<b>1040</b>		artment of the Treasury—Internal Revenue Servi S. Individual Income Tax		urn	202	3	OMB No. 1545-	-0074	IRS Use Only	–Do not w	rite or stapl	le in this space.
For the year Jan. 1–Dec. 31, 2023, or other tax year beginning					, 2023, ending , 20				, 20	See separate instructions.		
Your first name and middle initial				t name					Your social security number			
BIPLAB				AHAPATRA						55	-	
If joint return, spouse's first name and middle initial Last na											ecurity number	
PURBA ACHA				ARVA					966	95	4710	
Home address (number and street). If you have a P.O. box, see instruction								A	Apt. no.		• •	tion Campaign
6307 BIC	GE LOV	N CMNS										u, or your
City, town, or post office. If you have a foreign address, also complete s				spaces bel	paces below. State							pintly, want \$3
ENFIELD					СТ							d. Checking a ot change
Foreign country	y name			Foreign pr	ovince/state/c	count	ty	Foreig	n postal code		or refun	. J.
											Vou You	Spouse
Filing Status	;	] Single					Head of ho	ouseh	old (HOH)			
Check only	X	X Married filing jointly (even if only one had income)									-	
one box.		Married filing separately (MFS)     Qualifying surviving spouse (QS)									ř.	
	-	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 depe	ndent:								
Digital	At ar	ny time during 2023, did you: (a) rec	eive (as	a reward	l, award, or	payr	ment for proper	ty or	services); or	(b) sell,		
Assets	exch	ange, or otherwise dispose of a dig	ital ass	et (or a fir	nancial intere	est ir	n a digital asse	t)? (Se	ee instruction	ns.)	Ves	s 🛛 No
Standard	Som	eone can claim: 🗌 You as a de	pender	nt 🗌	Your spouse	e as	a dependent					
Deduction		Spouse itemizes on a separate retur	n or yo	u were a	dual-status a	alien						
Age/Blindnes	s You:	Were born before January 2, 1	959 [	Are bl	ind Spo	ouse	: 🗌 Was bor	n befo	ore January 2	2, 1959	Is	blind
Dependent	s (see	instructions):		(2) 5	Social security	1	(3) Relationshi	ip (4	) Check the b	ox if quali	fi <mark>es for (</mark> se	ee instructions):
If more		(1) First name Last name			number to you				Child tax credit Credit for other depen			
than four												
dependents,												
see instruction and check	s – 							2				
here	]											
Income	1a	Total amount from Form(s) W-2, b								. 1a		41,854.
Attach Form(s)	b	Household employee wages not re				•		•		. <u>1b</u>	1	
W-2 here. Also	С									. <u>1</u> c		
attach Forms W-2G and	d								. 1d	-		
1099-R if tax	е	Taxable dependent care benefits from Form 2441, line 26						. <u>1e</u>				
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				•	• • • •	• •		. <u>1g</u>		
W-2, see	h	Other earned income (see instructions)							. 1h		0.	
instructions.	i										41,854.	
	<u>z</u>	Add lines 1a through 1h			· · · ·	ь т	· · · ·			. 1z	1	777.
Attach Sch. B if required.	2a 2a		2a 3a				axable interest Ordinary divider			. 2b . 3b	-	84.
	3a 4a		4a				axable amount			. 30 . 4b		
Standard	4a 5a		4a 5a				axable amount		·	. 40 . 5b		
Deduction for – Single or	6a						axable amount		· · ·	. <u>6</u> b	1	
Married filing	c											
separately, \$13,850	7	If you elect to use the lump-sum election method, check here (see instructions)								7		339.
Married filing jointly or	8								. 8			
Qualifying	9									. 9		43,054.
surviving spouse, \$27,700	10	Adjustments to income from Sche								. 10		
<ul> <li>Head of household,</li> </ul>	10       Adjustments to income from Schedule 1, line 26         11       Subtract line 10 from line 9. This is your adjusted gross income						. 11	_	43,054.			
\$20,800	12	_							. 12		27,700.	
If you checked any box under	13									-		
Standard Deduction,	14							. 14		27,700.		
see instructions.	15	Subtract line 14 from line 11. If zer	o or les	ss, enter -	0 This is ye	our <b>i</b>	taxable incom	е.		. 15		15,354.
				-								

