1040		artment of the Treasury—Internal Revenue Servi S. Individual Income Ta)		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, ending , 20							instructions.		
Your first name	and m	iddle initial	Last r	name			Your so	cial sec	urity number					
PRABHURA	M		POP	URI						787	96	5322		
		s first name and middle initial	Last r									security number		
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>9720 KIN</u>												ou, or your		
City, town, or p	ost offi	ce. If you have a foreign address, also co	mplete	spaces be	low.	Sta	ite	ZIP c				jointly, want \$3 nd. Checking a		
PLANO						TΣ		750		box bel	ow will	not change		
Foreign country	/ name		Foreign p	rovince/state/o	count	ty	Foreig	n postal code	your tax		_			
							<i></i>				∐ Yo	ou Spouse		
Filing Status		Single Head of household (HOH)												
Check only		Married filing jointly (even if only on Married filing concretely (MES)	ne nac	i income)					ring spouse					
one box.	L If y	Married filing separately (MFS) you checked the MFS box, enter the	namo		nouse If you	ı che					ild'e na	me if the		
		alifying person is a child but not you									iu s na			
Digital		ny time during 2023, did you: (a) rec						-				es 🛛 No		
Assets		hange, or otherwise dispose of a dig neone can claim: You as a de		· · · · · · · · · · · · · · · · · · ·			a dependent	i): (36		115.)				
Standard Deduction	_	Spouse itemizes on a separate retur	•		•		•							
				_										
		Were born before January 2, 1	959	Are bl		ouse		14	ore January			s blind		
Dependents		instructions): irst name Last name					(3) Relationsh to you	ip (4	Child tax c			(see instructions): or other dependents		
lf more than four	(1)						to you			Tour				
dependents,														
see instructions and check	s —													
here														
Income	1a	Total amount from Form(s) W-2, b	ox 1 (s	ee instruc	ctions) .					. 1a		60,951.		
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	a (see i	nstruction	ns)						;			
attach Forms W-2G and	d	d Medicaid waiver payments not reported on Form(s) W-2 (see instructions)												
1099-R if tax	е	Taxable dependent care benefits f		,						. 1e	,			
was withheld.	f	Employer-provided adoption bene								. 1f	_			
lf you did not get a Form	g	Wages from Form 8919, line 6 .					. <u>1</u> g							
W-2, see	h	Other earned income (see instructions)								. 1h		0.		
instructions.	i	Nontaxable combat pay election (s	see ins	structions)		1 i					60,951.			
	z 2a	Add lines 1a through 1h Tax-exempt interest	2a		· · · ·	 ьт	axable interest	• •		. 1z . 2b	_	00,991.		
Attach Sch. B if required.	2a 3a		2a 3a				Ordinary divider		• • •	. 20 . 3b	_			
	 4a		4a				axable amoun			. 4b	_			
Standard	5a		5a				axable amoun			. 5b				
 Deduction for – Single or 	6a		6a				axable amoun			. 6b	_			
Married filing separately,	c	If you elect to use the lump-sum e		method.					[
\$13,850	7	Capital gain or (loss). Attach Sche				`	,		[7				
 Married filing jointly or 	8	Additional income from Schedule		•						. 8		-9,945.		
Qualifying spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7,	, and 8	. This is y	our total inc	come	e			. 9		51,006.		
\$27,700	10	Adjustments to income from Sche	justments to income from Schedule 1, line 26											
 Head of household, 	11	Subtract line 10 from line 9. This is	syour	adjusted	gross incor	ne				. 11		51,006.		
\$20,800 If you checked r	12	Standard deduction or itemized	deduc	tions (fro	m Schedule	A)				. 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	ourt	taxable incom	ie .		. 15		37,156.		

