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



#104C		artment of the Treasury-Internal Revenue Servi		urn $2$	<b>023</b>	OMB No. 154	5-0074	IRS Use	Only—	Do not w	rite or sta	aple in this space.
For the year Jan	n. 1–Dec	c. 31, 2023, or other tax year beginning		, 20	023, ending			, 20		See se	oarate i	instructions.
Your first name	and m	iddle initial	Last nar	me					,	Your so	cial sec	curity number
SISIR			PASU	MARTI						690	68	6133
	pouse's	s first name and middle initial	Last nar						;			security number
Home address	(numbe	er and street). If you have a P.O. box, see	instructio	ons.				Apt. no.	- 1			ection Campaign
441 E EI								5704				ou, or your jointly, want \$3
City, town, or p	ost offi	ce. If you have a foreign address, also co	mplete sp	paces below.	S	tate	ZIP c					nd. Checking a
CHICAGO						L	606					not change
Foreign countr	y name			oreign provinc	e/state/cou	nty	Foreig	gn postal co	ode   !	your tax	or retu	
Filing Status	. X	Single				Head of h	nouseh	old (HOF	4)			
-	, <u>-</u>	Married filing jointly (even if only o	ne had ir	ncome)			100001	1014 (1101	.,			
Check only one box.		Married filing separately (MFS)				Qualifying	ı survi	vina spou	ıse (C	)SS)		
OHC BOX.	If v	ou checked the MFS box, enter the	name o	f vour spouse	e. If vou ch	,	,	0 1	,	,	ld's na	me if the
		alifying person is a child but not you										
Digital	At a	ny time during 2023, did you: (a) rec	eive (as a	a reward, awa								
Assets		nange, or otherwise dispose of a dig									□ Yee             □	es 🛛 No
Standard	Som	eone can claim:	pendent	: Your	spouse a	s a dependent						
Deduction		Spouse itemizes on a separate retur	n or you	were a dual-	status alie	en						
Age/Blindnes	s You	: Were born before January 2, 1	959	Are blind	Spous	e: Was bo	rn bef	ore Janua	ary 2,	1959		s blind
Dependent	s (see	instructions):		(2) Social	security	(3) Relations	nship (4) Check the b		ne box	k if quali	fies for (	(see instructions):
If more	(1) First name Last name			number		to you	•	Child ta	ax cre	dit	Credit fo	or other dependents
than four												
dependents, see instruction	c											
and check	·											
here												
Income	1a	Total amount from Form(s) W-2, b	,		,					1a		84,968.
Attach Form(s)	b	Household employee wages not re	•	. ,						1b		
W-2 here. Also	С	Tip income not reported on line 1a	•							1c		
attach Forms W-2G and	d	Medicaid waiver payments not reported on Form(s) W-2 (see instructions)							1d			
1099-R if tax	е		le dependent care benefits from Form 2441, line 26						1e			
was withheld.	f	Employer-provided adoption bene	fits from	Form 8839,	line 29					1f		
If you did not get a Form	g	Wages from Form 8919, line 6 .								1g		
W-2, see	h	Other earned income (see instruct	•				· .			1h		0.
instructions.	i	Nontaxable combat pay election (s	see instr	uctions) .		<u>1</u>	i					0.4.060
	z	Add lines 1a through 1h			· ; .					1z		84,968.
Attach Sch. B if required.	2a	· —	2a		$\overline{}$	Taxable interes				2b		
	<u>3a</u> _		3a			Ordinary divide				3b		2.
Standard	4a		4a			Taxable amour				4b		
Deduction for—	5a		5a			Taxable amour				5b		
Single or Married filing	6a	,	6a			Taxable amour	nt		٠ ـ	6b		
separately, \$13,850	_c	If you elect to use the lump-sum e		•	`	,			. ⊨	-		
Married filing	7	Capital gain or (loss). Attach Schedule D if required. If not required, check here						7		10 500		
jointly or Qualifying	8	Additional income from Schedule	•							8		-12 <b>,</b> 500.
surviving spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7,								9		72,470.
\$27,700 • Head of	10	•	Adjustments to income from Schedule 1, line 26						10		70 470	
household, \$20,800	11	Subtract line 10 from line 9. This is	•	-						11		72,470.
If you checked	12	Standard deduction or itemized								12		13,850.
any box under Standard	13	Qualified business income deducti								13		12 050
Deduction, see instructions.	14	Add lines 12 and 13				 tavabla incor				14		13,850.

