# 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		ırn	202	3	OMB No. 1545	-0074	IRS Use	Only-	-Do not w	rite or sta	aple in this space.
For the year Jar	n. 1–Dec	c. 31, 2023, or other tax year beginning			, 2023, end	ling			, 20		See se	parate	instructions.
Your first name SANDHYAI  If joint return, s	DEVI	iddle initial s first name and middle initial	Last nar	UTLA							611	89	9551 security number
	-	er and street). If you have a P.O. box, see	instruction	ons.					Apt. no.	- 1			ection Campaign
901 HIDDEN VALLEY DRIVE  City, town, or post office. If you have a foreign address, also complete space of the space of th			TX			4105   ZIP code   78665   Foreign postal code			Check here if you, or your spouse if filing jointly, want \$3 to go to this fund. Checking a box below will not change your tax or refund.  You Spouse				
Check only one box.	If y	Single  Married filing jointly (even if only or Married filing separately (MFS)  you checked the MFS box, enter the lalifying person is a child but not you  ny time during 2023, did you: (a) receipt	name o ur depen	f your sp dent:				surviv	ving spou	use (0 enter	the chi	ld's na	me if the
Digital Assets Standard Deduction	Som	nange, or otherwise dispose of a diginate can claim: You as a de Spouse itemizes on a separate retur	ital asset pendent	t (or a fin	ancial inter	est ir e as	n a digital asse a dependent					Y	es 🗵 No
										0	1050		
		: Were born before January 2, 1	959 _	Are bli	•	ouse		- 1					s blind (see instructions):
If more		(see instructions): (1) First name Last name		(2) Social security number (3) Relationsh to you		Child tax c					or other dependents		
than four													
dependents, see instruction and check here	s ——								]				
Income	 1a	Total amount from Form(s) W-2, b	ox 1 (see	instruct	tions) .					<del>-</del>	1a		65,960.
	b	Household employee wages not re	,		,						1b		•
Attach Form(s) W-2 here. Also	С	Tip income not reported on line 1a	a (see ins	structions	s)						1c	:	
attach Forms	d	Medicaid waiver payments not rep	Medicaid waiver payments not reported on Form(s) W-2 (see instructions)							1d			
W-2G and 1099-R if tax	е	Taxable dependent care benefits from Form 2441, line 26						1e					
was withheld.	f	Employer-provided adoption bene	fits from	Form 88	339, line 29						1f		
If you did not	g	Wages from Form 8919, line 6 .									1g		
get a Form W-2, see	h	Other earned income (see instruct	ions) .					· ·			1h		0.
instructions.	i	Nontaxable combat pay election (s	see instr	uctions)			<u>1</u> i						
	z	Add lines 1a through 1h									1z		65,960.
Attach Sch. B	2a	Tax-exempt interest	2a				axable interest				2b		
if required.	3a_	Qualified dividends	3a				rdinary divide				3b		
Standard	4a	IRA distributions	4a				axable amoun				4b		
Standard Deduction for—	5a	<del>-</del>	5a				axable amoun				5b		
Single or	6a	Social security benefits	6a			b Ta	axable amoun	t			6b	4	
Married filing separately,	С	If you elect to use the lump-sum e		•		`	,						
\$13,850 Married filing	7	Capital gain or (loss). Attach Sche								. L	7		
jointly or	8	Additional income from Schedule									8		-19,134.
Qualifying surviving spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7,			our <b>total inc</b>	come					9		46,826.
\$27,700 • Head of	10	Adjustments to income from Schedule 1, line 26							10	4			
household,	11	Subtract line 10 from line 9. This is	•	-	-						11		46,826.
\$20,800 If you checked	12		Standard deduction or itemized deductions (from Schedule A)						12		13,850.		
any box under Standard	13	Qualified business income deducti	ion from	Form 89	95 or Form	899	5-A				13		
Deduction,	14										14		13,850.
see instructions.	15	Subtract line 1/1 from line 11. If zer	n or less	ontor	O This is w	Our t	avahla incom				15	1	32 976

