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



£1040		artment of the Treasury—Internal Revenue Serv S. Individual Income Ta		urn	202	3	OMB No. 1545-0	0074	IRS Use Only	–Do not v	vrite or staple in this space	
For the year Jan. 1–Dec. 31, 2023, or other tax year beginning					, 2023, ending , 20				See separate instructions.			
Your first name and middle initial Last n									Your social security number			
SWETHA MUL										862	31 3492	
	spouse's	s first name and middle initial	Last na								's social security numb	ьe
										723	50 7310	
Home address	(numb	er and street). If you have a P.O. box, see	instruct	ions.				A	pt. no.		ential Election Campai	igr
6304 MA	STER	S WAY									here if you, or your	
City, town, or	oost off	ice. If you have a foreign address, also co	omplete :	spaces be	low.	Sta	ite	ZIP c	ode		if filing jointly, want \$	
ALPHARE'	TTA					GF	A	300	05		o this fund. Checking low will not change	a
Foreign countr	y name			Foreign p	rovince/state/c	count	ty	Foreig	n postal code	your ta	x or refund.	
											You Spou	se
Filing Status	s 🗆	Single					☐ Head of ho	useh	old (HOH)			
Check only		Married filing jointly (even if only o	ne had	income)			_					
one box.	×	Married filing separately (MFS)					Qualifying s	surviv	ing spouse	(QSS)		
		you checked the MFS box, enter the		,	, ,			or Q	SS box, ente	er the ch	ild's name if the	
	qι	ıalifying person is a child but not you	ur depe	ndent: _1	MANISH K	AN	DHI					_
Digital	At a	ny time during 2023, did you: (a) rec	eive (as	a reward	d. award. or i	pavr	ment for propert	v or	services): or	(b) sell.		_
Assets		nange, or otherwise dispose of a dig						•	,		☐ Yes ☒ No	
Standard	Son	neone can claim:	pender	nt 🗌	Your spouse	e as	a dependent					
Deduction		Spouse itemizes on a separate retur	n or yo	u were a	dual-status a	alien	1					
Age/Rlindnes	s You	: Were born before January 2, 1	959 [Are b	lind Spo	IIISA	·	hefo	ore January 2	1959	☐ Is blind	
Dependent			000 [T	Social security		(3) Relationship	14			ifies for (see instruction	 (S)
•	(1) First name Last name			number		to you		, ,	Child tax credit		Credit for other depende	
If more than four	• • •										П	_
dependents,												_
see instruction and check	ıs											_
here]											_
Income	1a	Total amount from Form(s) W-2, b	ox 1 (se	e instruc	ctions)					. 1a	111,422	
	b	Household employee wages not re	eported	on Form	n(s) W-2					. 1b)	
Attach Form(s) W-2 here. Also	s) The income part was and an line to (and income at income)								. 10	;		
attach Forms	d	Medicaid waiver payments not rep	orted o	n Form(s	s) W-2 (see ir	nstru	ıctions)			. 10	t	
W-2G and 1099-R if tax	е	Taxable dependent care benefits	from Fo	rm 2441	, line 26 .					. 16	•	
was withheld.	f	Employer-provided adoption bene	efits fror	m Form 8	8839, line 29					. 1f	f	
If you did not	g	Wages from Form 8919, line 6 .							. 10			
get a Form W-2, see	h	Other earned income (see instruct	ions)							. 1h	0	
instructions.	i	Nontaxable combat pay election (see inst	ructions))		<u>1i</u>					
	z	Add lines 1a through 1h	. ;							. 1z	111,422	
Attach Sch. B	2a	Tax-exempt interest	2a			b T	axable interest			. 2b)	_
if required.	3a_	Qualified dividends	3a			b C	ordinary dividen	ds .		. 3b)	_
Standard	4a	IRA distributions	4a			b T	axable amount			. 4b)	_
Deduction for—	5a	Pensions and annuities	5a			b T	axable amount			. 5b)	_
Single or Married filing	6a	,	6a				axable amount			. 6b)	_
Married filing separately,	С	,	ct to use the lump-sum election method, check here (see instructions)							╣ [=		
\$13,850 Married filing	7	Capital gain or (loss). Attach Schedule D if required. If not required, check here								_		
jointly or Qualifying	8 Additional income from Schedule 1, line 10									. 8		
surviving spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7		•	our total inc	ome	e			. 9	+	<u>.</u>
\$27,700 • Head of	10	Adjustments to income from Sche								. 10		
household, \$20,800	11	Subtract line 10 from line 9. This is	-							. 11	· ·	
 If you checked 	12	Standard deduction or itemized		,		,				. 12		•
any box under Standard	13	Qualified business income deduct	ion fron	n Form 8	995 or Form	899	15-A			. 13		
Deduction, see instructions.	14	Add lines 12 and 13								. 14	· ·	
	15	Suntract line 1/1 from line 11 If you	ro or loc	e antar	II INC IC W	OUR 1	tavabla inaama	•		1 46	_ i	

