E1040		artment of the Treasury—Internal Revenue Servin S. Individual Income Tax		turn	202	3	OMB No. 1545-	-0074	IRS Use Onl	y—Do not w	rite or sta	ple in this	s space.
For the year Jan	c. 31, 2023, or other tax year beginning	, 2023, ending, ,				, 20	See separate instructions.						
Your first name and middle initial Last r				name					Your social security number				
SRIHARSH KAT				TIKIREDDY							6787		
					tname								y number
ANUSHA MEK										APP	т.т.	ED F	-
	(numbe	er and street). If you have a P.O. box, see						A	pt. no.				ampaign
6501 ESC		, , , , , , , , , , , , , , , , , , ,							048			ou, or ye	
		ce. If you have a foreign address, also co	mplete	spaces be	low.	Sta	ite			spouse	if filing	jointly, v	want \$3
IRVING		,,,,,,,,,,,,,				ТΣ		750		to go to			0
Foreign country name			Foreign province/state/c			1		Foreign postal code		ow will i or refu	not char nd.	nge	
							,			,	Yo		Spouse
Filing Status		Single						haelu					
•	X Married filing jointly (even if only one had income)												
Check only		Married filing separately (MFS)	ie nae	r moonne)				surviv	ina snouse	(OSS)			
one box.	lf v	Arried filing separately (MFS) Qualifying surviving spouse (QSS) you checked the MFS box, enter the name of your spouse. If you checked the HOH or QSS box, enter the child's name if the											
		ualifying person is a child but not your dependent:											
Digital		ny time during 2023, did you: (a) rece						-	,	. ,		_	1
Assets		hange, or otherwise dispose of a digi					-	t)? (Se	e instructio	ons.)	XΥ	: S ∐	No
Standard Deduction		eone can claim: L You as a de Spouse itemizes on a separate returi	•		•		a dependent						
		Were born before January 2, 1		Are bl		ouse	_	n befo	ore January	2. 1959		s blind	
Dependents		•			Social security	,	(3) Relationsh	in (4	Check the b	oox if quali	fies for (see instr	ructions):
•	•	irst name Last name		(2)	number				Child tax o	· · ·			ependents
lf more than four													
dependents,													
see instructions	s ——												
and check here													
Income	1a	Total amount from Form(s) W-2, bo	ox 1 (s	ee instruc	ctions)					. 1a		100.	973.
income	b				,						_		
Attach Form(s) W-2 here. Also	c												
attach Forms	d								. 1d	_			
W-2G and	e	Taxable dependent care benefits fi							. 1e	_			
1099-R if tax was withheld.	f	Employer-provided adoption bene						• •		. 1f	_		
If you did not	a				-			• •		. 1g	_		
get a Form	9 h	Wages from Form 8919, line 6 <u>1</u> h			0.	
W-2, see instructions.	i	Nontaxable combat pay election (see instructions)											
instructions.	z									. 1z		100.	973.
Attach Sch. B	 2a		2a			. т	axable interest			. 12	-		
if required.	-4 3a	'	3a				Ordinary divider				-		
	4a		4a				axable amount			. 4b			
Standard	5a		5a				axable amount			. 5b	-		
Deduction for -	6a		6a				axable amount			. 6b	-		
 Single or Married filing 													
separately, \$13,850	c If you elect to use the lump-sum election method, check here (see instructions)							• •		7			
 Married filing 		7 Capital gain or (loss). Attach Schedule D if required. If not required, check here							. 8				
jointly or Qualifying	8 Additional income from Schedule 1, line 10							. 8		100	973.		
surviving spouse, \$27,700		9 Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income							· 9		±00,	213.	
 Head of 		10 Adjustments to income from Schedule 1, line 26									-	100	072
household, [\$20,800										. 11			973.
• If you checked										. 12	-	<u> </u>	700.
any box under Standard	13 Qualified business income deduction from Form 8995 or Form 8995-A									0.5	700		
Deduction, see instructions.	<i>duction,</i> 14 Add lines 12 and 13							. 14			700.		
	15	Subtract line 14 from line 11. If zer	o or le	ss, enter	-U This is y	our	taxable incom	е.		. 15		13,	273.

