Deduction for- Single or Married filing jointly or Qualifying surviving spouse, \$27,700 Sa Defations and annulutes	1040		artment of the Treasury—Internal Revenue Servi S. Individual Income Ta		turn	202	3	OMB No. 1545	-0074	IRS Use Only	/—Do not v	vrite or sta	aple in this space.
IMDRIKA INAPAROLLA B99 0 8485 Fjört run, spouse's first name and middle initial Last name Spouse's toold security number Home address jumber and streed, if you have a Po. box, see instructions. Apt. no. Precidential Election Campaign 2305 F1AZA TNAPAROLLA State 2IP code Transcience MICHARDON TX 75082 The Check here in the control	For the year Jan	. 1-Dec	2. 31, 2023, or other tax year beginning			, 2023, end	ling			, 20	See se	parate	instructions.
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Deduction, 14 Add lines 12 and 13 13,850.	any box under	13	Qualified business income deduct	ion fro	m Form 8	995 or Form	899	5-A			. 13	3	
see instructions. 15 Subtract line 14 from line 11. If zero or less, enter -0 This is your taxable income 15 48,827.	Deduction,	14	Add lines 12 and 13								. 14	<u> </u>	
	see instructions.	15	Subtract line 14 from line 11. If zer	o or le	ess, enter	-0 This is y	ourt	taxable incom	е.		. 15	5	48,827.

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 🗌		16	6,049.
Credits	17	Amount from Schedule 2, lin	e3					17	
	18	Add lines 16 and 17					[18	6,049.
	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	6,049.
	23	Other taxes, including self-e						23	0.
	24	Add lines 22 and 23. This is						24	6,049.
Payments	25	Federal income tax withheld							,
. aymente	а	Form(s) W-2				25a 10	,455.		
	b	Form(s) 1099				25b			
	С	Other forms (see instructions				25c			
	d	Add lines 25a through 25c	,					25d	10,455.
	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 .		-		30			
	31	Amount from Schedule 3, lin				31			
	32	Add lines 27, 28, 29, and 31				-		32	
	33	Add lines 25d, 26, and 32. T	,	-			•••	33	10,455.
Defined	34	If line 33 is more than line 24					• •	34	4,406.
Refund	34 35a		-			, .		35a	4,406.
Direct deposit?	b soa	Amount of line 34 you want Routing number $1 1 1$						35a	4,100.
See instructions.		Account number 4 8 8					Savings		
	d								
	36	Amount of line 34 you want a				36			
Amount You Owe	37	Subtract line 33 from line 24 For details on how to pay, g						07	
rou Owe	0 0					1 1		37	
	38	Estimated tax penalty (see in	,			38			
Third Party		you want to allow another	•		rn with the IRS?		omplete be	alaw	🗙 No
Designee							•		
	nai	signee's ne		Phone no.			onal identific ber (PIN)	Jation	
Sign	Un	der penalties of perjury, I declare th	nat I have examined	d this return and	accompanying sche	edules and statemen	ts, and to the	e best /	of my knowledge and
Here	bel	ief, they are true, correct, and com	plete. Declaration of	of preparer (othe	r than taxpayer) is b	ased on all informati	on of which	prepare	er has any knowledge.
пеге	Yo	ur signature		Date	Your occupation		If the I	IRS ser	nt you an Identity
									IN, enter it here
Joint return?				SOFTWARE ENGINEER (S					
See instructions. Keep a copy for	Sp	ouse's signature. If a joint return, t						nt your spouse an action PIN, enter it here	
your records.				l Ider (see					
	Ph	one no. (361)228-076	5	Email address	ΜΟΝΤΟΆΤΝΑΡΑΙ	KOLLA@GMAIL.C	 או		
		eparer's name	Preparer's signat	1	INTER CATINAL VI	Date	PTIN		Check if:
Paid		I PRIYA RAM SAGAR GUPTA TALLAM					P02082	702	Self-employed
Preparer		n's name GLOBAL TAX		ITTUI DUGUL	COLIN INDER	100/00/2024			
Use Only			Y CT E BRU	NOWICK N	J 08816		Firm's		678)965-9522
Co to united into an				NOWICK N			FILLIS		84-3171965 Form 1040 (2023)
GO IO WWW.IIS.go	wrom	n1040 for instructions and the late	st mornation.		BAA	REV 03/04/24 PRO			Form 1040 (2023)

SCHEDULE	1
(Form 1040)	

