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

2022

OMB No. 1545-0074

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

Filing Status	SX	Single Married filing jointly	_ Marri	ed filing separately (M	(IFS)	Head of	househol	HOH)		alifying su		İ	
Check only one box.	If vo	u checked the MFS box, enter the n	ame of v	vour spouse. If you ch	nackad	l the HOH or	OSS how	onter t		use (QSS)		alifving	
ONC DOX.		son is a child but not your dependen		your spouse. If you cr	ICCRCG		Q00 D07	t, criter ti	ile crilia	3 Harrie II I	ne qu	amying	
Your first name		· · · · · · · · · · · · · · · · · · ·	Last na	ime.					Your se	o ći al secur	itv nun	mber	
										Your social security number ***-**-9233			
SUDARSHAN If joint return, spouse's first name and middle initial Last name										Spouse's social security number			
n jonit rotain, o	pouco c	o mot riamo ana rimadio milia	Laot na						Орошос	o ooolal o	Juney	- Iumboi	
Home address	(numbe	er and street). If you have a P.O. box, see	instructi	ons			Apt.	no.	Droside	ential Floot	ion Ca	mnaign	
			, in loti doti	ono.			5			Presidential Election Campaigr Check here if you, or your			
City town or r			omplete s	naces helow	State		ZIP code		spouse if filing jointly, want \$3				
City, town, or post office. If you have a foreign address, also complete sp				.			01760		to this fund. Checking a elow will not change				
NATICK Foreign country name			Foreign province/state/county				ostal code	_	x or refund		ge		
				To reight province/state/county			1 Oroigit p	oroigii pootai dodo y a m		You Spouse			
 Digital	Δt ar	ny time during 2022, did you: (a) rec	oive (as	a reward award or i	navmo	nt for prope	rty or cor	vices): O	r (b) sell				
Assets		ange, gift, or otherwise dispose of									X	No	
Standard		eone can claim: You as a de		<u>-</u> _			accor). (c		JULIO 110.)				
Deduction		Spouse itemizes on a separate return		•		аоронасті							
					411011								
	_	Were born before January 2, 1	958 L	Are blind Spo	use:	_	n before				lind		
Dependents				(2) Social security		(3) Relationsh	P		-	ifies for (se			
If more	(1) F	irst name Last name		number		to you		Child tax o	redit	Credit for o	ther de	pendents	
than four dependents,											<u> </u>		
see instruction	s										<u> </u>		
and check	, —										<u> </u>		
here]									1	Ш		
Income	1a	Total amount from Form(s) W-2, b	,	,					. 1		95,9	967.	
Attach Form(s)	b	Household employee wages not r	•						. 11				
W-2 here. Also	С.	Tip income not reported on line 1a	`						. 10				
attach Forms	d	Medicaid waiver payments not reported on Form(s) W-2 (see instructions)							. 10				
W-2G and 1099-R if tax	e	Taxable dependent care benefits from Form 2441, line 26							. 10				
was withheld.	f	Employer-provided adoption benefits from Form 8839, line 29								f			
If you did not	g	Wages from Form 8919, line 6 .	. 13						. 19				
get a Form W-2, see	h	Other earned income (see instruct	' '				· · ·		. 11	1		0.	
instructions.	i	Nontaxable combat pay election (see insti	ructions)		<u>li</u>					٥- (267	
	<u>z</u>	Add lines 1a through 1h							. 1		95,5	967.	
Attach Sch. B if required.	2a		2a			able interest			. 21				
ii required.	3a		3a			inary divider							
	4a		4a			able amount			. 41				
Standard Deduction for— Single or	5a		5a 6a			able amount			. 5l				
	6a		-			able amount	ι		. 0	3			
Married filing separately,	C 7	If you elect to use the lump-sum election method, check here (see instructions)							7				
\$12,950	7				,						2 /		
Married filing jointly or	8	Other income from Schedule 1, lin							. 8			437.	
Qualifying surviving spouse,	9 10	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income							. 9			404.	
\$25,900	Adjustments to income from Sche						. 10			243.			
Subtract line 10 from line 9. This is your adjusted gross income							. 1			161.			
\$19,400	12								. 13		14,5	950.	
If you checked any box under	13 14	Qualified business income deduction from Form 8995 or Form 8995-A							. 14	_	12 (
Standard Deduction,	15		dd lines 12 and 13									9 <u>50.</u>	
see instructions.	10	Subtract line 14 HOITI line 11. Il Ze	o or les	o, enter -u This is yo	oui tax	anie ilicum			. 15	,	00,2	211.	

Form 1040 (2022	2)			Page 2		
Tax and	16	Tax (see instructions). Check if any from Form(s): 1 8814 2 4972 3	16	14,587.		
Credits	17	Amount from Schedule 2, line 3	17			
	18	Add lines 16 and 17	18	14,587.		
	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	14,587.		
	23	Other taxes, including self-employment tax, from Schedule 2, line 21	23	486.		
	24	Add lines 22 and 23. This is your total tax	24	15,073.		
Payments	25	Federal income tax withheld from:				
,	а	Form(s) W-2				
	b	Form(s) 1099				
	С	Other forms (see instructions)				
	d	Add lines 25a through 25c	25d	13,881.		
lf	26	2022 estimated tax payments and amount applied from 2021 return	26			
If you have a qualifying child,	27	Earned income credit (EIC)	T			
attach Sch. EIC.	28	Additional child tax credit from Schedule 8812				
	29	American opportunity credit from Form 8863, line 8	7			
	30	Reserved for future use	1			
	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	13,881.		
Refund	34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid	34			
neiulia	35a	Amount of line 34 you want refunded to you . If Form 8888 is attached, check here	35a			
Direct deposit?	b	Routing number * * * * * * X 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				
Amount You Owe	37	Subtract line 33 from line 24. This is the amount you owe . For details on how to pay, go to www.irs.gov/Payments or see instructions	37	1,192.		
	38	Estimated tax penalty (see instructions)				
Third Party Designee		by you want to allow another person to discuss this return with the IRS? See structions	nelow	X No		
Doolgiloo		signee's Phone Personal identi				
	na					
Sign	Un be	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	the bes	et of my knowledge and er has any knowledge.		
Here	Yo	ur signature Date Your occupation If the	e IRS sent you an Identity			
			ection P inst.)	IN, enter it here		
Joint return? See instructions.		SOFTWARE ENGINEER	<u> </u>			
Keep a copy for your records.	Sp	Iden	RIRS sent your spouse an tity Protection PIN, enter it here inst.)			
	Ph	one no. (312)502-8531 Email address SUDARSHANGUJJAR@GMAIL.COM				
Doid	Pre	eparer's name Preparer's signature Date PTIN		Check if:		
Paid	SYAM	I PRIYA RAM SAGAR CUPTA TALLAM SYAM PRIYA RAM SAGAR GUPTA TALLAM 03/18/2023 *****.	2703	Self-employed		
Preparer	Fir	m's name GLOBAL TAXES LLC Phor	Phone no. (678)965-9522			
Use Only	Fin	m's address 245 ROONEY CT E BRIINSWICK NJ 08816	Firm's FIN **-***1965			