<b>1040</b>		artment of the Treasury—Internal Revenue Servi <b>S. Individual Income Ta</b> )		turn	202	3	OMB No. 1545-	0074	IRS Use Only	–Do not w	vrite or sta	aple in this space.	
For the year Jan	. 1-Dec	c. 31, 2023, or other tax year beginning			, 2023, end	ing			, 20	See se	parate	instructions.	
Your first name	and mi	iddle initial	Last r	name							Your social security number		
MANPREEI	1		KAU	R						862	15	3457	
		s first name and middle initial	Last r									I security numbe	
Home address	(numbe	er and street). If you have a P.O. box, see	instruc	tions.				A	pt. no.	Preside	ntial Ele	ection Campaigr	
<u>4991 KEY</u>								Ŭ	1201			ou, 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			jointly, want \$3 nd. Checking a	
JACKSONV						FI		322		box bel	ow will	not change	
Foreign country	/ name			Foreign p	rovince/state/o	count	ty	Foreig	n postal code	your tax	_	_	
											L Yo	ou 🔄 Spouse	
Filing Status		Single		l :)			Head of ho	buseh	old (HOH)				
Check only		Married filing jointly (even if only of Married filing separately (MFS)	ne nac	i income)				ounviv	ring spouse	(099)			
one box.	L If y	you checked the MFS box, enter the	name	of your s	nouse If voi	ı che					ild'e na	me if the	
		alifying person is a child but not you											
Digital Assets		ny time during 2023, did you: (a) rec nange, or otherwise dispose of a dig						-				es 🛛 No	
Standard		neone can claim:  You as a de		· · · · · · · · · · · · · · · · · · ·			a dependent	0: (00		15.)			
Deduction	_	Spouse itemizes on a separate retur	•		•		•						
		: Were born before January 2, 1		Are b		ouse		n hofo	ore January 2	2 1050		s blind	
		· · · · · · · · · · · · · · · · · · ·	333					14				(see instructions):	
-		see instructions):  1) First name Last name			(2) Social security number to you			p (	Child tax c			or other dependents	
lf more than four	(1)										<u>·</u>		
dependents,													
see instructions and check	s —												
here													
Income	1a	Total amount from Form(s) W-2, b	ox 1 (s	ee instruc	ctions)					. 1a	1	88,754.	
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 instructions)       .								. 10	;		
attach Forms W-2G and	d	Medicaid waiver payments not reported on Form(s) W-2 (see instructions)								. 10			
1099-R if tax	е	Taxable dependent care benefits f	· · · · ·						. <u>1</u> e				
was withheld.	f	Employer-provided adoption bene							. <u>1</u> f				
lf you did not get a Form	g L	Wages from Form 8919, line 6 .		• •		. 1g		0.					
W-2, see	h :	Other earned income (see instructions)         .								. <u>1</u> h	1	0.	
instructions.	i z	Add lines 1a through 1h	see ms	structions)		•••	🕅			. 1z		88,754.	
Attach Sch. B	2a	-	2a			• Т	axable interest	• •		. 12 . 2b			
if required.	3a		3a				ordinary divider			 3b			
	4a		4a				axable amount			. 4b			
Standard Deduction for—	5a		5a				axable amount			. 5b			
Single or	6a	Social security benefits	6a				axable amount			. 6b	,		
Married filing separately,	с	If you elect to use the lump-sum election method, check here (see instructions)											
\$13,850	7	Capital gain or (loss). Attach Schedule D if required. If not required, check here								7			
<ul> <li>Married filing jointly or</li> </ul>	8	Additional income from Schedule	1, line	10						. 8		-10,118.	
Qualifying surviving spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income								. 9		78,636.	
\$27,700 • Head of	10	Adjustments to income from Schedule 1, line 26											
household,	11	Subtract line 10 from line 9. This is	s your	adjusted	gross incon	ne				. 11		78,636.	
\$20,800 • If you checked г	12	Standard deduction or itemized								. 12	:	13,850.	
any box under Standard	13	Qualified business income deduct	ion fro	m Form 8	995 or Form	899	5-A			. 13			
Deduction, see instructions.	14	Add lines 12 and 13	• •							. 14		13,850.	
	15	Subtract line 14 from line 11. If zer	ro or le	ss, enter	-0 This is y	our	taxable incom	е.		. 15		64,786.	

