<b>E1040</b>	Department of the Treasury-Internal Revenue Service U.S. Individual Income Tax Retur			turn	202	3 OMB No. 1545-0074 IRS Use Only		-Do not write or staple in this space.				
For the year Jar	a. 31, 2023, or other tax year beginning	, 2023, ending , 20				, 20	See separate instructions.					
Your first name	and mi	ddle initial	Last r	name						Your so	cial secu	urity number
PRASHANT	гн		SUN	КÜ						123	45	7375
		s first name and middle initial	Last r									security number
Home address	(numbe	er and street). If you have a P.O. box, see	instruc	tions.				A	vpt. no.	Preside	ntial Elec	ction Campaign
3543 167	7тн (	COURT NORTHEAST									,	ou, or your
City, town, or p	ost offic	ce. If you have a foreign address, also co	mplete	spaces be	low.	Sta	ate	ZIP c	ode			ointly, want \$3 d. Checking a
REDMOND					WA			98052 bo				ot change
Foreign country	/ name			Foreign p	rovince/state/o	count	ty	Foreig	n postal code	your ta	k or refur	
											You	u Spouse
Filing Status	; 🗵	Single					Head of ho	ouseh	old (HOH)			
Check only		Married filing jointly (even if only or	ne had	l income)						(000)		
one box.	L	Married filing separately (MFS)		-f								:f +
		ou checked the MFS box, enter the alifying person is a child but not you									na s nan	
Digital		ny time during 2023, did you: (a) rece										
Assets		ange, or otherwise dispose of a digi		_				t)? (Se	e instructio	ons.)		s 🛛 No
Standard Deduction	_	eone can claim: L You as a de Spouse itemizes on a separate return	•		•		a dependent					
Age/Blindness	s You:	Were born before January 2, 1	959	Are bl	lind <b>Spc</b>	ouse	: 🗌 Was bor	n befo	ore January	2, 1959	🗌 Is	blind
Dependents	s (see	instructions):		(2) 5	Social security	,	(3) Relationsh	ip (4	) Check the I	oox if qual	ifies for (s	ee instructions):
If more	<b>(1)</b> Fi	(1) First name Last name			number to you			Child tax credit			Credit for	other dependents
than four												
dependents, see instructions	s ——											
and check	, <u> </u>											
here	]											
Income	1a	Total amount from Form(s) W-2, be			- i	• •	• • • •	• •	· · ·	· 1a		24,402.
Attach Form(s)		<b>b</b> Household employee wages not reported on Form(s) W-2								. 1b		
W-2 here. Also attach Forms	c d	<ul> <li>c Tip income not reported on line 1a (see instructions)</li> <li>d Medicaid waiver payments not reported on Form(s) W-2 (see instructions)</li> </ul>							· 10			
W-2G and	u e	Taxable dependent care benefits f					• •		· 16			
1099-R if tax was withheld.	f	Employer-provided adoption bene				•••		• •		. 11		
If you did not	a.	Wages from Form 8919, line 6			,					. 10		
get a Form	h								. 11		0.	
W-2, see instructions.	i											
	z	Add lines 1a through 1h								. 1z	:	24,402.
Attach Sch. B	2a	Tax-exempt interest	2a			bΤ	axable interest			. 2b	)	
if required.	3a	Qualified dividends	3a			bС	Ordinary divider	nds .		. 3b	)	
	4a	IRA distributions	4a			bΤ	axable amount	t		. 4b	•	
Standard Deduction for—	5a	Pensions and annuities	5a			bΤ	axable amount	t		. 5b	)	
Single or	6a	Social security benefits	6a			bΤ	axable amount	t		. 6b	•	
Married filing separately,	С											
<ul><li>\$13,850</li><li>Married filing</li></ul>	7	Capital gain or (loss). Attach Schee		•	•		-				_	
jointly or Qualifying	8									. 8	_	04 465
surviving spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7,		-				• •		. 9		24,402.
\$27,700 • Head of	10	Adjustments to income from Sche						• •		. 10		04 400
household, \$20,800	11	Subtract line 10 from line 9. This is						• •		. 11		24,402.
• If you checked	12         Standard deduction or itemized deductions (from Schedule A)         .									. 12		13,850.
any box under Standard	13       Qualified business income deduction from Form 8995 or Form 8995-A       .       .       .       .         14       Add lines 12 and 13								. 13		13,850.	
Deduction, see instructions.	uctions. An or her all the data for all a data for a second							. 14		10,552.		
	15				5. 1113 IS Y	Jui		<b>.</b>		. 10	<u> </u>	10,002.

