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



For the year Jar	n. 1–Dec	c. 31, 2023, or other tax year beginning		, 2023, end	ling		, 20	8	See sep	parate instructions.		
Your first name and middle initial			Last name					Y	Your social security number			
PRATHYUSHA			BOMMA						349 87 4487			
			Last na							s social security number		
Home address	(numbe	er and street). If you have a P.O. box, see	instructi	ions.			Apt. no.	F	resider	itial Election Campaign		
5331 MAG	C AU	RTHUR RD					1095	0	Check h	ere if you, or your		
		ce. If you have a foreign address, also co	mplete s	spaces below.	Sta	te	ZIP code			if filing jointly, want \$3		
IRVING					TX	ζ	75063		to go to this fund. Checking a box below will not change			
Foreign country	y name			Foreign province/state/o	count	ty	Foreign postal c			or refund.		
										You Spouse		
Filing Status	s 🗵	Single				Head of he	ousehold (HOH	———— ∃)				
Check only		Married filing jointly (even if only or	ne had	income)			•	•				
one box.		Married filing separately (MFS)				☐ Qualifying	surviving spot	ıse (Q	SS)			
	If y	you checked the MFS box, enter the	name o	of your spouse. If you	ı che							
	qu	alifying person is a child but not you	ır depei	ndent:								
<u></u>	Λ± α.	outing during 2002 did your (a) room	ois so (00									
Digital Assets		ny time during 2023, did you: (a) rece nange, or otherwise dispose of a digi					-			☐ Yes ☒ No		
		neone can claim: You as a de					t): (See Institut	Ctions	.)	res re		
Standard Deduction			•			•						
Deduction	Ш.	Spouse itemizes on a separate return	n or you	u were a dual-status a	allen							
Age/Blindnes	s You	: Were born before January 2, 19	959	Are blind Spo	ouse	: Was bor	n before Janua	ary 2,	1959	☐ Is blind		
Dependent	s (see	instructions):		(2) Social security	,	(3) Relationsh	ip (4) Check t	he box	if qualif	ies for (see instructions):		
If more	(1) F	(1) First name Last name		number to you		to you	Child t	Child tax cred		Credit for other dependents		
than four							[
dependents, see instruction	e ——											
and check	- —						[
here							[
Income	1a	Total amount from Form(s) W-2, be	ox 1 (se	e instructions)					1a	92,219.		
Attach Form(s)	b	Household employee wages not reported on Form(s) W-2							1b			
W-2 here. Also	С	Tip income not reported on line 1a (see instructions)										
attach Forms W-2G and	d	Medicaid waiver payments not reported on Form(s) W-2 (see instructions)										
1099-R if tax	е	Taxable dependent care benefits from Form 2441, line 26							1e			
was withheld.	f	Employer-provided adoption bene	fits fron	n 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 instructi	ions)						1h	0.		
instructions.	i	Nontaxable combat pay election (s	see inst	ructions)		<u>1</u> i				4		
	z	Add lines 1a through 1h	· ;						1z	92,219.		
Attach Sch. B	2a	'	2a			axable interest			2b			
if required.	3a_		3a			ordinary divider			3b			
Standard	4a	IRA distributions	4a			axable amount			4b			
Deduction for—	5a		5a			axable amount			5b	+		
Single or Married filing	6a	,							6b	_		
separately,	C	If you elect to use the lump-sum election method, check here (see instructions)								4		
\$13,850 Married filing	7	Capital gain or (loss). Attach Sched						. Ш	7	14.700		
jointly or Qualifying	8	Additional income from Schedule	•						8	-14,709.		
surviving spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7,		•					9	77,510.		
\$27,700 • Head of	10	Adjustments to income from Sche							10			
household, \$20,800	11	Subtract line 10 from line 9. This is	•	-					11	77,510.		
If you checked	12		emized deductions (from Schedule A)							13,850.		
any box under Standard	13	Qualified business income deducti	on fron	n Form 8995 or Form	899	5-A			13	10.050		
Deduction, see instructions.	14	Add lines 12 and 13							14			
occ monucions.	15	Subtract line 14 from line 11. If zer	o or les	s, enter -0 This is y	our t	taxable incom	e		15	63,660.		

