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

2022

OMB No. 1545-007

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

Filing Status Check only	_	Single Married filing jointly	_	ed filing separately (M		_			spou	ifying surv ise (QSS)	•			
one box.	-	u checked the MFS box, enter the na on is a child but not your dependent	-	our spouse. If you ch	necke	ed the HOH or	QSS box, ent	er the	child's	name if th	e qualifying			
Your first name and middle initial				me				,	Your social security number					
TIRUMAL TUN				A				(	008-61-4888					
If joint return, spouse's first name and middle initial Last na				me					Spouse's social security numbe					
NAVYA			SURU	KANTI				1	APPLIED FOR					
Home address	(numbe	er and street). If you have a P.O. box, see	instruction	ons.			Apt. no.	ı	Presidential Election Campaig					
12610,RI	TRACE PKWY						Check here if you, or your							
City, town, or p	ost offic	ce. If you have a foreign address, also co	mplete s <sub>l</sub>	paces below.	ZIP code				spouse if filing jointly, want \$3 to go to this fund. Checking a					
AUSTIN				TX			78727				change			
Foreign country name				Foreign province/state/county				Foreign postal code yo			your tax or refund.			
										You	Spouse			
Digital Assets		ny time during 2022, did you: (a) rece ange, gift, or otherwise dispose of a			-		-			Yes	⊠ No			
Standard		eone can claim: You as a de					, (							
Deduction	_	Spouse itemizes on a separate return												
Age/Blindness	You:	Were born before January 2, 1	958	Are blind Spo	use:	☐ Was bor	n before Janu			☐ Is bl				
Dependents (se		instructions):		(2) Social security		(3) Relationsh	ip (4) Check	the box	· .	,	instructions):			
If more	<b>(1)</b> Fi	rst name Last name	number		to you		Child tax cr		dit	Credit for oth	her dependents			
than four														
dependents, see instructions	s ——							<u> </u>						
and check								<u> </u>						
here								Ш		L				
Income	1a	Total amount from Form(s) W-2, bo	,	,					1a	17	75 <b>,</b> 725.			
A44 I- F (-)	b	Household employee wages not reported on Form(s) W-2												
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)												
W-2G and 1099-R if tax	е	Taxable dependent care benefits from Form 2441, line 26												
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 W-2, see	Other earned income (see instructi			1	· · · ·		1h	-	0.					
instructions.	i	Nontaxable combat pay election (s	see instr	ructions)		<u>1i</u>								
		Add lines 1a through 1h							1z	1 1	75,725.			
Attach Sch. B	2a	'	2a			xable interest			2b	-				
if required.	3a		3a			dinary divider			3b		133.			
	4a		4a			axable amoun			4b					
Standard Deduction for—	5a	_	5a			axable amoun			5b					
Single or	6a	,	6a			axable amoun			6b					
Married filing separately,	_C	If you elect to use the lump-sum election method, check here (see instructions)									405			
\$12,950	7	Capital gain or (loss). Attach Schedule D if required. If not required, check here							7		-485.			
Married filing jointly or	8	Other income from Schedule 1, line 10						9		12,051.				
Qualifying surviving spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your <b>total income</b>									53,322.			
\$25,900	10	Adjustments to income from Schedule 1, line 26												
Head of household,	11	Subtract line 10 from line 9. This is your <b>adjusted gross income</b>									53,322.			
\$19,400	12	Standard deduction or itemized deductions (from Schedule A)									25,900.			
If you checked any box under	13								13	+ -				
Standard Deduction,	14	Add lines 12 and 13							14		25 <b>,</b> 900.			
see instructions.	15	Subtract line 14 from line 11. If zero or less, enter -0 This is your <b>taxable income</b>									37,422.			

	40	T / '	40	Page
Tax and	16	Tax (see instructions). Check if any from Form(s): 1  8814  2  4972  3	16	21,458.
Credits	17	Amount from Schedule 2, line 3	17	01 450
	18	Add lines 16 and 17	18	21,458.
	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	01 450
	22	Subtract line 21 from line 18. If zero or less, enter -0	22	21,458
	23	Other taxes, including self-employment tax, from Schedule 2, line 21	23	01 450
	24	Add lines 22 and 23. This is your <b>total tax</b>	24	21,458
Payments	25	Federal income tax withheld from:		
	a	Form(s) W-2		
	b	Form(s) 1099	_	
	C	Other forms (see instructions)		00 014
	d	Add lines 25a through 25c	25d	28,014
you have a	26	2022 estimated tax payments and amount applied from 2021 return	26	
ualifying child, ttach Sch. EIC. [	27	Earned income credit (EIC)		
	28	Additional child tax credit from Schedule 8812	_	
	29	American opportunity credit from Form 8863, line 8		
	30	Reserved for future use		
	31	Amount from Schedule 3, line 15		
	32	Add lines 27, 28, 29, and 31. These are your <b>total other payments and refundable credits</b>	32	
	33	Add lines 25d, 26, and 32. These are your <b>total payments</b>	33	28,014
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	6,556
	35a	Amount of line 34 you want <b>refunded to you</b> . If Form 8888 is attached, check here	35a	6,556
Direct deposit? See instructions.	b	Routing number 0 1 1 4 0 0 4 9 5 c Type: X Checking Savings		
oc mondonono.	d	Account number 3 8 8 0 0 3 9 3 9 9 0 0		
	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 <i>www.irs.gov/Payments</i> or see instructions	37	
	38	Estimated tax penalty (see instructions)		
Third Party Designee		you want to allow another person to discuss this return with the IRS? See structions	elow.	× No
	De	signee's Phone Personal identif ne no. number (PIN)	ication _	<del></del>

	Designee's			Phone	onal identification							
	name		no.				number (PIN)					
Sign Here  Joint return? See instructions. Keep a copy for your records.	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.											
	Your signature			Date	Your or	Your occupation			If the IRS sent you an Identity Protection PIN, enter it here			
					SOFI	SOFTWARE ENGINEER						
	Spouse's signature. If a joint return, <b>both</b> must sign.			Date	Spouse	Spouse's occupation			If the IRS sent your spouse an Identity Protection PIN, enter it here			
					HOME	MAKER		(see inst.)				
	Phone no. (603	Email address	ress RTIRU49@GMAIL.COM									
Paid Preparer	Preparer's name	Preparer's signat	ture			Date	PTIN	Check if:				
	SYAM PRIYA RAM SAGAR	GUPTA TALLAM	SYAM PRIYA	RAM SAGAR	GUPTA	TALLAM	03/02/2023	P02082703	3 Self-em		ploye	d
	Eliminary CIODAI MANDO IIO								Db /C70\0CE 0E22			

GLOBAL TAXES LLC

Firm's address 245 ROONEY CT E BRUNSWICK NJ 08816

Firm's name

**Use Only** 

Phone no. (678) 965-9522

Firm's EIN