



2022 Form M1, Individual Income Tax

Do not use staples on anything you submit.

SHASHANK VINALA 870554288 07041991
 Your First Name and Initial Last Name Your Social Security Number Your Date of Birth (MM/DD/YYYY)

If a Joint Return, Spouse's First Name and Initial _____ Spouse's Last Name _____
 Spouse's Social Security Number _____ Spouse's Date of Birth _____

8680 MARIGOLD CIRCLE _____
 Current Home Address Check if Address is: New Foreign

EDEN PRAIRIE _____ MN _____ 55344 _____
 City State ZIP Code

2022 Federal Filing Status (place an X in one box):

(1) Single (2) Married Filing Jointly (3) Married Filing Separately (4) Head of Household (5) Qualifying Widow(er)

Spouse Name _____
 Spouse SSN _____

Dependents (see instructions):

Dependent 1 First Name _____	Dependent 1 Last Name _____	Dependent 1 SSN _____	Dependent 1 Relationship to You _____
Dependent 2 First Name _____	Dependent 2 Last Name _____	Dependent 2 SSN _____	Dependent 2 Relationship to You _____
Dependent 3 First Name _____	Dependent 3 Last Name _____	Dependent 3 SSN _____	Dependent 3 Relationship to You _____

State Elections Campaign Fund

To grant \$5 to this fund, enter the code for the party of your choice. It will help candidates for state offices pay campaign expenses. This will not increase your tax or reduce your refund.

Political Party Code Numbers: Democratic/Farmer-Labor . . . 12 Grassroots/Legalize Cannabis 14 Legal Marijuana Now 17
 Republican 11 Independence 13 Libertarian 16 General Campaign Fund 99

Your Code _____ Spouse's Code _____

From Your Federal Return (see instructions)

<u>87513</u>	<u>0</u>	<u>0</u>	<u>74563</u>
A. Wages, salaries, tips, etc.	B. IRA, pensions, and annuities	C. Unemployment	D. Federal taxable income

1	Federal adjusted gross income (from line 11 of federal Form 1040 and 1040-SR)	1 ■	<u>87513</u>
2	Additions to income from line 10 of Schedule M1M and line 9 of Schedule M1MB (see instructions)	2 ■	_____
3	Add lines 1 and 2.	3	<u>87513</u>
4	Itemized deductions (from Schedule M1SA) or your standard deduction (see instructions)	4 ■	<u>12900</u>
5	Exemptions (determine from instructions)	5 ■	_____
6	State income tax refund from line 1 of federal Schedule 1	6 ■	_____
7	Subtractions from line 32 of Schedule M1M and line 21 of Schedule M1MB (see instructions)	7 ■	_____
8	Total subtractions. Add lines 4 through 7	8	<u>12900</u>
9	Minnesota taxable income. Subtract line 8 from line 3. If zero or less, leave blank.	9	<u>74613</u>
10	Tax from the table or schedules in the Form M1 instructions	10	<u>4669</u>