Form 1040 (2023	3)						_		Page 2	
Tax and	16	Tax (see instructions). Check	if any from Form	(s): 1 881	4 2 🗌 4972	з 🗌		16	13,584.	
Credits	17	Amount from Schedule 2, lin	те 3					17		
	18	Add lines 16 and 17						18	13,584.	
	19	Child tax credit or credit for	other dependent	ts from Sched	ule 8812			19		
	20	Amount from Schedule 3, lin	те 8					20		
	21	Add lines 19 and 20						21		
	22	Subtract line 21 from line 18	3. If zero or less,	enter -0				22	13,584.	
	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 total tax					24	13,584.	
Payments	25	Federal income tax withheld	d from:			1 1				
	а	Form(s) W-2				25a 1	7,841.			
	b	Form(s) 1099				25b				
	С	Other forms (see instruction	s)			25c				
	d	Add lines 25a through 25c						25d	17,841.	
If you have a	26	2023 estimated tax paymen	ts and amount a	pplied from 20)22 return	.,		26		
qualifying child, attach Sch. EIC.	27	Earned income credit (EIC)				27				
allacii Scii. ElC.	28	Additional child tax credit fro	m Schedule 8812	2		28				
	29	American opportunity credit	from Form 8863	3, line 8		29				
	30	Reserved for future use .				30				
	31	Amount from Schedule 3, lir	ne 15			31				
	32	Add lines 27, 28, 29, and 31	. These are your	total other pa	ayments and ref	undable credits		32		
	33	Add lines 25d, 26, and 32. T	hese are your to	tal payments				33	17,841.	
Refund	34	If line 33 is more than line 24	4, subtract line 2	4 from line 33.	This is the amou	nt you overpaid		34	4,257.	
	35a	Amount of line 34 you want			3 is attached, che	ck here	🗌	35a	4,257.	
Direct deposit?	b	Routing number 0 1 1			c Type:	Checking	Savings			
See instructions.	d	Account number 3 8 8	0 0 5 1	1 2 4 4	4 0					
	36	Amount of line 34 you want	applied to your	2024 estimate	ed tax	36				
Amount	37	Subtract line 33 from line 24								
You Owe		For details on how to pay, g	_	-				37		
	38	Estimated tax penalty (see i	nstructions) .			38				
Third Party		you want to allow another	•							
Designee							•		⊠ No	
		esignee's me		Phone no.			onal identi ber (PIN)	itication		
Sign	Un	der penalties of perjury, I declare t	hat I have examined	d this return and	accompanying sche	edules and statemer	nts, and to	the best	of my knowledge and	
Here	be	lief, they are true, correct, and com	h prepar	er has any knowledge.						
пеге	Yo	Your signature		Date		If the IRS sent you an lo				
									IN, enter it here	
Joint return?				5.	AUTOMATION ENGINEER			(see inst.)		
See instructions. Keep a copy for	Sp	ouse's signature. If a joint return,	both must sign.	Date	Spouse's occupat	ion			nt your spouse an ection PIN, enter it here	
your records.					- 1	inst.)	,			
	Ph	one no. (603) 417-944	0	Email address	M.SWETHA7	20@GMAIL.CO	DM MC			
Doid	Pre	eparer's name	Preparer's signat	ure		Date	PTIN		Check if:	
Paid	SYAN	M PRIYA RAM SAGAR GUPTA TALLAM	SYAM PRIYA	RAM SAGAR	GUPTA TALLAM	03/08/2024	P0208	2703	Self-employed	
Preparer	Fir	Firm's name GLOBAL TAXES LLC							(678) 965-9522	
Use Only			Y CT E BRU	NSWICK N	J 08816			ı's EIN	84-3171965	

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

SWETHA MULGAE

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.

