

For the year Jan. 1-Dec. 31, 2023, or other tax year

Check here if an amended return beginning _____, 2023 ending _____, 20____.

Note

DO NOT STAPLE

See page 5 before assembling return

Your legal last name THOTA	Legal first name PRAVEEN KUMAR	M.I.	Your social security number 421734404
If a joint return, spouse's legal last name THOTA	Spouse's legal first name SWATHI	M.I.	Spouse's social security number 729956161
Home address (number and street). If you have a PO Box, see page 12. 3018 FREEPORT DR		Apt. no.	Tax district Check below then fill in either the name of the city, village, or town and the county in which you lived at the end of 2023. <input checked="" type="checkbox"/> City <input type="checkbox"/> Village <input type="checkbox"/> Town City, village, or town MADISON County of DANE School district number See page 45 3269
City or post office CARY	State NC	Zip code 27519	
Filing status Check <input checked="" type="checkbox"/> below <input type="checkbox"/> Single <input checked="" type="checkbox"/> Married filing joint return <input type="checkbox"/> Married filing separate return. Fill in spouse's SSN above and full name here <input type="checkbox"/> Head of household, NOT married (see page 13). <input type="checkbox"/> Head of household, married (see page 13).			
		Legal last name	Legal first name
			M.I.
		If married, fill in spouse's SSN above and full name here	
			Special conditions <input type="checkbox"/> <input type="checkbox"/> Form 804 filed with return (see page 10)

Use **BLACK** Ink ● Print numbers like this → 0 1 2 3 4 5 6 7 8 9 Not like this → 0147 ● **NO COMMAS; NO CENTS**

1	Federal adjusted gross income from Form 1040, line 11	1	182486.00
2	Adjustments to federal adjusted gross income from <i>Schedule I</i> , line 3 (see page 13)	2	0.00
3	Add lines 1 and 2. This is your federal adjusted gross income for Wisconsin purposes	3	182486.00
	Form W-2 wages included in line 3	▶	203810.00
4	Total additions to income from Schedule AD, line 33. Include Schedule AD (see page 14)	4	6.00
5	Add lines 3 and 4	5	182492.00
6	Total subtractions from income from Schedule SB, line 50. Include Schedule SB (see page 14) Enter as a positive number	6	.00
7	Subtract line 6 from line 5. This is your Wisconsin income.	7	182492.00
8	Standard deduction. See table on page 35, OR ▼ If someone else can claim you (or your spouse) as a dependent, see page 15 and check here <input type="checkbox"/>	8	0.00
9	Subtract line 8 from line 7. If line 8 is larger than line 7, fill in 0	9	182492.00
10	Exemptions (Caution: See page 15)		
a	Fill in exemptions allowed <u>4</u> x \$700	10a	2800.00
b	Check if 65 or older <input type="checkbox"/> You + <input type="checkbox"/> Spouse = <u> </u> x \$250	10b	.00
c	Add lines 10a and 10b	10c	2800.00

