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	<b>X</b> S	Single Married filing jointly	Marrie	ed filing separately (M	/IFS)	Head of	house	hold (HOH	)		fying survi se (QSS)	ving	
Check only one box.	If yo	u checked the MFS box, enter the n	ame of y	our spouse. If you ch	necke	d the HOH or	QSS	box, enter	r the c			qualifying	
		on is a child but not your dependen											
Your first name and middle initial				Last name						Your social security number			
PRADEEP KUMAR M.				MAKKENA						***-**-2897			
If joint return, spouse's first name and middle initial Last				ast name					Sp	Spouse's social security number			
	, .												
		r and street). If you have a P.O. box, see	ons.	Apt. no.							n Campaign		
6017 E 75TH STREET								THD3			here if you, or your e if filing jointly, want \$3		
City, town, or post office. If you have a foreign address, also complete				· I				to to		to go to this fund. Checking a			
INDIANAPOLIS				IN						box below will not change your tax or refund.			
Foreign country name				Foreign province/state/county			Foreign postal code		de yo	You Spouse			
 Digital	At an	y time during 2022, did you: (a) rec	eive (as	a reward award or	navm	ent for prope	rty or	services):	or (b)	sell			
Assets		ange, gift, or otherwise dispose of					-				Yes	⊠ No	
Standard		eone can claim: You as a de		<u>_</u>									
Deduction		Spouse itemizes on a separate retur		•	alien								
Age/Blindness	You:	☐ Were born before January 2, 1	958	Are blind Spo	use:	Was bor	n bef	ore Januar	v 2. 19	958	☐ Is blir	nd	
Dependents	-			(2) Social security		(3) Relationsh			•		es for (see ir	nstructions):	
If more		rst name Last name		number		to you		Child tax cre			Credit for othe	er dependents	
than four													
dependents, see instructions												]	
and check	· —					702	>					]	
here												]	
Income	1a	Total amount from Form(s) W-2, b	ox 1 (see	e instructions)		.).)				1a	10	6,589.	
	b	Household employee wages not r	eported	on Form(s) W-2		V				1b			
Attach Form(s) W-2 here. Also	С	Tip income not reported on line 1a (see instructions)							1c				
attach Forms	d	Medicaid waiver payments not reported on Form(s) W-2 (see instructions)							1d				
W-2G and 1099-R if tax	е	Taxable dependent care benefits from Form 2441, line 26							1e				
was withheld.	f	Employer-provided adoption bene		Form 8839, line 29						1f			
If you did not	g	Wages from Form 8919, line 6						1g					
get a Form W-2, see	h	Other earned income (see instruct	′ ′							1h	_	0.	
instructions.	i	Nontaxable combat pay election (see instructions)											
	<b>Z</b>	Add lines 1a through 1h								1z	10	6,589.	
Attach Sch. B	2a	·	2a			xable interest				2b			
if required.	<u>3a</u>	Qualified dividends	3a			dinary divider				3b	-	4.	
	4a		4a			xable amoun				4b			
Standard Deduction for—	5a		5a			xable amoun				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)							_	1	2 000		
\$12,950	7		gain or (loss). Attach Schedule D if required. If not required, check here						Ш	7		3,000.	
Married filing jointly or	8	Other income from Schedule 1, line 10							8		1,000.		
Qualifying surviving spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your <b>total income</b>								9	+ 9	2,593.	
\$25,900	Adjustments to income from schedule 1, line 20							10	+	2			
<ul> <li>Head of household,</li> </ul>	Subtract line 10 from line 9. This is your adjusted gross income							11		2,593.			
\$19,400	12	Standard deduction or itemized deductions (from Schedule A)									+ +	<u>2,950.</u>	
If you checked any box under	13	Qualified business income deduction from Form 8995 or Form 8995-A								13			
Standard Deduction,	14 15	Add lines 12 and 13							14				
see instructions.	10	Subtract line 14 Iron line 11. II Ze	o or less	s, enter -u IIIIs IS y	our <b>ta</b>	ivanie ilicom	i <del>c</del> .			15	/	2,043.	

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	13,135.		
Credits	17	Amount from Schedule 2, line 3	. 17			
	18	Add lines 16 and 17	. 18	13,135.		
	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	13,135.		
	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	13,135.		
<b>Payments</b>	25	Federal income tax withheld from:				
	а	Form(s) W-2	7.			
	b	Form(s) 1099				
	С	Other forms (see instructions)				
	d	Add lines 25a through 25c	25d	13,697.		
If you have a qualifying child, attach Sch. EIC.	26	2022 estimated tax payments and amount applied from 2021 return	. 26			
	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 total other payments and refundable credits	. 32			
	33	Add lines 25d, 26, and 32. These are your total payments	. 33	13,697.		
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	562.		
	35a	Amount of line 34 you want <b>refunded to you</b> . If Form 8888 is attached, check here	35a	562.		
Direct deposit? See instructions.	b	Routing number * * * * * 0 1 9 6 c Type: X Checking Saving	js			
See instructions.	a	Account number * * * * * * * * 8 0 6 9				
-	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		byou want to allow another person to discuss this return with the IRS? See structions	te helow	X No		
Designee		_	sonal identification			
		me no. number (PIN				
Sign		der penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and lief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of whether they are true, correct, and complete. Declaration of whether they are true, correct, and complete.				
Here	Yo			nt you an Identity		
			Protection PIN, enter it here (see inst.)			
Joint return? See instructions. Keep a copy for your records.		SOFIWARE ENGINEER	<u> </u>			
	Sp	Id	If the IRS sent your spouse an Identity Protection PIN, enter it here (see inst.)			
	Ph	one no. (618)406-9063 Email address PRADEEPMAKKENA864@GMAIL.COM				
D-1-I	Pre	eparer's name Preparer's signature Date PTIN		Check if:		
Paid	SYAM	I PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA RAM SAGAR GUPTA TALLAM 02/25/2023 ****	**2703	Self-employed		
Preparer Use Only	Fin	m's name GLOBAL TAXES LLC	hone no. (	(678)965-9522		
Use Only	Fir	m's address 245 ROONEY CT E BRUNSWICK NJ 08816 Fi	irm's EIN	**-***1965		