Form **8879**

(Rev. January 2021)

Department of the Treasury Internal Revenue Service

IRS e-file Signature Authorization

▶ ERO must obtain and retain completed Form 8879.

► Go to www.irs.gov/Form8879 for the latest information.

OMB No. 1545-0074

IIILEIIIAI F	levelide Service					
Submis	ssion Identification Number (SID)					
Taxpaye	r's name	Social securi	ty numb	er		
MANM	IOHAN PEDDOLLA	358-71	-129	7		
Spouse's		Spouse's so	ial secu	ırity nu	mber	
Part	, ,	year you a	re au	thoriz	ing.)	
	whole dollars only on lines 1 through 5.					
	Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.		l 1		1 E	100
1 2	Adjusted gross income		2		45,	$\frac{188.}{0.}$
	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3			 267.
	Amount you want refunded to you		4			267. 267.
	Amount you owe		5		_ 3,	<u> </u>
Part		еер а сор		our r	eturr	1)
Under p my kno return (c to send for any Agent to paymen authoriz paymen busines taxes to persona Electror	benalties of perjury, I declare that I have examined a copy of the income tax return (original or amended wledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above original or amended) I am now authorizing. I consent to allow my intermediate service provider, transming return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejecteday in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U or initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indict of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate a tax, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation requised susy prior to the payment (settlement) date. I also authorize the financial institutions involved in the processor of the payment (settlement) date. I also authorize the financial institutions involved in the processor of the payment (settlement) date. I also authorize the financial institutions involved in the processor of the payment (settlement) date. I also authorize the financial institutions involved in the processor of the payment (settlement) date. I also authorize and resolve issues related to the payment (settlement) below is my signature for the income tax return (original or amended) I amic Funds Withdrawal Consent. Septimental accommendation of the payment of the income tax return (original or amended) I amin figure and payment for the income tax return (original or amended) I amin figure are entering your own PIN and your return is filed using the Practitioner PIN methologous.	I am now au e are the am itter, or electr action of the t S. Treasury a cated in the e the authoriz uests must b processing o ayment. I fur n now author my PIN The processing of the term of the te	thorizing ounts for the control of t	g, and rom the turn oritission, (designation to this or every order or ectronic knowlend, if a digits, I all zerock the trail	to the le inco liginato (b) the lated Fin softwaccouloke (cab) later ic payredge t lipplical	best of time tax r (ERO) reason inancial vare for nt. This ancel) a than 2 ment of hat the ble, my
Your si	gnature ► Date ►					
C	ala DIN, ahaali aha hay anki					
Spous	e's PIN: check one box only	DIN				
Ш	I authorize to enter or generate to enter or generate		ter five	dinite I		as my
	signature on the income tax return (original or amended) I am now authorizing.		n't ente			
	I will enter my PIN as my signature on the income tax return (original or amended) I am n if you are entering your own PIN and your return is filed using the Practitioner PIN meth below.		_			_
Spouse	e's signature ▶ Date ▶					
	Practitioner PIN Method Returns Only—continue below					
Part I	II Certification and Authentication — Practitioner PIN Method Only					
FRO's	EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN. 2 2	2 4 9	6 0	8 2	2 7	1
		Don't en				
authoriz	that the above numeric entry is my PIN, which is my signature for the electronic individual income to ted to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am subments of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS e-file Providers of In	itting this ret	urn in a	accorda	anće v	
ERO's	signature ▶ Date ▶					
	ERO Must Retain This Form — See Instructions					
	Don't Submit This Form to the IRS Unless Requested To I	o So				

E1040 Department of the Treasury—Internal Revenue Service U.S. Individual Income Tax Return