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	9,558.
Credits	17	Amount from Schedule 2, lin	ie 3				[	17	
	18	Add lines 16 and 17					[	18	9,558.
	19	Child tax credit or credit for	other dependen	ts from Sched	ule 8812			19	
	20	Amount from Schedule 3, lin	ie 8				[	20	
	21	Add lines 19 and 20					[	21	
	22	Subtract line 21 from line 18	. If zero or less,	enter -0			[	22	9,558.
	23	Other taxes, including self-e	mployment tax,	from Schedule	e 2, line 21 .		[	23	0.
	24	Add lines 22 and 23. This is					[	24	9,558.
Payments	25	Federal income tax withheld			,				
	а	Form(s) W-2				<b>25a</b> 9	,786.		
	b	Form(s) 1099				25b			
	с	Other forms (see instructions				25c			
	d	Add lines 25a through 25c	,					25d	9,786.
	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	9,786.
Refund	34							34	228.
neiuliu	35a	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you <b>overpaid</b> . Amount of line 34 you want <b>refunded to you</b> . If Form 8888 is attached, check here						35a	228.
Direct deposit?	b	Routing number $\begin{bmatrix} 0 & 2 & 1 \end{bmatrix}$	Savings	55a					
See instructions.	d	Account number 9 0 9							
	36	Amount of line 34 you want a							
A						36			
Amount You Owe	37	Subtract line 33 from line 24		37					
	38	For details on how to pay, go to www.irs.gov/Payments or see instructions						31	
Think Dauta			,						
Third Party Designee		you want to allow another	•				omplete be	low	× No
Designee		signee's		Phone			onal identific		
	nai			no.			ber (PIN)	ation	
Sign		der penalties of perjury, I declare th			1 7 0		,		, ,
Here	bel	ief, they are true, correct, and com	ased on all information	on of which p	repare	er has any knowledge.			
nere	Yo	ur signature		Date			nt you an Identity		
							Protect (see in:	otection PIN, enter it here	
Joint return? See instructions.		europie eigeneture. If a joint return	a a the result along	Data	SOFTWARE I		`	ne IRS sent your spouse an	
Keep a copy for	Sp	ouse's signature. If a joint return, <b>t</b>	<b>both</b> must sign.	Date	Spouse's occupat	ion			ection PIN, enter it here
your records.						(see in		,	
	Ph	one no. (234) 817-339	5	Email address	MPKSIMAR@	GMAIL.COM			
		eparer's name	Preparer's signat			Date	PTIN		Check if:
Paid	SYAM	PRIYA RAM SAGAR GUPTA TALLAM	SYAM PRIYA	RAM SAGAR	GUPTA TALLAM	01/13/2024	P02082	703	Self-employed
Preparer		m's name GLOBAL TAX		678)965-9522					
Use Only	Firm's address 245 ROONEY CT E BRUNSWICK NJ 08816								84-3171965
Go to www irs or		n1040 for instructions and the late			BAA				Form <b>1040</b> (2023)
					DAA	REV 01/08/24 PRO			

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

Attachment

Internal nevenue Service	Sequence No. <b>U</b>		
Name(s) shown on Fo	orm 1040, 1040-SR, or 1040-NR	Your soc	ial security number
MANPREET KAUR		862-15	-3457

## Part I Additional Income 1 1 2a 2a **b** Date of original divorce or separation agreement (see instructions): 3 3 4 4 5 -10,118. Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E 5 6 Farm income or (loss). Attach Schedule F. 6 7 7 8 Other income: Net operating loss 8a а 8b b Cancellation of debt 8c С d Foreign earned income exclusion from Form 2555 8d Income from Form 8853 8e е Income from Form 8889 . . . . . . . . . 8f f Alaska Permanent Fund dividends 8g g 8h h i Prizes and awards 8i i 8i 8k Т 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 Section 951(a) inclusion (see instructions) 8n n Section 951A(a) inclusion (see instructions) . . . . . . . . . . . . 0 80 Section 461(I) excess business loss adjustment 8p р Taxable distributions from an ABLE account (see instructions) . . . 8q α Scholarship and fellowship grants not reported on Form W-2 . . . 8r r Nontaxable amount of Medicaid waiver payments included on Form S 8s Pension or annuity from a nongualifed deferred compensation plan or t a nongovernmental section 457 plan 8t **u** Wages earned while incarcerated . . . . . . . . . . . . . 8u Other income. List type and amount: z 8z 9 9 10 Combine lines 1 through 7 and 9. This is your additional income. Enter here and on Form 10 -10,118.

For Paperwork Reduction Act Notice, see your tax return instructions.