11 Alternative minimum tax (enclose Schedule M1MT) ... 11
12 Add lines 10 and 11 ... 12 4669
13 Full-year residents: Enter the amount from line 12 on line 13. Skip lines 13a and 13b. Part-year residents and nonresidents: From Schedule M1NR, enter the amount from line 32 on line 13, from line 28 on line 13a, and from line 29 on line 13b (enclose Schedule M1NR) ... 13 4669
13a 0 13b 0
14 Other taxes, such as recapture amounts and the tax on lump-sum distributions (check appropriate boxes)
(a) Schedule M1HOME (b) Schedule M1529 (c) Schedule M1LS ... 14
15 Tax before credits. Add lines 13 and 14 ... 15 4669
16 Amount from line 19 of Schedule M1C, Nonrefundable Credits (enclose Schedule M1C) ... 16 748
17 Subtract line 16 from line 15 (if result is zero or less, leave blank) ... 17 3921
18 Nongame Wildlife Fund contribution (see instructions) This will reduce your refund or increase the amount you owe ... 18
19 Add lines 17 and 18 ... 19 3921
20 Minnesota income tax withheld. Complete and enclose Schedule M1W to report Minnesota withholding from Forms W-2, 1099, and W-2G and Schedules KPI, KS, and KF ... 20 4412
21 Minnesota estimated tax and extension payments made for 2022 ... 21
22 Amount from line 12 of Schedule M1REF, Refundable Credits (see instructions; enclose Schedule M1REF) ... 22
23 Total payments. Add lines 20 through 22 ... 23 4412
24 REFUND. If line 23 is more than line 19, subtract line 19 from line 23 (see instructions). For direct deposit, complete line 25 ... 24 491
25 Direct deposit of your refund (you must use an account not associated with a foreign bank):
Checking Savings Routing Number 011900254 Account Number 003852289665
26 AMOUNT YOU OWE. If line 19 is more than line 23, subtract line 23 from line 19 (see instructions) ... 26
27 Penalty amount from Schedule M15 (see instructions). Also subtract this amount from line 24 or add it to line 26 (enclose Schedule M15) ... 27
IF YOU PAY ESTIMATED TAX and want part of your refund credited to estimated tax, complete lines 28 and 29.
28 Amount from line 24 you want sent to you ... 28
29 Amount from line 24 you want applied to your 2023 estimated tax ... 29

Your Signature
2039162841
Daytime Phone
RVSSMANIKUMARAPPANA
Paid Preparer's Signature
6467277157
Preparer's Daytime Phone

Spouse's Signature (If Filing Jointly) Date (MM/DD/YYYY)
SHASHANK . SACRED@GMAIL . COM
Email Address
01302023
Date (MM/DD/YYYY)
P02090332
PTIN or VITA/TCE # (required)
kumar@gtaxfile.com
Preparer's Email Address

I do not want my paid preparer to file my return electronically.

I authorize the Minnesota Department of Revenue to discuss this tax return with the preparer or the third-party designee indicated on my federal return.

Include a copy of your 2022 federal return and schedules.

Mail to: Minnesota Individual Income Tax, Mail Station 0010, 600 N. Robert St., St. Paul, MN 55145-0010



2022 Schedule M1C, Nonrefundable Credits

Complete this schedule to determine line 16 of Form M1. Include this schedule when filing your return.

SHASHANK
Your First Name and Initial

VINALA
Your Last Name

870554288
Your Social Security Number

- 1 Marriage Credit for joint return when both spouses have taxable earned income or taxable retirement income *(enclose Schedule M1MA)* **1** ■ _____
- 2 Credit for long-term care insurance premiums paid *(enclose Schedule M1LTI)* **2** ■ _____
- 3 Credit for taxes paid to another state *(enclose Schedule(s) M1CR and M1RCR)* **3** ■ _____ 748
- 4 Credit for Past Military Service *(see instructions)* **4** ■ _____
- 5 Employer Transit Pass Credit *(enclose Schedule ETP)* **5** ■ _____
- 6 SEED Capital Investment Credit *(see instructions; enclose certification)* **6** ■ _____
- 7 Education Savings Account Contribution Credit *(enclose Schedule M1529)* **7** ■ _____
- 8 Credit for Attaining Master’s Degree in Teacher’s Licensure Field *(enclose Schedule M1CMD)* **8** ■ _____
- 9 Student Loan Credit *(enclose Schedule M1SLC)* **9** ■ _____
- 10 Beginning Farmer Management Credit **10** ■ _____
Enter the certificate number from the certificate you received from the Rural Finance Authority:
BF 22 - _____
- 11 Film Production Credit **11** ■ _____
Enter the credit certificate number: TAXC - _____
- 12 Tax Credit for Owners of Agricultural Assets **12** ■ _____
Enter the certificate number from the certificate you received from the Rural Finance Authority:
AO 22 - _____
AO 22 - _____
AO 22 - _____
- 13 Credit for increasing research activities *(enclose Schedule KPI, KS, or KF)* **13** ■ _____
- 14 Carryforward of prior year Beginning Farmer Management Credits *(see instructions)* **14** ■ _____
BF ____ - _____
BF ____ - _____
- 15 Carryforward of prior year Owners of Agricultural Assets Credits *(see instructions)* **15** ■ _____
AO ____ - _____
AO ____ - _____
- 16 Carryforward of prior year Credit for Increasing Research Activities **16** ■ _____
List the years the credits were reported to you on Schedule KPI, KS, or KF:

- 17 Alternative Minimum Tax Credit *(enclose Schedule M1MTC)* **17** ■ _____
- 18 This line intentionally left blank **18** ■ _____
- 19 Add lines 1 through 18. Enter total here and on line 16 of Form M1. **19** _____ 748

You must include this schedule with your Form M1.





2022 Schedule M1CR, Credit for Income Tax Paid to Another State

SHASHANK VINALA
Your First Name and Initial

Last Name

870554288
Social Security Number

Connecticut
State or Canadian Province or Territory That Taxed Income Also Taxed By Minnesota

You must complete a separate Schedule M1CR for each state or province to which you paid taxes. To report tax paid to Wisconsin, use Schedule M1RCR, Credit for Tax Paid to Wisconsin.

To be eligible for this credit, all of these must apply:

- You were a full- or part-year Minnesota resident in 2022
- You paid 2022 state income tax to **both Minnesota and another state or Canadian province on the same income**
- You were a Minnesota resident when both states taxed the same income

Round amounts to the nearest whole dollar.

Full-Year Residents and Part-Year Residents

1	Amount of adjusted gross income you received while a Minnesota resident that was taxed by the other state (<i>see instructions</i>)	1	<u>14533</u>
2	Your adjusted gross income adjusted by U.S. bond interest and bonds of another state (<i>determine from instructions</i>). Part-year residents: See instructions	2	<u>87513</u>
3	Divide line 1 by line 2. Enter the result as a decimal (<i>carry to five decimal places; if line 1 is more than line 2, enter 1.00000</i>)	3	<u>0.16607</u>
4	Complete the lines below to determine your Minnesota tax after credits.		
	a Tax from line 13 of Form M1.	4 a	<u>4669</u>
	b Add lines 1-2 and 4-9 of Schedule M1C	4 b	<u> </u>
	Subtract line 4b from line 4a. If the result is zero or less, STOP HERE . You do not qualify for this credit	4	<u>4669</u>
5	Multiply line 4 by line 3	5	<u>775</u>
6	From the other state's income tax return, enter the tax amount before you subtract any tax withheld or estimated tax payments (<i>see instructions</i>). If you paid taxes to a Canadian province or territory, see instructions	6 ■	<u>748</u>

Full-Year Residents

7	Amount from line 5 or line 6, whichever is less. Enter here and include on line 3 of Schedule M1C	7	<u>748</u>
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Part-Year Residents

8	From the other state's income tax return, enter the amount of income taxed by that state before subtracting itemized or standard deductions	8	<u> </u>
9	Divide line 1 by line 8. Enter the result as a decimal (<i>carry to five decimal places; if line 1 is more than line 8, enter 1.00000</i>)	9	<u> </u>
10	Multiply line 6 by line 9	10	<u> </u>
11	Amount from line 5 or line 10, whichever is less. Enter here and include on line 3 of Schedule M1C	11	<u> </u>

You must include this schedule with your Form M1.



2022 Schedule M1W, Minnesota Income Tax Withheld

Complete this schedule to report Minnesota income tax withheld. Include this schedule when you file your return.