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NO COMMAS; NO CENTS

11	Subtract line 10c from line 9. If line 10c is larger than line 9, fill in 0. This is taxable income . . .	11	<u>179692.00</u>
12	Tax (see table on page 38)	12	<u>9026.00</u>
13	Itemized deduction credit. Include Schedule 1, page 4	13	<u>.00</u>
14	Additional child and dependent care tax credit (see page 17)		
	Federal credit from Form 2441 \blacktriangleright <u>.00</u> x 50% =	14	<u>.00</u>
15	School property tax credit		
a	Rent paid in 2023 – heat included <u>.00</u> } Find credit from table page 19 .	15a	<u>300.00</u>
	Rent paid in 2023 – heat not included <u>10800.00</u> }		
b	Property taxes paid on home in 2023 <u>.00</u> Find credit from table page 20 .	15b	<u>.00</u>
16	Working families tax credit (see page 20)	16	<u>0.00</u>
17	Married couple credit. Include Schedule 2, page 4	17	<u>.00</u>
18	Nonrefundable credits from line 34 of Schedule CR	18	<u>.00</u>
19	Net income tax paid to another state. Include Schedule OS <u>NC</u>	19	<u>1702.00</u>
20	Add lines 13 through 19	20	<u>2002.00</u>
21	Subtract line 20 from line 12. If line 20 is larger than line 12, fill in 0. This is your net tax	21	<u>7024.00</u>
22	Sales and use tax due on internet, mail order, or other out-of-state purchases (see page 23) 22 <u>.00</u>		
	If you certify that no sales or use tax is due, check here \blacktriangleright <u>X</u>		
23	Donations (decreases refund or increases amount owed)		
a	Endangered resources <u>.00</u>	e	Military family relief <u>.00</u>
b	Cancer research <u>.00</u>	f	Second Harvest/Feeding Amer. <u>.00</u>
c	Veterans trust fund <u>.00</u>	g	Red Cross WI Disaster Relief <u>.00</u>
d	Multiple sclerosis <u>.00</u>	h	Special Olympics Wisconsin <u>.00</u>
	Total (add lines a through h) . . . \blacktriangleright	23i	<u>.00</u>
24	Penalties on IRAs, retirement plans, MSAs, etc. (see page 25) . . . <u>.00</u> x .33 =	24	<u>.00</u>
25	Other penalties (see page 25)	25	<u>.00</u>
26	Add lines 21, 22, 23i, 24, and 25	26	<u>7024.00</u>
27	Wisconsin tax withheld. Include withholding statements	27	<u>8763.00</u>
28	2023 estimated tax payments and amount applied from 2022 return. . .	28	<u>.00</u>
29	Earned income credit. Number of qualifying children \blacktriangleright <u> </u>		
	Federal credit. <u>.00</u> x <u> </u> % =	29	<u>.00</u>
30	Farmland preservation credit. a Schedule FC, line 17.	30a	<u>.00</u>
	b Schedule FC-A, line 13	30b	<u>.00</u>
31	Repayment credit (see page 27)	31	<u>.00</u>




Name(s) shown on Form 1 PRAVEEN KUMAR & SWATHI THOTA	Your social security number 421734404
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		NO COMMAS; NO CENTS
32	Homestead credit. Include Schedule H or H-EZ	32 _____ .00
33	Eligible veterans and surviving spouses property tax credit . .	33 _____ .00
34	Refundable credits from Schedule CR, line 40. Include Schedule CR	34 _____ .00
35	AMENDED RETURN ONLY—Amounts previously paid (see page 31)	35 _____ .00
36	Add lines 27 through 35	36 _____ 8763.00
37	AMENDED RETURN ONLY—Amounts previously refunded (see page 31)	37 _____ .00
38	Subtract line 37 from line 36	38 _____ 8763.00
39	If line 38 is larger than line 26, subtract line 26 from line 38. This is the AMOUNT YOU OVERPAID	39 _____ 1739.00
40	Amount of line 39 you want REFUNDED TO YOU	40 _____ 1739.00
41	Amount of line 39 you want APPLIED TO YOUR 2024 ESTIMATED TAX	41 _____ 0.00
42	If line 38 is smaller than line 26, subtract line 38 from line 26. This is the AMOUNT YOU UNDERPAID	42 _____ .00
43	Underpayment interest. Fill in exception code-See Sch. U _____	43 _____ .00
44	Add lines 42 and 43. This is the AMOUNT YOU OWE . Paper clip payment to front of return	44 _____ .00
45	Interest (see page 34)	45 _____ .00

Third Party Designee Do you want to allow another person to discuss this return with the department (see page 34)? **Yes** Complete the following. **No**

Designee's name ▶	Phone no. ▶	Personal identification number (PIN) ▶	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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 **Paper clip copies of your federal income tax return and schedules to this return. Assemble your return (pages 1-4) and withholding statements in the order listed on page 5.**

Sign here
 ▼ Under penalties of law, I declare that this return and all attachments are true, correct, and complete to the best of my knowledge and belief.

Your signature	Date	Daytime Phone	Wisconsin Identity Protection PIN (7 characters)
			9787604137
Spouse's signature (if filing jointly, BOTH must sign)	Date	Daytime Phone	Wisconsin Identity Protection PIN (7 characters)

I-010ai **Caution:** Only enter a Wisconsin Identity Protection PIN if you received one from the department (see page 34).