Form 1040 (2023	3)								Page <b>2</b>		
Tax and	16	Tax (see instructions). Check	if any from Form	n(s): <b>1</b> 881	4 <b>2</b> 🗌 4972	3 🗌		. 16	3,737.		
Credits	17	Amount from Schedule 2, lin	. 17								
	18	Add lines 16 and 17						. 18	3,737.		
	19	Child tax credit or credit for	other dependen	ts from Sched	ule 8812			. 19			
	20	Amount from Schedule 3, lin	•					. 20			
	21	Add lines 19 and 20						. 21			
	22	Subtract line 21 from line 18	3. If zero or less.	enter -0				. 22	3,737.		
	23	Other taxes, including self-e	•					. 23	0.		
	24	Add lines 22 and 23. This is			•			-	3,737.		
Payments	25	Federal income tax withheld									
. ayınıdınıd	а	Form(s) W-2				25a	9,41	6.			
	b	Form(s) 1099				25b	•				
	c	Other forms (see instruction				25c					
	d	Add lines 25a through 25c	•					. 25d	9,416.		
16	26	2023 estimated tax paymen						. 26			
If you have a qualifying child,	27	Earned income credit (EIC)				27					
attach Sch. EIC.	28	Additional child tax credit fro				28					
	29	American opportunity credit				29					
	30	Reserved for future use .				30					
	31	Amount from Schedule 3, lir				31					
	32	Add lines 27, 28, 29, and 31					s .	. 32			
	33	Add lines 25d, 26, and 32. T	•	=	=			-	9,416.		
Refund	34	If line 33 is more than line 24						. 34	5,679.		
riciana	35a								5,679.		
Direct deposit?	b	Routing number 1 1 1	9 0 0 6	5   9		Checking	Savin				
See instructions.		Account number 2 7 6						3-			
	36	Amount of line 34 you want			ed tax	36					
Amount	37										
You Owe	0.	Subtract line 33 from line 24. This is the <b>amount you owe</b> .  For details on how to pay, go to www.irs.gov/Payments or see instructions									
	38	Estimated tax penalty (see in	nstructions) .			38					
Third Party	Do	you want to allow another				See					
Designee		structions				. 🗌 Yes.	Comple	ete below.	<b>⋈</b> No		
		signee's						identification			
<u></u>		me	hat I have avening	no.			mber (PI		of my lenguinder and		
Sign		der penalties of perjury, I declare t lief, they are true, correct, and com									
Here		ur signature		Date	Your occupation				nt you an Identity		
	10	ui signature		Date				tection PIN, enter it here			
Joint return?			SOFTWARE I			EVELOPER	(	see inst.)			
See instructions. Keep a copy for		ouse's signature. If a joint return,	both must sign.	Date	Spouse's occupati	on			nt your spouse an ection PIN, enter it here		
your records.							(	see inst.)	•		
	Ph	one no. (724) 420-794	0	Email address	SANDHYADEVI(	827@GMAIL.	COM				
Paid	Pre	eparer's name	Preparer's signat	ture		Date	PTIN	1	Check if:		
Preparer	_LA	VANYA	LAVANYA			01/26/2024	1 P03	171188	Self-employed		
Use Only	Firm's name GLOBAL TAXES LLC Phor					Phone no.	one no. (646) 727-7157				
————	Fir	m's address 245 ROONE	Y CT E BRU	JNSWICK N	J 08816			Firm's EIN	30-1017196		
Co to www ire a	ov/Eorn	n1040 for instructions and the late	et information		544				Farm 1040 (2022)		

## 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

SANDHYADEVI LINGUTLA

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 soc	ial security number
611-89	-9551

Par	t I 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	ach Schedule E .	5	-19,134.
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> . Enter	here and on Form		
	1040, 1040-SR, or 1040-NR, line 8		10	-19 <b>,</b> 134.

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					
25 26	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.

OMB No. 1545-0074

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 Your social security number

SANDHYADEVI LINGUTLA 61						611-8	11-89-9551			
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.			<b>c</b> . See	instru	ctions. If you are	e an indi	vidual, rep	ort farm	
	Did you make any payments in 2023 that would require you									
В	f "Yes," did you or will you file required Form(s) 1099? .							. <u> </u>	es 🗌 No	
1a	Physical address of each property (street, city, state, ZIF	P code	e)							
Α	KUKATPALLY HYDRABAD IN									
В										
С										
1b	Type of Property (from list below)  2 For each rental real estate properabove, report the number of fair	rental	ntal and C			ir Rental Days	Persor Da		QJV	
Α	personal use days. Check the Quif you meet the requirements to the control of the			Α		324	0			
В	qualified joint venture. See instru			В						
<u>C</u>				С						
1	of Property: Single Family Residence 3 Vacation/Short-Term Ren Multi-Family Residence 4 Commercial	ital	5 Land 6 Roya	-		Self-Rental Other (descril				
						Propertie	s:			
Incon		_		Α	35.	В			С	
3 4	Rents received	3			33.					
Expe		-								
5	Advertising	5								
6	Auto and travel (see instructions)	6								
7	Cleaning and maintenance	7		2,4	92.					
8	Commissions	8								
9	Insurance	9								
10	Legal and other professional fees	10								
11	Management fees	11								
12	Mortgage interest paid to banks, etc. (see instructions)	12								
13	Other interest	13								
14	Repairs	14			91.					
15	Supplies	15		4,5	97.					
16	Taxes	16			0.0					
17	Utilities	17		5,5	89.					
18	Depreciation expense or depletion	18								
19 20	Other (list)  Total expenses. Add lines 5 through 19	19		19,6	60					
21	Subtract line 20 from line 3 (rents) and/or 4 (royalties). If	20		⊥ ⊅ <b>,</b> 0	09.					
21	result is a (loss), see instructions to find out if you must file <b>Form 6198</b>	21		-19 <b>,</b> 1	34.					
22	Deductible rental real estate loss after limitation, if any, on <b>Form 8582</b> (see instructions)	22		19,13		(	)	(	)	
23a	Total of all amounts reported on line 3 for all rental prope	erties			23a		535.			
b	Total of all amounts reported on line 4 for all royalty prop	erties			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					
е	Total of all amounts reported on line 20 for all properties									
24	Income. Add positive amounts shown on line 21. Do not		-				24			
25	Losses. Add royalty losses from line 21 and rental real estat							(	19,134.)	
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						26		-19.134	