For the year Jar	n. 1–Dec	2. 31, 2023, or other tax year beginning		, 2023, er	nding		,	20	See se	parate inst	tructions.
Your first name	and mi	iddle initial	Last r							cial securi	
ANUSHA				TIREDDY						44 7	•
	pouse's	s first name and middle initial	Last r								<u>279</u> curity numbe
											,,
Home address	(numbe	er and street). If you have a P.O. box, see	instruc	tions.			Ap	t. no.	Preside	ntial Election	on Campaigi
801 HEBI									Check I	nere if you,	or your
City, town, or p	ost offi	ce. If you have a foreign address, also co	omplete	spaces below.	Sta	ate	ZIP cod	le			ntly, want \$3
LEWISVI	LE				T	х	7505	7		o this fund. ow will not	Checking a change
Foreign country	/ name			Foreign province/state	e/coun	ity	Foreign	postal code		or refund.	0
										You	Spouse
<b>Filing Status</b>	; 🛛	Single				Head of h	ousehol	d (HOH)			
Check only		Married filing jointly (even if only o	ne had	l income)		_					
one box.		Married filing separately (MFS)				Qualifying		•	. ,		
		ou checked the MFS box, enter the			ou che	ecked the HOF	l or QS	S box, ente	er the chi	ild's name	if the
	qu	alifying person is a child but not you	ur depe	endent:							
Digital	At ar	ny time during 2023, did you: (a) rec	eive (a	s a reward, award, o	r payı	ment for prope	rty or se	ervices); or	(b) sell,		
Assets	exch	ange, or otherwise dispose of a dig	ital ass	set (or a financial inte	erest i	n a digital asse	t)? (See	instructio	ns.)	Ves	🗙 No
Standard	Som	eone can claim: 🗌 You as a de	epende	nt 🗌 Your spou	se as	a dependent					
Deduction		Spouse itemizes on a separate retur	n or yo	ou were a dual-status	s alier	า					
Age/Blindnes	s You:	: 🗌 Were born before January 2, 1	959	Are blind Sr	ouse	e: 🗌 Was bor	n befor	e January 2	2. 1959	🗌 ls bl	ind
Dependent				(2) Social securi		(3) Relationsh	(4)				instructions)
If more	•	irst name Last name		number	Ly	to you		Child tax c	· · ·		her dependent
than four											
dependents,										[	
see instruction and check	s ——										
here											
Income	1a	Total amount from Form(s) W-2, b	ox 1 (s	see instructions) .					. 1a		31,330.
Attach Form(s)	b	Household employee wages not re	eporte	d on Form(s) W-2 .					. 1b	1	
W-2 here. Also	С	Tip income not reported on line 1a	a (see i	nstructions)					. 1c	;	
attach Forms W-2G and	d	Medicaid waiver payments not rep	ported	on Form(s) W-2 (see	instru	uctions)			. 1d	1	
1099-R if tax	е	Taxable dependent care benefits f	from Fo	orm 2441, line 26					. 1e	,	
was withheld.	f	Employer-provided adoption bene	efits fro	om Form 8839, line 2	9.				. 1f		
If you did not get a Form	g	<b>0</b>					· ·		. <b>1</b> g		
W-2, see	h	Other earned income (see instruct	,				· ·		. 1h	1	0.
instructions.	i	Nontaxable combat pay election (s	see ins	structions)	• •	<b>1</b> i			_		21 220
	<u>z</u>	Add lines 1a through 1h	···		• •				. 1z		31,330.
Attach Sch. B if required.	2a	· · -	2a			Taxable interest			. 2b		
	<u>3a</u>		3a			Ordinary divide			. 3b		
Standard	4a		4a			Taxable amoun			. 4b		
Deduction for -	5a		5a			Taxable amoun			. 5b		
Single or Married filing	6a	, _	6a			Taxable amoun	t	 г	. 6b	)	
separately, \$13,850	с 7	If you elect to use the lump-sum e Capital gain or (loss). Attach Sche					• •	L			
Married filing	7 8	Additional income from Schedule		•	•		• •	L	7 . 8		-4,900.
jointly or Qualifying	8 9	Additional income from Schedule Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7	-				• •		. <u>o</u> . 9		_4,900. 26,430.
surviving spouse, \$27,700	9 10	Add lines 12, 20, 30, 40, 50, 60, 7 Adjustments to income from Sche		-			• •		. 9 . 10		
Head of	11	Subtract line 10 from line 9. This is					• •		. 11	-	26,430.
household, \$20,800	12	Standard deduction or itemized	-						· 11		20,430. 13,850.
If you checked any box under	13	Qualified business income deduct					• •		· 12		<u>-</u> ,000.
Standard Deduction,	14								. 14		13,850.
see instructions.	15	Subtract line 14 from line 11. If zer				taxable incom	e .				12,580.
				,	,						.,

