# E1040 Department of the Treasury—Internal Revenue Service U.S. Individual Income Tax Return



£1040		artment of the Treasury—Internal Revenue Servi  S. Individual Income Tax		turn	202	3	OMB No. 1545-	0074	IRS Use Only	–Do not v	write or staple in this space.
For the year Jar	n. 1–Dec	c. 31, 2023, or other tax year beginning	, 2023, ending , 20						See separate instructions.		
Your first name	iddle initial	ame						Your social security number			
BHAVITHA	A REI	DDY	JELA						799   12   7285		
If joint return, s	pouse's	s first name and middle initial	ame						Spouse's social security numbe		
Home address	(numbe	er and street). If you have a P.O. box, see	instruct	tions.				A	Apt. no.	Preside	ential Election Campaig
108 LAKE	E VII	EW DR									here if you, or your
City, town, or p	ost offi	ce. If you have a foreign address, also co	mplete:	spaces be	low.	Sta	te	ZIP co	ode		if filing jointly, want \$3 this fund. Checking a
OAK POIN						TX	ζ	750	68	box be	low will not change
Foreign country	y name			Foreign p	rovince/state/c	count	ty	Foreig	ın postal code	your ta	x or refund.  You Spouse
Filing Status	, X	Single					Head of ho	useh	old (HOH)		
Check only		Married filing jointly (even if only or	ne had	income)					, ,		
one box.		Married filing separately (MFS)					☐ Qualifying	surviv	ing spouse	(QSS)	
	If y	ou checked the MFS box, enter the	name	of your s	pouse. If you	ı che	ecked the HOH	or Q	SS box, ente	r the ch	ild's name if the
	qu	alifying person is a child but not you	ır depe	ndent:							
Digital	At ar	ny time during 2023, did you: (a) rec	eive (as	a reward	d, award, or p	payr	ment for proper	ty or	services); or	(b) sell,	
Assets	exch	ange, or otherwise dispose of a dig						:)? (Se	ee instructio	ns.)	☐ Yes ☒ No
Standard Deduction	_	eone can claim:	•		•		a dependent				
Age/Blindness	s You:	Were born before January 2, 1	959	Are b	lind <b>Spo</b>	use	: Was born	n befo	ore January 2	2, 1959	☐ Is blind
Dependent	s (see	instructions):		(2)	Social security		(3) Relationshi	p (4	) Check the b	ox if qual	ifies for (see instructions)
If more	(1) Fi	(1) First name Last name			number to you				Child tax c	redit	Credit for other dependent
than four											
dependents, see instruction	s ——										
and check	, —										
here L											
Income	1a	Total amount from Form(s) W-2, b								. 18	· ·
Attach Form(s)	b	1 , 3 1								. 1k	
W-2 here. Also	С.	Tip income not reported on line 1a	. 10								
attach Forms W-2G and	d	Medicaid waiver payments not reported on Form(s) W-2 (see instructions)									<u> </u>
1099-R if tax	e	Taxable dependent care benefits f								. 16	
was withheld.	f	Employer-provided adoption bene	tits troi	m Form 8	8839, line 29	•				. 11	
If you did not get a Form	9	Wages from Form 8919, line 6 .				•				. 10	
W-2, see	h :	Other earned income (see instruction (see instruction)							. 11	1 0.	
instructions.	i _	Nontaxable combat pay election (s	ructions) <u>1i</u>						1-	84,000.	
Attack Oct D	z 2a	Add lines 1a through 1h Tax-exempt interest	2a		· · i ·	Ь Т	axable interest			. 12	
Attach Sch. B if required.		· · · · · · · · · · · · · · · · · · ·	3a				axable interest Irdinary dividen			. 21 . 3k	
·	3a 4a		3a 4a				axable amount			. 31 . 4k	
Standard	<del>4</del> а 5а		<del>4</del> а 5а				axable amount			. 41.	
• Single or	6a		6a				axable amount			. 6k	
Married filing	C	•					 				
separately, \$13,850	7	If you elect to use the lump-sum election method, check here (see instructions) L Capital gain or (loss). Attach Schedule D if required. If not required, check here									
<ul> <li>Married filing jointly or</li> </ul>	8	Additional income from Schedule		•	•		•		_	10.1-0	
Qualifying Q Add lines 17 2h 3h 4h 5h 6h 7 and 8 This is your total											
\$27,700 surviving spouse, \$27,700 add lines 12, 2B, 3B, 4B, 5B, 6B, 7, and 6. This is your total income									. 9 . 10		
<ul> <li>Head of household,</li> </ul>	11	Subtract line 10 from line 9. This is								. 11	
\$20,800	12	Standard deduction or itemized deductions (from Schedule A)								. 12	
<ul> <li>If you checked any box under</li> </ul>	13										3
Standard Deduction,	14	A 1.1.11 40 140								. 14	
see instructions.	15	Subtract line 14 from line 11. If zer				our t	taxable incom	е.	<u></u>		