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

Form **1040** (2023)

Form 1040 (2023	3)							Page 2		
Tax and	16	Tax (see instructions). Check	if any from Form	(s): 1 🗌 881	4 2 4972	3	1	6 8,353.		
Credits	17	Amount from Schedule 2, lin	1	7						
	18	Add lines 16 and 17					1	8,353.		
	19	Child tax credit or credit for	1	9						
	20	Amount from Schedule 3, lin	ne8				2	0		
	21	Add lines 19 and 20					2	1		
	22	Subtract line 21 from line 18	. If zero or less,	enter -0			2	2 8,353.		
	23	Other taxes, including self-e	2	3 0.						
	24	Add lines 22 and 23. This is	2	4 8,353.						
Payments	25	Federal income tax withheld								
	а	Form(s) W-2				25a 14	,475.			
	b	Form(s) 1099				25b				
	с	Other forms (see instructions	s)			25c				
	d	Add lines 25a through 25c					25	5d 14,475.		
If you have a	26	2023 estimated tax payment	2	6						
qualifying child,	27	Earned income credit (EIC)								
attach Sch. EIC.	28	Additional child tax credit from								
	29	American opportunity credit								
	30	Reserved for future use .								
	31	Amount from Schedule 3, lin	ne 15			31				
	32	Add lines 27, 28, 29, and 31	. These are your	total other pa	ayments and refu	undable credits	3	2		
	33	Add lines 25d, 26, and 32. These are your total payments						3 14,475.		
Refund	34	If line 33 is more than line 24	1, subtract line 2	4 from line 33.	This is the amou	nt you overpaid	3	4 6,122.		
	35a	Amount of line 34 you want	refunded to you	. If Form 8888	3 is attached, che	ck here	. 🗌 35	5a 6,122.		
Direct deposit?	b	Routing number 1 1 1	Savings							
See instructions.	d	Account number 9 0 5								
	36	Amount of line 34 you want a								
Amount	37	Subtract line 33 from line 24								
You Owe		For details on how to pay, go to www.irs.gov/Payments or see instructions					3	7		
	38	Estimated tax penalty (see instructions)								
Third Party	Do	you want to allow another	person to disc	cuss this retu	rn with the IRS?	See		_		
Designee	ins	instructions					omplete belov	w. 🗶 No		
	De: nar	signee's		Phone no.			onal identification oer (PIN)	on		
Ciarra		der penalties of perjury, I declare th	nat I have examined		accompanying sche		. ,	est of my knowledge and		
Sign			parer has any knowledge.							
Here	Yo	ur signature	Date	Your occupation		If the IRS	f the IRS sent you an Identity			
							Protection PIN, enter it here			
Joint return?					SOFTWARE I		(see inst.)	·		
See instructions. Keep a copy for	Spouse's signature. If a joint return, both must sign.							ne IRS sent your spouse an ntity Protection PIN, enter it here		
your records.				HOME MAKER (see				,		
	Ph	one no. (469)909-999	Email address SRIHARSH.KATIKIREDDY@GMAIL.COM							
		eparer's name	⊥ Preparer's signat		DITINION . NALLI	Date	PTIN	Check if:		
Paid		PRIYA RAM SAGAR GUPTA TALLAM			СПРТА ТАТ.Т.АМ		P0208270			
Preparer		n's name GLOBAL TAX		o. (678)965-9522						
Use Only		m's address 245 ROONE	Firm's Ell	·						
Go to www.irs.cr		1040 for instructions and the late		TIONICIC IN				Form 1040 (2023)		
		in the instructions and the late	scinomation.		BAA	REV 12/21/23 PRO		1 0mm 10-to (2023)		

REV 12/21/23 PRO