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 Check only	X 5	Single Married filing jointly	Marrie	ed filing separately (N	/IFS)	Head of	hous	ehold (HOH)			fying survi se (QSS)	ving
one box.	If yo	u checked the MFS box, enter the r	ame of y	our spouse. If you c	hecke	ed the HOH or	QSS	S box, enter				qualifying
	pers	on is a child but not your dependen	t:									
Your first name	and mi	ddle initial	Last na	st name						Your social security number		
AMALIA S	3		GONS	ALVES					***-**-7358			
If joint return, sp	first name and middle initial	me					Spouse's social security number			ırity number		
Home address	(numbe	r and street). If you have a P.O. box, see	instruction	ons.				Apt. no.	Pre	esiden	tial Election	n Campaign
206S 13T	TH ST	REET						2208	Ch	eck he	ere if you, c	or your
		ce. If you have a foreign address, also co	omplete s	nplete spaces below. State ZIP				code			filing jointl	
PHILADEI	PHI	A		PA 1:			19	107		to go to this fund. Checking a box below will not change		
Foreign country name			F	Foreign province/state/county F			Fore	eign postal coc			tax or refund.	
											You	Spouse
Digital	At ar	y time during 2022, did you: (a) rec	eive (as	a reward, award, or	paym	ent for prope	rty o	r services);	or (b)	sell,		
Assets	exch	ange, gift, or otherwise dispose of	a digital	asset (or a financial i	intere	st in a digital	asse	t)? (See ins	tructic	ns.)	☐ Yes	⊠ No
Standard	Som	eone can claim: 🗌 You as a de	penden	t Your spouse	e as a	a dependent						
Deduction		Spouse itemizes on a separate retu	n or you	were a dual-status	alien							
Age/Blindness	You:	☐ Were born before January 2, 1	958	Are blind Spo	use:	Was bor	n be	fore Januar	y 2, 19	958	Is blir	nd
Dependents	s (see	nstructions):		(2) Social security	,	(3) Relationsh	iip	(4) Check the	box if	qualifie	es for (see ir	nstructions):
If more	(1) Fi	rst name Last name		number		to you		Child tax	credit	: 0	Credit for othe	er dependents
than four]			
dependents, see instructions	s ——]]
and check							,					
here											L	
Income	1a	Total amount from Form(s) W-2, b	•	,	-					1a	6	5,952.
Attach Form(s)	b	Household employee wages not r	•							1b		
W-2 here. Also	С.	Tip income not reported on line 1	`							1c		
attach Forms	d	Medicaid waiver payments not reported on Form(s) W-2 (see instructions)							1d			
W-2G and 1099-R if tax	e	•	_				٠			1e		
was withheld.	f	Employer-provided adoption bene		1 Form 8839, line 29			٠			1f		
If you did not get a Form	g	Wages from Form 8919, line 6 .					٠			1g		0.
W-2, see	h :	Other earned income (see instruct							•	1h		<u> </u>
instructions.	i z	Nontaxable combat pay election (Add lines 1a through 1h	see msu	uctions)		!!				1z	6	5,952.
Attach Sch. B	2 2a	J. Company	2a		h Ta	 axable interest			•	2b	0	3,752.
if required.	3a	Qualified dividends	3a			dinary divider			•	3b		
	4a	IRA distributions	4a			xable amoun			•	4b		
Standard	5a		5a			xable amoun			·	5b		
Deduction for—	6a	Social security benefits	6a			xable amoun			·	6b		
Single or Married filing	С		ou elect to use the lump-sum election method, check here (see instructions)						\Box			
separately,	7	Capital gain or (loss). Attach Sche				•				7		
\$12,950 Married filing	8	Other income from Schedule 1, lin							<u> </u>	8	_	6,600.
jointly or Qualifying	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7								9		9,352.
surviving spouse,	10	Adjustments to income from Schedule 1, line 26								10		
\$25,900 • Head of	11	Subtract line 10 from line 9. This is your adjusted gross income						11	5	9,352.		
household, \$19,400	12	Standard deduction or itemized	deduct	ions (from Schedule	A)					12		2,950.
If you checked	13	Qualified business income deduct	ion from	Form 8995 or Form	8995	5-A				13		
any box under Standard	14	Add lines 12 and 13								14	1	2,950.
Deduction, see instructions.	15	Subtract line 14 from line 11. If ze	ro or les	s, enter -0 This is y	our t a	axable incom	ie			15		6,402.
230												

