## Acknowledgement and General Information for Taxpayers Who File Returns Electronically

Thank you for participating in IRS e-file.

Taxpayer name			
DHRUVPALSINH	N	KHER	

Taxpayer address (option	al)
518 ORANGE AVENU	E
PORT ORANGE, FL	32127

1. X	x   Your federal income tax return for   2022   was filed electronically with the	IRS	Submission
	Processing Center. The electronic filing services were provided by ONETAXFILER LI	ιC	
2. <b>X</b>	X Your return was accepted on 03-16-2024 using a Personal Identification Number signature. You entered a PIN or authorized the Electronic Return Originator (ERO) to enter of for you. The Submission ID assigned to your return is 3895422024076xz0o5ds		nic
3.	Your return was accepted on Allow 4 to 6 weeks for the processing	g of your return.	
	The Earned Income Credit or a dependent's exemption on your return may be reduced or dis	allowed due to a	
	child's name and social security number mismatch.		
4.	Your electronic funds withdrawal payment request was accepted for processing.		
5.	Your electronic funds withdrawal payment request was not accepted for processing. Refer to	the "If You Owe Tax"	' section.

6. Your Form 4868, Application for Automatic Extension of Time to File U.S. Individual Income Tax Return, was accepted on \_\_\_\_\_\_. The Submission ID assigned to your extension is \_\_\_\_\_\_.

### DO NOT SEND A PAPER COPY OF YOUR RETURN TO THE IRS. IF YOU DO, IT WILL DELAY THE PROCESSING OF THE RETURN.

#### If You Need to Make a Change to Your Return

If you need to make a change or correct the return you filed electronically, you should send a Form 1040X, Amended U.S. Individual Income Tax Return, to the IRS Submission Processing Center that processes paper returns for your area. The address is available at *www.irs.gov*, or you can call the IRS toll-free at 1-800-829-1040.

#### If You Need to Ask About Your Refund

The IRS notifies your Electronic Retum Originator (ERO) when your retum is accepted, usually within 48 hours. If your retum was not accepted, the IRS notifies your ERO of the reasons for rejection. If it has been more than three weeks since the IRS accepted your return and you have not received your refund, go to *www.irs.gov* and click on "Where's My Refund?" to view your refund status. Exception: If box 3 above is checked, allow 4 to 6 weeks for processing of your return. A notice will be sent to you advising of changes to your return.

Also, you can call the TeleTax line at 1-800-829-4477, for automated refund information. You should have available the first social security number shown on your return, your filing status, and the exact amount of the refund you expect. TeleTax gives you the date for mailing or depositing your refund. You should receive your refund check within 30 days of the date given by TeleTax, or within one week of that date, if you chose direct deposit. If you do not receive it by then, or if TeleTax does not give your refund information, call the Refund Hotline at 1-800-829-1954.

The IRS uses refunds to cover overdue taxes and notifies you when this occurs. The Fiscal Service offsets refunds through the Treasury Offset Program to cover past due child support, federal agency non-tax debts such as student loans and state income tax obligations. Fiscal Service sends you an offset notice if it applies your refund or part of your refund to non-tax debts. If you have questions about the offset, contact the agency identified in the notice. You may also call the Treasury Offset Program Call Center at 1-800-304-3107, if you have additional questions.

#### If You Owe Tax

If your return has a balance due, you must pay the amount you owe by the prescribed due date. If you paid by electronic funds withdrawal (direct debit) or by credit card, no voucher is needed. The credit card service providers will charge a convenience fee based on the amount of taxes you are paying. The fees and the type of credit or debit cards accepted may vary between providers. You will be told the amount of the fee during the transaction and you will be given the option to either continue or end the transaction. For information on paying your taxes electronically, including by credit or debit card, go to *www.irs.gov/e-pay*.

