# E 1040 Department of the Treasury—Internal Revenue Service U.S. Individual Income Tax Return



<b>1040</b>		artment of the Treasury-Internal Revenue Servi		urn  20	23	OMB No. 1545-	0074	IRS Use	Only-	-Do not w	rite or sta	aple in this space.	
For the year Jar	n. 1–Dec	c. 31, 2023, or other tax year beginning		, 202	3, ending	•	,	, 20		See se	oarate i	instructions.	_
Your first name	and m	iddle initial	Last nar	me						Your so	cial sec	urity number	_
KRISHNA	CHA	ITHANYA	KOND	UPALLI						649	97	0350	
		s first name and middle initial	Last nar									security numb	er
MAMATHA			KUPP.	AM						978	92	1661	
	(numbe	er and street). If you have a P.O. box, see					Α	pt. no.			-	ection Campaig	gn
12100 M	ETRI	C BLVD					17	17		Check I	nere if y	ou, or your	
		ce. If you have a foreign address, also co	mplete sp	paces below.	Sta	ate	ZIP co	ode		•	<b>.</b>	jointly, want \$3	
AUSTIN					T	x	787	58		•		nd. Checking a not change	ı
Foreign countr	y name		F	oreign province/	state/coun	nty	Foreig	n postal c		your tax		ınd.	se
Filing Status Check only one box.	If y	Single  Married filing jointly (even if only or  Married filing separately (MFS)  Ou checked the MFS box, enter the alifying person is a child but not you	name o ur depen	f your spouse. dent:			surviv or QS	ring spou	use (0 enter	the chi			
Digital Assets		ny time during 2023, did you: (a) reconange, or otherwise dispose of a dig	ital asse	t (or a financial	interest i	n a digital asset					☐ Ye	es 🗵 No	_
Standard Deduction	_	neone can claim:	•			a dependent							
Age/Blindnes	s You	: Were born before January 2, 1	959	Are blind	Spouse	: Was born	n befo	re Janua	ary 2,	1959		s blind	
Dependent	<b>s</b> (see	instructions):		(2) Social se	curity	(3) Relationshi	ip (4	) Check t	he bo	x if quali	fies for (	see instructions	3):
If more	(1) F	(1) First name Last name		number		to you		Child tax c		dit	Credit fo	or other dependen	ıts
than four													
dependents, see instruction	s —												
and check here	· 1 —												_
-	10	Total amount from Form(s) W-2, b	ov 1 (co	instructions)				l		1a		127 <b>,</b> 005.	_
Income	1a b		,	,						1b	_	127,000.	_
Attach Form(s)		Household employee wages not reported on Form(s) W-2							10			_	
W-2 here. Also attach Forms	d								1d			_	
W-2G and	-	Medicaid waiver payments not reported on Form(s) W-2 (see instructions)						1e			_		
1099-R if tax was withheld.	e	Employer-provided adoption bene							1f			_	
If you did not	f	Wages from Form 8919, line 6.	iils iroiii	1 FUIII 6639, III	IE 29 .					_			_
get a Form	g	-	 :ana\							1g		0.	-
W-2, see	h ;	Other earned income (see instruction (see instruction (see	,				· ·			1h		<u> </u>	_
instructions.	i	Nontaxable combat pay election (s	see iiisif	uctions)						4		127,005.	
AHI 0 : 5	<u>z</u>	Add lines 1a through 1h	2a		· · ·	 Faxable interest				1z 2b			_
Attach Sch. B if required.	2a	· —	2a 3a	52.	-	raxable interest Ordinary dividen				3b		243.	_
	<u>3a</u> 4a		3a 4a	52.		Faxable amount				4b			_
Standard	<del>4</del> а 5а		<del>ч</del> а 5а		_	raxable amount				5b			_
Deduction for—			6a			Taxable amount				6b			_
Single or Married filing	6a c	If you elect to use the lump-sum e	_	nethod check	_				· -	]   00			_
separately, \$13,850	7	•		*	,	,				7			
Married filing	8	Capital gain or (loss). Attach Schedule D if required. If not required, check here							. ∟	8		-18,766.	_
jointly or Qualifying	9		•							9		108,482.	
surviving spouse, \$27,700	10	Add lines 12, 25, 35, 45, 35, 65, 7, Adjustments to income from Sche	1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your <b>total income</b>						10		100, 102.	_	
Head of	11	Subtract line 10 from line 9. This is								11		108,482.	_
household, \$20,800	12	Standard deduction or itemized	•	-				• •		12		27,700.	
If you checked any box under	13	Qualified business income deducti								13		<u> </u>	
Standard	14									14		27,700.	_
Deduction, see instructions.	15	Subtract line 1/1 from line 11. If zer								15		27 <b>,</b> 700 <b>.</b>	-