Form 1040 (202)	3)								Page Z	
Tax and	16	Tax (see instructions). Check if ar	ny from Form	(s): <b>1</b> 881	4 <b>2</b> 🗌 4972	3 🗌		16	8,447.	
Credits	17	Amount from Schedule 2, line 3						17		
	18	Add lines 16 and 17						18	8,447.	
	19	Child tax credit or credit for other	er dependent	s from Sched	ule 8812			19		
	20	Amount from Schedule 3, line 8						20		
	21	Add lines 19 and 20						21		
	22	Subtract line 21 from line 18. If z	zero or less, e	enter -0				22	8,447.	
	23	Other taxes, including self-empl	oyment tax, f	from Schedule	e 2, line 21			23	0.	
	24	Add lines 22 and 23. This is you	r total tax					24	8,447.	
Payments	25	Federal income tax withheld from	m:							
-	а	Form(s) W-2				<b>25a</b> 11	,474.			
	b	Form(s) 1099				25b				
	С	Other forms (see instructions)				25c				
	d	Add lines 25a through 25c						25d	11,474.	
If you have a	26	2023 estimated tax payments ar	nd amount ap	oplied from 20	22 return			26		
qualifying child,	27	Earned income credit (EIC)			No .	27				
attach Sch. EIC.	28	Additional child tax credit from So								
	29	American opportunity credit from	m Form 8863	, line 8		29				
	30	Reserved for future use				30				
	31	Amount from Schedule 3, line 15								
	32	Add lines 27, 28, 29, and 31. The	32							
	33	Add lines 25d, 26, and 32. These	e are your <b>to</b>	tal payments				33	11,474.	
Refund	34	If line 33 is more than line 24, su	ubtract line 24	4 from line 33.	This is the amour	t you <b>overpaid</b>		34	3,027.	
	35a	Amount of line 34 you want refu	ınded to you	ı. If Form 8888	is attached, chec	k here		35a	3,027.	
Direct deposit?	b	Routing number 0 2 1 0				Checking	Savings			
See instructions.	d	Account number 4 8 3 0	6 0 7	2 9 5 8	3 2					
	36	Amount of line 34 you want app	lied to your 2	2024 estimate	ed tax	36				
Amount	37	Subtract line 33 from line 24. Th								
You Owe		For details on how to pay, go to	www.irs.gov	/Payments or	see instructions .			37		
	38	Estimated tax penalty (see instru	uctions) .			38				
<b>Third Party</b>		you want to allow another pe				_				
Designee		structions					•		⊠ No	
		signee's me		Phone no.			onal identi ber (PIN)	rication		
Sign	Un	der penalties of perjury, I declare that I	have examined	this return and	accompanying sched	dules and statemen	ts, and to t	he best	of my knowledge and	
Here	be	lief, they are true, correct, and complete	e. Declaration of	of preparer (other	r than taxpayer) is ba	sed on all information	on of whicl	n prepare	er has any knowledge.	
11616	Yo	ur signature	Date Your occupation				If the IRS sent you an Identity			
			SOFTWARE ENGINEER				ection P inst.)	IN, enter it here		
Joint return? See instructions.		ouse's signature. If a joint return, both	Date	SOFTWARE E		`	he IRS sent your spouse an			
Keep a copy for your records.		ouse's signature. If a joint return, <b>both</b>	Date	Spouse's occupant	וונ	Identity Protection PIN, enter it her (see inst.)				
		one no. (812) 361-5857		Email address	LBREDG27@GM	ATT. COM	1,	,		
		(012/001 000/	parer's signatu		TITUGE / BGM	Date	PTIN		Check if:	
Paid		1 PRIYA RAM SAGAR GUPTA TALLAM SY.			GIIPTA TAT.T.AM	01/27/2024	P0208	2703	Self-employed	
Preparer		m's name GLOBAL TAXES			COLILI INDIMIN	01/2//2021		Phone no. (678) 965-9522		
Use Only		m's address 245 ROONEY (		NSWICK N.	т 08816			Firm's EIN 84-3171965		
<u> </u>		40406			- 00010		1	3 = 11 1	- 1010	

## **SCHEDULE 1** (Form 1040)

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

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service

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

Attach to Form 1040, 1040-SR, or 1040-NR. Go to www.irs.gov/Form1040 for instructions and the latest information.