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

Form **1040** (2023)

Form 1040 (2023	3)							Page <b>2</b>		
Tax and	16	Tax (see instructions). Check if any from Form(s):	<b>1</b> 8814	4 <b>2</b> 4972	3 🗌		16	1,528.		
Credits	17	Amount from Schedule 2, line 3	17							
	18	Add lines 16 and 17					18	1,528.		
	19	Child tax credit or credit for other dependents fr	rom Schedu	ule 8812			19			
	20	Amount from Schedule 3, line 8					20	1,000.		
	21	Add lines 19 and 20					21	1,000.		
	22	Subtract line 21 from line 18. If zero or less, enter	er-0				22	528.		
	23	Other taxes, including self-employment tax, from	n Schedule	2, line 21			23	0.		
	24	Add lines 22 and 23. This is your <b>total tax</b> .					24	528.		
Payments	25	Federal income tax withheld from:								
	a	Form(s) W-2								
	b	Form(s) 1099								
	С	Other forms (see instructions)			25c					
	d	Add lines 25a through 25c					25d	2,613.		
If you have a	26	2023 estimated tax payments and amount appli	ied from 20	22 return			26			
qualifying child,	27	Earned income credit (EIC)								
attach Sch. EIC.	28	Additional child tax credit from Schedule 8812								
	29	American opportunity credit from Form 8863, lin								
	30	Reserved for future use			30	7				
	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 <b>total</b>		-			33	2,613.		
Refund	34						34	2,085.		
neiuliu	35a	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you <b>overpaid</b> Amount of line 34 you want <b>refunded to you</b> . If Form 8888 is attached, check here						2,085.		
Direct deposit?	b	Amount of line 34 you want refunded to you. If Form 8888 is attached, check here         .         35a         2,085           Routing number         0         1         1         9         0         2         5         4         c Type:         Checking         Savings								
See instructions.	d	Account number 3 8 5 0 2 4 3 3								
	36	Amount of line 34 you want applied to your 2024 estimated tax 36								
Amount					00					
You Owe	37	Subtract line 33 from line 24. This is the <b>amoun</b> For details on how to pay, go to <i>www.irs.gov/Pa</i>					37			
	38	Estimated tax penalty (see instructions)			38		01			
Third Party										
Designee	Do you want to allow another person to discuss this return with the IRS? See instructions									
Designee	De	ignee's	Phone		Pers					
	na		no.			ber (PIN)				
Sign	Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete, Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.									
Here					ed on all mornau	I				
	Yo	ir signature Da	ate	Your occupation			e IRS sent you an Identity ection PIN, enter it here			
laint nation				SYSTEM ANA	T.VST	(see i		in, enter it here		
Joint return? See instructions.	Sp	ouse's signature. If a joint return, <b>both</b> must sign. Da	ite	Spouse's occupation		If the	f the IRS sent your spouse an			
Keep a copy for							dentity Protection PIN, enter it here			
your records.			HOME MAKER							
	Ph				RA15@GMAIL.C	MC				
Doid	Pre	parer's name Preparer's signature			Date	PTIN		Check if:		
Paid	SYAM	SYAM PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA RAM SAGAR GUPTA TALLAM 02/16/2024 PO.				P02082	82703 Self-employed			
Preparer	Fire	Firm's name GLOBAL TAXES LLC						Phone no. (678) 965-9522		
Use Only	Fire	Firm's address 245 ROONEY CT E BRUNSWICK NJ 08816					Firm's EIN 84-3171965			
Go to www.irs.go	ov/Form	1040 for instructions and the latest information.		BAA	REV 02/11/24 PRO			Form <b>1040</b> (2023)		
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