Department of the Treasury

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

2023 Attachment Sequence No. **01**

Internal Revenue Service	Go to www.irs.gov/Form1040 for instructions and the latest information.		Sequence No. 01
Name(s) shown on Fo	rm 1040, 1040-SR, or 1040-NR	Your soci	al security number
MONIKA INAPAKO	LLA	899-90	-8485

Par	t 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	-13,780.
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		
1	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		
ο	Section 951A(a) inclusion (see instructions)	80		
р	Section 461(I) excess business loss adjustment	8р		
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 (
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 1040, 1040-SR, or 1040-NR, line 8		10	-13,780.
For Pa	perwork Reduction Act Notice, see your tax return instructions.			1 (Form 1040) 2023

1	Educator expenses		 	11	
2	Certain business expenses of reservists, performing artists, and fee		nment		
-	officials. Attach Form 2106		 	12	
3	Health savings account deduction. Attach Form 8889		 	13	
4	Moving expenses for members of the Armed Forces. Attach Form 3903			14	
5	Deductible part of self-employment tax. Attach Schedule SE			15	
6	Self-employed SEP, SIMPLE, and qualified plans			16	
17	Self-employed health insurance deduction			17	
8	Penalty on early withdrawal of savings			18	
19a	Alimony paid			19a	
b	Recipient's SSN			Tou	
c	Date of original divorce or separation agreement (see instructions):	•			
20				20	
21	Student loan interest deduction			20	
22	Reserved for future use			22	
23	Archer MSA deduction			23	
24	Other adjustments:	· · ·	 • •	23	
<u>а</u>		24a			
a b	Deductible expenses related to income reported on line 81 from the	24a		-	
D		24b			
•	Nontaxable amount of the value of Olympic and Paralympic medals	240		-	
С	and USOC prize money reported on line 8m	24c			
А	Reforestation amortization and expenses	240 24d		-	
d	Repayment of supplemental unemployment benefits under the Trade	24u		-	
е		24e			
	Act of 1974	24e 24f		-	
f	Contributions to section 501(c)(18)(D) pension plans			-	
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				
-	tax law violations	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				
	Form 1040, 1040-SR, or 1040-NR, line 10	<u> </u>	 	26	

SCHEDULE	Ε
(Form 1040)	

Supplemental Income and Loss

OMB No. 1545-0074

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

Department of the Treasury Internal Revenue Service Attach to Form 1040, 1040-SR, 1040-NR, or 1041. Go to *www.irs.gov/ScheduleE* for instructions and the latest information.

2023	
Attachment Sequence No. 13	

Nama (a)	abauun	~ ~	we tu une	

	snown on return									social sec	-	umbe	r
	KA INAPAKOLLA								899	-90-8	485		-
Part	Note: If you a	re in th	From Rental Real Estate an be business of renting personal proper s from Form 4835 on page 2, line 40.	rty, use	yalties Schedule	e C . See	e instru	ctions. If you a	are an i	individua	l, repo	ort farr	n
A [Did you make any p	ayme	nts in 2023 that would require you	to file	Form(s)	1099? 5	See ins	structions .		[s 🛛	No
B	f "Yes," did you or	will yo	ou file required Form(s) 1099?							[s 🗌	No
1a			ch property (street, city, state, Zl										
					,								
<u>A</u>	VALLURI VAR	L ST	, 16-2-26 MANDAPETA ANI	DHRA	PRADES	SH IN	533	308					
B													
С							1						
1b	Type of Property	2	For each rental real estate prope	erty list	ted		Fa	ir Rental	Per	sonal U	se	Q	JV
	(from list below)	-	above, report the number of fair personal use days. Check the Q					Days		Days	_		
<u>A</u>	3	-	if you meet the requirements to			A		365		()	L	╡──
B		-	qualified joint venture. See instru			B						L	╡──
C						С							
	of Property:						_						
	Single Family Resid			ntal	5 Lanc			Self-Rental					
2	Multi-Family Reside	ence	4 Commercial		6 Roya	alties	8	Other (desc	ribe)				
								Properti	ies:				
ncom	ne:					Α		. В				С	
3				3		6	642.						
4				4									
Exper													
5				5									
6			tructions)	6									
7	•		nce	7		2.9	975.						
8	-			8		_,,							
9				9									
10			sional fees	10									
11				11		1 4	31.						
12			to banks, etc. (see instructions)	12			<u></u>						
13		-	· · · · · · · · · · · · · · · ·	13									
14				14		2.1	.63.						
15				15			23.						
16				16		270	20.						
17				17		2.2	87.						
18			r depletion	18			43.						
19	Other (list)		-	19		21,	10.						
20		dd lir	es 5 through 19	20		14,4	22						
21	-		ne 3 (rents) and/or 4 (royalties). If			/ -							
~ I			structions to find out if you must										
				21		-13 , 7	80.						
22			state loss after limitation, if any,	<u> </u>									
			ructions)	22	(13,78	30.1	()			١
23a	-		oorted on line 3 for all rental prope		N		23a	`	642	2.			/
b		-	ported on line 4 for all royalty prop				23b						
c		-	ported on line 12 for all properties				23c						
d			ported on line 18 for all properties				23d	2	2,743	3.			
e		-	ported on line 20 for all properties				23e		422				
24		-	mounts shown on line 21. Do no							24			
25			es from line 21 and rental real estat		-		nter to	tal losses her		25 (1	3,7	80.1
26	•	-	e and royalty income or (loss).							- (-	- / '	/
20			IV, and line 40 on page 2 do no										
), line 5. Otherwise, include this a							26	_	13.	780

