(Rev. July 2021)

## Carryback Claim

Department of the Treasury-Internal Revenue Service

## **Amended U.S. Individual Income Tax Return**

▶ Use this revision to amend 2019 or later tax returns.

▶ Go to www.irs.gov/Form1040X for instructions and the latest information.

OMB No. 1545-0074

This return is for calendar year (enter year) or fiscal year (enter month and year ended) 2022 Your first name and middle initial Last name Your social security number RAKESH KAMMA 743-16-1471 If joint return, spouse's first name and middle initial Last name Spouse's social security number Current home address (number and street). If you have a P.O. box, see instructions. Your phone number Apt no 19553 RAINIER VIEW RD SE (425)362-5163City, town or post office, state, and ZIP code. If you have a foreign address, also complete spaces below. See instructions. MONROE WA 98272 Foreign country name Foreign province/state/county Foreign postal code Amended return filing status. You must check one box even if you are not changing your filing status. Caution: In general, you can't change your filing status from married filing jointly to married filing separately after the return due date. ☐ Married filing jointly ☐ Married filing separately (MFS) ☐ Head of household (HOH) ☐ Qualifying widow(er) (QW) If you checked the MFS box, enter the name of your spouse. If you checked the HOH or QW box, enter the child's name if the qualifying person is a child but not your dependent A. Original amount B. Net change -Enter on lines 1 through 23, columns A through C, the amounts for the return C. Correct reported or as amount of increase year entered above. previously adjusted or (decrease) amount Use Part III on page 2 to explain any changes. (see instructions) explain in Part III **Income and Deductions** Adjusted gross income. If a net operating loss (NOL) carryback is 1 14,836. 14,836. 2 Itemized deductions or standard deduction 2 12,950. 0. 12,950. 3 Subtract line 2 from line 1 . . . . . 3 1,886. 0. 1,886. 4a Reserved for future use . . 4a Qualified business income deduction . 4b 0. 0. 5 Taxable income. Subtract line 4b from line 3. If the result is zero or less, 1,886. 5 0. 1,886. Tax Liability Tax. Enter method(s) used to figure tax (see instructions): 0. 6 189. 189. 7 Nonrefundable credits. If a general business credit carryback is 7 0. 0. 8 Subtract line 7 from line 6. If the result is zero or less, enter -0-8 189. 0. 189. 9 9 10 Other taxes . . . . . 10 0. 0. 0. 11 Total tax. Add lines 8 and 10 11 189. 0. 189. **Payments** 12 Federal income tax withheld and excess social security and tier 1 RRTA tax withheld. (If changing, see instructions.) . . . . . . . . . . . 12 591. 0. 591. 13 Estimated tax payments, including amount applied from prior year's return 13 0. 0. 14 14 0. 0. Refundable credits from: Schedule 8812 Form(s) 2439 4136 15 ☐ 8885 ☐ 8962 or ☐ other (specify): 15 0. Total amount paid with request for extension of time to file, tax paid with original return, and additional 16 16 17 Total payments. Add lines 12 through 15, column C, and line 16 . . . . . 17 591. **Refund or Amount You Owe** 18 402. 18 Overpayment, if any, as shown on original return or as previously adjusted by the IRS 19 Subtract line 18 from line 17. (If less than zero, see instructions.) . . . . . . . . . 19 189. 20 20 Amount you owe. If line 11, column C, is more than line 19, enter the difference . . . 21 If line 11, column C, is less than line 19, enter the difference. This is the amount **overpaid** on this return 21 22 Amount of line 21 you want **refunded to you** . . . . . . . . . . . . . . . . 0. 23 Amount of line 21 you want applied to your (enter year): estimated tax

Form 1040-X (Rev. 7-2021) Page 2 Part I **Dependents** A. Original number Complete this part to change any information relating to your dependents. B. Net change -C. Correct of dependents This would include a change in the number of dependents. amount of increase reported or as number or (decrease) Enter the information for the return year entered at the top of page 1. previously adjusted 24 24 Your dependent children who lived with you 25 25 0 0 Your dependent children who didn't live with you due to divorce or 26 separation 26 0 0 27 Other dependents . . . . . . . . 27 0 0 28 28 Reserved for future use 29 Reserved for future use . . . . . . 29 List ALL dependents (children and others) claimed on this amended return. 30 Dependents (see instructions): (d) ✓ if qualifies for (see instructions): (b) Social security (c) Relationship Credit for other If more number to you Child tax credit (a) First name Last name dependents than four dependents, see instructions and check here ► Presidential Election Campaign Fund (for the return year entered at the top of page 1) Part II Checking below won't increase your tax or reduce your refund. Check here if you didn't previously want \$3 to go to the fund, but now do. ☐ Check here if this is a joint return and your spouse did not previously want \$3 to go to the fund, but now does. Explanation of Changes. In the space provided below, tell us why you are filing Form 1040-X. ▶ Attach any supporting documents and new or changed forms and schedules. I RAKESH KAMMA HOLDING F1 VISA FOR THE TAX YEAR 2022, AS PER IRS I AM LIABLE TO FILE 1040NR WITH THE FEDERAL TAX DEPARTMENT OF REVENUE FOR THE TAX YEAR 2022. ERRONEOUSLY I FILED FROM 1040 WITH FEDERAL TAX DEPARTMENT OF REVENUE FOR THE TAX YEAR 2022. NOW THROUGH THIS FORM 1040X (AMENDMENT) I AM AMENDING THE TAX RETURN FOR THE TAX YEAR 2022 FROM 1040 TO 1040NR.

Sign Here	Remember to keep a copy of this form for your records.  Under penalties of perjury, I declare that I have filed an original return, and that I have examined this amended return, including accompanying schedules and statements, and to the best of my knowledge and belief, this amended return is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information about which the preparer has any knowledge.					
	Your signature				FUDENT our occupation	
	Spouse's signature. If a joint return, <b>both</b> must sign.		Date Spo		ouse's occupation	
Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature		Date	Check if	PTIN
	SYAM PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA RAM SAGAR GUP		TA TALLAM	12/31/2023	self-employed	P02082703
	Firm's name ► GLOBAL TAXES LLC				Firm's EIN ► 84-3171965	
	Firm's address ► 245 ROONEY CT E BRUNSWICK NJ 08816				Phone no. (678) 965-9522	