1040		partment of the Treasury—Internal Revenue Serv. S. Individual Income Tax		urn	202	3	OMB No. 1545-	0074	IRS Use On	ly—Do not	write or sta	aple in this space.
For the year Jar	n. 1–De	c. 31, 2023, or other tax year beginning			, 2023, end	ing			, 20	See se	parate	instructions.
Your first name	and m	niddle initial	Last nar	me						Your s	ocial sec	curity number
MANMOHAN	Ŋ		PEDD	OLLA						358	71	1297
If joint return, s	pouse'	s first name and middle initial	Last nar							Spouse	's socia	security number
Home address	(numb	er and street). If you have a P.O. box, see	instructio	ons.				Δ	pt. no.	Preside	ential Ele	ection Campaign
15925 G	DDDA	RD RD						3	303			ou, or your
City, town, or p	ost off	ice. If you have a foreign address, also co	omplete sp	paces belo	ow.	Sta	te	ZIP co	ode			jointly, want \$3 nd. Checking a
SOUTHGAT	ΓE					MI	-	481	95			not change
Foreign country	y name	•	F	oreign pro	ovince/state/o	count	y	Foreig	n postal code	your ta	x or refu	_
	-	a									Yo	ou Spouse
Filing Status	S	Single					☐ Head of ho	ouseh	old (HOH)			
Check only	F	Married filing jointly (even if only o	ne had ir	ncome)						(0.00)		
one box.		Married filing separately (MFS)					☐ Qualifying					
		you checked the MFS box, enter the			ouse. It you	ı che	ecked the HOH	or Q	SS box, en	ter the cr	ııld's na	me if the
	- qu	ualifying person is a child but not you	ur depeni	dent								
Digital		ny time during 2023, did you: (a) rec	•					-				S
Assets		nange, or otherwise dispose of a dig						t)? (Se	e instruction	ons.)	Y	es 🗵 No
Standard		neone can claim:	•		•		a dependent					
Deduction	ш	Spouse itemizes on a separate retur	n or you	were a c	duai-status a	allen						
Age/Blindnes	s You	: Were born before January 2, 1	959	Are bli	nd Spo	use	: Was bor	n befo	re January	2, 1959	l:	s blind
Dependent	•	•			ocial security		(3) Relationshi	p (4			1	(see instructions):
If more	(1) F	First name Last name			number		to you		Child tax	credit	Credit to	or other dependents
than four												
dependents, see instruction	s											
and check	, —								<u> </u>			
here L				·	. ,							45 100
Income	1a	Total amount from Form(s) W-2, b	•		,					. 1	_	45,188.
Attach Form(s)	b	Household employee wages not re	•	,	,					. 11		
W-2 here. Also attach Forms	C	Tip income not reported on line 1a	•		•					. 10	_	
W-2G and	d	Medicaid waiver payments not rep		` '	•	nstru	,			. 10		
1099-R if tax	e	Taxable dependent care benefits t		•		•				. 10		
was withheld.	f	Employer-provided adoption bene	etits trom	Form 88	339, line 29	•				. 1	_	
If you did not get a Form	g	Wages from Form 8919, line 6 .				•				. 19		0.
W-2, see	h :	Other earned income (see instruct	,	· · ·		•		 		. 11	1	
instructions.	i Z	Nontaxable combat pay election (see Add lines 1a through 1h	see msm	uctions)						. 1		45,188.
Attach Cab D	2 2a		2a		<u>.</u> .	h T	 axable interest			. 21		
Attach Sch. B if required.	3a		3a				rdinary divider			. 3	_	
	4a	· ·	4a				axable amount			. 41		
Standard	5a	_	5a				axable amount			. 5	_	
Deduction for— Single or	6a	_	6a				axable amount			. 6	_	
Married filing	С	If you elect to use the lump-sum e		nethod. c						i L		
separately, \$13,850	7	Capital gain or (loss). Attach Sche				•	,					
Married filing jointly or	8	Additional income from Schedule		•	•					. 8		
Qualifying	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7								. 9	_	45,188.
surviving spouse, \$27,700	10	Adjustments to income from Sche		-						. 10		
Head of household,	11	Subtract line 10 from line 9. This is								. 1		45,188.
\$20,800	12	Standard deduction or itemized	•	-						. 1:	_	13,850.
If you checked any box under	13	Qualified business income deduct				,	5-A			. 13	_	
Standard Deduction,	14									. 14		13,850.
see instructions.	15	Subtract line 14 from line 11. If zer	ro or less	s, enter -(0 This is y	our t	axable incom	е.	<u> </u>			31,338.

