



2023 Form M1, Individual Income Tax

Do not use staples on anything you submit.

ROOP SARATH CHANDR MANDAPATI 808612340 07021990
 Your First Name and Initial Last Name Your Social Security Number 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 _____

815 E 61ST ST _____
 Current Home Address

Check if Address is: New Foreign

MINNEAPOLIS MN 55417
 City State 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: Republican11 Grassroots/Legalize Cannabis 14 Legal Marijuana Now17
 Democratic/Farmer-Labor . . .12 Libertarian16 General Campaign Fund99

Your Code _____ Spouse's Code _____

From Your Federal Return (see instructions)

<u>118663</u>	<u>0</u>	<u>0</u>	<u>104813</u>
A. Wages, salaries, tips, etc.	B. IRA, pensions, and annuities	C. Unemployment	D. Federal taxable income

1	Federal adjusted gross income (from line 11 of federal Form 1040 and 1040-SR)	1	█ <u>118663</u>
2	Additions to income from line 10 of Schedule M1M and line 9 of Schedule M1MB (see instructions)	2	█ _____
3	Add lines 1 and 2.	3	█ <u>118663</u>
4	Itemized deductions (from Schedule M1SA) or your standard deduction (see instructions)	4	█ <u>13825</u>
5	Exemptions (from Schedule M1DQC)	5	█ _____
6	State income tax refund from line 1 of federal Schedule 1	6	█ _____
7	Subtractions from line 35 of Schedule M1M and line 21 of Schedule M1MB (see instructions)	7	█ _____
8	Total subtractions. Add lines 4 through 7.	8	█ <u>13825</u>
9	Minnesota taxable income. Subtract line 8 from line 3. If zero or less, leave blank.	9	█ <u>104838</u>
10	Tax from the table or schedules in the Form M1 instructions	10	█ <u>6757</u>
11	Alternative minimum tax (enclose Schedule M1MT)	11	█ _____
12	Add lines 10 and 11	12	█ <u>6757</u>
13	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)	13	█ <u>6757</u>
	13a █ <u>0</u> 13b █ <u>0</u>		



Table with 3 columns: Line number, Description, and Amount. Includes lines 14 through 30. Line 14: Other taxes... 14. Line 15: Tax before credits... 15 6757. Line 16: Amount from line 21... 16. Line 17: Subtract line 16... 17 6757. Line 18: Nongame Wildlife Fund contribution... 18. Line 19: Add lines 17 and 18... 19 6757. Line 20: Minnesota income tax withheld... 20 7374. Line 21: Minnesota estimated tax... 21. Line 22: Amount from line 11... 22. Line 23: Total payments... 23 7374. Line 24: REFUND... 24 617. Line 25: Direct deposit of your refund... 061000052 334052720471. Line 26: AMOUNT YOU OWE... 26. Line 27: Penalty amount... 27. Line 28: Penalty and interest... 28. Line 29: Amount from line 24... 29. Line 30: Amount from line 24... 30.

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

Your Signature: 4702028618
Daytime Phone
SYAM PRIYA RAM SAGAR GUPTA
Paid Preparer's Signature: 6789659522
Preparer's Daytime Phone

Spouse's Signature (If Filing Jointly): MRSC143@GMAIL.COM
Date (MM/DD/YYYY): 04132024
Email Address: SYAM@GTAXFILE.COM
Preparer's Email Address: P02082703
PTIN or VITA/TCE # (required)

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 M1W, Minnesota Income Tax Withheld

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

ROOP SARATH CHANDRA MANDAPATI 808612340
 Your First Name and Initial Last Name 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:	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>
• you, enter 1				
• spouse, enter 2				
a1 <u>1</u>	b1 <input type="checkbox"/>	c1 MN <u>2204583</u>	d1 <u>118663</u>	e1 <u>7374</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 ■ 7374

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:	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 (round to nearest whole dollar)
• you, enter 1			
• spouse, enter 2			
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 ■ 7374**

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