SHASHANK
Your First Name and Initial

VINALA
Last Name

870554288
Your Social Security Number

If a Joint Return, Spouse's First Name and Initial

Spouse's Last Name

Spouse's Social Security Number

If you received a federal Form W-2, 1099, W-2G, 1042-S, or Minnesota Schedule KPI, KS, or KF showing Minnesota income tax withheld, complete this schedule to determine line 20 of Form M1. List only the forms that report Minnesota income tax withheld. Round dollar amounts to the nearest whole dollar. You must include this schedule when you file your return. **DO NOT** send in your Forms W-2, 1099, or W-2G; keep them with your tax records. All instructions are included on this schedule.

1 Minnesota wages and Minnesota tax withheld on Forms W-2, other than from Forms W-2G. If you have more than five Forms W-2, complete line 5 on the back.

A	B—Box 13	C—Box 15	D—Box 16	E—Box 17
If the Form W-2 is for: • you, enter 1 • spouse, enter 2	If Retirement Plan box is checked, mark an X below.	Employer's seven-digit Minnesota Tax ID Number	State wages, tips, etc. <i>(round to nearest whole dollar)</i>	Minnesota tax withheld <i>(round to nearest whole dollar)</i>
a1 <u>1</u>	b1 <input type="checkbox"/>	c1 MN <u>7909544</u>	d1 <u>80247</u>	e1 <u>4412</u>
a2 _____	b2 <input type="checkbox"/>	c2 MN _____	d2 _____	e2 _____
a3 _____	b3 <input type="checkbox"/>	c3 MN _____	d3 _____	e3 _____
a4 _____	b4 <input type="checkbox"/>	c4 MN _____	d4 _____	e4 _____
a5 _____	b5 <input type="checkbox"/>	c5 MN _____	d5 _____	e5 _____

Subtotal for additional Forms W-2 (from line 5 on page 2) _____

Total Minnesota tax withheld on all Forms W-2 (add amounts in line 1, column E) 1 ■ 4412

2 Minnesota tax withheld on Forms 1099, W-2G, and 1042-S. If you have more than four forms, complete line 6 on the back.

A	B	C	D
If the Form 1099, W-2G, or 1042-S is for: • you, enter 1 • spouse, enter 2	Payer's seven-digit Minnesota Tax ID Number (if unknown, contact the payer)	Income amount (see the table on the back for amounts to include)	Minnesota tax withheld <i>(round to nearest whole dollar)</i>
a1 _____	b1 MN _____	c1 _____	d1 _____
a2 _____	b2 MN _____	c2 _____	d2 _____
a3 _____	b3 MN _____	c3 _____	d3 _____
a4 _____	b4 MN _____	c4 _____	d4 _____

Subtotal for additional 1099, W-2G, and 1042-S (from line 6 on page 2) _____

Total Minnesota tax withheld on all 1099, W-2G, and 1042-S (add amounts in line 2, column D) 2 ■ _____

3 Total Minnesota tax withheld by partnerships, S corporations, and fiduciaries (from line 7 on page 2) 3 ■ _____

4 Total. Add the Minnesota tax withheld on lines 1, 2, and 3.
Enter the total here and on line 20 of Form M1 **4 ■ 4412**

**Include this schedule with your Form M1.
If required, include Schedules KPI, KS, and KF.**

Filing Status [X] Single [] Married filing jointly [] Married filing separately (MFS) [] Head of household (HOH) [] Qualifying surviving spouse (QSS)
Check only one box. If you checked the MFS box, enter the name of your spouse. If you checked the HOH or QSS box, enter the child's name if the qualifying person is a child but not your dependent:

Form fields for personal information: Your first name and middle initial (SHASHANK), Last name (VINALA), Your social security number (870-55-4288), Spouse's social security number, Home address (8680 MARIGOLD CIRCLE), City (EDEN PRAIRIE), State (MN), ZIP code (55344).

