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

2022	2
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OMB No. 1545-0074

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

Filing Status Check only	s 🗌 S	Single X Married filing jointly	Marrie	d filing separately	(MFS)	Head of	household (HC	H) [		fying survi se (QSS)	ving	
one box.	-	u checked the MFS box, enter the noon is a child but not your dependent	-	our spouse. If you	ı check	ed the HOH or	QSS box, ent	er the		` ,	e qualifying	
Your first name	and mi	ddle initial	Last nar	ne				,	our soc	ial security	number	
LOKESHWAR R ALEK				EKANTI						021-54-3809		
If joint return, spouse's first name and middle initial Last name			ne					Spouse's social security number				
SHILPA AMMA			REDDY				(	021-54-8643				
Home address	(numbe	er and street). If you have a P.O. box, see	instruction	ons.			Apt. no.	-	Presiden	tial Election	n Campaign	
1217 но	RSETA	AIL DR								ere if you, o		
City, town, or p	ost offic	ce. If you have a foreign address, also co	mplete sp	paces below.	Sta	te	ZIP code			f filing joint		
LITTLE ELM				TX			75068			this fund. C		
Foreign countr	y name		F	oreign province/sta	te/count	ty	Foreign postal of			or refund.	3.	
										You	Spouse	
Digital Assets		ny time during 2022, did you: (a) rec ange, gift, or otherwise dispose of a	•				•	,	,	Yes	⊠ No	
Standard		eone can claim: You as a de				a dependent						
Deduction <b>Deduction</b>	_	Spouse itemizes on a separate retur	•			•						
Age/Blindnes			958	Are blind S	pouse	: Was bor	n before Janu			☐ Is blir		
Dependent				(2) Social secu	rity	(3) Relationsh			1		nstructions):	
If more	<b>(1)</b> Fi	rst name Last name		number		to you	Child	tax cre	dit (	Credit for other	er dependents	
than four												
dependents, see instruction	s											
and check _	, —											
here										<u>L</u>		
Income	1a	Total amount from Form(s) W-2, b	ox 1 (see	e instructions) .					1a	12	0,148.	
	b	1 7 0 1							1b			
Attach Form(s) W-2 here. Also	С	Tip income not reported on line 1a (see instructions)										
attach Forms	d	Medicaid waiver payments not reported on Form(s) W-2 (see instructions)							1d			
W-2G and 1099-R if tax	е	, , , ,							1e			
was withheld.	f	Employer-provided adoption bene	efits 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 instruct	ions) .						1h		0.	
W-2, see instructions.	i	Nontaxable combat pay election (	see instr	uctions)		<u>1</u> i						
	Z	Add lines 1a through 1h							1z	12	0,148.	
Attach Sch. B	2a	Tax-exempt interest	2a			axable interest			2b			
if required.	3a	Qualified dividends	3a		<b>b</b> 0	rdinary divide	nds		3b			
	4a	IRA distributions	4a		b T	axable amoun	t		4b			
tandard	5a	Pensions and annuities	5a		b T	axable amoun	t		5b			
<b>Deduction for—</b> Single or	6a	Social security benefits	6a		b T	axable amoun	t		6b			
Married filing	С	If you elect to use the lump-sum e	lection n	nethod, check he	re (see	instructions)						
separately, \$12,950	7	Capital gain or (loss). Attach Sche	dule D if	required. If not re	equired	, check here			7	_	3,000.	
Married filing	8	Other income from Schedule 1, line 10							8		985.	
jointly or Qualifying	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7	, and 8. <sup>-</sup>	This is your <b>total</b>	income	e			9	11	8,133.	
surviving spouse, \$25,900	10	Adjustments to income from Schedule 1, line 26									70.	
Head of	11	Subtract line 10 from line 9. This is your <b>adjusted gross income</b>								11	8,063.	
household, \$19,400	12	Standard deduction or itemized	deducti	ons (from Schedu	ıle A)				12	2	5,900.	
If you checked	13	Qualified business income deduct	ion from	Form 8995 or Fo	rm 899	5-A			13			
any box under Standard	14	Add lines 12 and 13							14	2	5,900.	
Deduction, see instructions.	15	Subtract line 14 from line 11. If zer	ro or less	s, enter -0 This is	s your <b>t</b>	taxable incom	ne		15		2,163.	
JOE INSTITUCTIONS.	l									-		

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	11,513.
Credits	17	Amount from Schedule 2, lin	e3					17	
	18	Add lines 16 and 17						18	11,513.
	19	Child tax credit or credit for	other dependen	ts from Sched	ule 8812			19	
	20	Amount from Schedule 3, lin	e8					20	
	21	Add lines 19 and 20						21	
	22	Subtract line 21 from line 18	. If zero or less,	enter -0				22	11,513.
	23	Other taxes, including self-e	mployment tax,	from Schedule	2, line 21 .			23	139.
	24	Add lines 22 and 23. This is	your <b>total tax</b>					24	11,652.
Payments	25	Federal income tax withheld							
•	а	Form(s) W-2							
	b	Form(s) 1099							
	С	Other forms (see instructions	s)			25c			
	d	Add lines 25a through 25c						25d	10,949.
16	26	2022 estimated tax payment						26	
If you have a qualifying child,	27	Earned income credit (EIC)			No	27			
attach Sch. EIC.	28	Additional child tax credit from				28			
	29	American opportunity credit	from Form 8863	3, line 8		29			
	30	Reserved for future use .		•		30			
	31	Amount from Schedule 3, lin	e 15			31			
	32	Add lines 27, 28, 29, and 31				undable credits		32	
	33	Add lines 25d, 26, and 32. T	,	•	•			33	10,949.
Defined	34	If line 33 is more than line 24						34	·
Refund	35a	Amount of line 34 you want	•					35a	
Direct deposit?	b	Routing number   X   X   X				_	Savings		
See instructions.	d	Account number   X   X   X   X   X   X   X   X   X							
	36	Amount of line 34 you want applied to your 2023 estimated tax 36							
Amount You Owe	37	Subtract line 33 from line 24 For details on how to pay, g	. This is the <b>amo</b>	ount you owe.				37	703.
	38	Estimated tax penalty (see instructions)							
Third Party Designee		you want to allow another	person to disc	cuss this retu	n with the IRS?		omplete b	elow.	⊠ No
3	De	signee's		Phone		Pers	onal identif	ication	
	nar	ne		no.		num	oer (PIN)		
Sign Here		Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.							
пеге	Yo	ur signature	Date	Pro				nt you an Identity IN, enter it here	
Joint return?					SOFTWARE :		(see		
See instructions. Keep a copy for	Sp	Spouse's signature. If a joint return, <b>both</b> must sign.		Date	Spouse's occupat	tion			nt your spouse an ection PIN, enter it here
your records.								nst.)	
	————	one no. (201) 668-100		Email address		GNOS@GMAIL.CO	)M	· ·	
		eparer's name	Preparer's signat		LIWITHIEL OVCO	Date Date	PTIN		Check if:
Paid		PRIYA RAM SAGAR GUPTA TALLAM			מווסיים יימד. דא א		P02082	7703	Self-employed
Preparer		n's name GLOBAL TA		IVIII DUGUL	OULTA TALLAM	1 0 1 / 0 / / 2023			
Use Only			Y CT E BRU	INSMTCK N	J 08816			s EIN	(678) 965-9522 84-3171965
0-1				TADAAT CIK IN				O LIIN	
GO to www.irs.go	v/r-orn	n1040 for instructions and the late	st information.		BAA	REV 03/22/23 PRO			Form <b>1040</b> (2022)