Form 1040 (2023	5)								Page Z
Tax and	16	Tax (see instructions). Check if a	ny from Form	(s): 1 881	4 2 🗌 4972	з 🗌		. 16	3,539.
Credits	17	Amount from Schedule 2, line 3						. 17	
	18	Add lines 16 and 17						. 18	3,539.
	19	Child tax credit or credit for oth	er dependent	s from Sched	ule 8812			. 19	
	20	Amount from Schedule 3, line 8						. 20	3,539.
	21	Add lines 19 and 20						. 21	3,539.
	22	Subtract line 21 from line 18. If	zero or less, e	enter -0				. 22	0.
	23	Other taxes, including self-emp	loyment tax,	from Schedule	e 2, line 21			. 23	0.
	24	Add lines 22 and 23. This is you	ır total tax					. 24	0.
Payments	25	Federal income tax withheld fro	m:						
•	а	Form(s) W-2				25a	3,26	57.	
	b	Form(s) 1099				25b			
	С	Other forms (see instructions)				25c			
	d	Add lines 25a through 25c .						. 25d	3,267.
If you have a	26	2023 estimated tax payments a	nd amount a	oplied from 20)22 return			. 26	
qualifying child,	27	Earned income credit (EIC) .			No .	27			
attach Sch. EIC.	28	Additional child tax credit from S	chedule 8812			28			
	29	American opportunity credit from	m Form 8863	, line 8		29			
	30	Reserved for future use				30			
	31	Amount from Schedule 3, line 1				31			
	32	Add lines 27, 28, 29, and 31. Th				ındable credi	ts .	. 32	
	33	Add lines 25d, 26, and 32. Thes	•	-	-			. 33	3,267.
Refund	34	If line 33 is more than line 24, so							3,267.
11010110	35a	Amount of line 34 you want refu				•		35a	3,267.
Direct deposit?	b	Routing number 0 1 1 9			_	Checking	Savir		
See instructions.	d	Account number 3 8 5 0			<i>,</i> –				
	36	Amount of line 34 you want app				36			
Amount	37	Subtract line 33 from line 24. Th	nis is the amo	ount vou owe					
You Owe	٠.	For details on how to pay, go to						. 37	
	38	Estimated tax penalty (see instr	uctions) .			38			
Third Party	Do	you want to allow another pe				See		,	
Designee	ins	structions				. 🗌 Yes	. Compl	ete below.	X No
		signee's		Phone				dentification	
		me	la accession and a second	no.			umber (F		
Sign		der penalties of perjury, I declare that I lief, they are true, correct, and complet							, ,
Here		ur signature		Date	Your occupation		1		nt you an Identity
	10	ur signature		Date	Tour occupation				PIN, enter it here
Joint return?					SOFTWARE E	ENGINEER		(see inst.)	
See instructions.	Sp	ouse's signature. If a joint return, both	n must sign.	Date	Spouse's occupati	on			nt your spouse an
Keep a copy for your records.								Identity Prot (see inst.)	ection PIN, enter it here
,		(455) 210, 4442		- " II			~~~	(366 1131.)	
		one no. (475)312-4443	eparer's signat	Email address	MANMOHANPEDD	OLLA@GMAIL Date	.COM PTI	NI .	Check if:
Paid					CIIDMA MATTA				Self-employed
Preparer		1 PRIYA RAM SAGAR GUPTA TALLAM SY		KAM SAGAR	GUPIA TALLAM	02/20/202		2082703	
Use Only		m's name GLOBAL TAXE		MOUT OF 31	T 00016				(678)965-9522
	Fin	m's address 245 ROONEY	CI E BKO	NOMICK NO	J 08816			Firm's EIN	84-3171965

SCHEDULE 3 (Form 1040)

(Form 1040)

Department of the Treasury Internal Revenue Service

Additional Credits and Payments

Attach to Form 1040, 1040-SR, or 1040-NR.

Go to www.irs.gov/Form1040 for instructions and the latest information.