If you are not paying electronically you may use Form 1040-V, Payment Voucher, which you can obtain from your Electronic Retum Originator. If the IRS does not receive your payment by the prescribed due date, you will receive a notice that requests full payment of the tax due, plus penalties and interest. If you can not pay the amount in full, complete Form 9465, Installment Agreement Request, which you may file electronically. To apply for an installment agreement online, go to *www.irs.gov*. You may also order Form 9465 by calling 1-800-TAX-FORM (1-800-829-3676). If approved, the IRS charges a user fee to set up an installment agreement.

#### If You Need to Inquire About Your Electronic Funds Withdrawal Payment

You may call 1-888-353-4537 to inquire about the status of your electronic funds withdrawal payment. If there is a change to the bank account information included on your return, you should call this number to cancel a scheduled payment. You should have available the social security number of the first person listed on the tax return, the payment amount, and the bank account number. Cancellation requests must be received no later than 11:59 p.m. E.T. two business days prior to the scheduled payment date.

#### **Tax Refund Related Financial Products**

Financial institutions offer a variety of financial products to taxpayers based on their refunds. Contracts for financial products are between you and the financial institution. The IRS is not associated with the contract. **If you have questions about tax refund related products, contact your Electronic Return Originator or the lender.** 

#### Instructions for Electronic Return Originators

Line 2 - PIN Presence Indicator - Check box 2 if the taxpayer entered a PIN or authorized the ERO to enter or generate the PIN for the taxpayer, and the Acknowledgement File PIN Presence Indicator is a "Practitioner PIN," "Self-Select PIN" or "Online Filer PIN." Form 8879, IRS *e-file* Signature Authorization, is required if the ERO enters or generates the PIN or if the Practitioner PIN method is used. Use Form 8453, U.S. Individual Income Tax Transmittal for an IRS *e-file* Return, to send required paper forms or supporting documentation listed next to the form check boxes (do not send Forms W-2, W-2G, or 1099R).

Line 3 - Exception Processing - Check box 3 if the Acknowledgement File Acceptance Code equals "Exception." The acceptance code indicates that this return has been previously rejected and this subsequent submission still has invalid data.

Line 4 - Payment Acknowledgement Literal - Check box 4 if the taxpayer requested to use electronic funds withdrawal to pay the balance due, and the Acknowledgement File Payment Acknowledgement Literal field equals "Payment Request Received."

Line 5 - Payment Acknowledgement Literal - Check box 5 if the taxpayer requested to use electronic funds withdrawal to pay the balance due, and the Acknowledgement File Payment Acknowledgement Literal field does not equal "Payment Request Received." If box 5 is checked, inform the taxpayer that he/she must pay by check, money order, debit card, or credit card.

Note: EROs can use the Acknowledgement File information, translated by the transmitter, to complete Form 9325.

#### DHRUVPALSINH N KHER

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#### Department of the Treasury - Internal Revenue Service ded LLS Individual Income Tax Return

