E <b>1040</b>		artment of the Treasury-Internal Revenue Servi <b>5. Individual Income Tax</b>		urn	202	2	OMB No. 1545	-0074	IRS Use Only	—Do not w	rite or staple	in this space.	
Filing Status Check only one box.	lf yo	Single $\bigotimes$ Married filing jointly u checked the MFS box, enter the na on is a child but not your dependent	ame of y	-	separately (N use. If you ch					spo	lifying surv use (QSS) name if th	•	
Your first name	e and middle initial Last name You									Your so	Your social security number		
LAXMAN K	UMAF	२	KEET	HA					18		184-79-0634		
lf joint return, sp	ouse's	first name and middle initial	Last nar	me					S		Spouse's social security numbe		
MOUNIKA			KEET	HA						APPL	APPLIED FOR		
Home address (	numbe	r and street). If you have a P.O. box, see	instructio	ons.				A	Apt. no.	Preside	ntial Election	on Campaigr	
8371, INDIANAPOLIS AVE 3044 C								Check here if you, or your					
City, town, or po	ost offic	ce. If you have a foreign address, also co	mplete sp	paces bel	ow.	Sta	ite	ZIP c	ode			tly, want \$3 Checking a	
COLUMBUS			ОН				432			ow will not			
Foreign country	name		F	Foreign pr	ovince/state/c	coun	ty	Foreig	Foreign postal code		-		
	• ·									<i>a</i> ,			
Digital Assets		ny time during 2022, did you: (a) rece ange, gift, or otherwise dispose of a				-		-			2 Yes	X No	
Standard	Som	eone can claim: 🗌 You as a de	pendent	:	Your spouse	e as	a dependent						
Deduction	<u> </u>	Spouse itemizes on a separate retur	n or you	were a	dual-status a	alien	1						
Age/Blindness	You:	Were born before January 2, 1	958	Are bl	ind Spo	use	: 🗌 Was bor		ore January 2	,	🗌 ls bl	-	
Dependents	(see	instructions):	(2) 5		Social security		(3) Relationshi		) Check the b	ox if quali	fies for (see	instructions):	
If more	<b>(1)</b> Fi	rst name Last name		number		to you			Child tax c	redit	Credit for ot	her dependents	
than four											[		
dependents, see instructions											[		
and check											[		
here													
Income	1a	Total amount from Form(s) W-2, b	ox 1 (see	e instruc	tions)					. 1a	4	43,549.	
	b	Household employee wages not re								. 1b			
Attach Form(s) W-2 here. Also	С	Tip income not reported on line 1a	(see ins	ee 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	е	Taxable dependent care benefits from Form 2441, line 26    .    .    .    .    .    .							. 1e				
was withheld.	f	Employer-provided adoption benefits from Form 8839, line 29								. 1f			
lf you did not	g	Wages from Form 8919, line 6 .								. 1g			
get a Form	h	Other earned income (see instructions)							. 1h		0.		
W-2, see instructions.	i	Nontaxable combat pay election (see instructions)											
	Z	Add lines 1a through 1h	·							. 1z	4	43,549.	
Attach Sch. B	<b>2</b> a	Tax-exempt interest	2a			bΤ	axable interest	t.		. 2b			
if required.	3a	Qualified dividends	3a			b C	Ordinary divide	nds .		. 3b			
	4a	IRA distributions	4a			bΤ	axable amoun	t		. 4b			
Standard	5a	Pensions and annuities	5a			bΤ	axable amoun	t		. 5b			
• Single or	6a	Social security benefits	6a			bΤ	axable amoun	t		. 6b			
Married filing	с	If you elect to use the lump-sum election method, check here (see instructions) $\ldots$ $\square$											
separately, \$12,950	7	Capital gain or (loss). Attach Schedule D if required. If not required, 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, and 8. This is your <b>total income</b>									4	43,549.	
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	4	43,549.		
household, \$19,400	12	Standard deduction or itemized deductions (from Schedule A)								. 12		25,900.	
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		25,900.		
Deduction, see instructions.	15	5 Subtract line 14 from line 11. If zero or less, enter -0 This is your taxable income								. 15		17,649.	

