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



For the year Jan. 1–Dec. 31, 2023, or other tax year beginning		, 2023, ending			, 20	, 20		See separate instructions.					
Your first name and middle initial			Last name					Your social security number					
SRI SWETHA			MACHIRAJU						295   63   0929				
If joint return, s	oouse's	s first name and middle initial	Last na	ame							curity number		
Home address	(numbe	er and street). If you have a P.O. box, see	instructi	ions.			Apt. no.		Preside	ntial Electi	ion Campaign		
11855 SV	7 127	TH ST								here if you,			
City, town, or p	ost offic	ce. If you have a foreign address, also co	mplete s	spaces below.	Stat	te	ZIP code		•	spouse if filing jointly, want \$3 to go to this fund. Checking a			
PEMBROKE	PIN	NES			FL	ı	33025				box below will not change		
Foreign country	name		Foreign province/state/county Foreign po			Foreign postal of	code	your tax	x or refund.				
										You	Spouse		
Filing Status	$\mathbf{X}$	Single				Head of he	ousehold (HO	H)					
Check only		Married filing jointly (even if only or	ne had	income)									
one box.		Married filing separately (MFS)				Qualifying	surviving spo	use (0					
	If y	ou checked the MFS box, enter the	name (	of your spouse. If you	u che	cked the HOH	or QSS box,	enter	the chi	ild's name	if the		
	qu	alifying person is a child but not you	r deper	ndent:									
Digital	At ar	ny time during 2023, did you: (a) rece	eive (as	a reward, award, or	pavn	nent for prope	rtv or services	s): or (	b) sell.				
Assets		ange, or otherwise dispose of a digi								☐ Yes	⊠ No		
Standard	Som	eone can claim: You as a de	penden	t Your spouse	e as a	a dependent			-				
Deduction		Spouse itemizes on a separate returi	n or you	u were a dual-status a	alien	•							
A ao /Plindness	. Va	☐ Were born before January 2, 19	050 F	Are blind <b>Cae</b>		□ Was bor	n hoforo lonu	0210	1050	☐ Is bl	lind		
			909 [	<u> </u>	ouse:		n before Janu						
Dependents		instructions): irst name Last name		(2) Social security number	′	(3) Relationsh to you	ip (4) Child			1	e instructions): ther dependents		
If more	(1) [	Last name		Hamber		to you	Offilia		Juit	Orcall for or			
than four dependents,								<u> </u>					
see instructions	s —							<u> Н</u>					
and check here								<u> Н</u>					
-	1a	Total amount from Form(s) W-2, bo	ov 1 (ec	e instructions)				Ш	1a	1	05 <b>,</b> 038.		
Income	b		•	,					1b		00,000.		
Attach Form(s)	C	Household employee wages not reported on Form(s) W-2								;			
W-2 here. Also attach Forms	d	Medicaid waiver payments not reported on Form(s) W-2 (see instructions)											
W-2G and	e	Taxable dependent care benefits from Form 2441, line 26							1d				
1099-R if tax was withheld.	f	Employer-provided adoption benefits from Form 8839, line 29							1f				
If you did not	g g	Wages from Form 8919, line 6.							1g				
get a Form	h	Other earned income (see instructi							1h		0.		
W-2, see instructions.	i	Nontaxable combat pay election (s	,			1i	 						
	z	Add lines to through th							1z	. 1	05,038.		
Attach Sch. B	2a	1	2a		b Ta	axable interest	t		2b				
if required.	За		3a			rdinary divider			3b				
	4a		4a			axable amount			4b	,			
Standard	5a		5a		<b>b</b> Ta	axable amount	t		5b	,			
Deduction for— Single or	6a	Social security benefits	ба		<b>b</b> Ta	axable amount	t		6b	,			
Married filing separately,	С												
\$13,850	7	Capital gain or (loss). Attach Sched	dule D i	f required. If not requ	ired,	check here		. [	7				
<ul> <li>Married filing jointly or</li> </ul>	8		Additional income from Schedule 1, line 10							-:	14,279.		
Qualifying surviving spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7,	and 8.	This is your total inc	come				9		90,759.		
\$27,700	10	Adjustments to income from Scheo	dule 1,	line 26					10	,	<u> </u>		
<ul> <li>Head of household,</li> </ul>	<u>11</u>	Subtract line 10 from line 9. This is	your <b>a</b>	djusted gross incon	ne				11		90 <b>,</b> 759.		
\$20,800 If you checked	12	Standard deduction or itemized	deduct	tions (from Schedule	A)				12		13,850.		
any box under	13	Qualified business income deducti	on fron	n Form 8995 or Form	8995	5-A			13				
Standard Deduction,	14	Add lines 12 and 13							14		13 <b>,</b> 850.		
see instructions.	15	Subtract line 14 from line 11. If zero	o or les	s, enter -0 This is y	our <b>t</b> a	axable incom	ie		15	, <u> </u>	76,909.		