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	8,205.		
Credits	17	Amount from Schedule 2, lir					<del></del> .	. [	17			
	18	Add lines 16 and 17						. [	18	8,205.		
	19	Child tax credit or credit for	other dependen	ts from Sched	ule 8812				19	,		
	20	Amount from Schedule 3, lir	•						20			
	21	•							21			
	22	Subtract line 21 from line 18							22	8,205.		
	23	Other taxes, including self-e	,						23	0.		
	24	Add lines 22 and 23. This is			·			.	24	8,205.		
Payments	25	Federal income tax withheld								7,200		
i ayınıcını	а	Form(s) W-2				25a	14,0	000.				
	b	Form(s) 1099				25b	, -					
	С	Other forms (see instruction				25c		-				
	d	Add lines 25a through 25c	•						25d	14,000.		
15	26	2023 estimated tax paymen							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, lir				31						
	32	Add lines 27, 28, 29, and 31					dite		32			
	33	Add lines 25d, 26, and 32. T						t t	33	14,000.		
Refund	34								34	5,795.		
neiulia								35a	5,795.			
Direct deposit?	b	Routing number 0 1 1				Checking	_	/ings	Ju			
See instructions.	d	Account number 4 6 6						/iligs				
	36	Amount of line 34 you want				36						
Amount	37	Subtract line 33 from line 24				00						
You Owe	31	For details on how to pay, g							37			
	38	Estimated tax penalty (see in	_	-		38		1				
Third Party		you want to allow another										
Designee		structions	•				es. Com	plete be	low.	<b>⋉</b> No		
Ü		Designee's Phone				Personal identification						
		me		no.			number	· ,				
Sign		der penalties of perjury, I declare t lief, they are true, correct, and com										
Here		-	1	1		-	_					
	YO	Your signature			Date Your occupation					f the IRS sent you an Identity Protection PIN, enter it here		
Joint return?			STUDENT					see inst.)				
See instructions.	Sp	Spouse's signature. If a joint return, <b>both</b> must sign.		Date					f the IRS sent your spouse an			
Keep a copy for your records.		· · · · · · · · · · · · · · · · · · ·					entity Protection PIN, enter it here ee inst.)					
	Ph	one no. (617) 901-718	5	Email address	PASUMARTI.S@N	ORTHEASTE	RN.EDU					
Doid	Pre	eparer's name	Preparer's signat	ure		Date	P	TIN		Check if:		
Paid	SYA	M PRIYA RAM SAGAR GUPTA	SYAM PRIY	A RAM SAG	GAR GUPTA	04/08/2	024 PC	2082	703	Self-employed		
Preparer	Fin	Firm's name GLOBAL TAXES LLC					Phone	ne no. (678) 965-9522				
Use Only	Firm's address 245 ROONEY CT E BRUNSWICK NJ 08816					Firm's	Firm's EIN 84-3171965					

## SCHEDULE 1 (Form 1040)

**Additional Income and Adjustments to Income** 

2023
Attachment
Sequence No. 01

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service

SISIR PASUMARTI

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
690-68-6133

Par	t I Additional Income			
1	Taxable refunds, credits, or offsets of state and local income taxes		1	0.
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. Att	ach Schedule E .	5	-12,500.
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 <b>additional income</b> . Ente	r here and on Form	10	-12.500

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-basis government	nent		_
	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		9a	 _
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)			
b	Deductible expenses related to income reported on line 8l from the			
	rental of personal property engaged in for profit			
С	Nontaxable amount of the value of Olympic and Paralympic medals			
	and USOC prize money reported on line 8m			
d	Reforestation amortization and expenses			
е	Repayment of supplemental unemployment benefits under the Trade Act of 1974			
f	Contributions to section 501(c)(18)(D) pension plans			
g	Contributions by certain chaplains to section 403(b) plans 24g			
_	Attorney fees and court costs for actions involving certain unlawful			
	discrimination claims (see instructions)			
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			
j	Housing deduction from Form 2555			
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form			
	1041)			
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. Enter here and			
	Form 1040, 1040-SR, or 1040-NR, line 10	1	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.

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

SIS	IR PASUMARTI						690-6	8-6133	3
Par	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.	rtv. use		<b>C</b> . See	instru	ctions. If you a	re an indi	vidual, rep	oort farm
	Did you make any payments in 2023 that would require you							es 🛛 No	
В	If "Yes," did you or will you file required Form(s) 1099? .							. 🗌 Y	es 🗌 No
1a	Physical address of each property (street, city, state, ZII	P code	e)						
Α	4-7-18/5/2. FLAT NO 301 SAITEJA NILAYA	AM S	AINAGA	R NA	CHAR	AM IN 50	0076		
В									
С									
1b	Type of Property (from list below)  2 For each rental real estate properation above, report the number of fair	rental a	and		Fa	ir Rental Days		nal Use ays	QJV
Α	personal use days. Check the Quif you meet the requirements to			Α		365		0	
В	qualified joint venture. See instru			В					
_ <u>C</u>				С					
1	of Property: Single Family Residence 3 Vacation/Short-Term Ren Multi-Family Residence 4 Commercial	ntal	5 Land 6 Roya			Self-Rental Other (descr	ibe)		
						Propertion	es:		
Incor				Α		В			С
3	Rents received	3		6	50.				
4	Royalties received	4							
-	nses:	_							
5	Advertising	5							
6	Auto and travel (see instructions)	6		1 1	11				
7	Cleaning and maintenance	7		⊥,4	41.				
8	Commissions	8							
9	Insurance	9							
10	Legal and other professional fees	10		2 2	1 1				
11	Management fees	11		۷,۷	11.				
12 13	Mortgage interest paid to banks, etc. (see instructions) Other interest	13							
14	Repairs	14		3 1	17.				
15	Supplies	15			11.				
16	Taxes	16		۷,٦	<u>+</u> +				
17	Utilities	17		1.7	85.				
18	Depreciation expense or depletion	18			85.				
19	Other (list)	19			•••				
20	Total expenses. Add lines 5 through 19	20		13,1	50.				
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 <b>Form 6198</b>	21		-12 <b>,</b> 5	00.				
22	Deductible rental real estate loss after limitation, if any, on <b>Form 8582</b> (see instructions)	22	(	12 <b>,</b> 50	0)	(	)	(	)
<b>23</b> a	Total of all amounts reported on line 3 for all rental prope	erties			23a		650.		
b	Total of all amounts reported on line 4 for all royalty prop				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		,185.		
е	Total of all amounts reported on line 20 for all properties				23e	13	,150.		
24	Income. Add positive amounts shown on line 21. Do not		•				. 24		
25	Losses. Add royalty losses from line 21 and rental real estat							(	12,500.
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						n . <b>26</b>		-12,500.