Form 1040 (2022	2)			Page 2				
Tax and	16	Tax (see instructions). Check if any from Form(s): 1 8814 2 4972 3	16	5,831.				
Credits	17	Amount from Schedule 2, line 3	17					
	18	Add lines 16 and 17	18	5,831.				
	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	5,831.				
	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	5,831.				
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	7,294.				
If you have a	26	2022 estimated tax payments and amount applied from 2021 return	26					
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	<u> </u>					
	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	7,294.				
Refund	34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid	34	1,463.				
	35a	Amount of line 34 you want refunded to you . If Form 8888 is attached, check here	35a	1,463.				
Direct deposit? See instructions.	b	Routing number * * * * * 1 8 0 8 c Type: X Checking Savings						
oee mandenons.	d	Account number * * * * * * * * 7 5 1 8						
	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 <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	elow.	X No				
Ü	De		Personal identification					
	naı	me no. number (PIN)						
Sign		der penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to ief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which						
Here				nt you an Identity				
	10			IN, enter it here				
Joint return?		ARCHITECTURAL DESIGNER (see i	nst.)					
See instructions. Keep a copy for	Sp		If the IRS sent your spouse an Identity Protection PIN, enter it here (see inst.)					
your records.								
		one no. (267)334-5468 Email address AMALIAGONSALVES@BLTA.COM eparer's name Preparer's signature Date PTIN		Check if:				
Paid		PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA RAM SAGAR GUPTA TALLAM 01/26/2023 *****2)7N2	Self-employed				
Preparer				678)965-9522				
Use Only			e no. (s EIN	**-***5487				
	1,111	TIS AUDIESS Z 13 TOOMET CT E DROMBWICK TO OUGLO	2 LIIN					

SCHEDULE 1 (Form 1040)

Additional Income and Adjustments to Income

OMB No. 1545-0074

2022

Attachment Sequence No. 01

Department of the Treasury Internal Revenue Service

AMALIA S GONSALVES

Name(s) shown on Form 1040, 1040-SR, or 1040-NR

Attach to Form 1040, 1040-SR, or 1040-NR.

Go to www.irs.gov/Form1040 for instructions and the latest information.

Your social security number

***-**-7358

Par	t I Additional Income			
1	Taxable refunds, credits, or offsets of state and local income taxes		1	
2a	Alimony received		2a	
b	Date of original divorce or separation agreement (see instructions):			
3	Business income or (loss). Attach Schedule C		3	
4	Other gains or (losses). Attach Form 4797		4	
5	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Att	ach Schedule E .	5	-6,600.
6	Farm income or (loss). Attach Schedule F		6	
7	Unemployment compensation		7	
8	Other income:			
а	Net operating loss	8a ()		
b	Gambling	8b		
С	Cancellation of debt	8c		
d	Foreign earned income exclusion from Form 2555	8d ()		
е	Income from Form 8853	8e		
f	Income from Form 8889	8f		
g	Alaska Permanent Fund dividends	8g		
h	Jury duty pay	8h		
i	Prizes and awards	8i		
j	Activity not engaged in for profit income	8j		
k	Stock options	8k		
ı	Income from the rental of personal property if you engaged in the rental			
	for profit but were not in the business of renting such property	81		
m	Olympic and Paralympic medals and USOC prize money (see			
	instructions)	8m		
n	Section 951(a) inclusion (see instructions)	8n		
0	Section 951A(a) inclusion (see instructions)	80		
р	Section 461(I) excess business loss adjustment	8p		
q	Taxable distributions from an ABLE account (see instructions)	8q		
r	Scholarship and fellowship grants not reported on Form W-2	8r		
S	Nontaxable amount of Medicaid waiver payments included on Form	0- /		
	1040, line 1a or 1d	8s ()		
t	Pension or annuity from a nonqualifed deferred compensation plan or	04		
	a nongovernmental section 457 plan	8t		
	Wages earned while incarcerated	8u		
Z	Other income. List type and amount:	0-		
9	Total other income. Add lines 8a through 8z	8z	9	
10	Combine lines 1 through 7 and 9. Enter here and on Form 1040, 1040-SF		10	-6,600.
10	Combine lines 1 through 7 and 9. Enter here and on Form 1040, 1040-SF	l, or 1040-NR, line 8	10	-6,600.

For Paperwork Reduction Act Notice, see your tax return instructions.