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

Form **1040** (2023)

Form 1040 (2023	5)									Page <b>2</b>
Tax and	16	Tax (see instruc	tions). Check	if any from Form	(s): <b>1</b> 🗌 8814	4 <b>2</b> 4972	3 🗌		16	1,058.
Credits	17	Amount from S	chedule 2, lin	e3					17	
	18	Add lines 16 an	nd 17						18	1,058.
	19	Child tax credit	or credit for a	other dependent	ts from Schedu	ule 8812			19	
	20	Amount from S	chedule 3, lin	e8					20	
	21	Add lines 19 an	nd 20					[	21	
	22	Subtract line 21	I from line 18.	If zero or less,	enter -0			[	22	1,058.
	23	Other taxes, inc	cluding self-er	nployment tax,	from Schedule	e 2, line 21 .			23	0.
	24	Add lines 22 an	nd 23. This is y	our <b>total tax</b>					24	1,058.
Payments	25	Federal income	tax withheld	from:						
-	а	Form(s) W-2					<b>25a</b> 2	,557.		
	b	Form(s) 1099 .					25b			
	С	Other forms (se	e instructions	)			25c			
	d	Add lines 25a tl	hrough 25c .					1	25d	2,557.
If you have a	26	2023 estimated	l tax payment	s and amount a	pplied from 20	22 return .			26	
qualifying child, attach Sch. EIC.	27	Earned income	credit (EIC) .				27			
	28	Additional child	tax credit fron	n Schedule 8812			28			
	29	American oppo	rtunity credit	from Form 8863	8, line 8		29			
	30	Reserved for fu	ture use				30			
	31	Amount from S								
	32	Add lines 27, 28, 29, and 31. These are your total other payments and refundable credits								
	33	Add lines 25d, 26, and 32. These are your total payments								2,557.
Refund	34	If line 33 is mor	e than line 24	, subtract line 24	4 from line 33.	This is the amou	nt you <b>overpaid</b>		34	1,499.
	35a	Amount of line 34 you want refunded to you. If Form 8888 is attached, check here								1,499.
Direct deposit?	b	Routing number	Savings							
See instructions.	d	Account number								
	36	Amount of line	34 you want <b>a</b>	pplied to your	2024 estimate	dtax	36			
Amount	37	Subtract line 33								
You Owe		For details on how to pay, go to www.irs.gov/Payments or see instructions					· ·	37		
	38	Estimated tax p	penalty (see in	structions) .			38			
Third Party			llow another	person to disc	cuss this retur	n with the IRS?				<b>•</b>
Designee		nstructions							X No	
	De: nar	signee's ne			Phone no.			onal identific oer (PIN)	ation	
Sign	Un	der penalties of per	jury, I declare th	at I have examined	d this return and	accompanying sche		. ,	best	of my knowledge and
Here	bel	belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which							repare	er has any knowledge.
пеге	Yo	ur signature			Date	Your occupation		If the I	RS sei	nt you an Identity
									tion P st.)	IN, enter it here
Joint return? See instructions.	- 0	noune's signature. If a joint rature, both must sign			Det	SOFTWARE ENGINEER				
Keep a copy for	Sp								ne IRS sent your spouse an ntity Protection PIN, enter it here	
your records.		(se								,
	Ph	one no.			Email address					
Deid		parer's name		Preparer's signat	ure		Date	PTIN		Check if:
Paid	VENK							P024708	333	Self-employed
Preparer										678)965-9522
Use Only				CT E BRU	NSWICK NJ	J 08816		Firm's		88-2145487
Go to www.irs.go	ov/Forn	n1040 for instructio				BAA	REV 02/16/24 PRO			Form <b>1040</b> (2023)