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



# 1040		artment of the Treasury-Internal Revenue Servi		ırn	20 2 ;	3	OMB No. 1545	-0074	IRS Use	Only—	Do not w	rite or sta	ple in this space	æ.
For the year Jan. 1–Dec. 31, 2023, or other tax year beginning					, 2023, ending , 20					See separate instructions.				
Your first name and middle initial Last na				 name					,	Your social security number			r	
MIR ZAHID ALI										123	45	4208		
If joint return, spouse's first name and middle initial Last na				ame				:	Spouse's	s social	security num	nbei		
Home address	(numbe	er and street). If you have a P.O. box, see	instructio	ns.				A	Apt. no.		Preside	ntial Ele	ction Campa	aign
_160 LAK	ESID	E DR						_ 1	712				ou, or your	Φ0
City, town, or p	ost offi	ce. If you have a foreign address, also co	mplete sp	aces belov	w.	Stat	te	ZIP c	ode		•	٠.	jointly, want : nd. Checking	
SAINT CHARLES								60174			•		not change	,
Foreign country	Foreign country name Foreign province/state/co				ounty	у	Foreign postal code			your tax	or refu		use	
Filing Status	, X	Single	•				Head of he	ouseh	old (HOI	1)				
Check only		☐ Married filing jointly (even if only one had income)												
one box.		☐ Married filing separately (MFS) ☐ Qualifying surviving spouse (QS									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												
	qu	alifying person is a child but not you	ır depen	dent:										
Digital	At ar	ny time during 2023, did you: (a) rec	eive (as a	reward	award or r	navm	ent for prope	rtv or	services). or (l	a) sell			
Assets		nange, or otherwise dispose of a dig											es 🛛 No	
Standard		neone can claim: You as a de					a dependent				,			
Deduction		Spouse itemizes on a separate retur	•			- 4								
Ago/Blindnos	. Vau	: Were born before January 2, 1	050	Are blin	d Spo	11001	□ Was bor	n hofe	oro Janu	on/ 2	1050		s blind	
	_		333 _		<u> </u>	use.		14					see instruction	nue).
-		s (see instructions): (1) First name Last name					(3) Relationsh to you	iib (Child tax cre				r other depende	
If more than four	(.,.	(7)								П			$\overline{}$	
dependents,													H	
see instruction	s —												一 一	
and check here \Box]												一	
Income	1a	Total amount from Form(s) W-2, b	ox 1 (see	instruction	ons)					. .	1a		330,142	2.
	b	Household employee wages not re	eported o	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								1d					
W-2G and 1099-R if tax	е	Taxable dependent care benefits from Form 2441, line 26							1e					
was withheld.	f	Employer-provided adoption benefits from Form 8839, line 29						1f						
If you did not	g	Wages from Form 8919, line 6 .									1g			
get a Form W-2, see	h	Other earned income (see instruct	ions) .								1h		C	Ο.
instructions.	i	Nontaxable combat pay election (s	see instru	uctions) .			<u>1</u> i							
	Z	Add lines 1a through 1h									1z		330,142	2.
Attach Sch. B if required.	2 a	Tax-exempt interest	2a			b Ta	axable interest	t.			2b	1		
	3a	Qualified dividends	3a			b O	rdinary divide	nds .			3b	1		
Standard	4a		4a			b Ta	axable amoun	t			4b			
Deduction for—	5a		5a				axable amoun				5b			
Single or Married filing	6a		6a				axable amoun	t			6b	+		
separately,	С	If you elect to use the lump-sum election method, check here (see instructions)												
\$13,850 Married filing	7		Schedule D if required. If not required, check here					. ∟	7	+				
jointly or Qualifying	8	Additional income from Schedule 1, line 10							8	+		<u>).</u>		
surviving spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income							9	+	330,142	<u>.</u>		
\$27,700 • Head of	10	Adjustments to income from Schedule 1, line 26								10	+	220 111		
household, \$20,800	11	Subtract line 10 from line 9. This is									11	+	330,142	
If you checked	12	Standard deduction or itemized		•		-					12	+	13,850	J .
any box under Standard	13	Qualified business income deduction from Form 8995 or Form 8995-A						13	+	12 050				
Deduction, see instructions.	14	Add lines 12 and 13							14	+	13,850			

Form 1040 (2023	3)								Page 2		
Tax and	16	Tax (see instructions). Ch	neck if any from Form	(s): 1 881	4 2 4972	3 🗌		16	82,597.		