Schedule 1 (Form 1040) 2022

Schedule 1 (Form 1040) 2022 Page **2**

Par	t II Adjustments to Income		
11	Educator expenses	11	
12	Certain business expenses of reservists, performing artists, and fee-basis government		
	officials. Attach Form 2106	12	
13	Health savings account deduction. Attach Form 8889	13	
14	Moving expenses for members of the Armed Forces. Attach Form 3903	14	
15	Deductible part of self-employment tax. Attach Schedule SE	15	
16	Self-employed SEP, SIMPLE, and qualified plans	16	
17	Self-employed health insurance deduction	17	
18	Penalty on early withdrawal of savings	18	
19a	Alimony paid	19a	
b	Recipient's SSN		
С	Date of original divorce or separation agreement (see instructions):		
20	IRA deduction	20	
21	Student loan interest deduction	21	
22	Reserved for future use	22	
23	Archer MSA deduction	23	
24	Other adjustments:		
а	Jury duty pay (see instructions)	_	
b	Deductible expenses related to income reported on line 8l from the		
	rental of personal property engaged in for profit	_	
С	Nontaxable amount of the value of Olympic and Paralympic medals		
_	and USOC prize money reported on line 8m	_	
d	Reforestation amortization and expenses		
е	Repayment of supplemental unemployment benefits under the Trade Act of 1974		
f	Contributions to section 501(c)(18)(D) pension plans		
g	Contributions by certain chaplains to section 403(b) plans 24g		
h	Attorney fees and court costs for actions involving certain unlawful		
	discrimination claims (see instructions)		
i	Attorney fees and court costs you paid in connection with an award		
	from the IRS for information you provided that helped the IRS detect		
	tax law violations		
j	tax law violations		
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form		
	1041)		
Z	Other adjustments. List type and amount:		
	24z		
25	Total other adjustments. Add lines 24a through 24z	25	
26	Add lines 11 through 23 and 25. These are your adjustments to income. Enter here and on		
	Form 1040 or 1040-SR, line 10, or Form 1040-NR, line 10a	26	

BAA

SCHEDULE E (Form 1040)

Supplemental Income and Loss

(From rental real estate, royalties, partnerships, S corporations, estates, trusts, REMICs, etc.)

Attach to Form 1040, 1040-SR, 1040-NR, or 1041.

Go to www.irs.gov/ScheduleE for instructions and the latest information.

OMB No. 1545-0074 Attachment Sequence No. 13

Department of the Treasury Internal Revenue Service

Name(s) shown on return Your social security number

AMAI	JIA S GONSALVES				***_**	<u>-7</u> 358	<u> </u>			
Part	Note: If you are in the business of renting personal proper rental income or loss from Form 4835 on page 2, line 40.	rty, use Sche	dule C. See							
	Did you make any payments in 2022 that would require you f "Yes," did you or will you file required Form(s) 1099?									
1a	Physical address of each property (street, city, state, Zl						23 1 110			
		1 code)		4						
A B	KHOPWADI VASAI MAHARASHTRA IN 401201									
				(
	Type of Property 2 For each rental real estate prope	ype of Property 2 For each rental real estate property listed Fair Rental Personal Use								
	(from list below) above, report the number of fair	above, report the number of fair rental and Days Days								
_ <u>A</u>	if you meet the requirements to			365		0				
B C	qualified joint venture. See instru		В							
	of Property:		C							
1	Single Family Residence 3 Vacation/Short-Term Ren Multi-Family Residence 4 Commercial		and Royalties	7 Self-Rental 8 Other (desc	cribe)					
				Propert						
Incon	ne.		A	Propert	ies.		С			
3	Rents received	3		00.						
4	Royalties received									
Exper		+ + + + + + + + + + + + + + + + + + + +								
5	Advertising	5								
6	Auto and travel (see instructions)	6								
7	Cleaning and maintenance	7	7	00.						
8	Commissions	8								
9	Insurance	9								
10	Legal and other professional fees	10								
11	Management fees	11	3	00.						
12	Mortgage interest paid to banks, etc. (see instructions)	12								
13	Other interest	13								
14	Repairs	14	1,9							
15	Supplies	15	1,4	50.						
16	Taxes	16								
17	Utilities	17	2,7	60.						
18	Depreciation expense or depletion	18								
19	Other (list)	19		0.0						
20	Total expenses. Add lines 5 through 19	20	7,2	00.						
21	Subtract line 20 from line 3 (rents) and/or 4 (royalties). If result is a (loss), see instructions to find out if you must file Form 6198		-6,6	00						
22	Deductible rental real estate loss after limitation, if any,	21	0,0							
22	on Form 8582 (see instructions)	22 (6,60	0.)()(,)			
23a	Total of all amounts reported on line 3 for all rental prope			23a	600.					
b	Total of all amounts reported on line 4 for all royalty prop			23b						
С	Total of all amounts reported on line 12 for all properties			23c						
d	Total of all amounts reported on line 18 for all properties			23d	7.000					
е	Total of all amounts reported on line 20 for all properties			23e	7,200.					
24	Income. Add positive amounts shown on line 21. Do no		-	Salandada (Salanda)	. 24	,	C COO \			
25	Losses. Add royalty losses from line 21 and rental real esta						6,600.)			
26	Total rental real estate and royalty income or (loss). here. If Parts II, III, IV, and line 40 on page 2 do not Schedule 1 (Form 1040), line 5. Otherwise, include this a	apply to yo	ou, also er	nter this amount	on		-6,600.			