	► Use t	his revision to amend 202	20 or later tax	x re	turns.			3 No. 1545-0074
(Rev. July 2021)	► Go to www.irs.	gov/Form1040X for instr	uctions and	the	latest informatio	on. <b>DO</b>	NO	<u>T MAIL</u>
This return i	s for calendar year (enter year) 202	2 or fiscal year (	enter month	n an	d year ended)			
Your first name and	I middle initial	Last name				Your social s	ecurity n	umber
DHRUVPAL	DHRUVPALSINH N KHER				098-79-2034			
If joint return, spous	e's first name and middle initial	Last name				Spouse's soo	ial securi	ty number
Current home addre	ess (number and street). If you have a P.O. box, see ins	tructions.			Apt. no.	Your phone n	ımber	
518 ORAN	GE AVENUE					310-95	4-639	3
City, town or post o	ffice, state, and ZIP code. If you have a foreign address	, also complete spaces below. See	e instructions.					
PORT ORA	NGE, FL 32127							
Foreign country nar	ne	Foreign prov	ince/state/county			Foreig	n postal c	ode
change your Single [ If you checke	ed the MFS box, enter the name of yo	to married filing separa iling separately (MFS)	ately after th	ie re f ho	eturn due date. ousehold (HOH)	🗌 Qua	lifying	widow(er) (QW)
-	hild but not your dependent		4					
	s 1 through 23, columns A through C	the amounts for the re	turn		A. Original amount reported or as	B. Net cha amount of ind		C. Correct
year entered					previously adjusted (see instructions)	or (decreas explain in P		amount
	n page 2 to explain any changes.				(366 1131 461013)	explainin		
	ed gross income. If a net operating loss (N	OL) carryback is						
	ed, check here			1	108,624	(28,	ممما	80,624
	ed deductions or standard deduction			2	12,950	(20)		12,950
	ct line 2 from line 1			3	95,674	(28,	000)	67,674
				a	557071	(20)		077071
	ed business income deduction			b				
	e income. Subtract line 4b from line 3. If th							
enter -	0		!	5	95,674	(28,	000)	67,674
Tax Liabilit								
6 Tax. E	nter method(s) used to figure tax (see instr	uctions):						
TABL	E			6	16,798	(6,	292)	10,506
7 Nonref	undable credits. If a general business cre	dit carryback is						
include	ed, check here		. 🕨 🗌 🔡	7	4,500			4,500
8 Subtra	ct line 7 from line 6. If the result is zero or	ess, enter -0		8	12,298	(6,	292)	6,006
9 Reserv	ved for future use		!	9				
10 Other				0				
	ax. Add lines 8 and 10		1	1	12,298	(6,	292)	6,006
Payments								
12 Federa	al income tax withheld and excess social se	ecurity and tier 1 RRTA						
	hheld. (If changing, see instructions.) .			2	5,855			5,855
	ted tax payments, including amount applied			3				
	l income credit (EIC)		1	4				
	dable credits from: Schedule 8812 F							
	3 🗌 8885 🗌 8962 or 🗌 other (specify)			5				
	mount paid with request for extension of ti							
•							16	6,443
	ayments. Add lines 12 through 15, column	C, and line 16		• •	••••		17	12,298
	Amount You Owe							
	ayment, if any, as shown on original return		-				18	
	ct line 18 from line 17. (If less than zero, so						19	12,298
	nt you owe. If line 11, column C, is more						20	
21 If line '	11, column C, is less than line 19, enter th	e difference. This is the a	mount <b>overp</b> a	aıd	on this return		21	6,292

11, column C, is less than line 19, enter the difference. This is the amount overpaid on this return. . . . 21 22 Amount of line 21 you want applied to your (enter year): estimated tax 23 Complete and sign this form on page 2.

For Paperwork Reduction Act Notice, see separate instructions.

Form 1040-X (Rev. 7-2021)

6,292

EEA

22

23

Part	I Dependents				
This w	lete this part to change any information relating to your dependents. Yould include a change in the number of dependents. The information for the return year entered at the top of page 1.		A. Original number of dependents reported or as previously adjusted	B. Net change amount of increase or (decrease)	C. Correct number
24	Reserved for future use	24			
25	Your dependent children who lived with you	25			
26	Your dependent children who didn't live with you due to divorce or				
	separation	26			
27	Other dependents	27			
28	Reserved for future use	28			
29	Reserved for future use	29			
30	List <b>ALL</b> dependents (children and others) claimed on this amended return.				

Dependents (see instructions):		(b) Social security	(a) Deletionship	(d) Check if qualifies for (see instructions):		
If more than four	(a) First name	Last name	number	(c) Relationship to you	Child tax credit	Credit for other dependents
dependents,						
see						
instructions						
and check					<u>_</u>	
here 🕨 🗌						

Part II Presidential Election Campaign Fund (for the return year entered at the top of page 1)

Checking below won't increase your tax or reduce your refund.

Check here if you didn't previously want \$3 to go to the fund, but now do.

Check here if this is a joint return and your spouse did not previously want \$3 to go to the fund, but now does.

**Part III Explanation of Changes.** In the space provided below, tell us why you are filing Form 1040-X.

► Attach any supporting documents and new or changed forms and schedules.