Mail your return to: Wisconsin Department of Revenue
 If tax due.....PO Box 268, Madison WI 53790-0001
 If refund or no tax due.....PO Box 59, Madison WI 53785-0001
 If homestead credit claimed.....PO Box 34, Madison WI 53786-0001

Do Not Submit Photocopies



Schedule **OS**

Wisconsin
Department of Revenue

**Credit for Net Tax Paid
to Another State**

Attach to your Wisconsin Form 1, 1NPR, or 2

2023

Name(s) shown on Form 1, 1NPR, or 2

Identifying number

PRAVEEN KUMAR & SWATHI THOTA

421-73-4404

To be eligible for this credit, you must have been a full-year or part-year Wisconsin resident in 2023 and have paid 2023 state income tax **on the same income** to Wisconsin and another state.

**Be sure to include a copy of your
tax return from the other state(s).**

NO COMMAS
NO CENTS



		State 1		State 2	
		N	C		
PART I – Income From Other State					
	Postal abbr. →				
<u>1</u>	Wages, salaries, tips, etc	1	41032.00		.00
<u>2</u>	Business income / loss	2	.00		.00
<u>3</u>	Capital gain / loss	3	0.00		.00
<u>4</u>	Other gains / losses	4	.00		.00
<u>5</u>	IRA distributions, pensions, and annuities	5	0.00		.00
<u>6</u>	Rental real estate, royalties, partnerships, S corporations, trusts, etc	6	0.00		.00
<u>7</u>	Farm income / loss	7	.00		.00
<u>8</u>	Unemployment compensation	8	.00		.00
<u>9</u>	Social security benefits	9	.00		.00
<u>10</u>	Other income _____	10	.00		.00
<u>11</u>	Add lines 1 through 10 in each column	11	41032.00		.00
Adjustments to Income					
<u>12</u>	Deductible part of self-employment tax	12	.00		.00
<u>13</u>	Self-employed SEP, SIMPLE, and qualified plans	13	.00		.00
<u>14</u>	Self-employed health insurance deduction	14	.00		.00
<u>15</u>	IRA deduction	15	.00		.00
<u>16</u>	Other adjustments to income _____	16	.00		.00
<u>17</u>	Add lines 12 through 16 in each column	17	.00		.00
<u>18</u>	Total income taxed by other state – subtract line 17 from line 11	18	41032.00		.00
PART II – Calculation of Credit (Individual, Estate, or Trust Income Tax)					
<u>19</u>	Income taxable to both Wisconsin and other state (see instructions)	19	41032.00		.00
<u>20</u>	Total income taxed by the other state (see instructions)	20	41032.00		.00
<u>21</u>	Divide line 19 by line 20. Carry the decimal to four places and fill in on line 21. If line 20 is less than line 19, enter 1.0000	21	1 . 0 0 0 0		
<u>22</u>	From the income tax return of the other state, fill in the net tax amount after subtracting all nonrefundable and refundable credits (see instructions)	22	1702.00		.00
<u>23</u>	Multiply line 21 by line 22. Round the result to the nearest dollar. If tax was paid to another state and passed through to you by a tax-option (S) corpora- tion, limited liability company, or partnership, go on to Part III. Otherwise, skip lines 25 through 29 and go on to Part IV. If claiming a credit for net tax paid to Minnesota, Iowa, Illinois, or Michigan, skip lines 30 through 34 and fill in the amount from line 23 on line 35	23	1702.00		.00

Name(s) shown on Form 1, 1NPR, or 2 PRAVEEN KUMAR & SWATHI THOTA	Identifying number 421-73-4404
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NO COMMAS; NO CENTS

PART III – Calculation of Credit (Shareholders, Partners, and Members)

Caution: See Instructions

	State 1	State 2
24 Postal abbreviation for state to which tax was paid 24	<u> N </u> <u> C </u>	<u> — </u> <u> — </u>
25 Income taxable to both Wisconsin and other state (see instructions) 25	0.00	.00
26 Total income taxed by the other state (see instructions) 26	0.00	.00
27 Divide line 25 by line 26. Carry the decimal to four places and fill in on line 27. If line 26 is less than line 25, enter 1.0000 27	— — — —	— — — —
28 From the income tax return of the other state, fill in the net tax amount after subtracting all nonrefundable and refundable credits (see instructions) 28	0.00	.00
29 Multiply line 27 by line 28. Round the result to the nearest dollar. If claiming a credit for net tax paid to Minnesota, Iowa, Illinois, or Michigan, skip lines 30 through 34 and fill in the amount from line 29 on line 36 29	.00	.00

