<b>1040</b>		rtment of the Treasury—Internal Revenue Servi 5. Individual Income Ta		turn	202	3	OMB No. 1545	-0074	IRS Use Only	—Do not w	rite or staple i	n this space.	
For the year Jan. 1–Dec. 31, 2023, or other tax year beginning					, 2023, ending				, 20 See separate instruction			ructions.	
Your first name and middle initial Last r				name						Your social security number			
REVANTH CHE				ERUKURI						350	06 56	504	
				t name								urity number	
RAMYASRI MAN				IDEPUDI						375	49 3	118	
		r and street). If you have a P.O. box, see						A	pt. no.		· · ·	n Campaign	
272 GILD	ER V	VOODS DRIVE								Check I	nere if you,	or your	
		ce. If you have a foreign address, also co	mplete	spaces bel	ow.	Sta	ate	ZIP c	ode		if filing joint		
GARNER						NC	2	275	29		o this fund. ( ow will not	0	
Foreign country name				Foreign province/state/c			ounty				or refund.	inding o	
											🗌 You	Spouse	
Filing Status		Single					Head of he	ouseh	old (HOH)				
Check only		Arried filing jointly (even if only one had income)											
one box.		Married filing separately (MFS)     Qualifying surviving spouse (QSS)											
	lf y	If you checked the MFS box, enter the name of your spouse. If you checked the HOH or QSS box, enter the child's name if the											
	qua	alifying person is a child but not you	ır depe	endent:									
Digital	Δt an	y time during 2023, did you: (a) rec	oivo (a	s a roward	award or	navr	ment for prope	rty or	services): or	(b) sell			
Digital Assets		ange, or otherwise dispose of a dig									Yes	🗙 No	
Standard		eone can claim:  You as a de					a dependent	<u>/ (</u>		- /			
Deduction	_	Spouse itemizes on a separate retur	•		•								
Age/Blindness	You:	Were born before January 2, 1	959	Are bl	ind Spo	ouse	: 🗌 Was bor	n befo	ore January 2	2. 1959	🗌 ls bli	nd	
Dependents		•		<u> </u>	Social security		(3) Relationsh	1	) Check the b	-			
If more		(1) First name Last name			number				Child tax credit		Credit for oth	er dependents	
than four	IRA	IRA CHERUKURI			709-29-5567 Daught				X				
dependents,	LAY	A CHERUKURI		089	-37-908	9	Daughter		X				
see instructions and check	5												
here													
Income	1a	Total amount from Form(s) W-2, b	ox 1 (s	ee instruc	tions) .					. <b>1</b> a	13	4,640.	
Attach Form(s) W-2 here. Also	b	Household employee wages not re	d on Form	n Form(s) W-2..........					. 1b	)			
	С	c Tip income not reported on line 1a (see instructions)								. 1c	;		
attach Forms W-2G and	d	d Medicaid waiver payments not reported on Form(s) W-2 (see instructions)								. 1d			
1099-R if tax	е	e Taxable dependent care benefits from Form 2441, line 26								. 1e	•		
was withheld.	f	Employer-provided adoption benefits from Form 8839, line 29							. 1f				
lf you did not get a Form	g	Wages from Form 8919, line 6 .		· · ·						. <b>1g</b>			
W-2, see	h	Other earned income (see instruct					· · · ·	· ·		. <b>1</b> h	1	0.	
instructions.	i										1.0	4 6 4 0	
	Z	Add lines 1a through 1h	·		· · · ·	• •		• •		. 1z	-	4,640.	
Attach Sch. B if required.	2a		2a		0		axable interest			. 2b	-	<b>F</b> 2	
	<u>3a</u>		3a		8.		Ordinary divider			. 3b	-	53.	
Standard	4a		4a				axable amoun			. 4b	-		
Deduction for –	5a		5a				axable amoun			. 5b	-		
<ul> <li>Single or Married filing</li> </ul>	6a		6a				axable amoun	[	· · ·	. 6b			
separately, \$13,850		<ul> <li>c If you elect to use the lump-sum election method, check here (see instructions)</li></ul>											
<ul> <li>Married filing</li> </ul>	7			•				• •	L			0 010	
jointly or Qualifying	8	Additional income from Schedule	,					• •	• • •	. 8		0,810.	
surviving spouse, \$27,700	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7						• •		. 9 . 10		3,883.	
• Head of												2 002	
household,	old, <b>11</b> Subtract line 10 from line 9. This is your <b>adjusted gross incom</b>											3,883.	
• If you checked any box under									. 12		7,700.		
Standard						J-A	• •		. 13		7 700		
Deduction, see instructions.	14 15	Subtract line 14 from line 11. If zer	•••••	· · ·	 -0- This is w	· ·	· · · · ·			. 14		7,700. 6,183.	
	15			55, EIIEI -		Jur		σ.		. 15	0	10,103.	