DEAR IRS

Form 1040-X (Rev. 7-2021)

THIS IS BRINGING TO YOUR NOTICE THAT WE HAVE FILED 2022 REGULAR TAX RETURNS ON 02ND FEB 2024 IN WHICH UNFORTUNATELY WE REPORTED \$28000 OF GAMBLING INCOME. SO WE ARE REQUESTING YOU TO CONSIDER THIS 1040X AMENDMENT RETURN AFTER REMOVING THAT EXTRA \$28000 INCOME

	Remember to keep a copy of this form for your records. Under penalties of perjury, I declare that I have filed an original return, and that I have examined this amended return, including accompanying schedules and statements, and to the best of my knowledge and belief, this amended return is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information about which the preparer has any knowledge.										
Sign Here	41045 Your signature	03-17-20 Date		UT occupation							
	Spouse's signature. If a joint return, <b>both</b> must sign.	Date	Sp	ouse's occupatior							
	Preparer's signature		Date	Check if	PTIN						
Paid	MAHESH		03-23-2024	-2024 self-employed P0205383							
Preparer	Print/Type preparer's name MAHESH										
Use Only	Firm's name <b>• ONETAXFILER LLC</b>			Firm's EIN ►							
Use Only	Firm's address ► 539W.COMMERCE STREET	Phone no.									
	Dallas, TX 75208	312-248-7571									
For forms and p	publications, visit www.irs.gov/Forms.			Form <b>104</b>	<b>0-X</b> (Rev. 7-2021)						

EEA

	DEC				1 1				
LE 1040	<u>-N</u>	R U.S. Nonresident Ali			2022	OMB No. 154	45-0074	S Use Only-E or staple in th	nis space.
For the year Ja	n. 1–C	ec. 31, 2022, or other tax year beginr	ning	, 2022	, ending		20		eparate ictions.
Filing Status Check only		Single Married filing sepa you checked the QSS box, enter the ch	• • •	— • •	g surviving spouse (( is a child but not you		Estat	e 🗌	Trust
one box. Your first name	and n	niddle initial	Last name				Your ide	ntifying nu	umber
							(see instr	, ,	
DHRUVPALSI	и ни	1	KHER				098-7	9-2034	
Home address	(numt	per and street). If you have a P.O. box,	see instructio	ons.				Ар	t. no.
518 ORANGE									
		ice. If you have a foreign address, also	o complete spa	aces below.		State		ZIP code	
PORT ORANG		<u>.</u>	Eoreign pro	vince/state/county		FL Foreign n	ostal code	32127	
1 oreigin country	name	-		Vince/state/county		lioleigii p		,	
Digital Assets	At a	ny time during 2022, did you: (a) recei	ve (as a rewa	ard, award, or paymen	t for property or serv	/ vices); or (b	) sell, exc	hange, gift	, or
		erwise dispose of a digital asset (or a f						_	x No
Dependents						<b>(4)</b> Ch	eck the box	- I	or (see inst.)
(see instructions)	:	(1) First name Last name		(2) Dependent's identifying number	(3) Relationship to y	ou Child	tax credit		for other endents
		.,		, , ,			$\Box$		
If more than four									
dependents, see instructions and									
check here									
Income	1a	Total amount from Form(s) W-2, box	1 (see instruc	ctions)			1a		57,511
Effectively	b	Household employee wages not repo	orted on Form	n(s) W-2			1b		
Connected	С	Tip income not reported on line 1a (s		,					
With U.S.	d	Medicaid waiver payments not report	,	, ,					
Trade or	e	Taxable dependent care benefits from							
Business	f	Employer-provided adoption benefits							
Attach	g	Wages from Form 8919, line 6							
Form(s) W-2,	h i	Other earned income (see instruction Reserved for future use					m		
1042-S, SSA-1042-S,	i						1j		
RRB-1042-S,	, k	Total income exempt by a treaty from			em l		,		
and 8288-A here. Also	ĸ	line 1(e)		, ,					
attach	z	Add lines 1a through 1h			· · · ·		1z		57,511
Form(s)	2a	Tax-exempt interest 2	a	<b>b</b> Tax	able interest		2b		
1099-R if tax was	3a	Qualified dividends 3	a	b Orc	linary dividends		3b		
withheld.	4a	IRA distributions 4			able amount				
lf you did not	5a	Pensions and annuities 5			able amount				
get a Form	6	Reserved for future use							
W-2, see instructions.	7	Capital gain or (loss). Attach Schedu							02 112
1130 0010115.	8 9	Other income from Schedule 1 (Form Add lines 1z, 2b, 3b, 4b, 5b, 7, and	,,						23,113
	9 10	Add lines 12, 20, 30, 40, 50, 7, and Adjustments to income:	o. 11115 15 you	in total enectively CC		••••			80,624
	a	From Schedule 1 (Form 1040), line 2	26		10a				
	b								
	c								
	d	Enter the amount from line 10a. The					10d	1	0
	11	Subtract line 10d from line 9. This is	-	-					80,624
	12	Itemized deductions (from Schedu	lle A (Form 10	040-NR)) or, for certa	ain residents of India	, standard			
				U.SIn	dia .Tax .Treat	y	12		12,950
	13a	Qualified business income deduction			13a				
	b	Exemptions for estates and trusts on		,					
	С	Add lines 13a and 13b							
	14 15								12,950
	15	Subtract line 14 from line 11. If zero	or less, ente	r -u I his is your tax	aple income		15		67,674

