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.

Filing Status Check only	X 5	Single Married filing jointly	Marrie	ed filing separately (MFS)	Head of	househ	old (HOH)			ifying survise (QSS)	viving	
one box.	-	u checked the MFS box, enter the r	-	our spouse. If you	check	ed the HOH or	r QSS b	ox, enter	the c	•	` ,	ne qualifying	
		on is a child but not your depender											
Your first name and middle initial Last										Your social security number			
				PATIL						714-26-7690			
If joint return, spouse's first name and middle initial				Last name					Sp	ouse's	s social sed	curity number	
Home address	(numbe	er and street). If you have a P.O. box, se	e instructio	ons.			A	ot. no.	Pr	esider	ntial Election	on Campaign	
8524 BUR	NET	RD					#	313		Check here if you, or your			
City, town, or post office. If you have a foreign address, also complete spaces below.					te				spouse if filing jointly, want \$3 to go to this fund. Checking a				
AUSTIN				TX						box below will not change			
Foreign country name			F	Foreign province/state/county			Foreigr	Foreign postal code yo			your tax or refund. You Spouse		
Distribut	Λ+ or	ay time during 2022, did your (a) rea	noivo (no	o roward award a		nont for propo	rty or c	or (icoo):	or (b)	ooll	, You	Spouse	
Digital Assets		ny time during 2022, did you: (a) red ange, gift, or otherwise dispose of					-				☐ Yes	⊠ No	
Standard	Som	eone can claim: You as a de	ependent	Your spous	se as	a dependent		7					
Deduction	_	Spouse itemizes on a separate retu	•				,						
Age/Blindness	You:	☐ Were born before January 2,	1958	Are blind Sp	ouse	: Was bor	rn befo	re January	/ 2, 19	958	☐ Is bl	ind	
Dependents	s (see	instructions):		(2) Social securit	y	(3) Relationsh	nip (4)	Check the	box if	qualif	ies for (see	instructions):	
If more	(1) F	rst name Last name		number		to you		Child tax	credit	t	Credit for otl	ner dependents	
than four dependents,											[
see instructions	s ——											ᆗ	
and check												ᆗ	
here \square											<u> </u>		
Income	1a	Total amount from Form(s) W-2, k							٠	1a		97,583.	
Attach Form(s)	b	Household employee wages not reported on Form(s) W-2								1b			
W-2 here. Also	C	Tip income not reported on line 1a (see instructions)								1c			
attach Forms	d	Medicaid waiver payments not reported on Form(s) W-2 (see instructions)								1d			
W-2G and 1099-R if tax	e	Taxable dependent care benefits from Form 2441, line 26								1e			
was withheld.	f									1f			
If you did not get a Form	g	Wages from Form 8919, line 6 .	_ 1							1g			
W-2, see	h :	Other earned income (see instruc							•	1h		0.	
instructions.	i -	Nontaxable combat pay election	(see mstr	uctions)		<u>1i</u>				1-		97,583.	
Attack Cab D	z 2a	Add lines 1a through 1h Tax-exempt interest	2a		 Ь Т	axable interes			•	1z 2b		77,303.	
Attach Sch. B if required.	2a 3a	Qualified dividends	3a			rdinary divide			•	3b			
	4a	IRA distributions	4a			axable amoun			•	4b			
Standard	-та 5а	Pensions and annuities	5a			axable amoun			•	5b			
Deduction for—	6a	Social security benefits	6a			axable amoun			•	6b			
Single or Married filing	С	If you elect to use the lump-sum		method, check here					$\dot{\Box}$	0.5			
separately,	7	Capital gain or (loss). Attach Sche			•	,			$\overline{\Box}$	7			
\$12,950 Married filing	8 Other income from Schedule 1, line 10					_	8	-1	L0,936.				
jointly or Qualifying	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income							9		36,647.		
surviving spouse,	10	Adjustments to income from Schedule 1, line 26											
\$25,900 • Head of	44 (2) (3) (4) (5) (7)							10		36,647.			
household, \$19,400	12											12,950.	
If you checked	13	Qualified business income deduction from Form 8995 or Form 8995-A							13				
any box under Standard	14	Add lines 12 and 13	13							14		L2,950.	
Deduction, see instructions.	15	Subtract line 14 from line 11. If zero or less, enter -0 This is your taxable income								15		73,697.	

Form 1040 (2022	2)			Page 2		
Tax and	16	Tax (see instructions). Check if any from Form(s): 1 8814 2 4972 3	16	11,826.		
Credits	17	Amount from Schedule 2, line 3	17			
	18	Add lines 16 and 17	18	11,826.		
	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	11,826.		
	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	11,826.		
Payments	25	Federal income tax withheld from:				
. ayınıdını	а	Form(s) W-2				
	b	Form(s) 1099				
	С	Other forms (see instructions)				
	d	Add lines 25a through 25c	25d	16,320.		
16	26	2022 estimated tax payments and amount applied from 2021 return	26			
If you have a 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	7			
	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	16,320.		
Refund	34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid	34	4,494.		
neiulia	35a	Amount of line 34 you want refunded to you . If Form 8888 is attached, check here	35a	4,494.		
Direct deposit?	b	Routing number X 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				
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	37			
	38	Estimated tax penalty (see instructions)				
Third Party	Do	you want to allow another person to discuss this return with the IRS? See				
Designee		structions	below.	X No		
	De nai	signee's Phone Personal identi me no. number (PIN)	fication			
Sign		der penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to				
Here	bel	ief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of whic		,		
11010	Yo		f the IRS sent you an Identity Protection PIN, enter it here			
Joint return?			ection P inst.)	IN, enter it here		
See instructions.	Sn		ne IRS sent your spouse an			
Keep a copy for your records.		Iden	titty Protection PIN, enter it here inst.)			
	Ph	one no. (832)806-3228 Email address PATIL.TEJALR@GMAIL.COM				
Paid	Pre	eparer's name Preparer's signature Date PTIN	· 	Check if:		
Preparer Preparer	SYAM	I PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA RAM SAGAR GUPTA TALLAM 04/06/2023 P0208	2703	Self-employed		
Use Only	Fir	m's name GLOBAL TAXES LLC Pho	Phone no. (678)965-9522			
USE UTILY	Fire	m's address 245 ROONEY CT E BRIINSWICK N.I 08816	Firm's FIN 84-3171965			