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			_	ed filing separately (M	,	_	household (HOH		spou	fying survi se (QSS)	_	
one box.		u checked the MFS box, enter the n on is a child but not your dependen		our spouse. If you ch	neck	ed the HOH or	QSS box, enter	the o	child's	name if the	e qualifying	
Your first name and middle initial				Last name						Your social security number		
PARASHURAM				POCHARAM						512-51-9529		
				ast name					Spouse's social security number			
Home address (number and street). If you have a P.O. box, see instructions. Apt. no.							P	Presidential Election Campaign				
5900 SW HAWKES ST										ere if you, o		
City, town, or post office. If you have a foreign address, also compl				plete spaces below. State ZIF						oouse if filing jointly, want \$3 go to this fund. Checking a		
BENTONVILLE				AR 7			72713	2713 box b		w will not o		
Foreign country name			F	Foreign province/state/county Fo				de y			Spouse	
 Digital	At ar	y time during 2022, did you: (a) rec	eive (as	a reward, award, or p	oayn	nent for prope	rty or services);	or (b) sell,			
Assets	exch	ange, gift, or otherwise dispose of	a digital	asset (or a financial in	ntere	est in a digital	asset)? (See ins	truct	ions.)	Yes	⊠ No	
Standard		eone can claim: You as a de							-			
Deduction		Spouse itemizes on a separate retui		ı were a dual-status a _	alien							
	_	Were born before January 2, 1	958	Are blind Spo	use		n before Januar	,		Is blir	-	
Dependents				(2) Social security number	4	(3) Relationsh to you	ip .		L	0		
If more than four	(1)	1) First name Last name		Hamber		to you	Child tax cre		iii.		er dependents	
dependents,							-	1				
see instructions	s						-	1				
and check here]							1			1	
Income	1a	Total amount from Form(s) W-2, b	ox 1 (se	e instructions)	•			• 1	1a	7	9,034.	
	b	Household employee wages not r	eported	on Form(s) W-2					1b			
Attach Form(s) W-2 here. Also	C	Tip income not reported on line 1a	a (see ins	structions)	٦.			•	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							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 instr	ructions)		<u>1i</u>				4		
	Z	Add lines 1a through 1h						•	1z	1	9,034.	
Attach Sch. B	2a	Tax-exempt interest	2a			axable interest		•	2b			
if required.	3a	Qualified dividends	3a			rdinary divider		•	3b	-		
	4a	IRA distributions	4a	,		axable amoun			4b	_		
Standard Deduction for—	5a		5a 6a			axable amoun axable amoun		•	5b 6b			
Single or	6a c	Social security benefits If you elect to use the lump-sum e	2000000					_	OD	_		
Married filing separately,	7	Capital gain or (loss). Attach Sche						H	7			
\$12,950 Married filing	8	Other income from Schedule 1, lir						ш	8	-	0.	
jointly or	9							•	9	+ 7	9,034.	
Qualifying surviving spouse,	10	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income								+ '	<i>J,</i> ∪34.	
\$25,900 • Head of	11	Subtract line 10 from line 9. This is your adjusted gross income									9,034.	
household,	12	Standard deduction or itemized deductions (from Schedule A)							11		2,950.	
\$19,400 If you checked	13	Qualified business income deduction from Form 8995 or Form 8995-A								+ -	<u> </u>	
any box under Standard	14	Add lines 12 and 13							13	1	2,950.	
Deduction,	15	Subtract line 14 from line 11. If zero or less, enter -0 This is your taxable income							15		6,084.	
see instructions.										Ť		

Form 1040 (2022	2)			Page 2
Tax and	16	Tax (see instructions). Check if any from Form(s): 1 8814 2 4972 3	16	10,154.
Credits	17	Amount from Schedule 2, line 3	17	
	18	Add lines 16 and 17	18	10,154.
	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	10,154.
	23	Other taxes, including self-employment tax, from Schedule 2, line 21	23	0.
	24	Add lines 22 and 23. This is your total tax	24	10,154.
Payments	25	Federal income tax withheld from:		
	a	Form(s) W-2		
	b	Form(s) 1099		
	C	Other forms (see instructions)		
	d	Add lines 25a through 25c	25d	10,294.
16	26	2022 estimated tax payments and amount applied from 2021 return	26	
If you have a qualifying child,	27	Earned income credit (EIC)		
attach Sch. 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	10,294.
Refund	34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid	34	140.
riciana	35a	Amount of line 34 you want refunded to you . If Form 8888 is attached, check here	35a	140.
Direct deposit?	b	Routing number 0 4 4 0 0 0 0 3 7 c Type: ▼ Checking Savings		
See instructions.	d	Account number 8 5 1 6 5 3 1 8 3		
	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	
	38	Estimated tax penalty (see instructions)		
Third Party		you want to allow another person to discuss this return with the IRS? See	v	
Designee		structions		× No
	De	signee's Phone Personal identifunction no. Personal identifunction no.	ication	
Cian	Un	der penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to	the bes	st of my knowledge and
Sign		ief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which		
Here	Yo			nt you an Identity
			ection Plinst.)	IN, enter it here
Joint return?	_	SOFTWARE ENGINEER	,	<u> </u>
See instructions. Keep a copy for	Sp			nt your spouse an ection PIN, enter it here
your records.		(see		J. J
	Ph	one no. (234)263-9466 Email address PARASHURAM.POCHARAM@GMAIL.COM		
	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 02/12/2023 P02082	2703	Self-employed

Firm's name

Firm's address

GLOBAL TAXES LLC

245 ROONEY CT E BRUNSWICK NJ 08816

Preparer

Use Only

Phone no. (678) 965-9522

Firm's EIN