<b>1040</b>		artment of the Treasury—Internal Revenue Service <b>S. Individual Income Tax</b>		turn	202	3	OMB No. 1545	-0074	IRS Use Only	–Do not w	rite or sta	ple in this space.	
For the year Jar	n. 1–Dec	c. 31, 2023, or other tax year beginning			, 2023, end	ling			, 20	See se	parate i	nstructions.	
Your first name	and m	iddle initial	Last r	ame		Your so	cial sec	urity number					
SRINIVAS	3		вни	SARAPU	T		119 11 5501						
		s first name and middle initial	Last r								Spouse's social security number		
SRI BHAN	•		SAT									7915	
		± er and street). If you have a P.O. box, see	-					A	pt. no.	Presidential Election Campa			
		MONT CIR										ou, or your	
	ice. If you have a foreign address, also co	spaces be	paces below. State ZIP code						spouse if filing jointly, want				
COLLIERVILLE								380		, v		id. Checking a	
Foreign countr			Foreign p	rovince/state/				n postal code		ow will r k or refui	not change nd.		
· · · · · g. · · · · .	,			· • • • • • • • • •			-,			, your tu	Yo	_	
Eiling Statur		Single					Head of he	ousoh					
Filing Status		Married filing jointly (even if only or	ha had	l income)				ousen					
Check only		Married filing separately (MFS)	ic nau	ninconic)			Qualifying	surviv		(099)			
one box.	L If v	you checked the MFS box, enter the	name	of your s	nouse If voi	ı che					ild's nar	ne if the	
		alifying person is a child but not you											
Digital		ny time during 2023, did you: (a) rece						-					
Assets		hange, or otherwise dispose of a digi		· _				et)? (Se	e instructio	ns.)	∐ Ye	s 🗙 No	
Standard	_	neone can claim: 🗌 You as a de					a dependent						
Deduction		Spouse itemizes on a separate return	n or yo	ou were a	dual-status	alien	1						
Age/Blindnes	s You	: 🗌 Were born before January 2, 19	959	Are b	lind Spo	ouse	: 🗌 Was bor	n befo	ore January 2	2, 1959	🗌 Is	blind	
Dependent	<b>s</b> (see	instructions):		(2) Social security (3) Relationship				ip (4			· ·	see instructions):	
If more	<b>(1)</b> F	irst name Last name		number			to you		Child tax c	redit	Credit for	r other dependents	
than four													
dependents, see instruction	s ——												
and check													
here													
Income	1a	Total amount from Form(s) W-2, be	ox 1 (s	ee instruc	ctions)					. 1a	1	94,092.	
Attach Form(s)	b	Household employee wages not re	eporte	d on Form	n(s) W-2 .					. 1b	•		
W-2 here. Also	С	Tip income not reported on line 1a	(see i	nstructions)						. 1c	;		
attach Forms W-2G and	d	Medicaid waiver payments not rep	orted	on Form(s) W-2 (see instructions)						. 1d	I		
1099-R if tax	е	Taxable dependent care benefits f			-					. 1e	,		
was withheld.	f			m Form 8839, line 29						. 1f			
If you did not	g	Wages from Form 8919, line 6 .								. 1g	I		
get a Form W-2, see	h	Other earned income (see instructi	,							. 1h	1	0.	
instructions.	i	Nontaxable combat pay election (s	see ins	structions)			<b>1</b> i						
	Z	Add lines 1a through 1h	• ;							. 1z	:	94,092.	
Attach Sch. B	2a	· · -	2a				axable interest			. <b>2</b> b	•	223.	
if required.	<u>3a</u>		3a			b C	Ordinary divider	nds .		. <b>3</b> b	)		
Standard	4a		4a				axable amoun			. 4b	)		
Deduction for –	5a		5a				axable amoun			. 5b			
<ul> <li>Single or Married filing</li> </ul>	6a		6a				axable amoun	t		. 6b	•		
Married filing separately,	С	If you elect to use the lump-sum el				`	,		[	_			
<ul><li>\$13,850</li><li>Married filing</li></ul>	7	Capital gain or (loss). Attach Scheo							[	7	_		
jointly or	8	Additional income from Schedule								. 8		-18,356.	
Qualifying spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7,	and 8	. This is y	our total inc	come	<b>e</b>			. 9		75 <b>,</b> 959.	
\$27,700 • Head of	10	Adjustments to income from Schee	dule 1	, line 26						. 10			
household,	11	Subtract line 10 from line 9. This is	your	adjusted	gross incor	ne				. 11		75,959.	
<ul> <li>\$20,800</li> <li>If you checked</li> </ul>	12	Standard deduction or itemized	deduc	<b>tions</b> (fro	m Schedule	A)				. 12	2	27,700.	
any box under Standard	13	Qualified business income deducti	on fro	m Form 8	995 or Form	899	95-A			. 13			
Deduction,	14	Add lines 12 and 13								. 14	·	27,700.	
see instructions.	15	Subtract line 14 from line 11. If zero or less, enter -0 This is your taxable income									j	48,259.	