Form 1040 (2023	3)								Page Z	
Tax and	16	Tax (see instructions). Check	if any from Form	(s): <b>1</b> 881	4 <b>2</b> 4972	з 🗌		16	9,247.	
Credits	17	Amount from Schedule 2, lin	ne 3					17		
	18	Add lines 16 and 17						18	9,247.	
	19	Child tax credit or credit for	other dependen	ts from Sched	ule 8812			19		
	20	Amount from Schedule 3, lin	ne 8					20		
	21	Add lines 19 and 20						21		
	22	Subtract line 21 from line 18	. If zero or less,	enter -0				22	9,247.	
	23	Other taxes, including self-e	mployment tax,	from Schedule	e 2, line 21			23	0.	
	24	Add lines 22 and 23. This is	your <b>total tax</b>					24	9,247.	
Payments	25	Federal income tax withheld	l from:							
-	а	Form(s) W-2				<b>25a</b> 17	7,494.			
	b	Form(s) 1099				25b				
	С	Other forms (see instructions	s)			25c				
	d	Add lines 25a through 25c						25d	17,494.	
If you have a	26	2023 estimated tax paymen	ts and amount a	pplied from 20	)22 return			26		
qualifying child,	27	Earned income credit (EIC)				27				
attach Sch. EIC.	28	Additional child tax credit from	m Schedule 8812	·		28				
	29	American opportunity credit	from Form 8863	3, line 8		29				
	30	Reserved for future use .				30				
	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	ndable credits		32		
	33	Add lines 25d, 26, and 32. T	hese are your <b>to</b>	tal payments				33	17,494.	
Refund	34	If line 33 is more than line 24	1, subtract line 2	4 from line 33.	This is the amoun	t you <b>overpaid</b>		34	8,247.	
	35a	Amount of line 34 you want	refunded to you	ı. If Form 8888	3 is attached, chec	k here	. 🗆	35a	8,247.	
Direct deposit?	b	Routing number 1 1 1				Checking	Savings			
See instructions.	d	Account number 4 8 8	0 9 0 4	8 6 8 6	6 1					
	36	Amount of line 34 you want	applied to your	2024 estimate	ed tax	36				
Amount You Owe	37	Subtract line 33 from line 24 For details on how to pay, g						37		
rou owe	38	Estimated tax penalty (see in	_	-		38		31		
Third Doub		you want to allow another								
Third Party Designee		,	•		m with the ins?		omplete	below.	X No	
Doolgiloo	De	esignee's	Phone		•	identification				
	na	me		no.		num	ber (PIN)			
Sign		ider penalties of perjury, I declare the lief, they are true, correct, and com								
Here	Yo	Your signature		Date Your occupation				If the IRS sent you an Identity		
				SOFTWARE DEVELOPER				tection P e inst.)	IN, enter it here	
Joint return? See instructions.		ouso's signature. If a joint roturn, I	hath must sign	Date	Spouse's occupation	`	,			
Keep a copy for your records.	Spouse's signature. If a joint return, <b>both</b> must sign.		Date	HOMEMAKER	Ide	If the IRS sent your spouse an Identity Protection PIN, enter it here (see inst.)				
	———Ph	one no. (512) 905-859	1	Email address	KRISHNA.KONDU	PALLI@GMATT, C	OM			
		eparer's name	Preparer's signat			Date Date	PTIN		Check if:	
Paid	SYAM	1 PRIYA RAM SAGAR GUPTA TALLAM	SYAM PRIYA	RAM SAGAR	GUPTA TALLAM	02/14/2024	P0208	32703	Self-employed	
Preparer		m's name GLOBAL TA				, , , _ , _ ,			(678) 965-9522	
Use Only	Firm's address 245 ROONEY CT E BRU			NSWICK N	J 08816		Firm's EIN 84-3171965			
		2 10 110011		O-1. IV			1		<u> </u>	

