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



<b>1040</b>		artment of the Treasury-Internal Revenue Servi		urn	202	3	OMB No. 1545	-0074	IRS Use	Only-	-Do not w	rite or sta	aple in this space.
For the year Jai	n. 1–Dec	c. 31, 2023, or other tax year beginning			, 2023, end	ling			, 20		See se	parate	instructions.
Your first name	e and m	iddle initial	Last na	me							Your so	cial sec	curity number
DEVI PR	IYA		BALI	NENI							520	63	2544
If joint return, s	spouse's	s first name and middle initial	Last na										security number
Home address	(numbe	er and street). If you have a P.O. box, see	   instruction	ons.				, A	Apt. no.		Preside	ntial Ele	ection Campaign
1513 MERIDIAN DRIVE								3					ou, or your
City, town, or post office. If you have a foreign address, also complete sp				paces bel	paces below. State ZIP				ii couc			•	jointly, want \$3 nd. Checking a
IRVING						TX	Z	750	38		•		not change
Foreign countr	y name		F	Foreign pr	ovince/state/	count	ry	Foreig	ın postal o	ode	your tax	or refu	
Filing Status	s 🗵	Single		,			Head of h	ouseh	old (HOI	<del>-</del> 1)			
Check only		Married filing jointly (even if only of	ne nad i	ncome)						//	200)		
one box.	lt.		nomo	of vour or	souss If you	, obo	☐ Qualifying		0 1	,	,	ild'o no	ma if tha
		ialifying person is a child but not you											
Digital		ny time during 2023, did you: (a) rec											
		nange, or otherwise dispose of a dig						et)? (Se	ee instru	ction	s.)	Y	es 🗵 No
Standard	_	neone can claim: You as a de	•				a dependent						
Deduction	<u> </u>	Spouse itemizes on a separate retur	n or you	ı were a d	duai-status	allen							
Age/Blindnes	s You	: Were born before January 2, 1	959	Are bli	ind <b>Sp</b>	ouse	: Was bor	n befo	ore Janu	ary 2	, 1959	l:	s blind
Dependent	<b>s</b> (see	(see instructions):			(2) Social security (3) Relationship			nip (4	(4) Check the bo				(see instructions):
If more	(1) F	irst name Last name		number to you			Child tax cr		ax cre	edit	Credit fo	or other dependents	
Your first nam  DEVI PR  If joint return,  Home addres  1513 ME  City, town, or  IRVING  Foreign count  Check only one box.  Digital  Assets  Standard  Deduction  Age/Blindnes  Dependen  If more than four dependents, see instruction and check here  Income  Attach Form(s  W-2 here. Also attach Forms  W-2G and 1099-R if tax was withheld.  If you did not get a Form  W-2, see instructions.  Attach Sch. B if required.  Standard  Deduction for—										<u> </u>			
see instruction	ıs												
	, —												
-	10	Total amount from Form(a) W/ 2 h	ov 1 (00	o inatruo	tions)						10		106,684.
income	1a b	Total amount from Form(s) W-2, b Household employee wages not re	•		,						1a 1b		100,004.
Attach Form(s)		Tip income not reported on line 1a									10		
	d	Medicaid waiver payments not rep	•		•						1d		
W-2G and	e	Taxable dependent care benefits f				iiotiu	otions,				1e		
	f	Employer-provided adoption bene				•					1f		
	g g	Wages from Form 8919, line 6 .	,,,,,		000,10 20	•					1g		
get a Form	h	Other earned income (see instruct	ions)								1h		0.
	i	Nontaxable combat pay election (s	,				1 <sub>1i</sub>	Ì					
	z	Add lines 1a through 1h									1z		106,684.
Attach Sch. B	 2a		2a	-	ĺ	b Ta	axable interes	t.			2b		· · · · · · · · · · · · · · · · · · ·
	3a	· –	3a				rdinary divide						
	4a	_	4a				axable amoun						
Standard	5a		5a				axable amoun						
Single or	6a	_	6a				axable amoun				6b		
Married filing	С												
\$13,850	7	Capital gain or (loss). Attach Schedule D if required. If not required, check here								7			
jointly or	8	Additional income from Schedule									8		-14,549.
	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7	, and 8.	This is yo	our <b>total inc</b>	come	e				9		92,135.
\$27,700	10	Adjustments to income from Sche	dule 1, l	line 26							10	)	
household,	11	Subtract line 10 from line 9. This is your adjusted gross income							11		92,135.		
	12	Standard deduction or itemized	deduct	ions (fro	m Schedule	A)					12	2	13,850.
any box under	13	Qualified business income deduct	ion from	Form 89	995 or Form	899	5-A				13	3	
Deduction,	14										14		13,850.
see instructions.	15	Subtract line 1/1 from line 11 If zer	ro or les	c ontor	O This is v	our t	avabla incom	10			15	: 1	78 285