Form 1040-NR (2	2022)	DHRUVPALSINH N KHER				098-7	9-2034		Pa	age <b>2</b>
Tax and	16	Tax (see instructions). Check if a	ny from Fo	orm(s): <b>1</b> 🗌 88	14 <b>2</b> 497	2 3		16	10,5	506
Credits	17	Amount from Schedule 2 (Form 10	040), line 3	3				17		
	18	Add lines 16 and 17						18	10,5	506
	19	Child tax credit or credit for other	dependent	s from Schedule	3812 (Form 1040)			19		
	20	Amount from Schedule 3 (Form 10	040), line 8	3				20	4,5	500
	21	Add lines 19 and 20						21	4,5	500
	22	Subtract line 21 from line 18. If ze	ro or less,	enter -0				22	6,0	006
	23a	Tax on income not effectively con	nected wit	h a U.S. trade or	business from					
		Schedule NEC (Form 1040-NR),				23a				
	b	Other taxes, including self-employ								
		line 21				23b				
	с	Transportation tax (see instruction	ıs)			23c				
	d	Add lines 23a through 23c						23d		
	24	Add lines 22 and 23d. This is you						24	6.0	006
Payments	25	Federal income tax withheld from:								<u></u>
raymento	a	Form(s) W-2				25a	5,855			
	b	Form(s) 1099					57055			
	c	Other forms (see instructions)								
	d	Add lines 25a through 25c						25d	5 . 1	855
	e	Form(s) 8805						25e	570	<u></u>
	f	Form(s) 8288-A					ł	25f		
	g	Form(s) 1042-S						25g		
	9 26	2022 estimated tax payments and						23g 26		
	20	Reserved for future use		•				20		
	27	Additional child tax credit from Sch								
				, ,		28 29				
	29 20	Credit for amount paid with Form								
	30 24	Reserved for future use				30				
	31	Amount from Schedule 3 (Form 10	,.			31		20		•
	32	Add lines 28, 29, and 31. These a						32		
Defined	33	Add lines 25d, 25e, 25f, 25g, 26,						33 34	5,0	855
Refund	34 25 o	If line 33 is more than line 24, sul				• •		34 35a		
Dire et der esito	35a	Amount of line 34 you want <b>refur</b>						358		
Direct deposit? See instructions.	b	Routing number			<b>c</b> Type:		Savings			
	a	Account number								
	е	If you want your refund check mai	lied to an a	address outside tr	e United States h	ot snown on pag	je 1,			
		enter it here.				36				
A	36	Amount of line 34 you want appli	-		d tax	30				
Amount You Owe	37	Subtract line 33 from line 24. This		-				27		
Tou Owe		For details on how to pay, go to v	-	ov/Payments of s	ee instructions	· · · · · · · · ·		37	-	151
<b>T</b> 1.1.1	38	Estimated tax penalty (see instruct	,		•••••	38			<b> </b>	
Third	Do yo	u want to allow another person to di	Iscuss this	return with the IM	S? See Instruction	is. <b>Te</b>	s. Complet	e beio	w. <u>x</u> No	
Party Designee	Desig			Phone			nal identific	ation		ı
Designee	namē			no.			er (PIN)			
		penalties of perjury, I declare that I have they are true, correct, and complete. De								
Sign									ent you an Identit	
Here	YOURS	signature		Date	Your occupation				PIN, enter it here	
TICIC		41045		03-17-2024	ENGINEER		(see ir	1		
	Phone	eno. 310-954-6393		Email address	DNK.1195@GM	ATL.COM				
Deid			Preparer's			Date	PTIN		Check if:	
Paid	MAHE		AHESH	-		03-23-2024		837	Self-employ	ved
Preparer		name ONETAXFILER LI					Phone no			
Use Only		address 539W.COMMERCE		I					,	<u>.                                    </u>
		Dallas, TX 752					Firm's EIN	J		
		241140/ 11 / 34						<u> </u>		