For Disclosure, Privacy Act, and Paperwork Reduction Act Notice, see separate instructions.

Form 1040 (2022	2)									Page <b>2</b>
Tax and	16	Tax (see instructions). Check if any	from Form	(s): <b>1</b> 🗌 881	4 <b>2</b> 4972	3		16	1,	763.
Credits	17	Amount from Schedule 2, line 3						17		
	18	Add lines 16 and 17						18	1,	763.
	19	Child tax credit or credit for other	dependen	ts from Sched	ule 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 zer	o or less,	enter -0				22	1,	763.
	23	Other taxes, including self-employ	ment tax,	from Schedule	e 2, line 21 .			23		0.
	24	Add lines 22 and 23. This is your to	otal tax					24	1,	763.
Payments	25	Federal income tax withheld from:								
,	а	Form(s) W-2				25a 6	5,807.			
	b	Form(s) 1099				25b				
	с	Other forms (see instructions) .				25c		1		
	d	Add lines 25a through 25c						25d	6,	807.
	26	2022 estimated tax payments and						26		
If you have a qualifying child,	27	Earned income credit (EIC)				27				
attach Sch. EIC.	28	Additional child tax credit from Sche				28		1		
	29	American opportunity credit from I	Form 8863	3, 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. Thes	e are vour	total other pa	avments and ref	undable credits		32		
	33	Add lines 25d, 26, and 32. These a						33	6,	807.
Defend	34	If line 33 is more than line 24, subt						34		044.
Refund	35a	Amount of line 34 you want refund					. 🗆	35a	5,	044.
Direct deposit?	b	Routing number 0 4 4 0 0					Savings			
See instructions.	d	Account number 8 9 5 1 2	<u> </u>							
	36	Amount of line 34 you want applie			d tax	36				
Amount	37	• • • •	-							
You Owe	07	Subtract line 33 from line 24. This is the <b>amount you owe</b> . For details on how to pay, go to <i>www.irs.gov/Payments</i> or see instructions								
	38	Estimated tax penalty (see instruct	-	-		38		37		
Third Party	Do	you want to allow another perso								
Designee		instructions							X No	
Ũ	De	signee's		Phone		Pers	onal identif	ication		
	nar	ne		no.		num	ber (PIN)			
Sign		der penalties of perjury, I declare that I ha								
Here		elief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which						• •		0
	Yo	ur signature	Date	Your occupation		If the IRS sent you an Identity Protection PIN, enter it here				
Joint return? See instructions.					SOFTWARE	ARE EMPLOYEE (see				Ť
	Sp	ouse's signature. If a joint return, <b>both</b> m	Date	Spouse's occupa		If the	IRS se	nt your spouse	e an	
Keep a copy for	- 1-	lde						,	ection PIN, ent	ter it here
your records.					HOME MAKE	R	(see	inst.)		
	Ph	one no. (937) 309-8759		Email address	LKEETHA18	9@GMAIL.COM	1			
Paid	Pre	parer's name Prepa	rer's signat	ure		Date	PTIN		Check if:	
Preparer	SYAM	M PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA RAM SAGAR GUPTA TALLAM 03/04/2023 P02082						2703	Self-emp	ployed
Use Only	Firi	Firm's name GLOBAL TAXES LLC Phon							(678)965-	·9522
	Firi	n's address 245 ROONEY CT	E BRU	NSWICK N	J 08816		Firm	's EIN	84-317	1965
Go to www.irs.go	ov/Forn	1040 for instructions and the latest infor	mation.		BAA	REV 02/24/23 PRO			Form <b>10</b> 4	40 (2022

Form <b>W-7</b>
(Rev. August 2019)
Department of the Treasury Internal Revenue Service

