



2022 Form M1, Individual Income Tax Do not use staples on anything you submit.

NANDA VENKATA SAI Your First Name and Initial		BOYAPATI Last Name	741848747 Your Social Security Number	10281992 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 Numl	per Spouse's Date of Birth	
	SUTTON DR Home Address		Check if Address is:	New Foreign	
EDE1	N PRAIRIE		MN State	55347 ZIP Code	
2022	Federal Filing Status (place	ce an X in one box):			
X (1) Single (2) Married Filing Jointly	(3) Married Filing Separately Spouse Name	(4) Head of Househ	old (5) Qualifying Widow(er)	
Depe	endents (see instructions)	Spouse SSN			
Depend	lent 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	
Depend	lent 3 First Name	Dependent 3 Last Name	Dependent 3 SSN	Dependent 3 Relationship to You	
Your Co	Republi		armer-Labor		
A. Wag		, pensions, and annuities		Federal taxable income	
1			nd 1040-SR)		
3	Add lines 1 and 2			3 50055	
4			tion (see instructions)	10000	
5	Exemptions (determine from instr	ructions)		5 🔳	
6	State income tax refund from line	1 of federal Schedule 1		6■	
7	Subtractions from line 32 of Schee	dule M1M and line 21 of Schedule	M1MB (see instructions)	7 🔳	
8	Total subtractions. Add lines 4 thr	ough 7		812900	
9	Minnesota taxable income. Subtr	ract line 8 from line 3. If zero or les	s, leave blank	937155	
10	Tax from the table or schedules in	the Form M1 instructions		102119	

2022 M1, page 2



11	Alternative minimum tax (enclose Schedule M1MT)		.11 ■				
12 13	Full-year residents: Enter the amount from line 12 on line 13.	. Skip lines 13a and 13b.	.12	2119			
	Part-year residents and nonresidents: From Schedule M1NR, e line 13, from line 28 on line 13a, and from line 29 on line 13b	13	2119				
	13a ■0 13b ■)					
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	2119			
16	Amount from line 19 of Schedule M1C, Nonrefundable Credits	16 ■					
17	Subtract line 16 from line 15 (if result is zero or less, leave black	nk)	17	2119			
18	Nongame Wildlife Fund contribution (see instructions) This will reduce your refund or increase the amount you owe		18 ■				
	This will reduce your return of increase the amount you owe		10				
19	Add lines 17 and 18		19	2119			
20	Minnesota income tax withheld. Complete and enclose Sched		20 =	3239			
	Minnesota withholding from Forms W-2, 1099, and W-2G and S	criedules KPI, KS, and KF	20				
21	1 Minnesota estimated tax and extension payments made for 2022						
22	Amount from line 12 of Schedule M1REF, Refundable Credits (22 ■					
23	Total payments. Add lines 20 through 22	23	3239				
24	REFUND. If line 23 is more than line 19, subtract line 19 from For direct deposit, complete line 25	24 ■	1120				
25	Direct deposit of your refund (you must use an account not a	24					
	Checking Savings Routing Number	Account Number					
26	AMOUNT YOU OWE. If line 19 is more than line 23, subtract I	ine 23 from line 19 (see instructions)	26 ■				
27	Penalty amount from Schedule M15 (see instructions). Also su						
IE V	this amount from line 24 or add it to line 26 (enclose Schedule M15)						
	F YOU PAY ESTIMATED TAX and want part of your refund credited to estimated tax, complete lines 28 and 29. 8 Amount from line 24 you want sent to you						
	Amount from line 24 you want applied to your 2023 estimate ayer(s): I declare that this return is correct and complete to the		29 ■				
iaxp	ayer(s). Tueclure that this retain is correct and complete to the	best of my knowledge and belief.					
Your	Signature	Spouse's Signature (If Filing Jointly)	Dat	e (MM/DD/YYYY)			
	22985815	RAMESHC214@GMAIL.COM		- (,			
Dayt	ime Phone	Email Address					
	AM PRIYA RAM SAGAR GUPTA TALLAM Preparer's Signature	03012023 Date (MM/DD/YYYY)		12082703 N or VITA/TCE # (required)			
	89659522	SYAM@GTAXFILE.COM		Tee ii (required)			
	arer's Daytime Phone	Preparer's Email Address					
	I do not want my paid preparer to file my return electronically.	I authorize the Minnesota Department of Revenue					
	Include a convint your 2022 federal return and schedules	with the preparer or the third-party designee indic	ated on my	r federal return.			

Mail to: Minnesota Individual Income Tax, Mail Station 0010, 600 N. Robert St., St. Paul, MN 55145-0010 1031 REV 02/17/23 PRO





2022 Schedule M1W, Minnesota Income Tax Withheld

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

	ANDA VENKAT		BOYAPA	TI			7418487	
Υοι	ır First Name and Initia	ıl	Last Name			· ·	Your Social Sec	urity Number
If a	Joint Return, Spouse's F	irst Name and Initial	Spouse's Last	Name			Spouse's Social	Security Number
coi am	rou received a feder mplete this schedul nounts to the neare: 2G; keep them with	e to determine lin st whole dollar. Yo	e 20 of Form M1 u must include tl	. List only the form	ms that report Minr n you file your retur	nesota income ta	ax withheld.	Round dollar
	Minnesota wages an complete line 5 on t	nd Minnesota tax w				you have more th	nan five Form	s W-2,
	A	B—Box 13	C—Box 15		D—Box 16		E—Box 17	
	If the Form W-2 is for:	If Retirement Plan	Employer's sev	en-digit Minnesota	State wages, tips, e	etc.	Minnesota tax	withheld
	you, enter 1spouse, enter 2	box is checked, mark an X below.	Tax ID Number		(round to nearest v		(round to near	rest whole dollar)
	a1 <u>1 </u>	b1	c1 MN	5452889	d1 55	5485	21	3239
	a2	b2	c2 MN		d2		e2	
	a3	b3	c3 MN		d3		e3	
	a4	b4	c4 MN		d4		e4	
	a5	b5	c5 MN		d5_		e5	
	Subtotal for addition	nal Forms W-2 <i>(fror</i>	m line 5 on page 2	2)				
	Total Minnesota tax	withheld on all Fo	orms W-2 (add an	nounts in line 1, co	lumn E)	1■		3239
2	Minnesota tax withl	held on Forms 1099	9, W-2G, and 1042	2-S. If you have mo	re than four forms, o	complete line 6 o	n the back.	
	Α		В		c	•	D	
	If the Form 1099, W-2G	, or 1042-S is for:	Payer's seven-o	digit Minnesota Tax ID	Income amount (se	ee the table on	Minnesota	tax withheld
	• you, enter 1		Number (if unk	nown, contact the pay	ver) the back for amou	nts to include)	(round to ne	earest whole dollar)
	• spouse, enter 2							
	a1		b1 MN		c1	c	i1	
	a2		b2 MN		c2		12	
	a3		b3 MN		c3	ć	13	
								
	a4		24 10114	_	.4		14	
	Subtotal for addition	nal 1099, W-2G, an	d 1042-S (from lir	ne 6 on page 2)				
	Total Minnesota tax	withheld on all 10	099, W-2G, and 10	042-S (add amoun	ts in line 2, column D) 2 ■		
3	Total Minnesota tax	withheld by partr	nerships, S corpoi	ations, and fiducia	aries			
		•				3■		
4	Total. Add the Minn							2020
	Enter the total here	and on line 20 of F	orm M1			4 ■		3239