PART IV - Credit Allowed

30 Income taxable to both Wisconsin and other state (see instructions) 30	41032.00	.00
31 Wisconsin income from Form 1, line 7, Form 1NPR, line 30, or Form 2, see instructions 31	182492.00	.00
32 Divide line 30 by line 31. Carry the decimal to four places and fill in on line 32. If line 31 is less than line 30, fill in 1.0000 32	0 . 2 2 4 8	— — — —
33 Fill in the Wisconsin net income tax from: • Form 1, line 12, less the amounts on lines 13 through 18 • Form 1NPR, line 46, less the amounts on lines 47 through 49 • Form 2, line 6c, less the amount on line 7 33	8726.00	.00
34 Multiply line 32 by line 33. Round the result to the nearest dollar 34	1962.00	.00
35 Fill in the amount from line 23 35	1702.00	.00
36 Fill in the amount from line 29 36	.00	.00
37 Add lines 35 and 36 37	1702.00	.00
38 Fill in the smaller of line 34 or line 37. If claiming a credit for net tax paid to Minnesota, Iowa, Illinois, or Michigan, fill in the amount from line 37 38	1702.00	.00
39 Add the amounts in each column of line 38. Fill in the total here 39		1702.00
40 If you have tax paid to more than 2 states, fill in the amount from line 39 of any additional Schedules OS 40		.00
41 Add lines 39 and 40. This is your credit for tax paid to another state (see instructions) 41		1702.00



Name PRAVEEN KUMAR & SWATHI THOTA	Social Security Number 421734404
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See the instructions for additional information on the additions listed below.

Additions to Income

1 State and municipal interest (see page 1)	1	<u>6.00</u>
2 Capital gain/loss addition (see page 2)	2	<u>.00</u>
3 Nonqualified distributions from Edvest and Tomorrow’s Scholar college savings account	3	<u>.00</u>
4 Nonqualified distributions from ABLE accounts	4	<u>.00</u>
5 Federal net operating loss deduction	5	<u>.00</u>
6 Income (lump-sum distributions) reported on federal Form 4972	6	<u>.00</u>
7 Excess distribution from a passive foreign investment company	7	<u>.00</u>
8 Expenses paid to or incurred with related entities	8	<u>.00</u>
9 Expenses for moving business outside of Wisconsin or the United States	9	<u>.00</u>
10 Differences in federal and Wisconsin basis of assets	10	<u>.00</u>
11 Reserved for future use	11	<u>.00</u>
12 Differences in federal and Wisconsin reporting of marital property (community) income	12	<u>.00</u>
13 Farmland preservation credit	13	<u>.00</u>
14 Development zones credits	14	<u>.00</u>
15 Enterprise zone jobs credit	15	<u>.00</u>
16 Reserved for future use	16	<u>.00</u>
17 Economic development tax credit	17	<u>.00</u>
18 Jobs tax credit	18	<u>.00</u>
19 Capital investment credit	19	<u>.00</u>
20 Community rehabilitation program credit	20	<u>.00</u>
21 Research credits	21	<u>.00</u>
22 Manufacturing and agriculture credit (amount computed for 2022 - see instructions)	22	<u>.00</u>
23 Business development credit	23	<u>.00</u>
24 Electronics and information technology manufacturing zone credit	24	<u>.00</u>
25 Employee college savings account contribution credit	25	<u>.00</u>
26 Add lines 1 through 25. Enter here and on line 27, page 2	26	<u>6.00</u>



Name PRAVEEN KUMAR & SWATHI THOTA	Social Security Number 421734404
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27 Enter amount from line 26 on page 1 **27** 6.00