For Disclosure, Privacy Act, and Paperwork Reduction Act Notice, see separate instructions.

Form **1040** (2023)

Form 1040 (2023	5)		Page
Tax and	16	Tax (see instructions). Check if any from Form(s): 1	<b>16</b> 9,901.
Credits	17	Amount from Schedule 2, line 3	17
	18	Add lines 16 and 17	<b>18</b> 9,901.
	19	Child tax credit or credit for other dependents from Schedule 8812	<b>19</b> 4,000.
	20	Amount from Schedule 3, line 8	20
	21	Add lines 19 and 20	<b>21</b> 4,000.
	22	Subtract line 21 from line 18. If zero or less, enter -0	<b>22</b> 5,901.
	23	Other taxes, including self-employment tax, from Schedule 2, line 21	<b>23</b> 0.
	24	Add lines 22 and 23. This is your <b>total tax</b>	<b>24</b> 5,901.
Payments	25	Federal income tax withheld from:	
	а	Form(s) W-2	
	b	Form(s) 1099	
	С	Other forms (see instructions)	
	d	Add lines 25a through 25c	<b>25d</b> 10,697.
If you have a	26	2023 estimated tax payments and amount applied from 2022 return	26
qualifying child, attach Sch. EIC.	27	Earned income credit (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	<b>33</b> 10,697.
Refund	34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid	<b>34</b> 4,796.
	35a	Amount of line 34 you want <b>refunded to you</b> . If Form 8888 is attached, check here	<b>35a</b> 4,796.
Direct deposit? See instructions.	b	Routing number       0       5       3       1       0       0       3       0       0       c Type:       Checking       Savings	
	d	Account number 0 0 8 1 3 5 4 0 2 5 2 1	
	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 structions	pelow. 🛛 🗙 No
Designee			
	nar		ICATION
Sign Here	Un	der penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the	ne best of my knowledge and
	bel	lief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which	ı preparer has any knowledge.
TICIC	Yo	5	IRS sent you an Identity
Joint return? See instructions.			ection PIN, enter it here inst.)
	Sn	SILE RELIABILITI ENGINEER ,	IRS sent your spouse an
Keep a copy for	Op		tity Protection PIN, enter it here
your records.		HOME MAKER (see i	inst.)
	Ph	one no. (312)203-7801 Email address REVANTHCHERU@GMAIL.COM	
Paid	Pre	eparer's name Preparer's signature Date PTIN	Check if:
	VENK	ATA SAI PAVAN KUMAR DUDIPALLI VENKATA SAI PAVAN KUMAR DUDIPALLI P02470	0833 Self-employed
Preparer Use Only	Fin	m's name GLOBAL TAXES LLC Phon	ne no. (678)965-9522
	Fin	m's address 245 ROONEY CT E BRUNSWICK NJ 08816 Firm'	s EIN 88-2145487
Go to www.irs.go	ov/Forn	n1040 for instructions and the latest information. BAA REV 02/05/24 PRO	Form <b>1040</b> (2023

BAA