Digital Assets At any time during 2022, did you: (a) receive (as a reward, award, or payment for property or services); or (b) sell, exchange, gift, or otherwise dispose of a digital asset (or a financial interest in a digital asset)? (See instructions.) [] Yes [X] No

Standard Deduction Someone can claim: [] You as a dependent [] Your spouse as a dependent [] Spouse itemizes on a separate return or you were a dual-status alien

Age/Blindness You: [] Were born before January 2, 1958 [] Are blind Spouse: [] Was born before January 2, 1958 [] Is blind

Table for Dependents with columns: (1) First name, Last name, (2) Social security number, (3) Relationship to you, (4) Child tax credit, Credit for other dependents.

Main income table with rows 1a through 15. Includes sub-rows for tax-exempt interest, qualified dividends, IRA distributions, pensions, and social security benefits. Total income is 87,513. Adjusted gross income is 87,513. Standard deduction is 12,950. Taxable income is 74,563.

Tax and Credits	16	Tax (see instructions). Check if any from Form(s): 1 <input type="checkbox"/> 8814 2 <input type="checkbox"/> 4972 3 <input type="checkbox"/> _____	16	12,024.
	17	Amount from Schedule 2, line 3	17	
	18	Add lines 16 and 17	18	12,024.
	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	12,024.
	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	12,024.

Payments	25	Federal income tax withheld from:		
	a	Form(s) W-2	25a	11,648.
	b	Form(s) 1099	25b	
	c	Other forms (see instructions)	25c	
	d	Add lines 25a through 25c	25d	11,648.
	26	2022 estimated tax payments and amount applied from 2021 return	26	
	27	Earned income credit (EIC)	27	
	28	Additional child tax credit from Schedule 8812	28	
	29	American opportunity credit from Form 8863, line 8	29	
	30	Reserved for future use	30	
	31	Amount from Schedule 3, line 15	31	
	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	11,648.

Refund	34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid	34																		
	35a	Amount of line 34 you want refunded to you . If Form 8888 is attached, check here <input type="checkbox"/>	35a																		
	b	Routing number <table border="1"> <tr> <td>X</td><td>X</td><td>X</td><td>X</td><td>X</td><td>X</td><td>X</td><td>X</td><td>X</td><td>X</td> </tr> </table> c Type: <input type="checkbox"/> Checking <input type="checkbox"/> Savings	X	X	X	X	X	X	X	X	X	X									
	X	X	X	X	X	X	X	X	X	X											
d	Account number <table border="1"> <tr> <td>X</td><td>X</td><td>X</td><td>X</td><td>X</td><td>X</td><td>X</td><td>X</td><td>X</td><td>X</td><td>X</td><td>X</td><td>X</td><td>X</td><td>X</td><td>X</td><td>X</td><td>X</td> </tr> </table>	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X		
X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X				
	36	Amount of line 34 you want applied to your 2023 estimated tax	36																		

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	376.
	38	Estimated tax penalty (see instructions)	38	

Third Party Designee Do you want to allow another person to discuss this return with the IRS? See instructions **Yes**. Complete below. **No**

Designee's name _____ Phone no. _____ Personal identification number (PIN)

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Sign Here 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 occupation SOFTWARE ENGINEER	If the IRS sent you an Identity Protection PIN, enter it here (see inst.) <table border="1"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table>						
Spouse's signature. If a joint return, both must sign. _____	Date _____	Spouse's occupation _____	If the IRS sent your spouse an Identity Protection PIN, enter it here (see inst.) <table border="1"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table>						
Phone no. (203) 916-2841	Email address SHASHANK.SACRED@GMAIL.COM								

Paid Preparer Use Only

Preparer's name RVSSMANIKUMARAPPANA	Preparer's signature RVSSMANIKUMARAPPANA	Date 01/30/2023	PTIN P02090332	Check if: <input type="checkbox"/> Self-employed
Firm's name GLOBAL TAXES LLC	Firm's address 245 ROONEY CT E BRUNSWICK NJ 08816		Phone no. (646) 727-7157	Firm's EIN 30-1017196