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

|--|

OMB No. 1545-0074

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

Filing Status Check only	Single Married filing jointly Married filing separately (MFS) Head of household (HOH) If you checked the MFS box, enter the name of your spouse. If you checked the HOH or QSS box, enter the								Qualifying surviving spouse (QSS)			
one box.	-	on is a child but not your dependent	-	our spouse. Il you c	пескей іпе	non or Q	SS DOX, enter	the cr	ilia s ri	ame ii the	qualifying	
Your first name	st name and middle initial Last nar			name					Your social security number			
PADMA TATUSKAR GNAN				NESHWAR					***-**-5381			
If joint return, spouse's first name and middle initial  Last name									Spouse's social security number			
Home address	(numbe	r and street). If you have a P.O. box, see	instructio	ons.			Apt. no.	Pre	sident	ial Election	n Campaign	
			7,51.				Check here if you, or yo					
2129 BOYNTON STREET  City, town, or post office. If you have a foreign address, also complete				plete spaces below. State Z						pouse if filing jointly, want \$3		
CHARLOTTE				NC 2			8269	o go to this fund. Checking a ox below will not change				
				1000.00			oreign postal coc	our tax or refund.				
										You	Spouse	
Digital	At an	y time during 2022, did you: (a) rec	eive (as a	a reward, award, or	payment fo	or property	or services):	or (b) :	sell.			
Assets		ange, gift, or otherwise dispose of a		THE RESIDENCE OF THE PROPERTY OF THE PARTY.						Yes	X No	
Standard		eone can claim:										
Deduction		Spouse itemizes on a separate retur	n or you	were a dual-status	alien							
Age/Blindness	You:	☐ Were born before January 2, 1	958	Are blind Spo	ouse:	Was born b	pefore Januar	y 2, 19	58	Is blin	nd	
Dependents	s (see	instructions):		(2) Social security	(3) R	elationship	(4) Check the	box if	qualifie	s for (see ir	structions):	
If more		rst name Last name		number to you			Child tax		C	redit for othe	er dependents	
than four	3							]				
dependents, see instructions	,				7			]			]	
and check						02		]				
here $\square$								]			]	
Income	1a	Total amount from Form(s) W-2, box 1 (see instructions)							1a	10:	3,091.	
meome	b	Household employee wages not reported on Form(s) W-2										
Attach Form(s) W-2 here. Also	C	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	е	Taxable dependent care benefits from Form 2441, line 26										
1099-R if tax was withheld.	f	Employer-provided adoption benefits from Form 8839, line 29										
If you did not	g	Wages from Form 8919, line 6							1g			
get a Form	h	Other earned income (see instructions)									0.	
W-2, see instructions.	i	Nontaxable combat pay election (s	see instr	uctions)		1i						
	Z	Add lines 1a through 1h						•	1z	10:	3,091.	
Attach Sch. B	2a	Tax-exempt interest	2a		<b>b</b> Taxable	interest		•	2b			
if required.	3a	Qualified dividends	3a		<b>b</b> Ordinar	y dividends	3		3b			
	4a		4a		<b>b</b> Taxable			•	4b			
Standard Deduction for—	5a		5a					•	5b			
Single or	6a		6a						6b			
Married filing separately,	С	If you elect to use the lump-sum election method, check here (see instructions)										
\$12,950	7	Capital gain or (loss). Attach Sche						Ш	7			
Married filing jointly or	8	Other income from Schedule 1, lin							8			
Qualifying	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7		(F)				•	9	10:	3 <b>,</b> 091.	
surviving spouse, \$25,900	10	Adjustments to income from Sche							10			
Head of household,	11	Subtract line 10 from line 9. This is	,						11		3,091.	
\$19,400	12	Standard deduction or itemized		The same of the sa	,				12	2.	5,900.	
If you checked any box under	13	Qualified business income deduction from Form 8995 or Form 8995-A										
Standard Deduction,	14	Add lines 12 and 13									5,900.	
see instructions.	15	Subtract line 14 from line 11. If zer	o or less	s, enter -u This is y	our taxable	e income		•	15		7,191.	

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	8,850.	
Credits	17	Amount from Schedule 2, line 3	17		
	18	Add lines 16 and 17	18	8,850.	
	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	8,850.	
	23	Other taxes, including self-employment tax, from Schedule 2, line 21	23	0.	
	24	Add lines 22 and 23. This is your <b>total tax</b>	24	8,850.	
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	8,917.	
	26	2022 estimated tax payments and amount applied from 2021 return	26		
If you have a qualifying child, attach Sch. EIC.	27	Earned income credit (EIC)	Y		
	28	Additional child tax credit from Schedule 8812			
	29	American opportunity credit from Form 8863, line 8	4		
	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	8,917.	
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	67.	
	35a	Amount of line 34 you want <b>refunded to you</b> . If Form 8888 is attached, check here	35a	67.	
Direct deposit?	b	Routing number   *   *   *   *   *   X   X   X   X   C Type: Checking Savings			
See instructions.	d	Account number   *   *   *   *   *   *   *   *   *			
	36	Amount of line 34 you want applied to your 2023 estimated tax 36			
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		
	38	Estimated tax penalty (see instructions)	0.		
Third Party		you want to allow another person to discuss this return with the IRS? See			
Designee		structions	below.	<b>X</b> No	
J	De	signee's Phone Personal ident	ification		
	nai	me no. number (PIN)			
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 whic			
Here					
	Yo			nt you an Identity IN, enter it here	
Joint return?			inst.)		
See instructions.	Sp		e IRS sei	nt your spouse an	
Keep a copy for your records.			•	ection PIN, enter it here	
your records.	-		inst.)		
		one no. Email address PADMA.ACS5@GMAIL.COM			
Paid		eparer's name Preparer's signature Date PTIN	0.000	Check if:	
Preparer	19	I PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA RAM SAGAR GUPTA TALLAM 02/22/2023   *****		Self-employed	
Use Only	-	The second secon	Phone no. (678) 965-9522		
	Fir	m's address 245 ROONEY CT E BRUNSWICK NJ 08816	's FIN	**-***1065	