## Application for IRS Individual Taxpayer Identification Number

(Rev. August 2019)	► For use by indi	ividuals who are r	not IIS citi-	one or	normanor	t recide	nte				
Department of the Treas Internal Revenue Servic	Saly		arate instruc		Permaner	it reslue					
	I taxpayer identification num				ourposes	only.	Applicat	ion type	e (check one box):		
Before you begin:									a new ITIN n existing ITIN		
	ubmitting Form W-7. Read the								c, d, e, f, or g, you		
_	ederal tax return with Form V	-		of the e	exception	<b>is</b> (see i	nstruction	s).			
	t alien required to get an ITIN to cla	-	əfit								
	t alien filing a U.S. federal tax retur										
	nt alien (based on days present in						tructiona)				
d 📋 Dependent	of U.S. citizen/resident alien If	a, enter relationsn	ip to 0.5. ci	izen/res	ident allen	(see ins	tructions)				
e 🛛 Spouse of L		d or e, enter name LAXMAN KUMAI			S. citizen/	resident	alien (see in		ns)► 4-79-0634		
f 🗌 Nonresiden	t alien student, professor, or resea	rcher filing a U.S. f	ederal tax re	turn or d	claiming a	n excepti	ion				
g 🗌 Dependent/	spouse of a nonresident alien hold	ling a U.S. visa									
h 🗌 Other (see i	·										
Additional information	on for <b>a</b> and <b>f</b> : Enter treaty country			and	d treaty ar						
Name	1a First name MOUNIKA	Midd	Middle name				name ETHA				
(see instructions)	1b First name	Mide	Middle name				name				
Name at birth if different		IVIICO	<i>l</i> iddle name				liallie				
	2 Street address, apartment nu	Imber, or rural rout	e number. If	you ha	ve a P.O.	box, see	separate i	nstruct	ions.		
Applicant's Mailing	2 Street address, apartment number, or rural route number. If you have a P.O. box, see separate instructions. 8371, INDIANAPOLIS AVE Apt 3044										
Address	City or town, state or province, and country. Include ZIP code or postal code where appropriate.										
	COLUMBUS OH USA 43240										
Foreign (non-	3 Street address, apartment number, or rural route number. Don't use a P.O. box number.										
U.S.) Address	City or town, state or province, and country. Include postal code where appropriate.										
(see instructions)	City or town, state or provinc	e, and country. Inc	ciude postal	code wr	iere appro	priate.					
Birth	4 Date of birth (month / day / year)	Country of birth		Citv ar	nd state or	province	e (optional)	5 🗆	Male		
Information	04/10/1987	INDIA		ony a		p. e e .	(optional)		Female		
Other	6a Country(ies) of citizenship INDIA       6b Foreign tax I.D. number (if any)       6c Type of U.S. visa (if any), number, and expiration date										
Information	6d Identification document(s) submitted (see instructions) 🛛 Passport 🗌 Driver's license/State I.D.										
	USCIS documentation Other Date of entry into										
	the United Sta										
	Issued by: INDIA No.: V8207470 Exp. date: 03/09/2032 (MM/DD/YYYY							(YYY):			
	6e Have you previously received an ITIN or an Internal Revenue Service Number (IRSN)?										
	<ul> <li>No/Don't know. Skip line 6f.</li> <li>Yes. Complete line 6f. If more than one, list on a sheet and attach to this form (see instructions).</li> </ul>										
	Gf       Enter ITIN and/or IRSN ▶       ITIN       IRSN       and										
	name under which it was issued								and		
	First name Middle name Last name										
	6g Name of college/university or company (see instructions) ►										
	City and state  Length of stay										
Sign Here	Under penalties of perjury, I (applicant/delegate/acceptance agent) declare that I have examined this application, including accompanying documentation and statements, and to the best of my knowledge and belief, it is true, correct, and complete. I authorize the IRS to share information with my acceptance agent in order to perfect this Form W-7, Application for IRS Individual Taxpayer Identification Number.								norize the IRS to share		
Keep a copy for your records.	Signature of applicant (if del	tions)	Date (month / day / year) Phone number								
	Name of delegate, if applica		to applicant				Court-appointed guardian attorney				
Acceptance	Signature	Signature			onth / day	′ year)	Phone				
Agent's						Fax					
Use ONLY	Name and title (type or print	Name of c	ompany		EIN		P	ΓIN			
	🖊					Office code					

REV 02/24/23 PRO