



**2023 Form M1, Individual Income Tax**

Do not use staples on anything you submit.

<u>KUSHAL REDDY</u> Your First Name and Initial	<u>MOTLA</u> Last Name	<u>038833300</u> Your Social Security Number	<u>10182000</u> Your Date of Birth (MM/DD/YYYY)
_____ If a Joint Return, Spouse's First Name and Initial	_____ Spouse's Last Name	_____ Spouse's Social Security Number	_____ Spouse's Date of Birth
<u>4307 W 36 TH ST , ST LOUIS PARK</u> Current Home Address		Check if Address is: <input type="checkbox"/> New <input type="checkbox"/> Foreign	
<u>MINNEAPOLIS</u> City	<u>MN</u> State	<u>55416</u> ZIP Code	

**2023 Federal Filing Status (place an X in one box):**

(1) Single  (2) Married Filing Jointly  (3) Married Filing Separately  (4) Head of Household  (5) Qualifying Surviving Spouse

Spouse Name \_\_\_\_\_  
Spouse SSN \_\_\_\_\_

**State Elections Campaign Fund**

To grant \$5 to this fund, enter the code for the party of your choice. It will help candidates for state offices pay campaign expenses. This will not increase your tax or reduce your refund.

Political Party Code Numbers:	Republican . . . . .	Grassroots/Legalize Cannabis 14	Legal Marijuana Now . . . . .17
Your Code	Democratic/Farmer-Labor . . .12	Libertarian . . . . .	General Campaign Fund . . . . .99
Spouse's Code			

**From Your Federal Return (see instructions)**

<u>12402</u>	<u>0</u>	<u>0</u>	<u>-1448</u>
A. Wages, salaries, tips, etc.	B. IRA, pensions, and annuities	C. Unemployment	D. Federal taxable income
<b>1</b> Federal adjusted gross income (from line 11 of federal Form 1040 and 1040-SR) . . . . .	<b>1</b> ■	<u>12402</u>	
<b>2</b> Additions to income from line 10 of Schedule M1M and line 9 of Schedule M1MB (see instructions) . . . . .	<b>2</b> ■	_____	
<b>3</b> Add lines 1 and 2 . . . . .	<b>3</b>	<u>12402</u>	
<b>4</b> Itemized deductions (from Schedule M1SA) or your standard deduction (see instructions) . . . . .	<b>4</b> ■	<u>13825</u>	
<b>5</b> Exemptions (from Schedule M1DQC) . . . . .	<b>5</b> ■	_____	
<b>6</b> State income tax refund from line 1 of federal Schedule 1 . . . . .	<b>6</b> ■	_____	
<b>7</b> Subtractions from line 35 of Schedule M1M and line 21 of Schedule M1MB (see instructions) . . . . .	<b>7</b> ■	_____	
<b>8</b> Total subtractions. Add lines 4 through 7 . . . . .	<b>8</b>	<u>13825</u>	
<b>9</b> Minnesota taxable income. Subtract line 8 from line 3. If zero or less, leave blank. . . . .	<b>9</b>	_____	
<b>10</b> Tax from the table or schedules in the Form M1 instructions . . . . .	<b>10</b>	_____	
<b>11</b> Alternative minimum tax (enclose Schedule M1MT) . . . . .	<b>11</b> ■	_____	
<b>1</b> Add lines 10 and 11 . . . . .	<b>12</b>	_____	
<b>13</b> Full-year residents: Enter the amount from line 12 on line 13. Skip lines 13a and 13b. Part-year residents and nonresidents: From Schedule M1NR, enter the amount from line 32 on line 13, from line 28 on line 13a, and from line 29 on line 13b (enclose Schedule M1NR) . . . . .	<b>13</b>	_____	
<b>13a</b> ■ _____	<b>13b</b> ■ _____		



Table with 3 columns: Line number, Description, Amount. Includes rows 14 through 30. Row 20 shows 'Minnesota income tax withheld' with amount 341. Row 22 shows 'Amount from line 11 of Schedule M1REF' with amount 350. Row 23 shows 'Total payments' with amount 691. Row 24 shows 'REFUND' with amount 691. Row 25 includes routing and account numbers for direct deposit.

Taxpayer(s): I declare that this return is correct and complete to the best of my knowledge and belief.

Your Signature: 7636140354
Daytime Phone: SYAM PRIYA RAM SAGAR GUPTA
Paid Preparer's Signature: 6789659522
Preparer's Daytime Phone

Spouse's Signature (If Filing Jointly): KUSHALREDDYMOTLA@GMAIL.COM
Date (MM/DD/YYYY): 03312024
Email Address: syam@gtaxfile.com
PTIN or VITA/TCE # (required): P02082703

Checkboxes for: I do not want my paid preparer to file my return electronically. I authorize the Minnesota Department of Revenue to discuss this tax return with the preparer or the third-party designee indicated on my federal return.