## SCHEDULE 1 (Form 1040)

## **Additional Income and Adjustments to Income**

OMB No. 1545-0074

2023

Attachment
Sequence No. 01

Department of the Treasury Internal Revenue Service

Name(s) shown on Form 1040, 1040-SR, or 1040-NR

KRISHNA CHAITHANYA KONDUPALLI & MAMATHA KUPPAM

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

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

١.		Sequence No. <b>01</b>
	Your soci	ial security number
	649-97	-0350

Par	t I Additional Income			
1	Taxable refunds, credits, or offsets of state and local income taxes		1	
2a	Alimony received		2a	
b	Date of original divorce or separation agreement (see instructions):			
3	Business income or (loss). Attach Schedule C		3	
4	Other gains or (losses). Attach Form 4797		4	
5	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Atta		5	-18,766.
6	Farm income or (loss). Attach Schedule F		6	
7	Unemployment compensation		7	
8	Other income:			
а	Net operating loss	8a (	)	
b	Gambling	8b		
С	Cancellation of debt	8c		
d	Foreign earned income exclusion from Form 2555	8d (	)	
е	Income from Form 8853	8e		
f	Income from Form 8889	8f		
g	Alaska Permanent Fund dividends	8g		
h	Jury duty pay	8h		
i	Prizes and awards	8i		
j	Activity not engaged in for profit income	8j		
k	Stock options	8k		
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)	8m		
n	Section 951(a) inclusion (see instructions)	8n		
0	Section 951A(a) inclusion (see instructions)	80		
р	Section 461(I) excess business loss adjustment	8p		
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	8s (	<u>)</u>	
t	Pension or annuity from a nonqualifed deferred compensation plan or			
	a nongovernmental section 457 plan	8t		
u	Wages earned while incarcerated	8u		
Z	Other income. List type and amount:			
		8z		
9	Total other income. Add lines 8a through 8z		9	
10	Combine lines 1 through 7 and 9. This is your additional income. Enter	here and on Form		
	1040, 1040-SR, or 1040-NR, line 8		10	-18,766.

Schedule 1 (Form 1040) 2023 Page **2** 

Par	t II Adjustments to Income				
11	Educator expenses			11	
12	Certain business expenses of reservists, performing artists, and fee-				
	officials. Attach Form 2106			12	
13	Health savings account deduction. Attach Form 8889			13	
14	Moving expenses for members of the Armed Forces. Attach Form 3903			14	
15	Deductible part of self-employment tax. Attach Schedule SE			15	
16	Self-employed SEP, SIMPLE, and qualified plans			16	
17	Self-employed health insurance deduction			17	
18	Penalty on early withdrawal of savings			18	
19a	Alimony paid			19a	
b	Recipient's SSN				
С	Date of original divorce or separation agreement (see instructions):				
20	IRA deduction			20	
21	Student loan interest deduction			21	
22	Reserved for future use			22	
23	Archer MSA deduction			23	
24	Other adjustments:	_			
а	, , , , , , , , , , , , , , , , , , ,	24a			
b	Deductible expenses related to income reported on line 8l from the				
		24b			
С	Nontaxable amount of the value of Olympic and Paralympic medals	04			
_1	• • • • • • • • • • • • • • • • • • • •	24c		_	
d		24d		-	
е	Repayment of supplemental unemployment benefits under the Trade Act of 1974	24e			
f		24f			
g	Contributions by certain chaplains to section 403(b) plans	24g			
h	Attorney fees and court costs for actions involving certain unlawful				
	discrimination claims (see instructions)	24h			
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				
	<b>-</b>	24i			
j		24j			
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form				
		24k			
Z	Other adjustments. List type and amount:	24z			
<b>0</b> -					
25 26	Total other adjustments. Add lines 24a through 24z	 E		25	
26	Add lines 11 through 23 and 25. These are your <b>adjustments to income</b> .	. ∟nter	nere and on		
	Form 1040, 1040-SR, or 1040-NR, line 10			26	

