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

2022
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OMB No. 1545-0074

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

Filing Status Check only	<b>5</b> 🗌 5	Single X Married filing jointly	Marrie	ed filing separately (M	IFS)	Head of	household (H	OH) [		ifying survi ıse (QSS)	ving	
one box.		u checked the MFS box, enter the na on is a child but not your dependent		our spouse. If you ch	neck	ed the HOH or	QSS box, er	iter the	child's	name if the	qualifying	
				Last name						Your social security number		
DA 1900 - HE STONE POWER - STONE STO										***-**-3204		
				DHINDSA .ast name						Spouse's social security number		
PUNEET K		mot harrie and middle imilal		HINDSA					***-**-8969			
		r and street) If you have a P.O. hoy see		50 - 100 - 1			Apt. no.	_	Presidential Election Campaign			
						4	ere if you, o					
		ce. If you have a foreign address, also co	mnlete sr	lete spaces below. State			ZIP code	P code spouse		e if filing jointly, want \$3		
ANAHEIM	oot onic	oc. If you have a folloigh address, also so	mpioto of	CA			92807	to go to		to this fund. Checking a		
Foreign country name			Foreign province/state/county				20.			ox below will not change our tax or refund.		
r or orgin oodinary	патто			oroign province, state, o	Journe	,	Toroign postar	5000		You	Spouse	
Digital		y time during 2022, did you: (a) rece								<b>S</b>		
Assets	exch	ange, gift, or otherwise dispose of a		_			asset)? (See	instruc	ctions.)	X Yes	∐ No	
Standard Deduction		eone can claim:				a dependent						
		☐ Were born before January 2, 19		Are blind Spo		- □ Was hor	n before Jan	uary 2	1958	ls blir	nd	
Dependents	-			(2) Social security		(3) Relationsh				ies for (see in		
If more		rst name Last name		number		to you		tax cre	edit	Credit for other	er dependents	
than four	EKA	M SINGH DHINDSA		***-**-6688		Son		×				
dependents,		SIR SINGH DHINDSA		***-**-3720	_	Son	×			Ē	<u> </u>	
and check	3	THE STROTT PHINDSH		0/20		551						
here $\square$												
Income	1a	Total amount from Form(s) W-2, bo	ox 1 (see	e instructions)					1a	20	0,818.	
meome	b	Household employee wages not re	ported	on Form(s) W-2		7			1b	1		
Attach Form(s)	C	Tip income not reported on line 1a	(see ins	structions)					1c			
W-2 here. Also attach Forms	d	Medicaid waiver payments not rep	ot reported on Form(s) W-2 (see instructions)						1d			
W-2G and	е	Taxable dependent care benefits from Form 2441, line 26							1e			
1099-R if tax was withheld.	f	Employer-provided adoption benefits from Form 8839, line 29							1f			
If you did not	g	Wages from Form 8919, line 6						1g				
get a Form	h	Other earned income (see instructi	see instructions)						1h		0.	
W-2, see instructions.	i	Nontaxable combat pay election (see instructions)										
	Z	Add lines 1a through 1h		, .					1z	20	0,818.	
Attach Sch. B	2a	Tax-exempt interest	2a		b Ta	axable interest			2b	1	<u>15.</u>	
if required.	3a	Qualified dividends	3a	1,072.	<b>b</b> 0	rdinary divider	nds		3b		1,072.	
	4a	IRA distributions	1a		b Ta	axable amount	t		4b			
Standard Deduction for—	5a		5a		b Ta	axable amount	t		5b			
Single or	6a	Social security benefits 6a b Taxable amount						6b				
Married filing separately,	C	If you elect to use the lump-sum election method, check here (see instructions)										
\$12,950	7	Capital gain or (loss). Attach Schedule D if required. If not required, check here							7		<u>-45.</u>	
Married filing jointly or	8	Other income from Schedule 1, line 10						8		<u>7,637.</u>		
Qualifying	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your <b>total income</b>							9		9,497.	
surviving spouse, \$25,900 <b>10</b> Adjustments to income from Schedule 1, line 26									10			
Head of household,	ead of 11 Subtract line 10 from line 9. This is your adjusted gross income								11		9,497.	
\$19,400	12		andard deduction or itemized deductions (from Schedule A)						12		5,900.	
If you checked any box under	13	Qualified business income deduction from Form 8995 or Form 8995-A							13			
Standard Deduction,	14	Add lines 12 and 13							14 15	T	5,900.	
see instructions.	15	Subtract line 14 from line 11. If zero or less, enter -0 This is your <b>taxable income</b>								18	3,597.	

Form 1040 (2022	2)			Page <b>2</b>	
Tax and	16	Tax (see instructions). Check if any from Form(s): 1  8814  2  4972  3	16	31,638.	
Credits	17	Amount from Schedule 2, line 3	17		
	18	Add lines 16 and 17	18	31,638.	
	19	Child tax credit or credit for other dependents from Schedule 8812	19	4,000.	
	20	Amount from Schedule 3, line 8	20	609.	
	21	Add lines 19 and 20	21	4,609.	
	22	Subtract line 21 from line 18. If zero or less, enter -0	22	27,029.	
	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	27,029.	
Payments	25	Federal income tax withheld from:			
	а	Form(s) W-2			
	b	Form(s) 1099			
	C	Other forms (see instructions)			
	d	Add lines 25a through 25c	25d	24,476.	
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	2		
	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	24,476.	
Refund	34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you <b>overpaid</b>	34		
rioiana	35a	Amount of line 34 you want <b>refunded to you</b> . If Form 8888 is attached, check here	35a		
Direct deposit? See instructions.	b	Routing number * * * * * * X X X X C Type: Checking Savings			
See instructions.	d	Account number * * * * * * * * * * * * * * * * 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 <b>amount you owe</b> .  For details on how to pay, go to www.irs.gov/Payments or see instructions	37	2,553.	
	38	Estimated tax penalty (see instructions)			
<b>Third Party</b>	Do	you want to allow another person to discuss this return with the IRS? See			
Designee	ins	structions	oelow.	<b>X</b> No	
	De nai	signee's Phone Personal identir me no. number (PIN)	fication		
<u> </u>			Alex less	A = 6 = = = 1 = 1 = 1 = 1 = 1 = 1	
Sign		der penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to lief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which			
Here				nt you an Identity	
	, ,	Prote	ection P	IN, enter it here	
Joint return?		SOFTWARE (see	inst.)		
See instructions. Keep a copy for	Sp		the IRS sent your spouse an dentity Protection PIN, enter it here		
your records.			inst.)	Cuon Pila, enter it here	
	——Ph	one no. Email address			
		eparer's name Preparer's signature Date PTIN		Check if:	
Paid		PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA RAM SAGAR GUPTA TALLAM 04/14/2023 *****	2703	Self-employed	
Preparer	(P			678) 965-9522	
Use Only			's EIN	**-***1965	
	0.000				