Form 8582
Department of the Treasury Internal Revenue Service

Passive Activity Loss Limitations

See separate instructions.

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

Go to www.irs.gov/Form8582 for instructions and the latest information.

OMB No. 1545-1008

Name(s)) shown on return					tifying nu	
	KA INAPAKOLLA				89	9-90-	8485
Par							
	Caution: Complete Parts IV an	nd V before comple	eting Part I.				
	I Real Estate Activities With Active Pa ance for Rental Real Estate Activities			ive participation, se	ee Special		
1a	Activities with net income (enter the a	mount from Part IN	/, column (a)) .	1a			
b	Activities with net loss (enter the amou	unt from Part IV, c	olumn (b))	1b ()	
С	Prior years' unallowed losses (enter th		, , , , , , , , , , , , , , , , , , , ,)	
d	Combine lines 1a, 1b, and 1c					1d	
All Ot	her Passive Activities						
2a	Activities with net income (enter the a	mount from Part V	', column (a)) .	2 a	0.		
b	Activities with net loss (enter the amound				0.	<u></u>	
С	Prior years' unallowed losses (enter th				-9,663.	<i>,</i>	
d	Combine lines 2a, 2b, and 2c					2d	-9,663.
3	Combine lines 1d and 2d and subtractive zero or more, stop here and include prior year unallowed losses entered of normally used	this form with you on line 1c or 2c. F	ur return; all losse Report the losses	es are allowed, inc	luding any	3	-9,663.
	If line 3 is a loss and: • Line 1d is a l					5	5,005.
			zero or more), sk	ip Part II and go to	line 10.		
Cautio	on: If your filing status is married filing	•				e year,	do not complete
	. Instead, go to line 10.	, , ,	,	, ,	0	, ,	
Par	II Special Allowance for Ren			-			
	Note: Enter all numbers in Part	•		tions for an examp	le.		
4 5	Enter the smaller of the loss on line 16 Enter \$150,000. If married filing separa			5		4	
6	Enter modified adjusted gross income	•				-	
U	Note: If line 6 is greater than or equal on line 9. Otherwise, go to line 7.						
7	Subtract line 6 from line 5			7			
8	Multiply line 7 by 50% (0.50). Do not er	nter more than \$25	,000. If married fili	ng separately, see i	nstructions	8	
9	Enter the smaller of line 4 or line 8. If	line 3 includes any	/ CRD, see instruc	ctions		9	0.
Part							
10	Add the income, if any, on lines 1a and					10	0.
11 Part	Total losses allowed from all passivout how to report the losses on your tailIVComplete This Part Before	ax return				11	0.
Faru	Complete This Part Belore	e Part I, Lines I	a, ib, and ic. S				
	Name of activity	Currer	-	Prior years	Ove	erall gai	n or loss
	-	(a) Net income (line 1a)	(b) Net loss (line 1b)	(c) Unallowed loss (line 1c)	(d) Gai	n	(e) Loss
Total	Enter on Part I, lines 1a, 1b, and 1c						
i utal.	LINE UTT ALL, IIIES TA, TU, AUU TC						

For Paperwork Reduction Act Notice, see instructions.