Form 1040 (2023	3)								Page Z
Tax and	16	Tax (see instructions). Check if an	y from Form(	s): <b>1</b> 🗌 881	4 <b>2</b> 🗌 4972	з 🗌		16	12,231.
Credits	17	Amount from Schedule 2, line 3						17	
	18	Add lines 16 and 17						18	12,231.
	19	Child tax credit or credit for othe	er dependent	s from Schedi	ule 8812			19	
	20	Amount from Schedule 3, line 8						20	
	21	Add lines 19 and 20						21	
	22	Subtract line 21 from line 18. If z	ero or less, e	enter -0				22	12,231.
	23	Other taxes, including self-emplo	oyment tax, f	rom Schedule	2, line 21			23	0.
	24	Add lines 22 and 23. This is your	total tax					24	12,231.
Payments	25	Federal income tax withheld from	n:						
-	а	Form(s) W-2				<b>25a</b> 18	,069.		
	b	Form(s) 1099				25b			
	С	Other forms (see instructions) .				25c			
	d	Add lines 25a through 25c						25d	18,069.
If you have a	26	2023 estimated tax payments an	nd amount ap	oplied from 20	22 return			26	
qualifying child,	27	Earned income credit (EIC)			No .	27			
attach Sch. EIC.	28	Additional child tax credit from Sc	hedule 8812			28			
	29	American opportunity credit from	n Form 8863,	, line 8		29			
	30	Reserved for future use				30			
	31	Amount from Schedule 3, line 15							
	32	Add lines 27, 28, 29, and 31. These are your <b>total other payments and refundable credits</b>							
	33	Add lines 25d, 26, and 32. These	e are your <b>to</b> t	tal payments				33	18,069.
Refund	34	If line 33 is more than line 24, su	btract line 24	from line 33.	This is the amour	t you <b>overpaid</b>		34	5,838.
	35a	Amount of line 34 you want refu			is attached, chec	k here		35a	5,838.
Direct deposit?	b	Routing number 0 1 1 9				Checking	Savings		
See instructions.	d	Account number 3 8 5 0	1 3 9	4 2 7 3	3 1				
	36	Amount of line 34 you want appl	ied to your 2	2024 estimate	d tax	36			
Amount	37	Subtract line 33 from line 24. Thi							
You Owe		For details on how to pay, go to	www.irs.gov	/Payments or	see instructions.			37	
	38	Estimated tax penalty (see instru				38			
Third Party		you want to allow another per							N.
Designee		structions					•		⊠ No
		signee's me		Phone no.			onal identi ber (PIN)	ification	
Sign		der penalties of perjury, I declare that I h							
Here	be	lief, they are true, correct, and complete	. Declaration o	f preparer (other	than taxpayer) is ba	sed on all informati	on of whic	h prepare	er has any knowledge.
TICIC	Yo	Your signature		Date Your occupation				If the IRS sent you an Identity Protection PIN, enter it here	
							1	ection P inst.)	IN, enter it here
Joint return? See instructions.	Sn	Spouse's signature. If a joint return, <b>both</b> must sign.		Data		OFTWARE ENGINEER		the IRS sent your spouse an	
Keep a copy for your records.				Date Spouse's occupation			Iden	Identity Protection PIN, enter it here (see inst.)	
-		one no (413) 221 (000		Email address	CMT::::::::::::::::::::::::::::::::::::	728600777 00	,		
		one no. (413) 231–6099 eparer's name Pre	parer's signatu	Email address	SWETHAMACHI	Date	PTIN		Check if:
Paid					רווחת תחרווי			2702	Self-employed
Preparer		I PRIYA RAM SAGAR GUPTA TALLAM SYA		NAUNG MAN	GUPIA TALLAM	03/14/2024	P0208		
Use Only		m's name GLOBAL TAXES		MOMTOW N	T 00016				678) 965-9522
	rir 	m's address 245 ROONEY C	T E DKUI	NOWICK NO	00010		Firm	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