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		. 16	5,353.		
Credits	17	Amount from Schedule 2, lin	e3					. 17			
	18	Add lines 16 and 17 .						. 18	5,353.		
	19	Child tax credit or credit for	other dependent	ts from Sched	ule 8812			. 19			
	20	Amount from Schedule 3, lin	e8					. 20			
	21	Add lines 19 and 20						. 21			
	22	Subtract line 21 from line 18	. If zero or less,	enter -0				. 22	5,353.		
	23	Other taxes, including self-e						. 23	0.		
	24	Add lines 22 and 23. This is						. 24	5,353.		
Payments	25	Federal income tax withheld									
<b>.</b>	а	Form(s) W-2				<b>25a</b> 1	5,488	3.			
	b	Form(s) 1099				25b					
	с	Other forms (see instructions				25c					
	d	Add lines 25a through 25c	<i>.</i>					. 25d	15,488.		
If you have a	26	2023 estimated tax payment	s and amount a	oplied from 20	22 return			. 26	· ·		
qualifying child,	27	Earned income credit (EIC)				27					
attach Sch. EIC.	28	Additional child tax credit from				28					
	29	American opportunity credit	from Form 8863	, line 8		29					
	30										
	31	Amount from Schedule 3, line 15         . <th.< th="">         .         <th.< th="">         .          .         <th< th=""><th></th><th></th><th></th></th<></th.<></th.<>									
	32	Add lines 27, 28, 29, and 31. These are your total other payments and refundable credits					. 32				
	33	Add lines 25d, 26, and 32. These are your <b>total payments</b>						. 33	15,488.		
Refund	34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid					. 34	10,135.			
lioiuliu	35a	Amount of line 34 you want refunded to you. If Form 8888 is attached, check here						35a	10,135.		
Direct deposit?	b	Routing number $0 5 1 0 0 0 0 1 7$ c Type: Checking Savings									
See instructions.	d	Account number 4 3 5									
	36	Amount of line 34 you want a				36					
Amount	37	· · · · · · · · · · · · · · · · · · ·									
You Owe	0.	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						. 37			
	38	Estimated tax penalty (see instructions)									
Third Party	Do	you want to allow another	,								
Designee			•				Comple	te below.	× No		
U	De	signee's		Phone				entification			
	na			no.			nber (PIN	<i>.</i>			
Sign		der penalties of perjury, I declare the ief, they are true, correct, and com									
Here			ploto. Doolaration o						, ,		
	YO	ur signature		Date	Your occupation				nt you an Identity IN, enter it here		
Joint return?					SOFTWARE B	ENGINEER		see inst.)			
See instructions.	Sp	ouse's signature. If a joint return, I	ooth must sign.	Date	Spouse's occupat				e IRS sent your spouse an		
Keep a copy for your records.									ection PIN, enter it here		
your records.		HOME MAREN (						see inst.)			
		one no. (571) 502-078		Email address	BHUSARS92						
Paid		eparer's name	Preparer's signat			Date	PTIN		Check if:		
Preparer	SYAM	I PRIYA RAM SAGAR GUPTA TALLAM		RAM SAGAR	GUPTA TALLAM	02/07/2024		082703	Self-employed		
Use Only	Fir	m's name GLOBAL TAX					P	hone no.	(678)965-9522		
	Fir	m's address 245 ROONE	Y CT E BRU	NSWICK N	J 08816		F	irm's EIN	84-3171965		
Go to www.irs.go	ov/Forn	n1040 for instructions and the late	st information.		BAA	REV 01/27/24 PRO			Form <b>1040</b> (2023)		

REV 01/27/24 PRO

SCHEDULE	1
(Form 1040)	

Department of the Treasury

Internal Revenue Service

## Additional Income and Adjustments to Income

Attach to Form 1040, 1040-SR, or 1040-NR.