OMB No. 1545-0074

2023

Attachment
Sequence No. 03

Name(s) shown on Form 1040, 1040-SR, or 1040-NR MANMOHAN PEDDOLLA

Your social security number 358-71-1297

Par	t I Nonrefundable Credits					
1	Foreign tax credit. Attach Form 1116 if required				1	
2	Credit for child and dependent care expenses from Form 2441 Form 2441	, lin 	e 11. 	Attach	2	
3	Education credits from Form 8863, line 19				3	
4	Retirement savings contributions credit. Attach Form 8880				4	
5a	Residential clean energy credit from Form 5695, line 15				5a	
b	Energy efficient home improvement credit from Form 5695, line 32				5b	
6	Other nonrefundable credits:					
а	General business credit. Attach Form 3800	6a				
b	Credit for prior year minimum tax. Attach Form 8801	6b				
С	Adoption credit. Attach Form 8839	6c				
d	Credit for the elderly or disabled. Attach Schedule R	6d				
е	Reserved for future use	6e				
f	Clean vehicle credit. Attach Form 8936	6f		3,539.		
g	Mortgage interest credit. Attach Form 8396	6g				
h	District of Columbia first-time homebuyer credit. Attach Form 8859	6h				
i	Qualified electric vehicle credit. Attach Form 8834	6i				
j	Alternative fuel vehicle refueling property credit. Attach Form 8911	6j				
k	Credit to holders of tax credit bonds. Attach Form 8912	6k				
ı	Amount on Form 8978, line 14. See instructions	6I				
m	Credit for previously owned clean vehicles. Attach Form 8936 .	6m				
Z	Other nonrefundable credits. List type and amount:					
		6z				
7	Total other nonrefundable credits. Add lines 6a through 6z $$. $$.				7	3,539.
8	Add lines 1 through 4, 5a, 5b, and 7. Enter here and on Form 10 1040-NR, line 20	040,	1040-	SR, or	8	3,539.
				(cc	ntinu	ued on page 2)

Schedule 3 (Form 1040) 2023 Page **2**

Par	Other Payments and Refundable Credits				
9	Net premium tax credit. Attach Form 8962			9	
10	Amount paid with request for extension to file (see instructions) .			10	
11	Excess social security and tier 1 RRTA tax withheld			11	
12	Credit for federal tax on fuels. Attach Form 4136			12	
13	Other payments or refundable credits:				
а	Form 2439	13a			
b	Credit for repayment of amounts included in income from earlier years	13b			
С	Elective payment election amount from Form 3800, Part III, line 6, column (i)	13c			
d	Deferred amount of net 965 tax liability (see instructions)	13d			
Z	Other payments or refundable credits. List type and amount:	13z			
14	Total other payments or refundable credits. Add lines 13a through	13z		14	
15	Add lines 9 through 12 and 14. Enter here and on Form 1040, 1040 line 31	-	•	15	

Form **8936**

Clean Vehicle Credits

OMB No. 1545-2137

2023

Attachment
Sequence No. 69

Department of the Treasury Internal Revenue Service Attach to your tax return.

Go to www.irs.gov/Form8936 for instructions and the latest information.

Name(s) shown on return

MANMOHAN PEDDOLLA

358-71-1297

Notes: • Complete a separate Schedule A (Form 8936) for each clean vehicle placed in service during the tax year.