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	1,289.
Credits	17	Amount from Schedule 2, lin	e3				[	17	
	18	Add lines 16 and 17					[	18	1,289.
	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	1,289.
	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 <b>total tax</b>					24	1,289.
Payments	25	Federal income tax withheld							
	а	Form(s) W-2				<b>25a</b>	3,330.		
	b	Form(s) 1099				25b			
	с	Other forms (see instructions	s)			25c			
	d	Add lines 25a through 25c						25d	3,330.
If you have a	26	2023 estimated tax payment	ts and amount a	pplied from 20	)22 return			26	
qualifying child,	27	Earned income credit (EIC)				27			
attach Sch. EIC.	28	Additional child tax credit from				28			
	29	American opportunity credit	from Form 8863	s, line 8		29			
	30	Reserved for future use .				30			
	31	Amount from Schedule 3, lin	e15			31			
	32	Add lines 27, 28, 29, and 31	. These are your	total other pa	ayments and ref	undable credits		32	
	33	Add lines 25d, 26, and 32. T	hese are your <b>to</b>	tal payments				33	3,330.
Refund	34	If line 33 is more than line 24	l, subtract line 24	4 from line 33.	This is the amou	nt you <b>overpaid</b>		34	2,041.
	35a	Amount of line 34 you want	refunded to you	I. If Form 8888	3 is attached, che	ck here	. 🗆 [	35a	2,041.
Direct deposit?	b	Routing number 1 1 1	9 0 0 6	59	c Type: 🛛 🗙	Checking	Savings		
See instructions.	d	Account number 7 6 8	9 3 4 1	7 9 5					
	36	Amount of line 34 you want a	applied to your	2024 estimate	edtax	36			
Amount	37	Subtract line 33 from line 24	. This is the amo	ount you owe					
You Owe		For details on how to pay, g	o to <i>www.irs.gov</i>	//Payments or	see instructions			37	
	38	Estimated tax penalty (see in	nstructions) .			38			
Third Party	Do	you want to allow another	person to disc	cuss this retu	rn with the IRS?	See			_
Designee	ins	tructions				🗌 <b>Yes.</b> C	omplete be	elow.	× No
	De nai	signee's		Phone no.			onal identific ber (PIN)	cation	
Ciarra		der penalties of perjury, I declare tl	nat I have examined		accompanying sch		. ,	e hest	of my knowledge and
Sign		ief, they are true, correct, and com							
Here	Yo	ur signature		Date	Your occupation		If the I	RS ser	nt you an Identity
							Protec	ction P	IN, enter it here
Joint return?					SOFTWARE 1		(see in	,	
See instructions. Keep a copy for	Sp	ouse's signature. If a joint return, I	ooth must sign.	Date	Spouse's occupat	ion			nt your spouse an
your records.							(see in	•	ection PIN, enter it here
	Ph	one no. (361)228-923	о Э	Email address		704040CMATE C	` `		
		one no. (361) 228-923 eparer's name	Preparer's signat	1	ANUSHAKEDDII	70494@GMAIL.C	PTIN		Check if:
Paid		PRIYA RAM SAGAR GUPTA TALLAM					P02082	702	Self-employed
Preparer		n's name GLOBAL TAX		INTE SAGAR	GOLIA IALLAM	101/19/2024			(678) 965-9522
Use Only			Y CT E BRU	NSWICK N	J 08816		Firm's		84-3171965
Go to www.ire.cr		1040 for instructions and the late		TADATCI/ IN					Form <b>1040</b> (2023)
		noro for instructions and the late	scanornation.		BAA	REV 01/12/24 PRO			1 0mm <b>1 0 TO</b> (2023)

SCHEDULE	1
(Form 1040)	

Department of the Treasury

## Additional Income and Adjustments to Income

Attach to Form 1040, 1040-SR, or 1040-NR.

OMB No. 1545-0074 2 3

Department of the Treasury Internal Revenue Service	Go to www.irs.gov/Form1040 for instructions and the latest information.		Attachment Sequence No. <b>01</b>
Name(s) shown on Fo	orm 1040, 1040-SR, or 1040-NR	Your soci	ial security number
ANUSHA THATIRE	DDY	830-44	-7279

Par	t 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. Attach S	chedule E .	5	-4,900.
6	Farm income or (loss). Attach Schedule F.		6	
7	Unemployment compensation		7	
8	Other income:			
а	Net operating loss	(	)	
b	Gambling			
С	Cancellation of debt			
d	Foreign earned income exclusion from Form 2555	(	)	
е	Income from Form 8853			
f	Income from Form 8889			
g	Alaska Permanent Fund dividends			
h	Jury duty pay			
i	Prizes and awards			
j	Activity not engaged in for profit income			
k	Stock options			
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			
	instructions)			
n	Section 951(a) inclusion (see instructions)			
ο	Section 951A(a) inclusion (see instructions)			
р	Section 461(I) excess business loss adjustment			
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	(	)	
t	Pension or annuity from a nonqualifed deferred compensation plan or			
	a nongovernmental section 457 plan			
u	Wages earned while incarcerated			
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 here	and on Form		
	1040, 1040-SR, or 1040-NR, line 8	<u> </u>	10	-4,900.
For Pa	perwork Reduction Act Notice, see your tax return instructions.		Schedule	1 (Form 1040) 2023