Go to www.irs.gov/Form1040 for instructions and the latest information.

OMB No. 1545-0074

Attachment Sequence No. 01 Your social security number

119-11-5501

Name(s) show	vn on Form 104	10,	1040-	SR, or 1040-N	١R
SRINIVAS	BHUSARAPU	&	SRI	BHARATHI	SATHI

Par	t I Additional Income		
1	Taxable refunds, credits, or offsets of state and local income taxes	1	
2a	Alimony received		
b	Date of original divorce or separation agreement (see instructions):		
3	Business income or (loss). Attach Schedule C		
4	Other gains or (losses). Attach Form 4797	4	
5	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E	5	-18,356.
6	Farm income or (loss). Attach Schedule F.	6	
7	Unemployment compensation	7	
8	Other income:		
а	Net operating loss	)	
b	Gambling		
С	Cancellation of debt		
d	Foreign earned income exclusion from Form 2555	)	
е	Income from Form 8853		
f	Income from Form 8889	_	
g	Alaska Permanent Fund dividends	_	
h	Jury duty pay	_	
i	Prizes and awards	_	
j	Activity not engaged in for profit income	_	
k	Stock options	_	
I	Income from the rental of personal property if you engaged in the rental		
	for profit but were not in the business of renting such property 81	_	
m	Olympic and Paralympic medals and USOC prize money (see		
	instructions)	_	
	Section 951(a) inclusion (see instructions)	_	
0	Section 951A(a) inclusion (see instructions)	_	
р	Section 461(I) excess business loss adjustment	_	
q	Taxable distributions from an ABLE account (see instructions)   8q	_	
r	Scholarship and fellowship grants not reported on Form W-2 8r	_	
S	Nontaxable amount of Medicaid waiver payments included on Form		
	1040, line 1a or 1d		
t	Pension or annuity from a nonqualifed deferred compensation plan or		
	a nongovernmental section 457 plan	_	
	Wages earned while incarcerated   8u	_	
Z	Other income. List type and amount:		
9	Total other income. Add lines %s through %z	9	
9 10	Total other income. Add lines 8a through 8z		
10	1040, 1040-SR, or 1040-NR, line 8		-18,356.
For Pa	perwork Reduction Act Notice, see your tax return instructions.		le 1 (Form 1040) 2023

1	t II       Adjustments to Income         Educator expenses				11	
2	Certain business expenses of reservists, performing artists, and fee	-basis	s gov	ernmer	<sup>π</sup> <b>12</b>	
•	officials. Attach Form 2106	• •	• •		12	
3	Health savings account deduction. Attach Form 8889					
4	Moving expenses for members of the Armed Forces. Attach Form 3903					
5	Deductible part of self-employment tax. Attach Schedule SE					
6	Self-employed SEP, SIMPLE, and qualified plans					
7	Self-employed health insurance deduction					
8	Penalty on early withdrawal of savings					
9a	Alimony paid					
b	Recipient's SSN	·			_	
С	Date of original divorce or separation agreement (see instructions):				_	
20	IRA deduction					
21	Student loan interest deduction					
22	Reserved for future use					
23	Archer MSA deduction				23	
24	Other adjustments:					
а	Jury duty pay (see instructions)	24a				
b	Deductible expenses related to income reported on line 8I from the					
	rental of personal property engaged in for profit	24b				
с	Nontaxable amount of the value of Olympic and Paralympic medals					
-	and USOC prize money reported on line 8m	24c				
d	Reforestation amortization and expenses	24d				
e	Repayment of supplemental unemployment benefits under the Trade					
Ŭ	Act of 1974	24e				
f	Contributions to section 501(c)(18)(D) pension plans	24f				
g	Contributions by certain chaplains to section 403(b) plans	24g				
•	Attorney fees and court costs for actions involving certain unlawful	279				
	discrimination claims (see instructions)	24h				
		2411			_	
i	Attorney fees and court costs you paid in connection with an award from the IRS for information you provided that helped the IRS detect					
	tax law violations	04:				
		24i			_	
j	Housing deduction from Form 2555	24j			_	
K	Excess deductions of section 67(e) expenses from Schedule K-1 (Form					
	1041)	24k			_	
z	Other adjustments. List type and amount:					
		24z				
25	Total other adjustments. Add lines 24a through 24z				25	
26	Add lines 11 through 23 and 25. These are your adjustments to income				n	
	Form 1040, 1040-SR, or 1040-NR, line 10	<u> </u>		<u> </u>	26	