	Sequence No. 01
Your soc	ial security number
862-31	-3492

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	ach Schedule E .	5	-14,498.
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		
ı	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 ()	
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	-14 , 498.

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

Par	Adjustments to Income				
11	Educator expenses			11	
12	Certain business expenses of reservists, performing artists, and fee	-basis	government		
	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	Jury duty pay (see instructions)	24a			
b	Deductible expenses related to income reported on line 8l 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			
е	Repayment of supplemental unemployment benefits under the Trade				
	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		-	
h	Attorney fees and court costs for actions involving certain unlawful	041			
	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	04:			
	Housing deduction from Form 2555	24i 24j		-	
J Ia	Excess deductions of section 67(e) expenses from Schedule K-1 (Form	24j		-	
k	1041)	24k			
_		24K		-	
Z	Other adjustments. List type and amount:	24z			
25	Total other adjustments. Add lines 24a through 24z			25	
25 26	Add lines 11 through 23 and 25. These are your adjustments to income			23	
_0	Form 1040, 1040-SR, or 1040-NR, line 10	. LIIIGI		26	
	BAA		23/24 PRO		le 1 (Form 1040) 2023
	BAA	1\L'V UZ/	LUIZA FINO		

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.

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service Name(s) shown on return

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

Attachment Sequence No. 13

Your social security number

	THA MULGAE				80	862-31-3492				
Par	Note: If you are in the business of renting personal proper rental income or loss from Form 4835 on page 2, line 40.	erty, use Sche	dule C. See		-					
	Did you make any payments in 2023 that would require you If "Yes," did you or will you file required Form(s) 1099?			Yes 🛚 No Yes 🗀 No						
1a		• •	· · · <u> </u>	100110	_					
					_					
	A 1-2-57, NAGULKATTA ZAHEERABAD TELANGANA IN 502220									
B C								_		
	Type of Droporty 0 Fay cook yeartely seel cotate proper	auto di ata al		Fair Danta		David and III a				
1b	Type of Property (from list below) 2 For each rental real estate properties above, report the number of fair			Fair Renta Days	" P	ersonal Use Days	g QJV			
A	personal use days. Check the Q		Α	365		0				
В	if you meet the requirements to		В	303				_		
	qualified joint venture. See instru	uctions.	C					_		
	of Property:			<u> </u>				_		
	Single Family Residence 3 Vacation/Short-Term Ren	ntal 5 L	and	7 Self-Rei	ntal					
	Multi-Family Residence 4 Commercial		Royalties	8 Other (c	describe	e)				
	<u> </u>									
				Prop	perties:			_		
Inco			A	1 E	В		С	_		
3 4	Rents received	3 4	0	45.				_		
	Royalties received	4						_		
5	Advertising	5								
6	Auto and travel (see instructions)	6						_		
7	Cleaning and maintenance	7	2,7	04.				_		
8	Commissions	8		011				_		
9	Insurance	9						_		
10	Legal and other professional fees	10						_		
11	Management fees	11	2,2	10.				_		
12	Mortgage interest paid to banks, etc. (see instructions)	12								
13	Other interest	13						_		
14	Repairs	14	2,9	24.						
15	Supplies	15	2,3	14.						
16	Taxes	16								
17	Utilities	17	2,6							
18	Depreciation expense or depletion	18	2,3	79.						
19	Other (list)	19						_		
20	Total expenses. Add lines 5 through 19	20	15,1	43.				_		
21	Subtract line 20 from line 3 (rents) and/or 4 (royalties). If									
	result is a (loss), see instructions to find out if you must file Form 6198	1 1	-14,4	00						
00		21	-14,4	90.				_		
22	Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions)	22 (14,49	8.)()()		
23a	Total of all amounts reported on line 3 for all rental prope			23a	6	45.				
b	, , , , ,			23b						
С	Total of all amounts reported on line 12 for all properties			23c						
d	Total of all amounts reported on line 18 for all properties			23d	2,3					
е	Total of all amounts reported on line 20 for all properties			23e	15,1					
24	Income. Add positive amounts shown on line 21. Do no	•	•			24		_		
25	Losses. Add royalty losses from line 21 and rental real estat					25 (14,498.	_)		
26	Total rental real estate and royalty income or (loss).									
	here. If Parts II, III, and IV, and line 40 on page 2 do no Schedule 1 (Form 1040), line 5. Otherwise, include this a					26	-14,498			