Qualified business income deduction from Form 8995 or Form 8995-A								13		3.
any box under Standard	14	Add lines 12 and 13								14	2	5,903.
Deduction, see instructions.	15	Subtract line 14 from line 11. If zer	o or les	s, enter -0 This is y	our t	axable incom	ne			15		3,587.
330 111011 40110113.		▼										

Form 1040 (2022	2)									Page 2		
Tax and	16	Tax (see in	structions). Check	if any from Form	(s): 1 881	4 2 4972	3 🗍		16	43,700.		
Credits	17		om Schedule 2, lir					-	17	,		
O. Cana	18		•						18	43,700.		
	19					ule 8812			19	2,000.		
	20			-					20			
	21		•						21	2,000.		
	22								22	41,700.		
	23					e 2, line 21			23	425.		
	24								24	42,125.		
Payments	25		come tax withheld							12,120.		
	а		-2				25a 46	5,809				
	b	, ,	99				25b					
	С		s (see instructions				25c	876				
	d		•	,				3.3	25d	47,685.		
	26		· ·			21 return			26	11,73331		
If you have a qualifying child, attach Sch. EIC.	27		come credit (EIC)				27					
	28		child tax credit from				28					
	29		opportunity credit				29	7				
	30		for future use .				30		-			
	31		om Schedule 3, lir				31		_			
	32		*			ayments and refu			32			
	33								33	47,685.		
D. C I	34					This is the amoun			34	5,560.		
Refund	35a					is attached, chec			35a	5,560.		
Direct deposit?	b		mber X X X					Savings		,		
See instructions.												
	36		line 34 you want a				36					
Amount	37		ne 33 from line 24									
You Owe	01					see instructions .			37			
	38		tax penalty (see in	_			38					
Third Party	Do					n with the IRS?	· · · · · · · · · · · · · · · · · · ·					
Designee		structions			,		. Yes. C	omplete	below.	× No		
		Designee's							identification			
		me			no.			ber (PIN)				
Sign										st of my knowledge an er has any knowledge.		
Here			ue, correct, and com	piete. Deciaration (sed on an imormati			,		
	YO	Your signature			Date Your occupation					nt you an Identity IN, enter it here		
Joint return?						SOFTWARE E	NGINEER	- 1	e inst.)			
See instructions.	Sp	Spouse's signature. If a joint return, both must sign.			Date Spouse's occupation				If the IRS sent your spouse an			
Keep a copy for your records.								ntity Prote e inst.)	ection PIN, enter it her			
your records.						HOME MAKEK						
		Phone no. (302)784-5505							0			
Paid	Pre	eparer's name		Preparer's signat	ure		Date	PTIN		Check if:		
Preparer								<u> </u>		Self-employed		
Use Only	Firm's name GLOBAL TAXES LLC								one no.			
	Firm's address 245 ROONEY CT E BRUNSWICK NJ 08816 Firm's								m's EIN			