SCHEDULE E		Supplemental Income and Loss								OMB No. 1545-0074		
(Form	1040)	(From rental real estate, royalties, partnerships, S corporations, estates, trusts, REMICs, etc.)									20 <b>23</b>	
	ent of the Treasury Revenue Service		Attach to Form 1040, Go to <i>www.irs.gov/ScheduleE</i> for					Attachment Sequence No. <b>13</b>				
Name(s)	shown on return								Your soci	al security		
SRIN	IVAS BHUSA	RAPU &	SRI BHARATHI SATHI						119-1	1-5501		
Part	I Income	or Los	s From Rental Real Estate an	d Ro	yalties			1				
	Note: If yo	ou are in tl	he business of renting personal proper	rty, use	Schedule	<b>c</b> . See	e instru	ctions. If you a	re an indiv	vidual, rep	ort farm	
			s from <b>Form 4835</b> on page 2, line 40. Ints in 2023 that would require you	to filo	Earm(a) 1	0002 0	Soo inc	tructiono				
			ou file required Form(s) 1099?									
						• •				1e		
1a	Physical addr	ess of ea	ach property (street, city, state, ZIF	P code	e)							
A	1-86-1, AGHRAHARAM ATREYAPURAM ANDHRA PRADESH IN 533235											
В												
С							1	1				
1b	Type of Prope						Fa	ir Rental	Person		QJV	
	(from list below	∧)	above, report the number of fair					Days	Da	ys	401	
A	3		personal use days. Check the Q. if you meet the requirements to f			Α		365		0		
В			qualified joint venture. See instru			В						
C						С						
	of Property:						_					
	Single Family R			ital	5 Land	-		Self-Rental				
2	Multi-Family Re	sidence	4 Commercial		6 Roya	alties	8	Other (descri	ibe)			
								Propertie	es:			
Incom	ne:					Α		В			С	
3	Rents received	1		3		6	71.					
4	Royalties rece	ived		4								
Exper	ises:											
5	Advertising .			5								
6	Auto and trave	l (see ins	structions)	6								
7	Cleaning and r	naintena	nce	7		2,7	58.					
8	Commissions			8								
9	Insurance			9								
10	Legal and othe	er profes	sional fees	10								
11	Management f	ees		11		2,9	68.					
12			to banks, etc. (see instructions)	12								
13	Other interest			13								
14	Repairs			14			96.					
15				15		2,8	54.					
16				16								
17				17			25.					
18		xpense o	or depletion	18		3,1	26.					
19	Other (list)			19								
20	•		nes 5 through 19	20		19,0	27.					
21			ne 3 (rents) and/or 4 (royalties). If									
			structions to find out if you must			10 0	ГC					
				21		-18,3	50.					
22			estate loss after limitation, if any,		,	10 25		1	```	,	,	
00-		-	tructions)	22		18,35	-	(	)	(	)	
23a		-	ported on line 3 for all rental prope			•	23a		671.			
b		all amounts reported on line 4 for all royalty properties23ball amounts reported on line 12 for all properties23c										
c d			ported on line 12 for all properties			•	23c 23d	2	,126.			
d			ported on line 18 for all properties			•	23a 23e		,120. ,027.			
е 24			amounts shown on line 21. <b>Do not</b>		 de anv lou		236	19	, 027. . <b>24</b>			
24 25			ses from line 21 and rental real estate				· ·	tal losses hard		(	18,356.)	
			te and royalty income or (loss).								10,330.)	
26			IV, and line 40 on page 2 do no									
			), line 5. Otherwise, include this ar						. 26	-	-18,356.	
For Pa			otice, see the separate instructions.		NE			-18,356			orm 1040) 2023	
a	- si il si il licuult		e	-					301	iouule E (F	5 1070J 2023	

24 PRO