<b>1040</b>	Department of the Treasury-Internal Revenue Service U.S. Individual Income Tax Retu			turn	202	20 <b>23</b> OMB No. 1545-007		-0074	4 IRS Use Only-Do not write or staple in this space				his space.	
For the year Jan. 1-Dec. 31, 2023, or other tax year beginning					, 2023, ending , 20				5	See separate instructions.				
Your first name and middle initial Last r										 \	Your social security number			
SRAVANTHI				ATHAP REDDY						688		-		
If joint return, spouse's first name and middle initial Last r									5		-	-	rity number	
BABU REDDY GOP.					PAL SHANKAR						APP	LI	ED	F
		er and street). If you have a P.O. box, see						A	Apt. no.	F	Presider	ntial Ele		Campaign
15015 W	AIR	PORT BLVD						1	.111	0	Check h	ere if y	ou, or	' your
		ce. If you have a foreign address, also co	mplete	spaces be	low.	Sta	te	ZIP c	ode					v, want \$3
SUGAR LAND						ТХ	ζ	774	98		o go to cox belo			necking a nange
Foreign country	/ name		Foreign p	rovince/state/o	county I		Foreig	Foreign postal code		our tax				
												Yo	<i>י</i> u [	Spouse
Filing Status	; [	] Single					Head of h	ouseh	old (HOH	)				
Check only		X Married filing jointly (even if only one had income)												
one box.		Married filing separately (MFS)     Qualifying surviving spouse (QS)									(SS)			
	lf y	If you checked the MFS box, enter the name of your spouse. If you checked the HOH or QSS box, enter the child's na										me if	the	
	qu	qualifying person is a child but not your dependent:												
Digital	At ar	ny time during 2023, did you: (a) rece	eive (a	s a rewar	d, award, or	payr	nent for prope	rty or	services)	; or (b	o) sell,			
Assets		nange, or otherwise dispose of a digi										🗌 Ye	es [	X No
Standard	Som	meone can claim: Vou as a dependent Vour spouse as a dependent												
Deduction		Spouse itemizes on a separate return	n or yo	ou were a	dual-status	alien	1							
Age/Blindness	You	: 🗌 Were born before January 2, 19	959	Are b	lind Spo	ouse	: 🗌 Was bor	rn befo	ore Janua	ry 2,	1959	<u> </u>	s blind	b
Dependents		see instructions): (2) Social security (3) Relationship (4) Check the box if							· · ·			,		
If more	<b>(1)</b> F	(1) First name Last name			number to you			Child tax cred			dit	Credit fo	r other	dependents
than four dependents,									L				_님	
see instruction:	s ——								L	<u> </u>			<u> </u>	
and check									L				_님	
here L	4	Table										-		0.00
Income	1a ⊾	Total amount from Form(s) W-2, bo									1a	+	54	.966.
Attach Form(s)		b Household employee wages not reported on Form(s) W-2								1b	-			
W-2 here. Also attach Forms	с с									1c 1d	-			
W-2G and	d e	Taxable dependent care benefits fi					• •	• •	• •	10	+			
1099-R if tax was withheld.	f	Employer-provided adoption benefit			-	•••		• •	• •	• •	1f	+		
If you did not	g				-				• •	• •	1g			
get a Form	9 h	Wages from Form 8919, line 6         .          .         .							1h			0.		
W-2, see instructions.	i	i Nontaxable combat pay election (see instructions)												
instructions.	z									1z	1	54	1,966.	
Attach Sch. B if required.		Ŭ I	2a			<b>b</b> Т	axable interes	t .			2b			<u> </u>
	3a	· · –	3a				ordinary divide				3b	-		
	4a		4a				axable amoun				4b			
Standard	5a		5a				axable amoun				5b			
<ul> <li>Deduction for –</li> <li>Single or</li> </ul>	6a	Social security benefits				axable amoun				6b				
Married filing separately,	с	If you elect to use the lump-sum election method, check here (see instructions)												
\$13,850	<sup>50</sup> <b>7</b> Capital gain or (loss). Attach Schedule D if required. If not required, check here									. 🗆	7			
<ul> <li>Married filing jointly or</li> </ul>	8	Additional income from Schedule 1, line 10								8				
Qualifying surviving spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your <b>total income</b>								9		54	1,966.	