28 Tax-option (S) corporation adjustments. Do not include adjustments listed on line 29 (list and provide amount)

a Name _____
FEIN _____ Amount **28a** _____ .00

b Name _____
FEIN _____ Amount **28b** _____ .00

c Add lines 28a and 28b **28c** .00

29 Tax-option (S) corporation entity level tax election adjustments (list and provide amount)

a Name _____
FEIN _____ Amount **29a** _____ .00

b Name _____
FEIN _____ Amount **29b** _____ .00

c Add lines 29a and 29b **29c** .00

30 Partnership, limited liability company, trust, or estate adjustments. Do not include adjustments listed on line 31 (list and provide amount)

a Name _____
FEIN _____ Amount **30a** _____ .00

b Name _____
FEIN _____ Amount **30b** _____ .00

c Add lines 30a and 30b **30c** .00

31 Partnership entity level tax election adjustments (list and provide amount)

a Name _____
FEIN _____ Amount **31a** _____ .00

b Name _____
FEIN _____ Amount **31b** _____ .00

c Add lines 31a and 31b **31c** .00

32 Other additions to income (list and provide amount)

a _____ Amount **32a** _____ .00

b _____ Amount **32b** _____ .00

c _____ Amount **32c** _____ .00

d Add lines 32a through 32c **32d** .00

33 Add lines 27, 28c, 29c, 30c, 31c, and 32d. This is your total addition to income. Enter on Form 1, line 4 **33** 6.00



Name(s) shown on Form 1 or Form 1NPR

PRAVEEN KUMAR & SWATHI THOTA

Your social security number

421-73-4404

Part I Short-Term Capital Gains and Losses – Assets Held One Year or Less

Note: Round all amounts (use a minus sign (-) for negative amounts)	(d) Proceeds (sales price)	(e) Cost or other basis	(g) Adjustments to gain or loss from Form(s) 8949, Part I, line 2, column (g)	(h) Gain or loss Subtract column (e) from column (d) and combine the result with column (g)
1a Amount from line 1a of Schedule D	.00	.00		.00
1b Amount from line 1b of Schedule D	295974.00	369282.00	84311.00	11003.00
2 Amount from line 2 of Schedule D	.00	.00	.00	.00
3 Amount from line 3 of Schedule D	.00	.00	.00	.00
4 Short-term gain from Form 6252 and short-term gain or loss from Forms 4684, 6781, and 8824			4	.00
5 Net short-term gain or loss from partnerships, S corporations, estates, and trusts from Schedule(s) K-1			5	.00
6 Adjustment from Wisconsin Schedule T (see Basis Difference in instructions)			6	.00
7 Short-term capital loss carryover from 2022 Wisconsin Schedule WD, line 34. Enter amount as a negative number			7	-19680.00
8 Net short-term capital gain or loss. Combine lines 1a through 7 in column (h)			8	-8677.00

Part II Long-Term Capital Gains and Losses – Assets Held More Than One Year

Note: Round all amounts (use a minus sign (-) for negative amounts)	(d) Proceeds (sales price)	(e) Cost or other basis	(g) Adjustments to gain or loss from Form(s) 8949, Part II, line 2, column (g)	(h) Gain or loss Subtract column (e) from column (d) and combine the result with column (g)
9a Amount from line 8a of Schedule D	.00	.00		.00
9b Amount from line 8b of Schedule D	20044.00	48082.00	11061.00	-16977.00
10 Amount from line 9 of Schedule D	.00	.00	.00	.00
11 Amount from line 10 of Schedule D	.00	.00	.00	.00
12 Gain from Form 4797, Part I; long-term gain from Forms 2439 and 6252; and long-term gain or loss from Forms 4684, 6781, and 8824			12	.00
13 Net long-term gain or loss from partnerships, S corporations, estates, and trusts from Schedule(s) K-1			13	.00
14 Capital gain distributions			14	.00
15 Adjustment from Wisconsin Schedule T (see Basis Difference in instructions)			15	.00
15a Adjustment from Wisconsin Schedule QI. Enter amount as a negative number			15a	.00
16 Long-term capital loss carryover from 2022 Wisconsin Schedule WD, line 39. Enter amount as a negative number			16	-730.00
17 Net long-term capital gain or loss. Combine lines 9a through 16 in column (h)			17	-17707.00

Go on to Part III →



Name PRAVEEN KUMAR & SWATHI THOTA	Social Security Number 421-73-4404
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Part III Summary of Parts I and II (see instructions) - use a minus sign (-) for negative amounts.