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	4,241.	
Credits	17	Amount from Schedule 2, lin	e3					17		
	18	Add lines 16 and 17					[18	4,241.	
	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	4,241.	
	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	4,241.	
Payments	25	Federal income tax withheld							· · · · ·	
·	а	Form(s) W-2				25a 6	,322.			
	b	Form(s) 1099				25b				
	с	Other forms (see instructions	s)			25c				
	d	Add lines 25a through 25c	,				2	25d	6,322.	
If you have a	26	2023 estimated tax payment						26	•	
qualifying child,	27	Earned income credit (EIC)		• •		27				
attach Sch. EIC.	28	Additional child tax credit from				28				
	29	American opportunity credit				29				
	30					30				
	31	Reserved for future use 30 Amount from Schedule 3, line 15 31								
	32	Add lines 27, 28, 29, and 31				-		32		
	33	Add lines 25d, 26, and 32. These are your total payments							6,322.	
Refund	34	If line 33 is more than line 24						33 34	2,081.	
nerana	35a	Amount of line 34 you want refunded to you . If Form 8888 is attached, check here							2,081.	
Direct deposit?	b	Routing number 3 2 2					Savings	85a		
See instructions.	ď	Account number 7 5 9	ouringo							
	36	Amount of line 34 you want a			ed tax	36				
Amount	37	Subtract line 33 from line 24	•••••							
You Owe	0/	For details on how to pay, g						37		
	38	Estimated tax penalty (see in				38				
Third Party		you want to allow another	,							
Designee		structions	•				omplete bel	ow.	🗙 No	
	De	signee's		Phone			onal identifica	tion		
	nai			no.			oer (PIN)			
Sign		der penalties of perjury, I declare the			1 2 0		,		, ,	
Here	Dei	ief, they are true, correct, and com	piete. Declaration	i preparer (ourie	,		•	, ,		
	Yo	ur signature		Date	Your occupation			you an Identity		
Joint return?					DATA ENGI	VEER	(see ins	otection PIN, enter it here ee inst.)		
See instructions.	Sp	ouse's signature. If a joint return, i	ooth must sian.	Date	Spouse's occupat		If the IR	the IRS sent your spouse an		
Keep a copy for	-1-							Protec	ction PIN, enter it here	
your records.										
	Ph	one no. (646) 884-353	5	Email address	PRABHURAM.PC	PURI@GMAIL.CO	M			
Paid	Pre	eparer's name	Preparer's signat	ure		Date	PTIN		Check if:	
Preparer	SYAM	PRIYA RAM SAGAR GUPTA TALLAM	SYAM PRIYA	RAM SAGAR	GUPTA TALLAM	02/28/2024	P020827	03	Self-employed	
Use Only	Fir	m's name GLOBAL TAX	Phone r	10. (6	578)965-9522					
	Fir	m's address 245 ROONE	Y CT E BRU	NSWICK N	J 08816		Firm's E	IN	84-3171965	
Go to www.irs.go	ov/Forn	1040 for instructions and the late	st information.		BAA	REV 02/16/24 PRO			Form 1040 (2023)	

SCHEDULE	1
(Form 1040)	

Department of the Treasury

Internal Revenue Service

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 Sequence No. 01

Name(s) shown on Form 1040, 1040-SR, or 1040-NR	Your social security number
PRABHURAM POPURI	787-96-5322
Part I Additional Income	

Par	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. Attac		5	-9,945.
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		8c		
d	Foreign earned income exclusion from Form 2555	8d ()	
е	Income from Form 8853	8e		
f		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		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			
		8m		
n		8n		
ο		80		
р		8р		
q		8q		
r		8r		
S	Nontaxable amount of Medicaid waiver payments included on Form			
		8s ()	
t	Pension or annuity from a nonqualifed deferred compensation plan or			
		8t		
u		8u		
z	Other income. List type and amount:			
Ē		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 Form		0.045
	1040, 1040-SR, or 1040-NR, line 8	<u></u>	10	-9,945.
For Pa	perwork Reduction Act Notice, see your tax return instructions.		Schedule	1 (Form 1040) 2023

1	Educator expenses					11	
2	Certain business expenses of reservists, performing artists, and fee				nont		
2	officials. Attach Form 2106	-Dasi	s yu	venn	nem	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	
7	Self-employed health insurance deduction					17	
8	Penalty on early withdrawal of savings					18	
9a						19a	
b						19a	
	Recipient's SSN						
C	Date of original divorce or separation agreement (see instructions):					20	
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 8I from the						
		24b					
С	Nontaxable amount of the value of Olympic and Paralympic medals						
		24c					
d		24d					
е	Repayment of supplemental unemployment benefits under the Trade						
		24e					
f	Contributions to section 501(c)(18)(D) pension plans	24f					
g		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						
		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				d on		
	Form 1040, 1040-SR, or 1040-NR, line 10					26	