Schedule 1 (Form 1040) 2023

Par	t II Adjustments to Income					
11	Educator expenses				11	
12	Certain business expenses of reservists, performing artists, and fee-			ment		
	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					
c	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:	· .			20	
 a		24a				
b	Deductible expenses related to income reported on line 8I from the	<u></u>				
N		24b				
с	Nontaxable amount of the value of Olympic and Paralympic medals	210				
Ŭ		24c				
d		24d				
e	Repayment of supplemental unemployment benefits under the Trade	2-14				
C		24e				
f		24f				
q		24g				
<b>U</b>	Attorney fees and court costs for actions involving certain unlawful	279				
		24h				
	, ,	2411				
1	Attorney fees and court costs you paid in connection with an award from the IRS for information you provided that helped the IRS detect					
		24i				
:		24i 24i				
J	Excess deductions of section 67(e) expenses from Schedule K-1 (Form	2 <b>4</b> j				
K		24k				
_	,	24K				
Z	Other adjustments. List type and amount:	24z				
05					05	
25	Total other adjustments. Add lines 24a through 24z			•••	25	
26	Add lines 11 through 23 and 25. These are your <b>adjustments to income</b> . Form 1040, 1040-SR, or 1040-NR, line 10				06	
					26	
	ВАА	REV (	)1/08/24 PRO	5	Schedule 1	(Form 1040)

	DULE E	Supplemental Income and Loss										OMB No. 1545-0074			
(Form 1040)		(From rental real estate, royalties, partnerships, S corporations, estates, trusts, REMICs, etc.)										200 <b>7</b> 2			
Departm	ent of the Treasury	Attach to Form 1040, 1040-SR, 1040-NR, or 1041.										Attachment			
Internal Revenue Service Go to www.irs.gov/ScheduleE for						uctions an	d the la	atest in	formation.		Sequen	ce No.			
Name(s) shown on return											al security		r		
	MANPREET KAUR 862-1														
Part				m Rental Real Estate ar			•								
	rental inco	ou are in ome or lo	the busi	ness of renting personal prope Form 4835 on page 2, line 40.	erty, use	Schedule	e C. See	einstru	ctions. If you a	are an indi	vidual, rep	ort far	m		
Α				2023 that would require you		Form(s) 1	099? \$	See ins	structions .		. 🗌 Ye	s X	No		
				required Form(s) 1099? .									No		
1a				operty (street, city, state, ZI											
	,					,		ורד גדא		1 4 1 0 1	0				
	3046, SEC	-32-A	, CHA	NDIGARH ROAD B.C.M	. SCI	HOOL LU	JDHIA	NA P	UNJAB IN	14101	0				
B C															
	Type of Property 2 For each rental real estate property listed Fair Rental Personal Use														
1b	Type of Prope (from list below			each rental real estate prope e, report the number of fair				Fa	ir Rental Days	Persor Da	QJV				
Α	3			onal use days. Check the Q			Α		365		0	+			
B				u meet the requirements to			B		505		0		╡──		
			quali	fied joint venture. See instru	uctions	s.	C						=		
	of Property:	I					•					<u> </u>	<u> </u>		
	Single Family R	esidend	ce	3 Vacation/Short-Term Rer	ntal	5 Lanc		7	Self-Rental						
	Multi-Family Re			4 Commercial		6 Roya	alties	8	Other (desc	ribe)					
	,					1									
							•		Propert	les:		_			
Incom		-			2		Α	01.	В			С			
3 4					3		/	01.							
		iveu .			4										
Expen 5					5										
6	0			ons)	6										
7					7		2 . (	40.							
8					8		270	. 10 .							
9					9										
10				fees	10										
11					11		1.7	09.							
12				nks, etc. (see instructions)	12										
13					13										
14	Repairs				14		2,5	90.							
15	Supplies .				15		2,1	.00.							
16	Taxes				16										
17	Utilities				17		2,3	80.							
18		expense	or dep	letion	18										
19	Other (list)				19										
20	•			hrough 19	20		10,8	19.							
21			· · ·	ents) and/or 4 (royalties). If											
				ions to find out if you must			10 1	1.0							
					21		-10,1	18.							
22				loss after limitation, if any,			10 1-		(	,			,		
00-				ns)	22	(	10,11		(	)	(		)		
23a				on line 3 for all rental prope			•	23a		701.					
b				on line 4 for all royalty prop			·	23b 23c							
c d															
e e				on line 20 for all properties			•	23u 23e	1 (	,819.					
24				its shown on line 21. <b>Do no</b>						. 24					
25				m line 21 and rental real estat				nter to	tal losses her		(	10,1	18.)		
26				l royalty income or (loss).								.,-			
				.,,											

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 . -10,118. NPA For Paperwork Reduction Act Notice, see the separate instructions.

Schedule E (Form 1040) 2023

26

-10,118.