#### **SCHEDULE E** (Form 1040)

### **Supplemental Income and Loss**

(From rental real estate, royalties, partnerships, S corporations, estates, trusts, REMICs, etc.)

Attach to Form 1040, 1040-SR, 1040-NR, or 1041.

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

Attachment Sequence No. 13

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service

Name	ne(s) shown on return								our social security number			
KRI									649-97-0350			
Pa	Income or Loss From Rental Real Estate an Note: If you are in the business of renting personal proper rental income or loss from Form 4835 on page 2, line 40.		•	<b>C</b> . See	instruc	ctions. If you a	are an indi	vidual, rep	ort farm			
A B	Did you make any payments in 2023 that would require you If "Yes," did you or will you file required Form(s) 1099?											
1a												
Α	FLAT 503,SV SUMERU NILAYAM HNO 12-2-417/34&35 SHA	ARADA	NAGAR CO	LONY,G	UDIMA	LKAPUR HYDE	ERABAD TI	ELANGANA	IN 500028			
В												
C							1					
1b	(from list below) above, report the number of fair	rental and			Fa	ir Rental Days	Personal Use Days		QΊΛ			
Α	personal use days. Check the Quif you meet the requirements to f			Α		365		0				
B	qualified joint venture. See instru			В								
С	- C Donnarda			С								
1	e of Property: Single Family Residence 3 Vacation/Short-Term Rent Multi-Family Residence 4 Commercial	tal	5 Land 6 Roya			Self-Rental Other (desc	ribe)					
						Propert	ies:					
Inco				Α		В			С			
3	Rents received	3		6	54.							
_4	Royalties received	4										
-	enses:	_										
5 6	Advertising	5 6										
7	Cleaning and maintenance	7		3 8	45.							
8	Commissions	8		3,0	43.							
9	Insurance	9										
10	Legal and other professional fees	10										
11	Management fees	11		3,4	63.							
12	Mortgage interest paid to banks, etc. (see instructions)	12										
13	Other interest	13										
14	Repairs	14		3,9	10.							
15	Supplies	15		2,8	12.							
16	Taxes	16										
17	Utilities	17			33.							
18	Depreciation expense or depletion	18		2,7	57.							
19	Other (list)	19		10 4	20							
20	Total expenses. Add lines 5 through 19 Subtract line 20 from line 3 (rents) and/or 4 (royalties). If	20		19,4	20.							
21	result is a (loss), see instructions to find out if you must file <b>Form 6198</b>	21	_	-18,7	66.							
22	Deductible rental real estate loss after limitation, if any, on <b>Form 8582</b> (see instructions)	22		18,76		,	)	(	)			
23a				, , (	23a		654.		,			
b	·				23b		-					
С					23c							
d					23d	2	2,757.					
е	•				23e	19	9,420.					
24	Income. Add positive amounts shown on line 21. Do not						. 24					
25	Losses. Add royalty losses from line 21 and rental real estate							(	18,766.)			
26	Total rental real estate and royalty income or (loss).	Comb	ine lines :	24 and	25. E	nter the resi	ult					

here. If Parts II, III, and IV, and line 40 on page 2 do not apply to you, also enter this amount on

26

-18,766.