	DULE E	Supplemental Income and Loss												OMB No. 1545-0074			
(Form	1040)	(From rental real estate, royalties, partnerships, S corporations, estates, trusts, REMICs, etc.)												20 23			
Departm	ent of the Treasury					o Form 1040,							Attachr	nent			
	Revenue Service			Go to wi	ww.irs.gov/S	cheduleE for	r instru	uctions an	d the la	ntest ir	nformation.		Sequen	ce No.			
. ,	shown on return												al security		er		
	HURAM POPU											787-9	6-5322				
Part						Estate an			• • • •	:	ationa If		مرمين المراجع				
	rental inco	ou are ome c	e in th or loss	e business s from Forn	of renting pe	rsonal proper ge 2, line 40.	ty, use	Schedule	C . See	nstru	ctions. If you a	are an Indi	viduai, rep	ort far	m		
A C)id you make an	iy pa	aymer	nts in 2023	3 that would	require you	to file	Form(s) 1	099? 5	See ins	structions .		. 🗌 Ye	s X	No		
B li	"Yes," did you	or v	vill yo	u file requ	ired Form(s) 1099? .							. 🗌 Ye	es 🗌	No		
1a	Physical addr	ess	of ea	ch proper	ty (street, ci	tv. state. ZIF	o code	e)									
Α	5-84 EDLA							,	5222	22							
 	J-04 EDLAI	EAD	0 60	JNIOK D	ISINICI	ANDIIKA I	RADI		JZZZ	55							
<u> </u>																	
 1b	Type of Prope	rtv	2	For oach	rontal roal (estate prope	rty liet	hod		E	air Rental	Porcor	nal Use				
10	(from list below		2			mber of fair				Га	Days		ays	C	۶JV		
Α	3					heck the Q			Α		365		0				
В				if you me	et the requi	rements to f	ile as	a	B		000						
C				qualified	joint venture	e. See instru	ctions	3.	C								
Туре	of Property:								_	1							
	Single Family R	esid	lence	3 Va	cation/Sho	rt-Term Ren ⁻	tal	5 Land		7	Self-Rental						
	Multi-Family Re				ommercial			6 Roya	alties	8	Other (desc	ribe)					
								-									
									•		Propert	les:		<u> </u>			
Incom		J					2		A	42.	В			С			
3 4	Rents received						3		0	42.							
Expen	Royalties recei	iveu	• •				4										
5							5										
6	Auto and trave						6										
7	Cleaning and r	•		,			7		1,1	96							
8	Commissions						8		-/-	50.							
9	Insurance						9										
10	Legal and othe						10										
11	Management f	-					11		1,3	55.							
12	Mortgage inter						12										
13	Other interest						13										
14	Repairs						14		2,0	64.							
15							15		1,8	31.							
16	Taxes						16										
17	Utilities						17		2,2	15.							
18	Depreciation e	xper	nse o	r depletio	n		18		1,9	26.							
19	Other (list)						19										
20	Total expenses	s. Ac	dd lin	es 5 throu	gh19		20		10,5	87.							
21	Subtract line 2																
	result is a (loss																
	file Form 6198						21		-9,9	45.							
22	Deductible ren									、					,		
	on Form 8582			-			22	(9,94	15.)	()	()		
23a	Total of all amo							· · ·		23a		642.					
b	Total of all amo									23b							
C d	Total of all amo		-							23c	1	026					
d	Total of all amo									23d		,926.					
е 24	Total of all amo									23e	T(. 587.					
24 25	Losses. Add ro							-		· ·	tal losses hor		(9 0	45.)		
25 26	Total rental re		•										(و رو	-iJ.)		
20	here. If Parts I																

Schedule 1 (Form 1040), line 5. Otherwise, include this amount in the total on line 41 on page 2 For Paperwork Reduction Act Notice, see the separate instructions.

26

-9,945.

-9,945.

NPA