	 Individuals completing Parts II, III, or IV, must also complete Part I. See "Note" 	' text b	elow.	you	
Part					
1a	Enter the amount from line 11 of your 2023 Form 1040, 1040-SR, or 1040-NR	1a	45,188.		
b	Enter any income from Puerto Rico you excluded	1b			
С	Enter any amount from Form 2555, line 45	1c			
d	Enter any amount from Form 2555, line 50	1d			
е	Enter any amount from Form 4563, line 15	1e			
2	Add lines 1a through 1e			2	45,188.
3a	Enter the amount from line 11 of your 2022 Form 1040, 1040-SR, or 1040-NR	3a	18,848.		
b	Enter any income from Puerto Rico you excluded	3b			
С	Enter any amount from Form 2555, line 45	3c			
d	Enter any amount from Form 2555, line 50	3d			
е	Enter any amount from Form 4563, line 15	3e			
4	Add lines 3a through 3e			4	18,848.
5	Enter the smaller of line 2 or line 4			5	18,848.
Part	Credit for Business/Investment Use Part of New Clean Vehicles				
	Note: Individuals can't claim a credit on line 6 if Part I, line 5, is more than \$ qualifying surviving spouse; \$225,000 if head of household).	\$150,0	00 (\$300,000 if	married	filing jointly or a
6	Enter the total credit amount figured in Part II of Schedule(s) A (Form 8936)			6	0.
7	New clean vehicle credit from partnerships and S corporations (see instructions)			7	
8	Business/investment use part of credit. Add lines 6 and 7. Partnerships and S co				
	and report this amount on Schedule K. All others, report this amount on Form 3800,	, Part I	II, line 1y	8	0.
0	Note: You can't claim the Part III credit if Part I, line 5, is more than \$15 qualifying surviving spouse; \$225,000 if head of household).			narried f	
9 10	Enter the total credit amount figured in Part III of Schedule(s) A (Form 8936) Enter the amount from Form 1040, 1040-SR, or 1040-NR, line 18			10	7,500.
11	Personal credits from Form 1040, 1040-SR, or 1040-NR (see instructions)			11	3,539.
12	Subtract line 11 from line 10. If zero or less, enter -0- and stop here. You can't cla				
	part of the credit			12	2 520
13	Personal use part of credit. Enter the smaller of line 9 or line 12 here and o	n Sch	edule 3 (Form	12	3,539.
	1040), line 6f. If line 12 is smaller than line 9, see instructions			13	3,539.
Part				1.0	37337.
	Note: You can't claim the Part IV credit if Part I, line 5, is more than \$7 qualifying surviving spouse; \$112,500 if head of household).	75,000	(\$150,000 if m	arried f	iling jointly or a
14	Enter the total credit amount figured in Part IV of Schedule(s) A (Form 8936)			14	
15	Enter the amount from Form 1040, 1040-SR, or 1040-NR, line 18			15	
16	Personal credits from Form 1040, 1040-SR, or 1040-NR (see instructions)			16	
17	Subtract line 16 from line 15. If zero or less, enter -0- and stop here. You can't cla			17	
18	Enter the smaller of line 14 or line 17 here and on Schedule 3 (Form 1040), I				
	smaller than line 14, see instructions			18	
Part				1 . 1	
19	Enter the total credit amount figured in Part V of Schedule(s) A (Form 8936)			19	
20	Qualified commercial clean vehicle credit from partnerships and S corporations (se			20	
21	Add lines 19 and 20. Partnerships and S corporations, stop here and report this a K. All others, report this amount on Form 3800, Part III, line 1aa			21	

SCHEDULE A (Form 8936)

Clean Vehicle Credit Amount

OMB No. 1545-2137

Attachment Sequence No. **69A**

Department of the Treasury Internal Revenue Service

Attach to your tax return. Go to www.irs.gov/Form8936 for instructions and the latest information.

(MOHAN PEDDOLLA		8-71-1297	
Part		33	0 11 1201	
1a	Year		2023	
b	Make	TE	SLA	
С	Model	MO	DEL 3	
2	Vehicle identification number (VIN) (see instructions) 5 Y J 3 E 1 E A	4 P	F 5 5 8	7 5 7
3	Enter date vehicle was placed in service (MM/DD/YYYY)	04	/21/2023	
4	Was the vehicle used primarily outside the United States? Answer "No" if it was but an excepti ☐ Yes. Stop here. You can't claim a credit amount for a vehicle used primarily outside the Un ☐ No.		-	ructions.
5	Does the VIN entered on line 2 belong to a new clean vehicle placed in service during the tax definitions. X Yes. Go to Part II. No. Go to line 6.	year?	? See instructio	ons for
6	Does the VIN entered on line 2 belong to a previously owned clean vehicle acquired after 202 the tax year? See instructions for definitions. Yes. Go to Part IV. No. Go to line 7.	22 an	d placed in ser	vice during
7	Does the VIN entered on line 2 belong to a qualified commercial clean vehicle acquired after during the tax year? See instructions for definitions. Yes. Go to Part V. No. Stop here. You can't use this schedule to figure a credit amount for a vehicle not described.			
Part 8	 Credit Amount for Business/Investment Use Part of New Clean Vehicle Did you acquire the vehicle for use or to lease to others, and not for resale? Answer "No" if you another person. ✓ Yes. No. Stop here. You can't claim a credit amount for a vehicle you didn't acquire for use or t resale. 		-	
9	Tentative credit amount (see instructions)	9		7,500.
10	Business/investment use percentage (see instructions)	10		%
11	Multiply line 9 by line 10. Include this credit amount on line 6 in Part II of Form 8936. If you entered 100% on line 10, stop here. Otherwise, go to Part III below	11		0.
Part	Credit Amount for Personal Use Part of New Clean Vehicle		1	
12	Subtract line 11 from line 9 in Part II. Stop here and include this credit amount on line 9 in Part III of Form 8936	12		7,500.