Form 1040 (2023	3)								Page Z
Tax and	16	Tax (see instructions). Check	if any from Form	(s): <b>1</b> 881	4 <b>2</b> 🗌 4972	з 🗌		16	12,528.
Credits	17	Amount from Schedule 2, lir	ne 3					17	
	18	Add lines 16 and 17						18	12,528.
	19	Child tax credit or credit for	other dependen	ts from Sched	ule 8812			19	
	20	Amount from Schedule 3, lin	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	12,528.
	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	12,528.
<b>Payments</b>	25	Federal income tax withheld	I from:						
_	а	Form(s) W-2				<b>25a</b> 14	477.		
	b	Form(s) 1099				25b			
	С	Other forms (see instruction	s)			25c			
	d	Add lines 25a through 25c						25d	14,477.
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)				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	ne 15			31			
	32	Add lines 27, 28, 29, and 31	. These are your	total other pa	ayments and refu	ndable credits		32	
	33	Add lines 25d, 26, and 32. T	hese are your <b>to</b>	tal payments				33	14,477.
Refund	34	If line 33 is more than line 24	4, subtract line 2	4 from line 33.	This is the amour	t you <b>overpaid</b>		34	1,949.
	35a	Amount of line 34 you want			3 is attached, chec	k here		35a	1,949.
Direct deposit?	b	Routing number 0 4 1			c Type: 🛛	Checking	Savings		
See instructions.	d	Account number 4 1 2	8 8 0 7	2 7 4					
	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.	<b>⋈</b> No
•		esignee's	Phone			dentification			
	name no. number (PIN)  Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to								
Sign		ider penalties of perjury, I declare t lief, they are true, correct, and com							
Here									, ,
	YO	our signature	Date	Your occupation		If the IRS sent you an Identity Protection PIN, enter it here			
Joint return?				SOFTWARE E		(see inst.)			
See instructions.		Spouse's signature. If a joint return, <b>both</b> must sign.		Date	Spouse's occupation			nt your spouse an	
Keep a copy for your records.					I .	ntity Protection PIN, enter it here e inst.)			
	Ph	Phone no. (216) 804-2188 Email address DEVIPRIYABALINENI@GMAIL.COM							
Paid	Pre	eparer's name	Preparer's signat	ure		Date	PTIN		Check if:
	SYAN	M PRIYA RAM SAGAR GUPTA TALLAM	SYAM PRIYA	RAM SAGAR	GUPTA TALLAM	01/27/2024	P0208	2703	Self-employed
Preparer Use Only	Fir	m's name GLOBAL TA	XES LLC			Ph			(678) 965-9522
	Fir	m's address 245 ROONE	Y CT E BRU	NSWICK N	J 08816		Firm	ı's EIN	84-3171965

## SCHEDULE 1 (Form 1040)

## **Additional Income and Adjustments to Income**

OMB No. 1545-0074

2023

Attachment
Seguence No. 01

Department of the Treasury Internal Revenue Service

DEVI PRIYA BALINENI

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. <b>01</b>
Your soci	ial security number
520-62	_2511

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. Atta		5	-14,549.
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		
I	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:			
•	Table the decree Add Press On the color	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> . Enter	nere and on Form	, ,	14 540
	1040, 1040-SR, or 1040-NR, line 8		10	-14 <b>,</b> 549.

