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	, 20 See separate instruction		e instructions.	
Your first name and middle initial				Last name			You	Your social security number		
VINATHI			MANI	MANDA				** **	3828	
If joint return, s	pouse's	s first name and middle initial	Last na	ame			Spo	use's soci	ial security number	
Home address	(numbe	er and street). If you have a P.O. box, see	instructi	ions.		Apt. no.	Pre	sidential F	Election Campaign	
531 BELM	ITNO	E PARK NORTH				Check here if you, or your				
City, town, or p	ost offic	ce. If you have a foreign address, also co	mplete s	spaces below.				ig jointly, want \$3 fund. Checking a		
Dayton				ОН		1 - 1 0 -			ill not change	
Foreign country name				Foreign province/state/o	Foreign postal code yo		r tax or re	_		
									You Spouse	
Filing Status	\mathbf{x}	Single			☐ Head of he	ousehold (HOH				
Check only		☐ Married filing jointly (even if only one had income)								
one box.		Married filing separately (MFS)	se (QSS							
	lf y	ou checked the MFS box, enter the	nter the	child's r	name if the					
	qu	alifying person is a child but not you	r deper	ndent:						
Digital	At ar	ny time during 2023, did you: (a) rece	eive (as	a reward, award, or i	pavment for prope	rty or services):	or (b) s	ell.		
Assets		ange, or otherwise dispose of a digi							Yes 🛛 No	
Standard	Som	eone can claim:	penden	t	e as a dependent					
Deduction		Spouse itemizes on a separate return			alien					
Ago/Blindness	Vari	Were been before January 2, 19	050 F	Arablind Cna	Was box	n before Janua	n/2 10	50 D	Is blind	
		Were born before January 2, 19	959 [, ,		or (see instructions):	
Dependents		instructions): irst name Last name	(2) Social security number (3) Relationship to you		iip · ·	x credit	1	t for other dependents		
If more	(1)1	Last Harrie		Trainipor to you		- Crima ta		Oroun		
than four dependents,	·					<u> </u>		_		
see instructions	s					+	-	+		
and check here \square	l :						_	_		
-	1a	Total amount from Form(s) W-2, bo	ox 1 (se	e instructions)				1a	14,120.	
Income	b	Household employee wages not re						1b	11,1201	
Attach Form(s) W-2 here. Also	c	Tip income not reported on line 1a	1c							
attach Forms	d	Medicaid waiver payments not rep	1d							
W-2G and	е	Taxable dependent care benefits for						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	ons)				[1h	0.	
W-2, see instructions.	i	Nontaxable combat pay election (s		ructions)	1i					
	z	Add lines 1a through 1h						1z	14,120.	
Attach Sch. B if required.	2a	Tax-exempt interest	2a		b Taxable interest	t	[2b		
	3a	Qualified dividends	3a	1	b Ordinary divide	nds	[3b		
$\overline{}$	4a	IRA distributions	1a	1	b Taxable amoun	t	[4b		
Standard Deduction for—	5a	Pensions and annuities	5a	1)	b Taxable amoun	t	[5b		
Single or	6a	Social security benefits	3a		b Taxable amoun	t		6b		
Married filing separately,	С	If you elect to use the lump-sum el								
\$13,850	7	Capital gain or (loss). Attach Sched	. 🗆 [7						
Married filing jointly or	8	Additional income from Schedule 1	[8						
Qualifying surviving spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7,	[9	14,120.					
\$27,700	10	Adjustments to income from Sched	dule 1,	line 26				10		
Head of household,	11	Subtract line 10 from line 9. This is	your a	djusted gross incon	ne		[11	14,120.	
\$20,800 If you checked r	12	Standard deduction or itemized	deduct	tions (from Schedule	A)		[12	13,850.	
any box under Standard	13	Qualified business income deducti	on from	n Form 8995 or Form	8995-A			13		
Deduction,	14	Add lines 12 and 13						14	13,850.	
see instructions.	15	Subtract line 14 from line 11. If zer	o or les	s, enter -0 This is yo	our taxable incom	<u> </u>		15	270.	

(see instructions). Check if any from Form runt from Schedule 2, line 3	its from Schedu			. 20 . 21	26.	
lines 16 and 17	nts from Schedu			. 18 . 19 . 20 . 21	26.	
d tax credit or credit for other dependent unt from Schedule 3, line 8 lines 19 and 20	enter -0-	ule 8812		. 19 . 20 . 21	26.	
unt from Schedule 3, line 8	enter -0			. 20 . 21		
lines 19 and 20	enter -0			. 21		
cract line 21 from line 18. If zero or less, er taxes, including self-employment tax,	enter -0					
er taxes, including self-employment tax,						
	fuere Calesalula			. 22	26.	
lines 22 and 22. This is your total toy	from Schedule	2, line 21		. 23	0.	
lines 22 and 23. This is your total tax				. 24	26.	
eral income tax withheld from:						
n(s) W-2			25a 2,1	32.		
n(s) 1099			25b			
er forms (see instructions)			25c			
lines 25a through 25c	. 25d	2,132.				
B estimated tax payments and amount a	. 26					
ed income credit (EIC)		No .	27			
tional child tax credit from Schedule 8812	2		28			
rican opportunity credit from Form 8860	3, line 8		29			
erved for future use						
unt from Schedule 3, line 15						
lines 27, 28, 29, and 31. These are your	. 32					
lines 25d, 26, and 32. These are your to	otal payments			. 33	2,132.	
e 33 is more than line 24, subtract line 2	24 from line 33.	This is the amoun	t you overpaid .	. 34	2,106.	
		is attached, chec	k here	□ 35a	2,106.	
ing number * * * * * * X X	XX			ings		
ount number * * * * * * * *	* * * *	* * X X	XX			
unt of line 34 you want applied to your	2024 estimate	d tax	36			
ract line 33 from line 24. This is the am	ount you owe.					
details on how to pay, go to www.irs.go	v/Payments or	see instructions.		. 37		
nated tax penalty (see instructions) .			38			
want to allow another person to discons				lete below.	X No	
s	Phone		Personal identification			
	no.					
			sed on all illionnation of		-	
ature	Date	Your occupation			he IRS sent you an Identity otection PIN, enter it here	
		TТ		(see inst.)		
signature. If a joint return, both must sign.	Date		on	If the IRS se	the IRS sent your spouse an	
					entity Protection PIN, enter it here	
	(see inst.)					
	Email address	VINATHIREDDI				
			00 0000		Check if:	
	RAM SAGAR	GUPTA TALLAM	01/29/2024 **		Self-employed	
me GLOBAL TAXES LLC				Phone no.	(678) 965-9 <u>522</u>	
dress 245 ROONEY CT E BRU	JNSWICK NJ	J 08816		Firm's EIN	**-***1965	
for instructions and the latest information.		BAA	REV 01/21/24 PRO		Form 1040 (2023)	
	ines 25a through 25c	In forms (see instructions) Ilines 25a through 25c It estimated tax payments and amount applied from 20 ed income credit (EIC) Itional child tax credit from Schedule 8812 Irican opportunity credit from Form 8863, line 8 In earned for future use I	lines 25d, 26, and 32. These are your total payments 33 is more than line 24, subtract line 24 from line 33. This is the amount unt of line 34 you want refunded to you. If Form 8888 is attached, checking number * * * * * * * * *	Ilines 25a through 25c sestimated tax payments and amount applied from 2022 return ed income credit (EIC)	Initial Professional Components (see instructions)	