Schedu	e A (Form 8936) 2023		Page 2
Part			
13a	Is the sales price of the vehicle more than \$25,000?		
	Yes. Stop here. The vehicle doesn't qualify for the Part IV credit.		
	∐ No.		
b	Did you acquire the vehicle for use and not for resale? Answer "No" if you are leasing the vehic	le fror	n another person.
	☐ Yes.		
	No. Stop here. You can't claim a credit amount for a vehicle you didn't acquire for use or a	cquire	ed for resale.
С	Can you be claimed as a dependent on another person's tax return, such as your parent's return	rn?	
	☐ Yes. Stop here. You can't claim a credit amount if you can be claimed as a dependent.		
	□ No.		
d	Is the vehicle a qualified fuel cell motor vehicle? See instructions.		
	☐ Yes.		
	☐ No.		
		[
14	Enter the sales price of the vehicle	14	
15	Multiply line 14 by 30% (0.30)	15	
16	Maximum vehicle credit amount	16	4,000.
10	Waximum vehicle credit amount	10	4,000.
17	Enter the smaller of line 15 or line 16. Stop here and include this credit amount on line		
	14 in Part IV of Form 8936	17	
Part	V Credit Amount for Qualified Commercial Clean Vehicle		
18a	Is the vehicle of a character subject to the allowance for depreciation? Answer "Yes" if the exceentities discussed in the instructions applies. Yes. No. Stop here. The vehicle is not a qualified commercial clean vehicle unless the exception		
b	Did you acquire the vehicle for use or to lease to others, and not for resale? Answer "No" if you another person. Yes. No. Stop here. You can't claim a credit amount for a vehicle you didn't acquire for use or to resale.		_
С	Is the vehicle also powered by gas or diesel? See instructions. Yes. No.	ı	
19	Enter the cost or other basis of the vehicle. See instructions	19	
20	Section 179 expense deduction (see instructions)	20	
21	Subtract line 20 from line 19	21	
	M III I II OA I 450((0.45) [000((0.00) (1) I I I I I I I I I I I I I I I I I I I		
22	Multiply line 21 by 15% (0.15) [30% (0.30) if the answer on line 18c above is "No"]	22	
23	Enter the incremental cost of the vehicle. See instructions	23	
24	Enter the smaller of line 22 or line 23	24	
25	Maximum credit. Enter \$7,500 (\$40,000 if the vehicle's gross vehicle weight rating (GVWR) is 14,000 pounds or more)	25	
00	, ,		
26	Enter the smaller of line 24 or line 25. Include this credit amount on line 19 in Part V		

