E 1040 Department of the Treasury—Internal Revenue Service U.S. Individual Income Tax Return

1040		artment of the Treasury-Internal Revenue Servi S. Individual Income Tax		urn	202	3	OMB No. 1545	-0074	IRS Use	Only—[Do not w	rite or sta	aple in this space.		
For the year Jan. 1–Dec. 31, 2023, or other tax year beginning					, 2023, ending , 20					S	See separate instructions.				
Your first name and middle initial Last na			Last na	name						Y	Your social security number				
PRAMOD REDDY DHAR				ARMA							*** ** 1795				
If joint return, spouse's first name and middle initial Last na											Spouse's social security number				
				BBAKA							*** ** 4599				
	numbe	er and street). If you have a P.O. box, see						1	Apt. no.				ection Campaign		
3500 NOR	THST	TAR RD						-	728	1			ou, or your		
		ce. If you have a foreign address, also co	mplete s	paces be	low.	Sta	te	ZIP c					jointly, want \$3		
RICHARDSON				TX								nd. Checking a not change			
Foreign country name									n postal c			or refu	ind.		
Filing Status		Single					Head of he	ouseh	old (HOH	1)	7				
Married filing igintly (even if only one had income)															
Check only one box.		Married filing separately (MFS)		,			☐ Qualifying	survi	ing spor	use (Q	e (QSS)				
0.10 20.11	lf y	you checked the MFS box, enter the	name c	of your s	oouse. If yo	u che		4				ld's nar	me if the		
		alifying person is a child but not you		35.						U					
Digital Assets		ny time during 2023, did you: (a) rece ange, or otherwise dispose of a digi								V		□Ye	es 🗵 No		
Standard		eone can claim: You as a de					a dependent	1): (0	JO III JULIU	0110113	•,		,5 <u>F</u> 110		
Deduction		Spouse itemizes on a separate return			or annual confinement										
Age/Blindness	You	Were born before January 2, 1	959 F	Are bl	ind Sn	ouse	: Was bor	n hefo	re Janu	any 2	1959		s blind		
Dependents				Ī	Social securit		(3) Relationsh	14	2 2				see instructions)		
If more	(1) First name Last name			number to you			Child tax cre			dit	Credit fo	r other dependents			
than four															
dependents,															
see instructions and check	· ·					-									
here \square															
Income	1a	Total amount from Form(s) W-2, be	ox 1 (se	e instruc	tions) .		* * 10 DE 11				1a		156,889.		
	b	Household employee wages not re	ported	on Form	(s) W-2 .						1b				
Attach Form(s) W-2 here. Also	С	Tip income not reported on line 1a (see instructions)									1c				
attach Forms	d	Medicaid waiver payments not rep									1d				
W-2G and 1099-R if tax	е	Taxable dependent care benefits f	1								1e				
was withheld.	f	Employer-provided adoption bene	fits from	Form 8	839, line 29						1f	1			
If you did not	g	Wages from Form 8919, line 6 .									1g				
get a Form	h	Other earned income (see instructi	ons)								1h	Y	0.		
W-2, see instructions.	i	Nontaxable combat pay election (s		ructions)			1i								
	z	Add lines 1a through 1h									1z		156,889.		
Attach Sch. B	2a		2a			b T	axable interest	t .			2b		300.		
if required.	3a		3a				rdinary divider				3b	2			
	4a		4a				axable amoun				4b				
Standard	5a		5a				axable amoun				5b	1			
Deduction for— Single or	6a		6a				axable amoun				6b				
Married filing	С	If you elect to use the lump-sum e	lection r	nethod.	check here	(see	instructions)								
separately, \$13,850	7		or (loss). Attach Schedule D if required. If not required, check here							. $\bar{\Box}$	7				
Married filing jointly or	8	Additional income from Schedule			-						8		-15,802.		
Qualifying	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income									9		141,387.		
surviving spouse, \$27,700	10	Adjustments to income from Schedule 1, line 26										1			
Head of household,	11	Subtract line 10 from line 9. This is					n m vi V				10		141,387.		
\$20,800	12	Standard deduction or itemized			•						12		27,700.		
If you checked any box under	13	Qualified business income deducti				,	5-A				13	_			
Standard Deduction,	14										14		27,700.		
see instructions.	15	Subtract line 1/1 from line 11. If zer							100		15	+	113 687		

Form 1040 (2023	3)			Page 2								
Tax and	16	Tax (see instructions). Check if any from Form(s): 1 8814 2 4972 3	16	15,626.								
Credits	17	Amount from Schedule 2, line 3	17									
	18	Add lines 16 and 17	18	15,626.								
	19	Child tax credit or credit for other dependents from Schedule 8812	19	<u> </u>								
	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	15,626.								
	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	15,626.								
Payments	25	Federal income tax withheld from:										
	а	Form(s) W-2										
	b	Form(s) 1099										
	C	Other forms (see instructions)										
	d	Add lines 25a through 25c	25d	19,610.								
If you have a	26	2023 estimated tax payments and amount applied from 2022 return	26	—								
qualifying child,	27	Earned income credit (EIC)	Y									
attach Sch. EIC.	28	Additional child tax credit from Schedule 8812										
	29	American opportunity credit from Form 8863, line 8										
	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	19,610.								
Refund	34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid	34	3,984.								
riorana	35a	Amount of line 34 you want refunded to you . If Form 8888 is attached, check here	35a	3,984.								
Direct deposit? See instructions.	b	Routing number * * * * * 1 8 2 5 c Type: ▼ Checking □ Savings										
	d	Account number * * * * * 0 9 5										
	36	Amount of line 34 you want applied to your 2024 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									
	38	Estimated tax penalty (see instructions)										
Third Party	Do	you want to allow another person to discuss this return with the IRS? See										
Designee		structions	oelow.	⋉ No								
		signee's Phone Personal identi	fication									
	na		le e le e e l	af and for addition and								
Sign		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.										
Here			If the IRS sent you an Identity									
	10		Protection PIN, enter it here									
Joint return?		SOFTWARE DEVELOPER (see	inst.)									
See instructions. Keep a copy for your records.	Sp		e IRS sent your spouse an									
			Identity Protection PIN, enter it here (see inst.)									
		HOPEPARER										
		one no. (516) 728-0616 Email address PRAMODO3.NET@GMAIL.COM eparer's name Preparer's signature Date PTIN		Check if:								
Paid			2702	The second second second								
Preparer			\$2703 Self-employed									
Use Only			Phone no. (678) 965-9522									
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