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-				
	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	, , , , , , , , , , , , , , , , , , ,	24a			
b	Deductible expenses related to income reported on line 8l from the				
		24b			
С	Nontaxable amount of the value of Olympic and Paralympic medals	04			
_1	· · · · · · · · · · · · · · · · · · ·	24c		_	
d		24d		_	
е	Repayment of supplemental unemployment benefits under the Trade Act of 1974	24e			
f		24f			
g	Contributions by certain chaplains to section 403(b) plans	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				
	<b>-</b>	24i			
j		24j			
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form				
		24k			
Z	Other adjustments. List type and amount:	24z			
05					
<b>25</b>	Total other adjustments. Add lines 24a through 24z	 E		25	
26	Add lines 11 through 23 and 25. These are your <b>adjustments to income</b> .	. ∟nter	nere and on		
	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.

Department of the Treasury Internal Revenue Service

Go to www.irs.gov/ScheduleE for instructions and the latest information.

Attachment Sequence No. 13

OMB No. 1545-0074

Name(s) shown on return Your social security number DEVI PRIYA BALINENI 520-63-2544

ע א יינע	L FRITA DALINENT						J 2 0 -	-05-2545	İ	
Part	Income or Loss From Rental Real Estate Note: If you are in the business of renting personal pr rental income or loss from Form 4835 on page 2, line	operty, use		e C. See	instru	ctions. If you a	are an ir	ndividual, rep	oort farm	
<b>A</b> [	Did you make any payments in 2023 that would require		Form(s)	10002 5	Soo in	structions			oc 🛛 🗷	\ <u>\</u>
	If "Yes," did you or will you file required Form(s) 1099?									
1a	Physical address of each property (street, city, state				• •		• •	· · 🗀 ·	C3 1	10
		·		D	7 7 7 7	NID TNI FO	0000			
_ <u>A</u> _	16-2-754/A/12, APAU COLONY GADDIANNA	RAM HY	DERABA.	D <b>,</b> ТЕГ	ANGA	NA IN 50	0060			
В										
С									1	
1b	Type of Property (from list below)  2 For each rental real estate property above, report the number of					ir Rental Days		onal Use Days	QJ'	V
Α	g personal use days. Check th			Α		365		0		1
В	if you meet the requirements		a						i	
С	qualified joint venture. See in	nstruction	S.	C						i –
	of Property:						1			
1	Single Family Residence  3 Vacation/Short-Term  Multi-Family Residence  4 Commercial	Rental	5 Land 6 Roya			Self-Rental Other (desc	ribe)			
						Propert	ies:			
ncon	ne:			Α		В			С	
3	Rents received	. 3		6	72.					
4	Royalties received									
eqx	nses:									
5	Advertising	. 5								
6	Auto and travel (see instructions)									
7	Cleaning and maintenance			1,8	98.					
8	Commissions									
9	Insurance									
10	Legal and other professional fees									
11	Management fees			2 1	42.					
12	Mortgage interest paid to banks, etc. (see instruction	-		۷, ۱	72.					
13	Other interest	-,								
14	Repairs			3,5	21					
15	Supplies				51.					
16	Taxes			۷,٦	J					
17	Utilities			2,4	51					
	Depreciation expense or depletion	-		2,7						
18 19	Other (list)	19	+	۷, /	JU.					
19 20	Total expenses. Add lines 5 through 19			15,2	21					
			-	10,2	∠⊥.					
21	Subtract line 20 from line 3 (rents) and/or 4 (royalties) result is a (loss), see instructions to find out if you may									
	file <b>Form 6198</b>			<b>-14,</b> 5	49.					
22	Deductible rental real estate loss after limitation, if all on Form 8582 (see instructions)		(	14,54	19.)	(		)(		
23a	Total of all amounts reported on line 3 for all rental pr				23a		672			
b	Total of all amounts reported on line 4 for all royalty p	-			23b					
С	Total of all amounts reported on line 12 for all proper	-			23c					
d	Total of all amounts reported on line 18 for all proper				23d	2	2 <b>,</b> 758			
е	Total of all amounts reported on line 20 for all proper				23e		5,221			
24	Income. Add positive amounts shown on line 21. <b>Do</b>						. 2			
25	Losses. Add royalty losses from line 21 and rental real e		•		nter to	tal losses her	_	_	14,54	9.
26	Total rental real estate and royalty income or (los								,	
	here. If Parts II, III, and IV, and line 40 on page 2 do									
	Schedule 1 (Form 1040), line 5. Otherwise, include th						. 2	6	-14.5	49