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



104 0		partment of the Treasury—Internal Revenue Service J.S. Individual Income Tax		ırn	202	3	OMB No. 1545-	0074	IRS Use O	nly—Do	not write	e or staple ir	ı this space.
For the year Ja	ec. 31, 2023, or other tax year beginning	, 2023, ending , 20					See	See separate instructions.					
Your first name and middle initial Last na					name						Your social security number		
DHIRAJ PADMAKAR NILA										12	123 45 2096		
If joint return, s	e's first name and middle initial	me				Spc	Spouse's social security numbe						
Home address	(num	ber and street). If you have a P.O. box, see	instructio	ns.				Α	pt. no.	Pre	sidenti	al Electio	n Campaigr
8545 16	6TH	AVE NE						1	17				,
City, town, or	post o	ffice. If you have a foreign address, also cor	mplete sp	aces belo	ow.	Sta	te	ZIP co	ode				
REDMOND						WA	4	980	52		•		J
Foreign countr	y nam	e	Fo	oreign pro	ovince/state/c	count	У	Foreig	n postal cod	Your social secur 123 45 2 Spouse's social secur Check here if you spouse if filing joi to go to this fund box below will no your tax or refund (c) or (b) sell, ctions.) Yes Tyou your tax or refund Tyou your t	r refund.	_	
											You	Spouse	
Filing Status	s [X Single					Head of ho	useh	(HOH) blo				
Check only	[Married filing jointly (even if only one had income)										*	
one box.	[☐ Married filing separately (MFS) ☐ Qualifying surviving spouse (QSS											
		f you checked the MFS box, enter the			ouse. If you	che	ecked the HOH	or QS	SS box, er	nter the	child	's name i	f the
	C	qualifying person is a child but not you	r depend	dent:									
Digital	At	any time during 2023, did you: (a) rece	eive (as a	a reward	. award. or i	pavn	nent for proper	tv or	services):	or (b) s	sell.		
Assets		change, or otherwise dispose of a digit	The second second		the state of the state of						[Yes	⊠ No
Standard	So	meone can claim: You as a dep	pendent		Your spouse	e as	a dependent						
Deduction		Spouse itemizes on a separate return			dual-status a	alien							
A ara /Dlindana		u: Were born before January 2, 19	250] Ara bli	nd Cna		. □ Was born	, bofo	ro longor	v 2 10	F0		
			939 <u> </u>	Are bli	•	use		14			101.00		
-		e instructions): First name Last name	(2) Social securit number			(3) Relationsh to you		p (4	Child tax credit Credit for other dependent				,
If more than four	(1)				named to you					1		Г	7
dependents,								-		1			1
see instruction	ıs							-					=
and check here	1									1			┪
-	1a	Total amount from Form(s) W-2, bo	ox 1 (see	instruct	tions)						1a	24	7 , 184.
Income	k		,								1000		
Attach Form(s) W-2 here. Also		Tip income not reported on line 1a (see instructions)							1c		~		
attach Forms	c		Medicaid waiver payments not reported on Form(s) W-2 (see instructions)								1d		
W-2G and	e	Taxable dependent care benefits from Form 2441, line 26							1e				
1099-R if tax was withheld.	f	Employer-provided adoption benefits from Form 8839, line 29							1f				
If you did not	ç	Wages from Form 8919, line 6							1g				
get a Form	ŀ	Other earned income (see instructions)							1h		0.		
W-2, see instructions.	i	Nontaxable combat pay election (s	ee instru	uctions)			1i						-
	Z	Add lines 1a through 1h								•0	See separate Your social set 123 45 Spouse's social set 123 45 Spouse's social set 123 45 Check here if spouse if filling to go to this set 125 15 Check here if spouse if filling to go to this set 125 15 Check here if spouse if filling to go to this set 125 15 Check here if spouse if filling to go to this set 125 15 Check here if spouse if filling to go to this set 125 15 Check here if spouse if filling to go to this set 125 15 Check here if spouse if filling to go to this set 125 15 Check here if spouse if filling to go to this set 125 15 Check here if spouse if filling to go to this set 125 15 Check here if spouse if filling to go to this set 125 15 Check here if spouse if filling to go to this set 125 15 Check here if spouse if filling to go to this set 125 15 Check here if spouse if filling to go to this set 125 15 Check here if spouse if filling to go to this set 125 15 Check here if spouse if filling to go to this set 125 15 Check here if spouse if s	24	7,184.
Attach Sch. B	2 a	Tax-exempt interest 2	2a			b Ta	axable interest				2b		11.
if required.	3a	Qualified dividends	За		521.	b 0	rdinary dividen	ds .			3b		521.