\$27,700	10       Adjustments to income from Schedule 1, line 26         ead of       11         12       Adjustments to income from Schedule 1, line 26										10			
<ul> <li>Head of household,</li> </ul>								11		54	1,966.			
\$20,800 • If you checked	12	I2         Standard deduction or itemized deductions (from Schedule A)         .									12		27	7,700.
any box under	13	<b>3</b> Qualified business income deduction from Form 8995 or Form 8995-A       .									13			
Standard Deduction,	14	<b>4</b> Add lines 12 and 13							14			7,700.		
see instructions.	15	Subtract line 14 from line 11. If zero or less, enter -0 This is your taxable income								15		27	,266.	

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> 🗌 881	4 <b>2</b> 4972	3	1	6	2,833.		
Credits	17	Amount from Schedule 2, lin	ne3				1	17			
	18	Add lines 16 and 17					1	8	2,833.		
	19	Child tax credit or credit for	other dependen	ts from Sched	ule 8812		1	9			
	20	Amount from Schedule 3, lin	ne8				2	20			
	21	Add lines 19 and 20					2	21			
	22	Subtract line 21 from line 18	. If zero or less,	enter -0			2	22	2,833.		
	23	Other taxes, including self-e					2	23	0.		
	24	Add lines 22 and 23. This is					2	24	2,833.		
Payments	25	Federal income tax withheld									
i aj monto	а	Form(s) W-2				<b>25a</b> 4	,843.				
	b	Form(s) 1099				25b	·				
	С	Other forms (see instructions				25c					
	d	Add lines 25a through 25c	,				2	5d	4,843.		
	26	2023 estimated tax payment						26			
If you have a l qualifying child,	27	Earned income credit (EIC)				27					
attach Sch. EIC.	28	Additional child tax credit from				28					
	29	American opportunity credit				29					
	30	Reserved for future use         .									
	31	Amount from Schedule 3, lin				31					
	32	,						32			
	33	Add lines 27, 28, 29, and 31. These are your total other payments and refundable credits       .         Add lines 25d, 26, and 32. These are your total payments       .							4,843.		
Refund	34	If line 33 is more than line 24						33 34	2,010.		
neiuliu	35a	Amount of line 34 you want	-			, .		5a	2,010.		
Direct deposit?	b	Routing number 1 1 1	Savings	Ja							
See instructions.	d	Account number 4 8 8	Javings								
	36	Amount of line 34 you want a									
Amount						36	_				
Amount You Owe	37	Subtract line 33 from line 24. This is the <b>amount you owe</b> . For details on how to pay, go to <i>www.irs.gov/Payments</i> or see instructions									
	38	Estimated tax penalty (see instructions)						37			
Third Dorts											
Third Party Designee		you want to allow another	•				mplete belo	w. 🗙 N	0		
Designee		Designee's				nal identificat		•			
	nai			Phone no.			er (PIN)				
Sign	Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which								•		
Here	Yo	ur signature	Date	Your occupation		If the IRS	he IRS sent you an Identity				
		i our orginaturo							Protection PIN, enter it here		
Joint return?					SENIOR SCM CONSULTANT			(see inst.)			
See instructions. Keep a copy for	Sp	ouse's signature. If a joint return, <b>k</b>	ooth must sign.	Date Spouse's occupation				f the IRS sent your spouse an			
your records.								dentity Protection PIN, enter it here see inst.)			
,	b			HOME MAKE	,						
		one no. (303)901-671 eparer's name		Email address	SRAVZZ.RED	DY@GMAIL.CO		Chock	if		
Paid			Preparer's signature					Check if: 32703 Self-emplo			
Preparer		SYAM PRIYA RAM SAGAR GUPTA SYAM PRIYA RAM SAGAR GUPTA 03/22/2024 P02082									
Use Only									e no. (678)965-9522		
						Firm's El					
Go to www.irs.go	ov/Forn	n1040 for instructions and the late	st information.		BAA	REV 03/07/24 PRO		Fo	orm <b>1040</b> (2023)		