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



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 name			Y	Your social security number				
VASUDEVA REDDY MU				MUTHYALA				686 55 2030				
		s first name and middle initial	Last n						s social security number			
Home address	(numbe	er and street). If you have a P.O. box, see	instruct	tions.		Apt. no.	Pı	resider	ntial Election Campaign			
2316 CEF	RROS	LINE						Check here if you, or your				
	100000	ce. If you have a foreign address, also co	mplete	spaces below.	State	ZIP code		spouse if filing jointly, want \$3				
DENTON				TX		76207	to go to this fund. Checkir box below will not change					
Foreign country	/ name		Foreign province/sta		county	Foreign postal c	oreign postal code your tax or refu					
						☐ You ☐ Spous						
Filing Status	X	Single	·		☐ Head of h	ousehold (HOF	1)					
Check only		Married filing jointly (even if only or										
one box.		Married filing separately (MFS)	use (QS	3S)	ł.							
	If y	ou checked the MFS box, enter the	enter th	ne chil	ld's name if the							
	qu	qualifying person is a child but not your dependent:										
Digital	At ar	ny time during 2023, did you: (a) rece	eive (as	s a reward award or	payment for prope	rty or services	or (b)	sell				
Assets		ange, or otherwise dispose of a digi							☐ Yes ☒ No			
Standard		eone can claim: You as a de			e as a dependent							
Deduction		Spouse itemizes on a separate return										
A are /Disastrane						un hafava Janus	- · · · · · · · · ·	050				
		Were born before January 2, 19	959			n before Janua	-		Is blind			
Dependents			(2) Social security number	(3) Relationsh to you	ip Child tax cre		1	fies for (see instructions): Credit for other dependents				
If more	(1)	irst name Last name		Humber	to you	Offilia t		. ,				
than four dependents,	_					l	┽					
see instructions	s					L	=	\rightarrow	<u>L</u>			
and check	1					L	=	\rightarrow	<u>L</u>			
here L	10	Total amount from Form(s) W-2, bo	ov 1 (c	og instructions)				1a	47,333.			
Income	1a b	Household employee wages not re						1b				
Attach Form(s)		Tip income not reported on line 1a	1c	-								
W-2 here. Also attach Forms	d	Medicaid waiver payments not rep	1d									
W-2G and	e	Taxable dependent care benefits f			istructions)			1e	 			
1099-R if tax was withheld.	f	Employer-provided adoption bene						1f	 			
If you did not	g	Wages from Form 8919, line 6.						1g	-			
get a Form	h	Other earned income (see instructi						1h				
W-2, see instructions.	i	Nontaxable combat pay election (s			1i	i		•••	 			
instructions.	z	Add lines 1a through 1h	00 1110	irdottorio,	· · · <u> </u>			1z	47,333.			
Attach Sch. B if required.	2a		2a		b Taxable interest	 I		2b				
	3a		3a		b Ordinary divide			3b	<u> </u>			
	4a		4a		b Taxable amoun			4b	 			
Standard	5a		5a		b Taxable amoun			5b	<u> </u>			
Deduction for— Single or	6a		6a		b Taxable amoun			6b				
Married filing	С	If you elect to use the lump-sum el										
separately, \$13,850	7	Capital gain or (loss). Attach Scheo	. \Box	7								
Married filing jointly or	8	Additional income from Schedule		1 11				8	-5,375.			
Qualifying	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7,						9	41,958.			
surviving spouse, \$27,700	10	Adjustments to income from Sche		10								
Head of household,	11	Subtract line 10 from line 9. This is	11									
\$20,800	12	Standard deduction or itemized	-					12				
If you checked any box under	13	Qualified business income deducti	13									
Standard Deduction,	14	Add lines 12 and 13	14									
see instructions.	15	Subtract line 14 from line 11. If zer	o or les	ss, enter -0 This is y	our taxable incom	ne		15				

Form 1040 (2023	3)			Page 2	
Tax and	16	Tax (see instructions). Check if any from Form(s): 1 8814 2 4972 3	16	3,155.	
Credits	17	Amount from Schedule 2, line 3	17		
	18	Add lines 16 and 17	18	3,155.	
	19	Child tax credit or credit for other dependents from Schedule 8812	19		
	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	3,155.	
	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	3,155.	
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	5,715.	
If you have a qualifying child,	26	2023 estimated tax payments and amount applied from 2022 return	26		
	27	Earned income credit (EIC)			
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	5,715.	
Refund	34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid	34	2,560.	
	35a	Amount of line 34 you want refunded to you . If Form 8888 is attached, check here	35a	2,560.	
Direct deposit?	b	Routing number 1 0 1 1 0 0 0 4 5 c Type: ✓ Checking Savings	;		
See instructions.	d	Account number 5 1 8 0 1 0 6 4 1 0 4 8			
	36	Amount of line 34 you want applied to your 2024 estimated tax 36			
Amount	37	Subtract line 33 from line 24. This is the amount you owe.			
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		o you want to allow another person to discuss this return with the IRS? See	100 000		
Designee		structions		⋉ No	
		esignee's Phone Personal iden no. number (PIN)			
Cian		nder penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to		of my knowledge and	
Sign		elief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which			
Here	Yo	our signature Date Your occupation If the	he IRS ser	nt you an Identity	
				N, enter it here	
Joint return?		SOFTWARE ENGINEER ,	e inst.)		
See instructions. Keep a copy for				e IRS sent your spouse an tity Protection PIN, enter it here	
your records.			e inst.)	ection Fire, enter it here	
	Ph	none no. (913) 956-1142 Email address VASUDEVA7070@GMAIL.COM			
		reparer's name Preparer's signature Date PTIN		Check if:	
Paid			82703	Self-employed	
Preparer	-			678) 965-9522	
Use Only		A SEC AND A DESCRIPTION OF THE PROPERTY OF THE	m's EIN	84-3171965	