18 Combine lines 8 and 17, and fill in the net gain or loss here (if line 18 is a loss, go to line 28)	18	<u>- 26384.00</u>
19 Fill in the smaller of line 17 or 18, or -0- if a loss or no entry on line 17	19	<u>.00</u>
20 Fill in 30% of line 19	20	<u>.00</u>
21 Fill in the amount of long-term capital gain from the sale of farm assets listed on Form 8949 and taxable to Wisconsin plus gain from the sale of farm assets that is included on line 12 or 13 of Schedule WD. If zero, skip lines 22 through 25 and fill in the amount from line 20 on line 26	21	<u>.00</u>
22 Gain included in line 17. Do not include any losses in this amount	22	<u>.00</u>
23 Divide line 21 by line 22. Carry the decimal to 4 places	23	<u>_____</u>
24 Multiply line 19 by the decimal amount on line 23	24	<u>.00</u>
25 Fill in 30% of line 24	25	<u>.00</u>
26 Add lines 20 and 25	26	<u>.00</u>
27 Subtract line 26 from line 18	27	<u>.00</u>
28 If line 18 shows a loss, fill in the smaller of:	(a) The loss on line 18,	
	(b) \$3,000/\$1,500 (see instructions), or	
	(c) Wisconsin ordinary income (see instructions)	28 <u>- 3000.00</u>

Note: When figuring whether a, b, or c is smaller, treat all numbers as if they are positive.

Part IV Computation of Wisconsin Adjustment to Income

29 Adjustment (see instructions for Part IV and Schedule I adjustments)		
a Fill in gain from line 7 of federal Form 1040 or 1040-SR, or gain from line 1e of Schedule I, if filed (if a loss, fill in -0-)	29a	<u>0.00</u>
b Fill in gain from Part III, line 27, (if blank, fill in -0-)	29b	<u>0.00</u>
c If line 29b is more than 29a, subtract line 29a from line 29b. See instructions on where to enter this amount	29c	<u>.00</u>
d If line 29b is less than 29a, subtract line 29b from line 29a. See instructions on where to enter this amount	29d	<u>.00</u>
e Fill in loss from line 7 of federal Form 1040 or 1040-SR, as a positive amount or the loss from line 2c of Schedule I, if filed (if a gain, fill in -0-)	29e	<u>3000.00</u>
f Fill in loss from Part III, line 28 as a positive amount	29f	<u>3000.00</u>
g If line 29f is more than 29e, subtract line 29e from line 29f. See instructions for where to enter this amount	29g	<u>.00</u>
h If line 29f is less than 29e, subtract line 29f from line 29e. See instructions for where to enter this amount	29h	<u>.00</u>

Part V Computation of Capital Loss Carryovers from 2023 to 2024 (Complete this part if the loss on line 18 is more than the loss on line 28.)

30 Fill in loss shown on line 8 as a positive amount. If none, fill in -0- and skip lines 31 through 34	30	<u>8677.00</u>
31 Fill in gain shown on line 17. If that line is blank or shows a loss, fill in -0-	31	<u>0.00</u>
32 Subtract line 31 from line 30	32	<u>8677.00</u>
33 Fill in the smaller of line 28 or line 32, treating both as positive amounts	33	<u>3000.00</u>
34 Subtract line 33 from line 32. This is your short-term capital loss carryover from 2023 to 2024	34	<u>5677.00</u>
35 Fill in loss from line 17 as a positive amount. If none, fill in -0- and skip lines 36 through 39	35	<u>17707.00</u>
36 Fill in gain shown on line 8. If that line is blank or shows a loss, fill in -0-	36	<u>0.00</u>
37 Subtract line 36 from line 35	37	<u>17707.00</u>
38 Subtract line 33 from line 28, treating both as positive amounts. (Note: If you skipped lines 31 through 34, fill in amount from line 28 as a positive amount.)	38	<u>0.00</u>
39 Subtract line 38 from line 37. This is your long-term capital loss carryover from 2023 to 2024	39	<u>17707.00</u>



Additional Information From 2023 Wisconsin Tax Return**Form 1: Wisconsin Income Tax****Rent, no heat****Itemization Statement**

Description	Amount
RENT PAID(1200 P. * 9 M)	10800.00
Total	10800.00