	48	IRA distributions 4	la l			b Ta	axable amount			•	4b	separate instruscocial security 3 45 20 3e's social security dential Election k here if you, case if filing joint to this fund. Color of the case or refund. Tyou child's name in the case of	
Standard Deduction for—	5a	Pensions and annuities 5	5a		, i	b Ta	axable amount			• 1	5b		
Single or	6a	Social security benefits	Sa			b Ta	axable amount				6b		
Married filing separately,	C	If you elect to use the lump-sum el	If you elect to use the lump-sum election method, check here (see instructions)										
\$13,850 Married filing jointly or	7	Capital gain or (loss). Attach Scheo	Capital gain or (loss). Attach Schedule D if required. If not required, check here							7		3,000.	
	8	Additional income from Schedule 1	Additional income from Schedule 1, line 10							8		4,540.	
Qualifying surviving spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7,	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income							9	21	0,176.	
\$27,700 Head of	10		Adjustments to income from Schedule 1, line 26										_
household,	11	Subtract line 10 from line 9. This is								21			0,176.
\$20,800 If you checked	12	Standard deduction or itemized of								• 1	12	1	3,850.
any box under Standard	13	Qualified business income deduction from Form 8995 or Form 8995-A							13		0.		
Deduction,	14	Add lines 12 and 13									3,850.		
see instructions.) 15	Subtract line 1/1 from line 11. If zero	o or lace	antar	∩ Thie ic v	aur t	avabla income	_			45	1 0	6 326

Form 1040 (202	3)								Page 2		
Tax and	16	Tax (see instructions). Check	if any from Form	(s): 1 881	4 2 🗌 4972	3 🗌		16	41,568.		
Credits	17										
	18								41,568.		
	19	Child tax credit or credit for	other dependent	ts from Sched	ule 8812			19			
	20	Amount from Schedule 3, lir	ne 8					20			
	21	Add lines 19 and 20						21			
	22	Subtract line 21 from line 18	. If zero or less,	enter -0				22	41,568.		
	23	Other taxes, including self-e	mployment tax,	from Schedule	e 2, line 21			23	425.		
	24	Add lines 22 and 23. This is	your total tax					24	41,993.		
Payments	25	Federal income tax withheld									
	а	Form(s) W-2				25a 47	,758.				
	b	Form(s) 1099				25b					
	C	Other forms (see instruction	s)			25c	425.				
	d	Add lines 25a through 25c						25d	48,183.		
If you have a	26	2023 estimated tax paymen	ts and amount a	pplied from 20	022 return			26			
qualifying child,	27	Earned income credit (EIC)			No .	27					
attach Sch. EIC.	28	Additional child tax credit from	m Schedule 8812			28					
	29	American opportunity credit	from Form 8863	8, line 8		29					
	30	Reserved for future use .				30					
	31	Amount from Schedule 3, lir	ne 15			31					
	32	Add lines 27, 28, 29, and 31	. These are your	total other pa	ayments and refu	ndable credits		32			
	33	Add lines 25d, 26, and 32. T	hese are your to	tal payments				33	48,183.		
Refund	34	If line 33 is more than line 24	1, subtract line 2	4 from line 33.	This is the amoun	t you overpaid		34	6,190.		
	35a							35a	6,190.		
Direct deposit?	b										
See instructions.	d	Account number X X X	X X X X	X X X	X X X X X	XX					
	36	Amount of line 34 you want	applied to your	2024 estimate	ed tax	36					
Amount	37	Subtract line 33 from line 24	. This is the amo	ount you owe							
You Owe		For details on how to pay, g						37			
	38	Estimated tax penalty (see in	nstructions) .			38					
Third Party	Do	you want to allow another	person to disc	cuss this retu	rn with the IRS?	See					
Designee	instructions						omplete l	pelow.	⋉ No		
_		Designee's		Phone Personal number (fication			
<u></u>		name no. number (PIN) Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge are									
Sign		lief, they are true, correct, and com									
Here	Yo	ur signature		Date	Your occupation		If the	IRS se	nt you an Identity		
	10	ar orginataro		Duto	Tour occupation				IN, enter it here		
Joint return?							(see	inst.)			
See instructions.		Spouse's signature. If a joint return, both must sign.			Spouse's occupation	on			IRS sent your spouse an		
Keep a copy for your records.								tity Proti inst.)	ection PIN, enter it here		
,	Phone no.			Email address							
		eparer's name	Preparer's signat			Date	PTIN		Check if:		
Paid		M PRIYA RAM SAGAR GUPTA TALLAM			מווסתא האדדאא	02/25/2024	P0208	2702	Self-employed		
Preparer				MAIN SAGAK	GOLIA TATTAM	02/23/2024					
Use Only								Phone no. (678) 965-9522 Firm's EIN 84-3171965			
-	Fir	m's address 245 ROONE	T CI E BRU	MONTCV N	0 00010		Firm	SEIN	84-3171965		