26

2023 MICHIGAN Individual Income Tax Return MI-1040 **Amended Return** (Include Schedule AMD) Return is due April 15, 2024. Type or print in blue or black ink. 1. Filer's First Name M.I. Last Name 2. Filer's Full Social Security No. (Example: 123-45-6789) MANMOHAN PEDDOLLA 358 — 71 If a Joint Return, Spouse's First Name МΙ Last Name 3. Spouse's Full Social Security No. (Example: 123-45-6789) Home Address (Number, Street, or P.O. Box) APT. 15925 GODDARD RD, 303 State ZIP Code 4. School District Code (5 digits) City or Town 48195 SOUTHGATE MΙ 82405 5. STATE CAMPAIGN FUND 6. FARMERS, FISHERMEN, OR SEAFARERS Check if you (and/or your spouse, if Filer filing a joint return) want \$3 of your taxes Check this box if 2/3 of your income is from farming, to go to this fund. This will not increase fishing, or seafaring. Spouse your tax or reduce your refund. 2023 FILING STATUS. Check one. 2023 RESIDENCY STATUS. Check all that apply. a. X Single a. | X Resident * If you check box "c." complete * If you check box "b" or line 3 and enter spouse's full name "c," you must complete helow: Married filing jointly Nonresident * b. and include Schedule NR. Married filing separately* Part-Year Resident * 9. **EXEMPTIONS. NOTE:** If someone else can claim you as a dependent, check box 9e, enter 0 on line 9a and enter \$1,500 on line 9e (see instr.) 5400 00 a. Number of exemptions (see instructions)..... \$5,400 9a b. Number of individuals who qualify for one of the following special exemptions: deaf, blind, hemiplegic, paraplegic, quadriplegic, or totally and permanently disabled 00 \$3,100 9b. 00 c. Number of qualified disabled veterans \$400 90 d. Number of Certificates of Stillbirth from MDHHS (see instructions) 00 \$5,400 9d Claimed as dependent, see line 9 NOTE above 00 5400 00 Add lines 9a, 9b, 9c, 9d and 9e. Enter here and on line 15 9f 45188 10. Adjusted Gross Income from your U.S. Form 1040 (see instructions) 00 10. 00 Additions from Schedule 1, line 9. Include Schedule 1 11. 45188 Total. Add lines 10 and 11 12. 00 Subtractions from Schedule 1, line 31. Include Schedule 1 13. 00 45188 loo Income subject to tax. Subtract line 13 from line 12. If line 13 is greater than line 12, enter "0" 14. 5400 00 Exemption allowance. Enter amount from line 9f or Schedule NR, line 19..... 15.

Taxable income. Subtract line 15 from line 14. If line 15 is greater than line 14, enter "0"

17. **Tax.** Multiply line 16 by 4.05% (0.0405)

16.

17.

39788 00

1611 00

NON-	REFUNDABLE CREDITS	AMOUNT		CREDIT	
18.	Income Tax Imposed by government units outside Michigan. Include a copy of the return (see instructions)	00	18b.		00
19.	Michigan Historic Preservation Tax Credit (see instructions). 19a.	00	19b.		00
20.	Income Tax. Subtract the sum of lines 18b and 19b from line 17. If the sum of lines 18b and 19b is greater than line 17, enter "0"		20.	1611	00
21.	Voluntary Contributions from Form 4642, line 6. Include Form 4642		21.		00
22.	Penalty for nonqualified withdrawal from Form 5792, <i>Michigan First-T Program</i> , line 5		22.		00
23.	USE TAX. Use tax due on Internet, mail order or other out-of-state put Worksheet 1 (see instructions)		23.	0	00
24.	Total Tax Liability. Add lines 20 through 23	24.		1611	00
REFU	JNDABLE CREDITS AND PAYMENTS		i		
25.	Property Tax Credit. Include MI-1040CR or MI-1040CR-2		25.		00
26.	Farmland Preservation Tax Credit. Include MI-1040CR-5		26.		00
		FEDERAL		MICHIGAN	
27.	Earned Income Tax Credit. Multiply line 27a by 30% (0.30) and enter result on line 27b	00	27b.		00
28.	Michigan Historic Preservation Tax Credit (refundable). Include Form	n 3581	28.		00
29.	Credit for allocated share of tax paid by an electing flow-through entity	y (see instructions)	29.		00
30.	Michigan tax withheld from Schedule W, line 6. Include Schedule W	(do not submit W-2s)	30.	1908	00
31.	Estimated tax, extension payments and 2022 credit forward		31.		00
32.	2023 AMENDED RETURNS ONLY. Taxpayers completing an original Amended returns must include Schedule AMD (see instructions) .	2023 return should skip to line 33.			
	32a. If you had a refund and/or credit forward on the original return, change and the negative number on line 32c.	neck box 32a and enter this amount as a			
	32b. If you paid with the original return, check box 32b and enter the a any additional tax paid after filing, as a positive number on line 32		32c.		00
33.	Total refundable credits and payments. Add lines 25, 26, 27b, 28, 29,	30, 31 and 32c 33.		1908	00