Include a copy of your 2023 federal return and schedules.

Mail to: Minnesota Individual Income Tax, Mail Station 0010, 600 N. Robert St., St. Paul, MN 55146-0010



# 2023 Schedule M1REF, Refundable Credits

KUSHAL REDDY  
Your First Name and Initial

MOTLA  
Last Name

038833300  
Social Security Number

- 1 Child and Dependent Care Credit (*enclose Schedule M1CD*) ..... **1** ■ \_\_\_\_\_  
     Enter number of qualifying persons **1a** \_\_\_\_\_
- 2 Child and Working Family Credits (*enclose Schedule M1CWFC*) ..... **2** ■ \_\_\_\_\_ 350  
     Enter number of qualifying children for the Child Tax Credit **2a** \_\_\_\_\_  
     Enter number of qualifying older children **2b** \_\_\_\_\_
- 3 K-12 Education Credit (*enclose Schedule M1ED*) ..... **3** ■ \_\_\_\_\_  
     Enter number of qualifying children **3a** \_\_\_\_\_
- 4 Credit for Parents of Stillborn Children (*enclose Schedule M1PSC*) ..... **4** ■ \_\_\_\_\_
- 5 Refundable credit for taxes paid to Wisconsin (*enclose Schedule M1RCR*) ..... **5** ■ \_\_\_\_\_
- 6 Credit for Historic Structure Rehabilitation (*enclose certificate*) ..... **6** ■ \_\_\_\_\_  
     Enter National Park Service (NPS) project number **6a** \_\_\_\_\_
- 7 Enterprise Zone Cred (*enclose DEED certificate*) ..... **7** ■ \_\_\_\_\_
- 8 Angel Investment Credit ..... **8** ■ \_\_\_\_\_
- 9 Pass-Through Entity Tax Credit (*see instructions*) ..... **9** ■ \_\_\_\_\_  
     Enter the Minnesota Tax ID Number and amount associated with each Pass-Through Entity Credit.  
     If you claimed more than three Pass-Through Entity Tax Credits, attach a statement to this form .  
     MN Tax ID Number: \_\_\_\_\_ Credit Amount: \_\_\_\_\_  
     MN Tax ID Number \_\_\_\_\_ Credit Amount \_\_\_\_\_  
     MN Tax ID Number \_\_\_\_\_ Credit Amount: \_\_\_\_\_
- 10 Claim of right (*see instructions*) ..... **10** ■ \_\_\_\_\_
- 11 Add lines 1 through 10. Enter the result here and on line 22 of Form M1 ..... **11** \_\_\_\_\_ 350

**You must include this schedule with your Form M1.**





# 2023 Schedule M1W, Minnesota Income Tax Withheld

Complete this schedule to report Minnesota income tax withheld. Include this schedule when you file your return.

KUSHAL REDDY  
Your First Name and Initial

MOTLA  
Last Name

038833300  
Your Social Security Number

\_\_\_\_\_  
If a Joint Return, Spouse's First Name and Initial

\_\_\_\_\_  
Spouse's Last Name

\_\_\_\_\_  
Spouse's Social Security Number

If you received a federal Form W-2, 1099, W-2G, 1042-S, or Minnesota Schedule KPI, KS, or KF showing Minnesota income tax withheld, complete this schedule to determine line 20 of Form M1. List only the forms that report Minnesota income tax withheld. Round dollar amounts to the nearest whole dollar. You must include this schedule when you file your return. **DO NOT** send in your Forms W-2, 1099, or W-2G; keep them with your tax records. All instructions are included on this schedule.

**1** Minnesota wages and Minnesota tax withheld on Forms W-2, other than from Forms W-2G. If you have more than five Forms W-2, complete line 5 on the back.

A	B—Box 13	C—Box 15	D—Box 16	E—Box 17
If the Form W-2 is for: • you, enter 1 • spouse, enter 2	If Retirement Plan box is checked, mark an X below.	Employer's seven-digit Minnesota Tax ID Number	State wages, tips, etc. <i>(round to nearest whole dollar)</i>	Minnesota tax withheld <i>(round to nearest whole dollar)</i>
a1 <u>1</u>	b1 <input type="checkbox"/>	c1 MN <u>1746999</u>	d1 <u>12402</u>	e1 <u>341</u>
a2 _____	b2 <input type="checkbox"/>	c2 MN _____	d2 _____	e2 _____
a3 _____	b3 <input type="checkbox"/>	c3 MN _____	d3 _____	e3 _____
a4 _____	b4 <input type="checkbox"/>	c4 MN _____	d4 _____	e4 _____
a5 _____	b5 <input type="checkbox"/>	c5 MN _____	d5 _____	e5 _____

Subtotal for additional Forms W-2 (from line 5 on page 2) ..... \_\_\_\_\_

**Total Minnesota tax withheld on all Forms W-2 (add amounts in line 1, column E) ..... 1 ■ 341**

**2** Minnesota tax withheld on Forms 1099, W-2G, and 1042-S. If you have more than four forms, complete line 6 on the back.

