**1040-X** 

(Rev. February 2024)

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

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) 2023 Your first name and middle initial Last name Your social security number ANDHRAPU 729-45-9587 NAVEENA If joint return, spouse's first name and middle initial Last name Spouse's social security number Home address (number and street). If you have a P.O. box, see instructions. Ant no **Presidential Election Campaign** Check here if you, or your spouse 189 GARDEN DRIVE DR 13 if filing jointly, didn't previously City, town, or post office. If you have a foreign address, also complete spaces below. State 7IP code want \$3 to go to this fund, but now MANCHESTER ИH 03102 do. Checking a box below will not Foreign postal code Foreign country name Foreign province/state/county change your tax or refund. ☐ You ☐ Spouse 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. 🗵 Single 🗌 Married filing jointly 🗎 Married filing separately (MFS) 🔲 Head of household (HOH) 🖂 Qualifying surviving spouse (QSS) If you checked the MFS box, enter the name of your spouse unless you are amending a Form 1040-NR. If you checked the HOH or QSS box, enter the child's name if the qualifying person is a child but not your dependent: Enter on lines 1 through 23, columns A through C, the amounts for the return A. Original amount B. Net change -C. Correct reported or as amount of increase year entered above. previously adjusted or (decrease) amount Use Part II on page 2 to explain any changes. explain in Part II (see instructions) **Income and Deductions** Adjusted gross income. If a net operating loss (NOL) carryback is 1 68,331. 9,545 77,876. 2 Itemized deductions or standard deduction 2 13,850. 0 13,850. 3 Subtract line 2 from line 1 . . . . . . . . . . . . 3 54,481. 9,545. 64,026. 4a Reserved for future use . . . . . 4a 4b Qualified business income deduction . 5 Taxable income. Subtract line 4b from line 3. If the result for column C is zero or less, enter -0- in column C . . . . . . . . . . . . . . . 5 54,481. 9,545. 64,026. **Tax Liability** Tax. Enter method(s) used to figure tax (see instructions): 6 7,292. 2,101. 9,393. 7 Nonrefundable credits. If a general business credit carryback is included, 7 0. 0 8 Subtract line 7 from line 6. If the result is zero or less, enter -0-7,292. 8 2,101. 9,393. 9 9 10 Other taxes . . . . . . 10 0. 0. 0. 11 Total tax. Add lines 8 and 10 11 7,292. 2,101. 9,393. **Payments** 12 Federal income tax withheld and excess social security and tier 1 RRTA tax withheld. (If changing, see instructions.) . . . . . . . . . . . 12 10,306. 1,464. 11,770. 13 Estimated tax payments, including amount applied from prior year's return 13 0. 0. 14 14 0. 0. 15 Refundable credits from: Schedule 8812 Form(s) 2439 4136 ☐ 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 11,770. **Refund or Amount You Owe** Overpayment, if any, as shown on original return or as previously adjusted by the IRS 18 3,014. 18 19 Subtract line 18 from line 17. (If less than zero, see instructions.) 19 8,756. 20 20 Amount you owe. If line 11, column C, is more than line 19, enter the difference . . . . . . . . . 637. 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 Complete and sign this form on page 2.

Form 1040-X (Rev. 2-2024)

Part	Dependents									
This wo	te this part to change any information relating to y uld include a change in the number of dependents e information for the return year entered at the top		A. Original number of dependents reported or as previously adjusted	B. Net change— amount of increase or (decrease)	C. Correct number					
24	Reserved for future use	24								
25	Your dependent children who lived with you	25	0	0						
<b>26</b>	Reserved for future use	26								
27	Other dependents	27	0	0						
	Reserved for future use									
	Reserved for future use									
<b>30</b>	30 List ALL dependents (children and others) claimed on this amended return.									
Depend	dents (see instructions):			(d) Check the box if qualifies for (see instructions):						
If more than fou	(a) First name Last name	(b) Social security (number	c) Relationship to you	Child tax credit	Credit for other dependents					
depende	nts,									
see instruction	nne.									
and che										
here _										
Part I	Explanation of Changes. In the space pro	vided below, tell us why yo	u are filing Form	1040-X.						

Attach any supporting documents and new or changed forms and schedules.

- I NAVEENA ANDHRAPU FILED 1040 FOR THE TAX YEAR 2023.
- I MISSED TO INCLUDE WAGE INCOME IN TAX RETURN, NOW THROUGH THIS AMENDMENT
- I INCLUDED WAGE STATEMENT, I REQUEST IRS TO ACCEPT THE CHANGES. PAYMENT OF \$637.

	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.									
Sign Here	Your signature		Date	Your occupation SOFTWARE ENGINEER		Protection P	If the IRS sent you an Identity Protection PIN, enter it here (see inst.)			
	Spouse's signature. If a joint return, <b>both</b> must sign.		Date	Spouse's occupation		If the IRS sent your spouse an Identity Protection PIN, enter it here (see inst.)				
	Phone no. (978)390-0442		Email address							
Paid	Preparer's name SYAM PRIYA RAM SAGAR GUPTA		s signature PRIYA RAM	SAGAR GUPTA	Date 03/31/2024	PTIN P02082703	Check if: Self-employed			
Preparer Use Only	Firm's name GLOBAL TAXES LLC					Phone no. (678)965-9522				
USE Offig	Firm's address 245 ROONEY CT E BRUNSWICK NJ 08816					Firm's EIN				