2023 MI-1040, F	Page 3 of 3
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Spouse's Signature

REFUND OR TAX DUE 34. If line 33 is less than line 24, subtract line 33 from line 24. If applicable, see instructions. YOU OWE 00 00 00 Include interest and penalty 34 297 00 35. Overpayment. If line 33 is greater than line 24, subtract line 24 from line 33 Credit Forward. Amount of line 35 to be credited to your 2024 estimated tax for your 2024 tax return. 36 00 297 DIRECT DEPOSIT a. Routing Transit Number b. Account Number c. Type of Account Deposit your refund directly to your financial institution! See instructions and complete a, b 1. X Checking 2. Savings 011900254 385029426238 Preparer Certification. I declare under penalty of perjury that Deceased Taxpayer. If Filer and/or Spouse died after December 31, 2022, enter dates below. ENTER DATE OF DEATH ONLY. Example: 04-15-2023 (MM-DD-YYYY) this return is based on all information of which I have any knowledge. Preparer's PTIN, FEIN or SSN Filer Spouse P02082703 Preparer's Name (print or type) Taxpayer Certification. I declare under penalty of perjury that the information in this return and attachments is true and complete to the best of my knowledge. SYAM PRIYA RAM SAGAR GUPTA TA Filer's Signature

Filer's Full Social Security Number

Refund, credit, or zero returns. Mail your return to:

By checking this box, I authorize Treasury to discuss my return with my preparer.

Michigan Department of Treasury, Lansing, MI 48956

E BRUNSWICK NJ 08816

<u>SYAM PRIYA RAM SAGAR GUPTA</u>

Preparer's Business Name, Address and Telephone Number

Preparer's Signature

GLOBAL TAXES LLC 245 ROONEY CT

678-965-9522

358 -

71

- 1297

Pay amount on line 34 (see instructions). Mail your check and return to: Michigan Department of Treasury, Lansing, MI 48929

Date

Date

2023 MICHIGAN Withholding Tax Schedule

Issued under authority of Public Act 281 of 1967, as amended.

Type or print in blue or black ink.

Attachment 13

INSTRUCTIONS: If you had Michigan income tax withheld in 2023, you must complete a *Withholding Tax Schedule* (Schedule W) to claim the withholding on your *Individual Income Tax Return* (MI-1040, line 30). Report military pay in Table 1 and military retirement benefits and taxable railroad retirement benefits (both Tier 1 and Tier 2) in Table 2 even if no Michigan tax was withheld. Include your completed Schedule W with Form MI-1040. See complete instructions on page 2 of this form. If you need additional space, include another Schedule W.

1. Filer's First Name	M.I.	Last Name	2. Filer's Full Social Security No. (Example: 123-45-6789)
MANMOHAN		PEDDOLLA	358 — 71 — 1297
If a Joint Return, Spouse's First Name	M.I.	Last Name	3. Spouse's Full Social Security No. (Example: 123-45-6789)

TABLE 1: MICHIGAN TAX WITHHELD OR MILITARY PAY REPORTED ON W-2, W-2G or CORRECTED W-2 FORMS

Α		В	С	D	E	
Enter "X" for: Filer or Spouse		Employer's identification number (Example: 38-1234567)	Box c — Employer's name	Box 1 — Wages, tips, other compensation	Box 17 — Michigan income tax withheld	
Х		88-1132259	PROVISION IT CON	45188 _C	1908	00
				C	00	00
				c	00	00
				c	00	00
				c	00	00
Enter	⁻ Table	1 Subtotal from additional Sche		00		
4.	SUB	TOTAL. Enter total of Table 1, c	1908	00		

TABLE 2: MICHIGAN TAX WITHHELD OR MILITARY RETIREMENT BENEFITS AND RAILROAD RETIREMENT BENEFITS (BOTH TIER 1 AND TIER 2) REPORTED ON 1099 FORMS

Α	В	С	D		E	
Enter "X" for: Filer or Spouse	Payer's federal identification number (Example: 38-1234567)	Payer's name	Taxable pension distribution, misc. income, etc. (see inst.)		Michigan income tax withheld	
			0	0		00
			0	0		00
			0	0		00
			0	0		00
			0	0		00
Enter Table 2 Subtotal from additional Schedule W forms (if applicable)						00
5. SUBTOTAL. Enter total of Table 2, column E.				5		00
6. TOTAL. Add lines 4 and 5. Enter here and carry to MI-1040, line 30				S	1908	00

REV 02/08/24 PRO