Go to www.irs.gov/Form1040NR for instructions and the latest information.

Form 1040-NR (2022)

	a Employee's social security number	OMB No. 1545-	0008	Safe, accurate, FAST! Use	IRS	e-file	Visit the IRS website at www.irs.gov/efile
<b>b</b> Employer identification number (EIN)			1	Wages, tips, other comper	sation	2 Federal	income tax withheld
46-2951591				:	21,394		2,767
c Employer's name, address, and ZIP co	de		3	Social security wages		4 Social s	security tax withheld
L&T TECHNOLOGY SERVI	CES LTD						
			5	Medicare wages and tips		6 Medicar	re tax withheld
2035 LINCOLN HIGHWAY	STE 3002						
EDISON	NJ 08817	,	7	Social security tips		8 Allocate	ed tips
d Control number			9			10 Depend	lent care benefits
e Employee's first name and initial	Last name	Suff.	11	Nonqualified plans			tructions for box 12
						° C	15
DHRUVPALSINH NILES	KUMAR		13	Statutory Retirement employee plan	Third-party sick pay	12b C d DD	682
5002 BORDEAUX VILLAG	E PLACE A		14	Other		12c	
ТАМРА	FL 33617					C d	
						12d	
						C o d	
<b>f</b> Employee's address and ZIP code							
15 State Employer's state ID number	16 State wages, tips, etc. 17 Sta	ate income tax	18	Local wages, tips, etc.	19 Local in	come tax	20 Locality name
I							

Form W-2 Wage and Tax Statement

2022

Department of the Treasury-Internal Revenue Service

Copy B - To Be Filed With Employee's FEDERAL Tax Return. This information is being furnished to the Internal Revenue Service.

EEA The information on this Form W-2 was used to prepare the taxpayer's 2022 Federal tax return by ONETAXFILER LLC

	a Employee's social security number 098-79-2034	OMB No. 1545	Safe, accurate, -0008 FAST! Use	IRS	e-file	Visit the IRS website at www.irs.gov/efile
<b>b</b> Employer identification number (EIN)			1 Wages, tips, other comp	pensation	2 Federa	l income tax withheld
26-0845218				36,117		3,088
<b>c</b> Employer's name, address, and ZIP co	de		3 Social security wages		4 Social s	security tax withheld
KEMPF INC						
			5 Medicare wages and tip	s	6 Medica	re tax withheld
1245 LAKESIDE DR APT	3005					
SUNNYVALE	CA 94	4085	7 Social security tips		8 Allocate	ed tips
d Control number			9			dent care benefits
e Employee's first name and initial	Last name	Suff.	<b>11</b> Nonqualified plans		C o d e	structions for box 12
DHRUVPALSINH NILES	KUMAR		13 Statutory employee plan	nt Third-party sick pay	12b C d e	
14216 CYBER PLACE AP	T 102		14 Other		12c	
ТАМРА	FL 331	.63			o d e	
					12d C d e	
f Employee's address and ZIP code						
15 State Employer's state ID number	16 State wages, tips, etc. 1	7 State income tax	<b>18</b> Local wages, tips, etc.	<b>19</b> Local in	come tax	20 Locality name