1	Adjustments to Income				. 11	1	
	Educator expenses						
2	Certain business expenses of reservists, performing artists, and fee	-basi	s gov	ernme	nt   .   12		
<b>,</b>	officials. Attach Form 2106	• •	• •	• •	. 13		_
3	Moving expenses for members of the Armed Forces. Attach Form 3903						_
4 5							_
5	Deductible part of self-employment tax. Attach Schedule SE						
6	Self-employed SEP, SIMPLE, and qualified plans						
7	Self-employed health insurance deduction						
8	Penalty on early withdrawal of savings						
9a	Alimony paid					а	
b	Recipient's SSN	•			_		
С	Date of original divorce or separation agreement (see instructions):						
20	IRA deduction						
21	Student loan interest deduction						
22	Reserved for future use						
23	Archer MSA deduction				. 23	3	
24	Other adjustments:						
а	Jury duty pay (see instructions)	24a					
b	Deductible expenses related to income reported on line 8l from the						
	rental of personal property engaged in for profit	24b					
С	Nontaxable amount of the value of Olympic and Paralympic medals						
	and USOC prize money reported on line 8m	24c					
d	Reforestation amortization and expenses	24d					
е	Repayment of supplemental unemployment benefits under the Trade						
	Act of 1974	24e					
f	Contributions to section 501(c)(18)(D) pension plans	24f					
q	Contributions by certain chaplains to section 403(b) plans	24g					
· ·	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					
i	Housing deduction from Form 2555	24i					
۲ ۲	Excess deductions of section 67(e) expenses from Schedule K-1 (Form						
n		24k					
z	Other adjustments. List type and amount:	2-TR					
2		24z					
25	Total other adjustments. Add lines 24a through 24z				. 25		
25 26						, 	—
0	Add lines 11 through 23 and 25. These are your <b>adjustments to income</b> Form 1040, 1040-SR, or 1040-NR, line 10						
	Form 1040, 1040-SR, or 1040-NR, line 10	• •	• •	• •	. 26	o   dule 1 (Form 1	_

SCHEDULE	Ε
(Form 1040)	

## **Supplemental Income and Loss**

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service

Attach to Form 1040, 1040-SR, 1040-NR, or 1041. ions and the latest information.

2023	
Attachment Sequence No. <b>13</b>	

Name(s	) shown on return						Your soc	al security	number
ANUS	SHA THATIREDDY						830-4	4-7279	
Part	Income or Loss From Rental Real Estate at Note: If you are in the business of renting personal proper rental income or loss from Form 4835 on page 2, line 40.	erty, use		<b>c</b> . See	e instruc	ctions. If you	are an indi	vidual, rep	ort farm
	Did you make any payments in 2023 that would require you f "Yes," did you or will you file required Form(s) 1099?	u to file							
1a	Physical address of each property (street, city, state, Z								
Α	8-7-126, KOTHIRAMPUR KARIMNAGAR TELA	NGANA	A IN 50	5001					
В									
С									
1b	Type of Property (from list below) <b>2</b> For each rental real estate prop above, report the number of fair				Fa	ir Rental Days		nal Use ays	QJV
Α	3 personal use days. Check the C			Α		365		0	
В	if you meet the requirements to			В					
С	qualified joint venture. See instr	uctions	j.	С					
Туре	of Property:		•		•				
	Single Family Residence3Vacation/Short-Term ResMulti-Family Residence4Commercial	ntal	5 Land 6 Roya			Self-Rental Other (desc			
						Propert			
Incom	ne:			Α		B			С
3	Rents received	3		3	58.				
4	Royalties received	4							
Exper									
5	Advertising	5							
6	Auto and travel (see instructions)	6							
7	Cleaning and maintenance	7		7	80.				
8	Commissions	8							
9	Insurance	9							
10	Legal and other professional fees	10							
11	Management fees	11		8	98.				
12	Mortgage interest paid to banks, etc. (see instructions)	12							
13	Other interest	13							
14		14			40.				
15	Supplies	15		1,4	20.				
16		16		1 1	20				
17		17		1,1	20.				
18 19	Depreciation expense or depletion	18 19							
20	Other (list) Total expenses. Add lines 5 through 19	20		5 2	58.				
21	Subtract line 20 from line 3 (rents) and/or 4 (royalties). If			5,2	50.				
~ 1	result is a (loss), see instructions to find out if you must								
	file <b>Form 6198</b>	21		-4,9	00.				
22	Deductible rental real estate loss after limitation, if any,								
	on Form 8582 (see instructions)	22	(	4,90	00.)	(	)	(	
23a	Total of all amounts reported on line 3 for all rental prop				23a		358.		
b	Total of all amounts reported on line 4 for all royalty pro	-			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			-	
e	Total of all amounts reported on line 20 for all properties				23e		5,258.		
24	Income. Add positive amounts shown on line 21. Do no		-			· · · ·	. 24	(	4 000
25	Losses. Add royalty losses from line 21 and rental real esta							(	4,900.
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	ot appl	y to you,	also e	nter th	nis amount	on		
	Schedule 1 (Form 1040), line 5. Otherwise, include this a	amount	in the tot	al on li	ne 41	on page 2	. 26	1	-4,900.

-4,900.