Form 1040 (2023	3)								Page Z	
Tax and	16	Tax (see instructions). Check	if any from Form	(s): 1 881	4 2 🗌 4972	з 🗌		16	9,316.	
Credits	17	Amount from Schedule 2, lir	ne 3					17		
	18	Add lines 16 and 17						18	9,316.	
	19	Child tax credit or credit for	other dependen	ts from Sched	ule 8812			19		
	20	Amount from Schedule 3, lir	ne 8					20		
	21	Add lines 19 and 20						21		
	22	Subtract line 21 from line 18	3. If zero or less,	enter -0				22	9,316.	
	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	9,316.	
Payments	25	Federal income tax withheld	I from:							
	а	Form(s) W-2				25a 13	3 , 914.			
	b	Form(s) 1099				25b				
	С	Other forms (see instruction	s)			25c				
	d	Add lines 25a through 25c						25d	13,914.	
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)			No .	27				
allacii Scii. ElC.	28	Additional child tax credit from	m Schedule 8812	·		28				
	29	American opportunity credit	from Form 8863	3, line 8		29				
	30	Reserved for future use .				30				
	31	Amount from Schedule 3, lir								
	32	Add lines 27, 28, 29, and 31. These are your total other payments and refundable credits								
	33	Add lines 25d, 26, and 32. T	hese are your to	tal payments				33	13,914.	
Refund	34	If line 33 is more than line 24	4, subtract line 2	4 from line 33.	This is the amour	nt you overpaid		34	4,598.	
	35a	Amount of line 34 you want	refunded to you	յ. If Form 8888	is attached, chec	k here	. 🗆	35a	4,598.	
Direct deposit?	b	Routing number 2 1 1			c Type:	Checking	Savings			
See instructions.	d									
	36	Amount of line 34 you want	applied to your	2024 estimate	ed tax	36				
Amount You Owe	37	Subtract line 33 from line 24 For details on how to pay, g						37		
	38	Estimated tax penalty (see in	_	-		38				
Third Party	Do	you want to allow another				See				
Designee		,	•				omplete	below.	⋈ No	
•		esignee's	Phone			dentification				
		me		no.			ber (PIN)			
Sign		der penalties of perjury, I declare t lief, they are true, correct, and com								
Here					Your occupation				, ,	
	YO	Your signature		Date	If the IRS sent you a Protection PIN, ente			, ,		
Joint return?					SOFTWARE D			e inst.)	,	
See instructions.		Spouse's signature. If a joint return, both must sign.		Date					nt your spouse an	
Keep a copy for your records.					I .	Identity Protection PIN, enter it here (see inst.)				
	Ph	Phone no. (815) 508-0969 Email address PRATHYUSHA.BOMMA1@GMAIL.COM					OM			
Paid	Pr	eparer's name	Preparer's signat	ure		Date	PTIN		Check if:	
	SYA	M PRIYA RAM SAGAR GUPTA	SYAM PRIY	A RAM SAC	GAR GUPTA	04/07/2024	P0208	32703	Self-employed	
Preparer	Fir	Firm's name GLOBAL TAXES LLC					Pho	Phone no. (678) 965-9522		
Use Only	Fir						n'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

PRATHYUSHA BOMMA

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 soci	ial security number
3/10-87	_1187

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		5	-14,709.
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	r here and on Form		4.4 5.5
	1040, 1040-SR, or 1040-NR, line 8		10	-14,709.

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 governr	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 8I 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	:	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.

Your social security number

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

OMB No. 1545-0074

PRA	THYUSHA BOMMA						349-8	7-4487		
Par	Note: If you are in the business of renting personal proper rental income or loss from Form 4835 on page 2, line 40.	rty, use	Schedule							
	Did you make any payments in 2023 that would require you to file Form(s) 1099? See instructions If "Yes," did you or will you file required Form(s) 1099?									
В								. 🗌 Ye	s 🗌 No	
1a	Physical address of each property (street, city, state, ZII	P code	e)							
Α	11-23-2388/B, NAVUYUA COLON DESHAIPET F	RD.WA	RANGAT	TEL	ANGAI	VA TN 50	5002			
В	11 20 2000/B/MINOTON COLON BESIMITED 1	(D) WI	11 (111 (0111		111011	110 30	0002			
C										
1b	Type of Property (from list below) 2 For each rental real estate properabove, report the number of fair	rental	and		Fa	ir Rental Days	Person Da	QJV		
Α	personal use days. Check the Q			Α		365		0		
В	if you meet the requirements to find a qualified joint venture. See instru			В	В					
С	qualified joint venture. See instru	JCHOHS	·-	С						
Туре	of Property:		'						•	
1	Single Family Residence 3 Vacation/Short-Term Ren	ntal	5 Land		7	Self-Rental				
2	Multi-Family Residence 4 Commercial		6 Roya	ılties	8	Other (desc	ribe)			
l				Α		Propert	ies:			
Inco				Α	17	В			С	
3	Rents received	3		6	17.					
4	Royalties received	4								
	nses:	_								
5	Advertising	5								
6	Auto and travel (see instructions)	6		2 0	1 1					
7	Cleaning and maintenance	7		∠,∪	11.					
8	Commissions	8								
9	Insurance	9								
10	Legal and other professional fees	10								
11	Management fees	11		2,1	11.					
12	Mortgage interest paid to banks, etc. (see instructions)	12								
13	Other interest	13			0.5					
14	Repairs	14			25.					
15	Supplies	15		2,6	35.					
16	Taxes	16		0 4	4.5					
17	Utilities	17			45.					
18	Depreciation expense or depletion	18		2,6	99.					
19	Other (list)	19		1 - 0	0.6					
20	Total expenses. Add lines 5 through 19	20		15,3	∠७.					
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	21	-	-14 , 7	09.					
22	Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions)	22	(14,70	9.)	()	()	
23a	Total of all amounts reported on line 3 for all rental prope	erties			23a		617.			
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	2,699.			
е	Total of all amounts reported on line 20 for all properties				23e		,326.			
24	Income. Add positive amounts shown on line 21. Do not						. 24			
25	Losses. Add royalty losses from line 21 and rental real estat		•		nter to	tal losses her	e 25	(14,709.)	
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 at	ot apply	y to you,	also e	nter th	nis amount o			-14,709.	