# Form W-2 Wage and Tax Statement

2022

Department of the Treasury-Internal Revenue Service

Copy B - To Be Filed With Employee's FEDERAL Tax Return. This information is being furnished to the Internal Revenue Service.

EEA The information on this Form W-2 was used to prepare the taxpayer's 2022 Federal tax return by ONETAXFILER LLC

## FOR TAX YEAR 2022

DHRUVPALSINH N KHER

ONETAXFILER LLC 539W.COMMERCE STREET Dallas, TX 75208 (312)248-7571

#### 2022 Filing Instructions DHRUVPALSINH N KHER

#### Form filed:

Form 1040-NR and supplemental forms and schedules

#### Filing method:

The return has been e-filed, do not mail.

#### Due date:

04-18-2023

#### Balance due:

\$151

#### Transaction method:

To pay by check or money order, write "2022 Form 1040-NR," your name, address, SSN or ITIN, and daytime phone number on the payment, make it payable to "United States Treasury," and mail with Form 1040-V to the address below. To pay using your bank account (at no extra cost to you), go to IRS.gov/Payments. To pay by credit or debit card (for a fee), go to 1040paytax.com.

#### Other information:

To minimize penalties and interest, make your payment as soon as possible.

#### Mail-to address:

Internal Revenue Service P.O. Box 1303 Charlotte, NC 28201-1303

#### 2022 Form 1040-X Filing Instructions DHRUVPALSINH N KHER

#### Form filed:

Form 1040-X and supplemental forms and schedules

#### Filing method:

The amended return has been e-filed, do not mail.

#### Refund:

FINSTIC

\$6,292

#### Transaction method:

An amount of \$6,292 will be deposited into your CHASE BANK checking account ending in 5552.

## **ONETAXFILER LLC**

539W.COMMERCE STREET Dallas, TX 75208 MAHESH@ONETAXFILER.COM Phone: (312)248-7571 | Fax:

March 23, 2024

DHRUVPALSINH N KHER 518 ORANGE AVENUE PORT ORANGE, FL 32127

DHRUVPALSINH N KHER:

Enclosed is your 2022 Form 1040-X, Amended U.S. Individual Income Tax Return, prepared from the information provided. Your return has been e-filed with the IRS and was accepted on March 16, 2024.

Your amended return reflects a refund of \$6,292.

The amount of \$6,292 will be deposited into your CHASE BANK checking account ending in \*\*5552.

Thank you for the opportunity to be of service. For further assistance with your tax return needs, contact our office at (312)248-7571.

Sincerely,

MAHESH ONETAXFILER LLC

Acco	ount Transac	tion Summary		2022
Name(s) as shown on return				ID Number
DHRUVPALSINH N KHER			X	XX-XX-2034
Account #1				
Account #1 Financial Institution	CHASE BA	INK		
Routing Transit Number	26708413			
Account Number	2523235			
Account Type	checking			
	-			
Federal Amended Form				
Federal Deposit	6,292			
Net Deposit	6,292	_		
PLEASE VERIFY BANK INFORMATION				
1. Bank Name				
2. Bank Routing Transit Number				
3. Bank Account Number				
4. Bank Account Type				
This information is used to deposit your refun or you have closed the account, you are respo		ount due. If you have pr	ovided incorrect inf	ormation,
I have reviewed the above information and certify to use this account.	y that this information	is correct and authorize	ONETAXFILE	R LLC
Your Signature	Date	Spouse's Signature	(If Married Filing Join	tly) Date