E 1040 Department of the Treasury—Internal Revenue Service U.S. Individual Income Tax Return

2022

OMB No. 1545-007

IRS Use Only—Do not write or staple in this space.

Filing Status	X S	Single $\ \ \square$ Married filing jointly $\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \$	Marrie	ed filing separately	(MFS)	Head of	household (HOH)			fying survi	ving
Check only one box.	If vo	u checked the MFS box, enter the r	name of v	OUR SPOUSE If YOU	chack	ad the HOH o	OSS hav enter			se (QSS)	aualifyina
OHE DOX.		on is a child but not your dependen		our spouse. It you	CHECK	ed the HOHO	QOO DOX, enter	uie ciii	iu s i	iaine ii tiie	qualifying
				Last name					Your social security number		
				AKU					752-12-0933		
				ne					Spouse's social security number		
ii joint rotaini, o	podoo c	The traine and middle middle	Laot na					opo.		000101 0000	nity nambor
Home address	(numbe	er and street). If you have a P.O. box, see	 e instructio	ons.			Apt. no.	Pres	ident	tial Election	n Campaign
6835 HURON AVE							'	1		eck here if you, or your	
City, town, or post office. If you have a foreign address, also complete				lete spaces below. State			ZIP code		spouse if filing jointly, want \$3 to go to this fund. Checking a		
HAMMOND					1	46323			this fund. C w will not c		
Foreign country name			F	Foreign province/state/		ty	Foreign postal cod		our tax or refund.		
,										You Spouse	
Digital	At ar	ny time during 2022, did you: (a) red	ceive (as	a reward. award. d	or pavr	ment for prope	rtv or services):	or (b) se	ell.		
Assets		ange, gift, or otherwise dispose of					-			Yes	⊠ No
Standard	Som	eone can claim: You as a de	ependent	Your spou	use as	a dependent					
Deduction		Spouse itemizes on a separate retu	rn or you	were a dual-statu	s alien						
Ago/Blindness	Vou	Were born before January 2,	1059	Are blind S	pouse	. Mac box	n before Januar	, 2 105	.Ω	☐ Is blir	
			1930 _		•		1				
Dependents	•	instructions): irst name Last name		(2) Social security number		(3) Relationsh to you	Child tax				er dependents
If more than four	(1)1) First name Last name				. ,	Ornid tax	l	+		7 dependents
dependents,									+		<u>-</u> 1
see instructions	s —										<u></u>
and check here										<u>-</u>	
		Total amount from Form(s) W-2, b	nox 1 (see	e instructions)					1a		7 , 777.
Income	b		,	,				.	1b		<u> </u>
Attach Form(s)	c	Household employee wages not reported on Form(s) W-2							1c		
W-2 here. Also	d	Medicaid waiver payments not reported on Form(s) W-2 (see instructions)							1d		
attach Forms W-2G and	е	Taxable dependent care benefits from Form 2441, line 26							1e		
1099-R if tax	f	Employer-provided adoption benefits from Form 8839, line 29							1f		
was withheld. If you did not	g	Wages from Form 8919, line 6									
get a Form	h	,	rearned income (see instructions)						1g 1h		0.
W-2, see	i	Nontaxable combat pay election (see instructions)									
instructions.	z	Add lines 1a through 1h	`					. [1z		7,777.
Attach Sch. B	2a	Tax-exempt interest	2a		b T	axable interes	t	. [2b		
if required.	3a	Qualified dividends	3a		b 0	ordinary divide	nds	. [3b		
	4a	IRA distributions	4a		b T	axable amoun	t		4b		
Standard	5a	Pensions and annuities	5a		b T	axable amoun	t		5b		
Deduction for—	6a	Social security benefits	6a		b T	axable amoun	t		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 Sche	edule D if	required. If not re	quired	, check here			7		
Married filing	8	Other income from Schedule 1, line 10							8		
jointly or Qualifying	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7	7, and 8.	This is your total i	ncome	e		. [9		7,777.
surviving spouse, \$25,900	10	Adjustments to income from Schedule 1, line 26									
Head of	11	Subtract line 10 from line 9. This is your adjusted gross income									7,777.
household, \$19,400	12	Standard deduction or itemized deductions (from Schedule A)								1	2 , 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							14	1:	2 , 950.
Deduction, see instructions.	15	Subtract line 14 from line 11. If zero or less, enter -0 This is your taxable income									0.

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Tax and	16	Tax (see instructions). Check if any from For	m(s): 1 881	4 2 🗌 4972	3 🗌		16	0.
Credits	17	Amount from Schedule 2, line 3				- 	17	
	18	Add lines 16 and 17	18	0.				
	19	Child tax credit or credit for other depende	ents from Sched	lule 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	s, enter -0				22	0.
	23	Other taxes, including self-employment tax	23	0.				
	24	Add lines 22 and 23. This is your total tax						0.
Payments	25	Federal income tax withheld from:						
	а	Form(s) W-2						
	b	Form(s) 1099						
	С	Other forms (see instructions)			25c			
	d	Add lines 25a through 25c					25d	837.
	26	2022 estimated tax payments and amount					26	
If you have a qualifying child,	27	Earned income credit (EIC)			27			
attach Sch. EIC.	28	Additional child tax credit from Schedule 88	1					
	29	American opportunity credit from Form 886	33. line 8		29		1	
	30	Reserved for future use			30			
	31	Amount from Schedule 3, line 15			31		1	
	32	Add lines 27, 28, 29, and 31. These are you					32	
	33	Add lines 25d, 26, and 32. These are your					33	837.
	34	If line 33 is more than line 24, subtract line					34	837.
Refund	35a	Amount of line 34 you want refunded to you				_	35a	837.
Direct deposit?	b	Routing number 0 7 4 0 0 0 0			Checking	Savings	000	
See instructions.	d	Account number 7 9 6 6 2 3 1						
	36	Amount of line 34 you want applied to you		ed tax	36			
Amount You Owe	37	Subtract line 33 from line 24. This is the arr For details on how to pay, go to www.irs.g	nount you owe				37	
	38	Estimated tax penalty (see instructions) .			38			
Third Party		you want to allow another person to distructions	scuss this retu	rn with the IRS		\I-t-		
Designee		signee's	Phone			complete conal identi		⋉ No
	nai		no.	•		iber (PIN)	lication	
Sign		der penalties of perjury, I declare that I have exami						
Here		ief, they are true, correct, and complete. Declaration	n of preparer (othe	Your occupation	ased on all informat			er nas any knowledge. nt vou an Identity
	10	ur signature DocuSigned by:	Date	Tour occupation				IN, enter it here
Joint return?		Sarath kumar koppaku		STUDENT		(see	inst.)	
See instructions.	Sp	ouse's signature of a signature out	Date	Spouse's occupation				nt your spouse an
Keep a copy for your records.							tity Prote inst.)	ection PIN, enter it here
your rooordo.		(E00) 005 0055			~===== ~		11131./	
		one no. (708) 295–2355	Email address	SARATH.PEGA	SIAN@GMAIL.C			Charle if
Paid Preparer Use Only		eparer's name Preparer's sign		OHDMA WATER	Date	PTIN	0700	Check if:
		PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA	KAM SAGAR	GUPTA TALLAN	1 01/25/2023	P0208		Self-employed
		m's name GLOBAL TAXES LLC		T 00016				(678) 965-9522
	Fir	m's address 245 ROONEY CT E BR	UNSWICK N	O 088T0		Firm	's EIN	88-2145487
Go to www.irs.go	ov/Forn	n1040 for instructions and the latest information.		BAA	REV 01/24/23 PRO			Form 1040 (2022)