REV 03/04/24 PRO

Form **8582** (2023)

		- 0h	and 0a 0		1:000			Page 2
					Overall gain or loss			
(a	(a) Net income			(c) Unallowed		(d) Gain		(e) Loss
	0.		0.	-				9,663.
	0.		0.					
		Part II,	Line 9. S	ee instruc	tions.			
an to l	d line number be reported on	(a) Loss		(b) Ratio		(c) Special allowance		(d) Subtract column (c) from column (a).
Total Allocation of Unallowed Losses. See inst				1.00				
Loss	ses. See instr	uction	S.					
	and line nur to be reporte	nber ed on	(a) Loss		(b) Ratio		(c) Unallowed loss	
	E Ln 2	2	9,663.		1.00000000			9,663.
				9,663.		1.00		9,663.
	and line nur to be reporte	nber ed on	(a) Loss		(b) Unallowed loss		(c) Allowed loss	
VALLURI VARI ST, 16-2-26 E Lr		2		9,663.		9,663.		0.
				9,663.		9,663.		0.
	(a Int Is For an to I (se Loss	Currer (a) Net income (line 2a) 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0.	Current year (a) Net income (line 2a) (b) I 0. 0. 0. 0. 0. 0. Image: Comparison of the second sec	Current year (a) Net income (line 2a) (b) Net loss (line 2b) 0. 0.	Current year Prior year (a) Net income (line 2a) (b) Net loss (line 2b) (c) Unall loss (lime 2b) 0. 0. 0. 9, 0. 0. 0. 9, 0. 0. 0. 9, 0. 0. 0. 9, 0. 0. 0. 9, 0. 0. 0. 9, 0. 0. 0. 9, 0. 0. 0. 9, 0. 0. 0. 9, 0. 0. 0. 9, 0. 0. 0. 9, 0. 0. 0. 9, 0. 0. 0. 9, 0. 0. 0. 9, 0. 0. 0. 0. 1.00 0. 0. 0. 1.01 0. 0. 0. 1.02 0. 0. 0. 1.03 0. 0. 0. 1.04 0. 0. 0.	(a) Net income (line 2a) (b) Net loss (line 2b) (c) Unallowed loss (line 2c) 0. 0. 9, 663. 0. 0. 9, 663. 0. 0. 9, 663. 0. 0. 9, 663. 0. 0. 9, 663. 0. 0. 9, 663. Int Is Shown on Part II, Line 9. See instructions. Form or schedule and line number to be reported on (see instructions) (b) Ratio Losses. See instructions. 1.00 Losses. See instructions. 1.00 Losses. See instructions. (a) Loss Form or schedule and line number to be reported on (see instructions) (a) Loss E Ln 22 9, 663. 1.0	Current year Prior years Overa (a) Net income (line 2a) (b) Net loss (line 2b) (c) Unallowed loss (line 2c) (d) Gain 0. 0. 9, 663. (d) Gain 100 1.00 (e) Special allowance (f) Special allowance 1.00 1.00 1.00 1.00 Losses. See instructions. Form or schedule and line number to be reported on (see instructions) (a) Loss (b) Ratio 1.00 1.00000000 1.00000000 1.000 1.000 1.00 1.00000000 1.000 1.000 1.000 1.00 1.000 1.000 1.000 1.000 1.00 1.000 <td>Current year Prior years Overall ga (a) Net income (line 2a) (b) Net loss (line 2b) (c) Unallowed loss (line 2c) (d) Gain 0. 0. 9, 663. 0. 0. 9, 663. 0. 0. 9, 663. 0. 0. 9, 663. 0. 0. 9, 663. 0. 0. 9, 663. 0. 0. 9, 663. Int Is Shown on Part II, Line 9. See instructions. Form or schedule and line number to be reported on (see instructions) Int Is Shown on Part II, Line 9. See instructions. Form or schedule and line number to be reported on (see instructions) Int Is Diverse see instructions. Form or schedule and line number to be reported on (see instructions) E Ln 22 9, 663. 1.00000000 Int Int Int Int Int Int Int Int Int Int</td>	Current year Prior years Overall ga (a) Net income (line 2a) (b) Net loss (line 2b) (c) Unallowed loss (line 2c) (d) Gain 0. 0. 9, 663. 0. 0. 9, 663. 0. 0. 9, 663. 0. 0. 9, 663. 0. 0. 9, 663. 0. 0. 9, 663. 0. 0. 9, 663. Int Is Shown on Part II, Line 9. See instructions. Form or schedule and line number to be reported on (see instructions) Int Is Shown on Part II, Line 9. See instructions. Form or schedule and line number to be reported on (see instructions) Int Is Diverse see instructions. Form or schedule and line number to be reported on (see instructions) E Ln 22 9, 663. 1.00000000 Int

REV 03/04/24 PRO

Form **8582** (2023)