Credits	17	· · · · · · · · · · · · · · · · · · ·									
	18	Add lines 16 and 17 .						18	82,597.		
	19	Child tax credit or credit	for other dependent	ts from Sched	ule 8812			19			
	20	Amount from Schedule	3, line 8					20			
	21	Add lines 19 and 20 .						21			
	22	Subtract line 21 from lin	e 18. If zero or less,	enter -0				22	82,597.		
	23	Other taxes, including s	elf-employment tax,	from Schedule	e 2, line 21			23	1,275.		
	24	Add lines 22 and 23. Th	s is your total tax					24	83,872.		
Payments	25	Federal income tax with	held from:								
	а	Form(s) W-2				25a 55	5,532.				
	b	Form(s) 1099				25b					
	С	Other forms (see instruc	tions)			25c	0.				
	d	Add lines 25a through 2	5c					25d	55,532.		
If you have a	26	2023 estimated tax payı	ments and amount a	pplied from 20	122 return			26			
qualifying child,	27	Earned income credit (E	IC)		No .	27					
attach Sch. EIC.	28	Additional child tax credi	t from Schedule 8812	!		28					
	29	American opportunity cr	edit from Form 8863	8, line 8 . .		29					
	30	Reserved for future use				30					
	31	Amount from Schedule	3, line 15			31 11	,255.				
	32	Add lines 27, 28, 29, and	d 31. These are your	total other pa	ayments and refu	ndable credits		32	11,255.		
	33	Add lines 25d, 26, and 3	32. These are your to	tal payments				33	66,787.		
Refund	34	If line 33 is more than lin	e 24, subtract line 2	4 from line 33.	This is the amoun	t you overpaid		34			
	35a	Amount of line 34 you w			is attached, chec	k here		35a			
Direct deposit?	b	Routing number X X					Savings				
See instructions.	d	d Account number X X X X X X X X X X X X X X X X X X X									
	36	Amount of line 34 you w	ant applied to your :	2024 estimate	ed tax	36					
Amount You Owe	37	Subtract line 33 from lin For details on how to pa						37	17,085.		
	38	Estimated tax penalty (s	ee instructions) .			38					
Third Party	Do	you want to allow and	ther person to disc	cuss this retu	n with the IRS?	See		,			
Designee	ins	structions			omplete	below.	⋈ No				
		Designee's name		Phone		Personal identification number (PIN)					
Sign	Un	der penalties of perjury, I decl ief, they are true, correct, and				lules and statemen	ts, and to		, ,		
Here			complete. Declaration (sed on an imormati			, ,		
	Yo	ur signature		Date	Your occupation				nt you an Identity IN, enter it here		
Joint return? See instructions. Keep a copy for your records.					SOFTWARE E	NGINEER		e inst.)	114, 01101 11 11010		
	Sp	Spouse's signature. If a joint return, both must sign.			Spouse's occupation			If the IRS sent your spouse an Identity Protection PIN, enter it here			
							(see	e inst.)			
		Phone no.					_				
Paid	Pre	eparer's name	Preparer's signat	ure		Date	PTIN		Check if:		
Preparer	VENE	VENKATA SAI PAVAN KUMAR DUDIPALLI VENKATA SAI			PAVAN KUMAR DUDIPALLI PO				2470833 Self-employed		
Use Only	Fir						none no. (678)965-9522				
Joe Jiny	Fir	m's address 245 ROC	Firn	n's EIN	88-2145487						