Attachment Sequence No. **01** Your social security number

	799-12-72	100
Part I Additional Income		
1 Taxable refunds, credits, or offsets of state and local income taxes	1	
<b>2a</b> Alimony received	2a	
<b>b</b> Date of original divorce or separation agreement (see instructions):		
3 Business income or (loss). Attach Schedule C		
<b>4</b> Other gains or (losses). Attach Form 4797	4	
5 Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule		-10,450.
6 Farm income or (loss). Attach Schedule F		
7 Unemployment compensation		
8 Other income:		
a Net operating loss	)	
<b>b</b> Gambling		
c Cancellation of debt		
d Foreign earned income exclusion from Form 2555 8d (		
e Income from Form 8853		
f Income from Form 8889		
g Alaska Permanent Fund dividends 8g		
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		
m Olympic and Paralympic medals and USOC prize money (see		
instructions)		
n Section 951(a) inclusion (see instructions)		
o Section 951A(a) inclusion (see instructions)		
p 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	)	
t Pension or annuity from a nonqualifed deferred compensation plan or		
a nongovernmental section 457 plan 8t		
u Wages earned while incarcerated		
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	rorm	

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			
05					
<b>25</b>	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. Attachment

OMB No. 1545-0074

Department of the Treasury

Internal	Revenue Service		Go to ww	v.irs.gov/ScheduleE for	r instru	uctions an	d the la	itest ir	formation.		Sequen	ce No. <b>13</b>	
Name(s) shown on return										Your socia	al security	number	
BHAV	/ITHA REDDY	GAJJ	ELA							799-1	2-7285		
Part	Income of	r Los	ss From Re	ntal Real Estate an	nd Ro	valties							
	Note: If you	are in	the business of	frenting personal proper			C. See	instru	ctions. If you a	are an indiv	/idual, rep	ort farm	
				<b>1835</b> on page 2, line 40.									
<b>A</b> [	Did you make any	paym	ents in 2023 t	hat would require you	to file	Form(s) 1	099? 5	See ins	structions .		. \[ \text{Y}\epsilon	es 🛛 No	
В	f "Yes," did you c	id you or will you file required Form(s) 1099?											
1a				(street, city, state, ZIF									
	-			<u> </u>									
A_	FL NO 401,	4TH	FLOOR SP	HOMES TEACHERS	CLY	HYDERA	BAD,	TELA	NGANA IN	500070	)		
B													
C													
1b	Type of Propert	of Property 2 For each rental real estate property listed						Fair Rental			al Use	QJV	
	(from list below)			ort the number of fair					Days	Da	ys	QJV	
Α	3			se days. Check the Q			Α		365		0		
В				the requirements to 1			В						
С			qualified jo	int venture. See instru	ictions	S.	С						
	of Property:												
	Single Family Res	sidono	2 V20	ation/Short-Term Ren	tal	5 Land	ı	7	Self-Rental				
	•			ation/3nort-renn hen nmercial	ıtaı			-		ر مانی			
2	Multi-Family Resi	dence	e 4 Con	imerciai		6 Roya	lities	0	Other (desc	nbe)			
									Properti	ies:			
Incon	ne:						Α		В.			С	
3	Rents received				3		6	46.					
4					4								
Exper		<del>.</del>			+ -								
_					_								
5	-				5								
6		•			6								
7					7		2,7	90.					
8					8								
9	Insurance				9								
10	Legal and other	profe	ssional fees		10								
11	Management fe	es .			11		1,9	14.					
12	Mortgage intere	st pai	d to banks, et	c. (see instructions)	12								
13	Other interest				13								
14	Repairs				14		2,8	63.					
15	-				15			51.					
16					16								
17					17		1 6	78.					
18					18		±, 0	,					
	Otl (I: - t)		•		_								
19	Other (list)	Λ	in a F there is	- 10	19		11 ^	0.0					
20	•		•	n 19	20		11,0	90.					
21				and/or 4 (royalties). If									
				find out if you must			10.	- 0					
					21	-	-10 <b>,</b> 4	50.					
22				fter limitation, if any,									
	on <b>Form 8582</b> (s	see in	structions) .		22	(	10,45	0.)	(	)	(	)	
23a	Total of all amou	unts re	eported on lin	e 3 for all rental prope	erties			23a		646.			
b	Total of all amou	unts re	eported on lin	e 4 for all royalty prop	erties			23b					
С				e 12 for all properties				23c					
d				e 18 for all properties				23d					
e				e 20 for all properties				23e	11	,096.			
24				wn on line 21. <b>Do no</b> t						. 24			
	•					-		· ·	tal laccas hav		1	10 450 \	
25	LUSSES. AUU 10y	aily 108	5562 110111 11116	21 and rental real estat	C 10556	ווווווווווווווו פי	C 22. C	niei io	iai iosses ner	e <b>25</b>	(	10,450.)	

-10,450.

26

Total rental real estate and royalty income or (loss). Combine lines 24 and 25. Enter the result here. If Parts II, III, and IV, and line 40 on page 2 do not apply to you, also enter this amount on Schedule 1 (Form 1040), line 5. Otherwise, include this amount in the total on line 41 on page 2