SRI SWETHA MACHIRAJU

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 social security number 295-63-0929

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. Att		5	-14,279.
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	<b>-</b> 14.279

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-base	sis 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)	a		
b	Deductible expenses related to income reported on line 8l from the			
	rental of personal property engaged in for profit	<b>o</b>		
С	Nontaxable amount of the value of Olympic and Paralympic medals			
	and USOC prize money reported on line 8m	_		
d	Reforestation amortization and expenses	d		
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	9		
h	Attorney fees and court costs for actions involving certain unlawful			
	discrimination claims (see instructions)	n	-	
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	j	-	
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form			
	1041)	K	.	
Z	Other adjustments. List type and amount:			
<b>-</b> -				
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> . En	nter here and on		
	Form 1040, 1040-ŠR, 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

SRI	SWETHA MACHIRAJU						295-6	3-0929	)		
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.	rty, use		<b>c</b> . See	instru	ctions. If you	are an indiv	/idual, rep	oort farm		
Α	Did you make any payments in 2023 that would require you	ı to file l	Form(s)	1099? S	See in:	structions .		es 🛛 No	⊠ 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, ZI	P code	)								
A	11-5-203, ROAD NO.1 SAROORNAGAR HYDERABAD, TELANGANA IN 500035										
B	TI 5 2007 KOND NO.1 DIMOOKIMOIK HIBBIAN	D11D <b>/</b> 1.	<u> </u>	111/11 11	., 50						
1b	Type of Property (from list below)  2 For each rental real estate properties above, report the number of fair									QJV	
A	personal use days. Check the Q					365		0			
В	if you meet the requirements to qualified joint venture. See instru			В							
С	qualified joint venture. See instit	uctions.		С							
Туре	of Property:						•		•		
	Single Family Residence 3 Vacation/Short-Term Rem Multi-Family Residence 4 Commercial	ntal	5 Land 6 Roya			Self-Rental Other (desc	ribe)				
						Propert					
Incor	ne:	T		Α		В			С		
3	Rents received	3		6	48.						
4	Royalties received	4									
Expe											
5	Advertising	5									
6	Auto and travel (see instructions)	6									
7	Cleaning and maintenance	7		2,6	78.						
8	Commissions	8									
9	Insurance	9									
10	Legal and other professional fees	10									
11	Management fees	11		2,1	33.						
12	Mortgage interest paid to banks, etc. (see instructions)	12									
13	Other interest	13									
14	Repairs	14			94.						
15	Supplies	15		2,3	10.						
16	Taxes	16									
17	Utilities	17			73.						
18	Depreciation expense or depletion	18		2,6	39.						
19	Other (list)	19									
20	Total expenses. Add lines 5 through 19	20		14,9	27.						
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>			-14 <b>,</b> 2	79.						
22	Deductible rental real estate loss after limitation, if any, on <b>Form 8582</b> (see instructions)	22 (		14,27		(	)	(			
23a	Total of all amounts reported on line 3 for all rental prope				23a		648.				
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	,	2,639.				
е	Total of all amounts reported on line 20 for all properties				23e		4,927.				
24	Income. Add positive amounts shown on line 21. Do no		le any lo	sses			. 24				
25	Losses. Add royalty losses from line 21 and rental real estat		•		nter to	tal losses he	re <b>25</b>	(	14,279	. )	
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	ot apply	to you,	also e	nter t	his amount			-14,279	9.	