A	B	C	D
If the Form 1099, W-2G, or 1042-S is for: • you, enter 1 • spouse, enter 2	Payer's seven-digit Minnesota Tax ID Number (if unknown, contact the payer)	Income amount (see the table on the back for amounts to include)	Minnesota tax withheld <i>(round to nearest whole dollar)</i>
a1 _____	b1 MN _____	c1 _____	d1 _____
a2 _____	b2 MN _____	c2 _____	d2 _____
a3 _____	b3 MN _____	c3 _____	d3 _____
a4 _____	b4 MN _____	c4 _____	d4 _____

Subtotal for additional 1099, W-2G, and 1042-S (from line 6 on page 2) ..... \_\_\_\_\_

**Total Minnesota tax withheld on all 1099, W-2G, and 1042-S (add amounts in line 2, column D) ..... 2 ■ \_\_\_\_\_**

**3 Total Minnesota tax withheld by partnerships, S corporations, and fiduciaries (from line 7 on page 2) ..... 3 ■ \_\_\_\_\_**

**4 Total.** Add the Minnesota tax withheld on lines 1, 2, and 3.  
Enter the total here and on line 20 of Form M1 ..... **4 ■ 341**

**Include this schedule with your Form M1.  
If required, include Schedules KPI, KS, and KF.**



## 2023 Schedule M1CWFC, Minnesota Child and Working Family Credits

To claim this credit, you must be a full- or part-year resident of Minnesota. If you are a full-year nonresident, you are not eligible for this credit. Do not complete Schedule M1CWFC if you have a 2-year or 10-year IRS ban or are otherwise restricted from claiming the federal EIC.

KUSHAL REDDY  
Your First Name and Initial

MOTLA  
Last Name

038833300  
Your Social Security Number

Round amounts to the nearest whole dollar.

1	Enter the amount from line 1 of Form M1. . . . .	1 ■	<u>12402</u>
2	Enter your total earned income (see instructions; if less than zero, enter zero). . . . .	2 ■	<u>12402</u>
3	If line 2 is greater than \$8,750, enter \$8,750. Otherwise enter the amount from line 2. . . . .	3 ■	<u>8750</u>
4	Multiply line 3 by 4% (.04). . . . .	4 ■	<u>350</u>
5	Credit for Qualifying Older Children: If you have: . . . . .	5 ■	<u>          </u>
	• One qualifying older child, enter \$925		
	• Two qualifying older children, enter \$2,100		
	• Three or more qualifying older children, enter \$2,500		
6	Add lines 4 and 5 . . . . .	6 ■	<u>350</u>
7	Number of qualifying children (see instructions) . . . . .	7 ■	<u>          </u>
8	Multiply line 7 by \$1,750. . . . .	8 ■	<u>          </u>
9	Add lines 6 and 8 . . . . .	9 ■	<u>350</u>
10	Enter the greater of line 1 or 2 . . . . .	10 ■	<u>12402</u>
11	Enter \$35,000 if married filing jointly or \$29,500 for any other filing status . . . . .	11 ■	<u>29500</u>
12	If line 10 is less than line 11, see instructions. Otherwise, subtract line 11 from line 10 . . . . .	12 ■	<u>          </u>
13	If you had an amount on line 5 but not on line 8, enter 9%(.09). Otherwise enter 12%(0.12) . . . . .	13 ■	<u>          </u>
14	Multiply line 12 by line 13. . . . .	14 ■	<u>          </u>
15	Subtract line 14 from line 9. If less than zero, enter 0. If you are a full year resident, enter this amount on line 2 of Schedule M1REF . . . . .	15 ■	<u>350</u>
16	Part year residents: If your Minnesota gross income is: . . . . .	16 ■	<u>          </u>
	• \$13,825 or more, multiply line 15 by line 30 of Schedule M1NR. Enter the result here and on line 2 of Schedule M1REF		
	• Less than \$13,825, see instructions Enter the result from step 5 of the Worksheet for line 16:_____		

**Include this schedule with your Form M1. Enter the number of qualifying children on line 2a and the number of qualifying older children on line 2b of Schedule M1REF.**

