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



£104 (eartment of the Treasury—Internal Revenue Serves. Individual Income Tax		urn	202	3	OMB No. 1545	-0074	IRS Use	Only-	-Do not w	rite or sta	aple in this space.	
For the year Ja	n. 1–De	c. 31, 2023, or other tax year beginning			, 2023, end	ling			, 20		See se	parate	instructions.	
Your first name and middle initial Last na				me							Your social security number			
SHASHAN	K		GARI	MELLA							688	75	8183	
		s first name and middle initial	Last na										l security numbe	
Home address	(numb	er and street). If you have a P.O. box, see	instruction	ons.					Apt. no.	- 1			ection Campaigi	
3030 OH						1			155				ou, or your jointly, want \$3	
•	post off	ice. If you have a foreign address, also co	mplete s	paces bel	ow.	Sta		ZIP c			•	_	nd. Checking a	
FRISCO						TX		750					not change	
Foreign countr	y name	•		-oreign pr	ovince/state/	count	У	Foreig	ın postal c	ode	your tax	or retu		
Filing Status	s X	Single					☐ Head of h	Louseh	old (HOH	——↓ 1)				
-	• <u> </u>	☐ Married filing jointly (even if only o	ne had i	ncome)						-,				
Check only one box.		Married filing separately (MFS)		,			☐ Qualifying	surviv	ing spou	use ((QSS)			
one box.	If v	you checked the MFS box, enter the	name c	of your sp	oouse. If you	u che	, ,		0 1	,	,	ld's na	ıme if the	
		ualifying person is a child but not you												
Digital	At a	ny time during 2023, did you: (a) rec	eive (as	a reward	d, award, or	payn	nent for prope	rty or	services); or (b) sell,			
Assets		nange, or otherwise dispose of a dig										□ Ye	es 🛛 No	
Standard	Son	neone can claim: You as a de	penden	t 🗌	Your spous	e as	a dependent							
Deduction		Spouse itemizes on a separate retur	n or you	were a	dual-status	alien								
Age/Blindnes	s You	: Were born before January 2, 1	959	Are bl	ind Sp o	ouse	: Was bor	rn befo	ore Janua	ary 2	, 1959		s blind	
Dependent	s (see	instructions):		(2) 9	Social security	,	(3) Relationsh	nip (4) Check t	he bo	x if quali	fies for ((see instructions)	
If more		(1) First name Last name			number to you				Child tax c			Credit fo	or other dependents	
than four									[
dependents, see instruction									[
and check														
here														
Income	1a	Total amount from Form(s) W-2, b	,		,						1a		97,250.	
Attach Form(s)	b	Household employee wages not re			. ,						1b			
W-2 here. Also	С	Tip income not reported on line 1a (see instructions)								1c				
attach Forms W-2G and	d		ents not reported on Form(s) W-2 (see instructions)							1d				
1099-R if tax	е	Taxable dependent care benefits t									1e			
was withheld.	f	Employer-provided adoption bene	fits fron								1f			
If you did not get a Form	g	Wages from Form 8919, line 6 .								1g				
W-2, see	h	Other earned income (see instruct	,					· ·			1h	_	0.	
instructions.	i	Nontaxable combat pay election (see instr	ructions)			<u>1</u> i						07 050	
	<u>z</u>	Add lines 1a through 1h	· .								1z		97,250.	
Attach Sch. B	2a	· –	2a				axable interest				2b			
if required.	3a_	· ·	3a				rdinary divide							
Standard	4a	-	4a				axable amoun							
Deduction for—	5a		5a				axable amoun							
Single or Married filing	6a	,	6a				axable amoun	t		٠ _	6b			
separately,	C	If you elect to use the lump-sum e				`	,				- I			
\$13,850 Married filing	7	Capital gain or (loss). Attach Sche								. L	7			
jointly or Qualifying	8	Additional income from Schedule	•								8		-14,773.	
surviving spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7		•							9		82,477.	
\$27,700 • Head of	10	Adjustments to income from Schedule 1, line 26								_	00 :==			
household, \$20,800	11	Subtract line 10 from line 9. This is your adjusted gross income							11		82,477.			
If you checked	12	Standard deduction or itemized									12		13,850.	
any box under Standard	13	Qualified business income deduct									13			
Deduction, see instructions.	14	Add lines 12 and 13									14		13,850.	
	15	Subtract line 1/1 tram line 11 If zon	o or loc	contor	II Ibio io v	Our t	avable incom	••			1 45	1	6× 677	

Form 1040 (202)	3)								Page Z	
Tax and	16	Tax (see instructions). Check	if any from Form	(s): 1 881	4 2 🗌 4972	з 🗌		16	10,405.	
Credits	17	Amount from Schedule 2, lir	ne 3					17		
	18	Add lines 16 and 17						18	10,405.	
	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	10,405.	
	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	10,405.	
Payments	25	Federal income tax withheld	I from:							
_	а	Form(s) W-2				25a 14	1,366.			
	b	Form(s) 1099				25b				
	С	Other forms (see instruction	s)			25c				
	d	Add lines 25a through 25c						25d	14,366.	
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	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 to	tal payments				33	14,366.	
Refund	34	If line 33 is more than line 24	4, subtract line 2	4 from line 33.	This is the amoun	nt you overpaid		34	3,961.	
	35a	Amount of line 34 you want			3 is attached, chec	k here		35a	3,961.	
Direct deposit?	b	Routing number 0 6 3				Checking	Savings			
See instructions.	d	Account number 8 9 8	1 3 2 2	5 3 9 1	1 1					
	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			onal iden	tification		
		me		no.			ber (PIN)			
Sign		der penalties of perjury, I declare t lief, they are true, correct, and com			1 , 0		,		, ,	
Here							1		, ,	
	YO	our signature		Date	Your occupation				nt you an Identity IN, enter it here	
Joint return?					SOFTWARE E	NGINEER		ee inst.)		
See instructions.		ouse's signature. If a joint return,	both must sign.	Date					nt your spouse an	
Keep a copy for your records.							Identity Protection PIN, enter it here (see inst.)			
	Ph	one no. (813) 333-812	3	Email address	SHASHANKGARIM	ELLA@GMAIL.C	OM			
Paid	Pr	eparer's name	Preparer's signat	ure		Date	PTIN		Check if:	
	SYAN	M PRIYA RAM SAGAR GUPTA TALLAM	SYAM PRIYA	RAM SAGAR	GUPTA TALLAM	02/16/2024	P0208	32703	Self-employed	
Preparer Use Only	Fir	m's name GLOBAL TA	XES LLC			Pho	ne no.	(678) 965-9522		
	Firm's address 245 ROONEY CT E BRUNSWICK NJ 08816						Firn	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

SHASHANK GARIMELLA

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.

Your social security number 688-75-8183

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	5	-14,773.	
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. 55
	1040, 1040-SR, or 1040-NR, line 8		10	-14,773.

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 government	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 8l 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	1	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

SHAS	SHANK GARIMELLA						688-7	5-8183	3		
Par	Income or Loss From Rental Real Estate ar Note: If you are in the business of renting personal proper rental income or loss from Form 4835 on page 2, line 40.	rtv. use		C . See	instru	ctions. If you	are an indiv	vidual, rep	oort farm		
Α	Did you make any payments in 2023 that would require you	to file	Form(s)	1099? S	See in	structions .		es 🛛 No			
В	f "Yes," did you or will you file required Form(s) 1099? .							. 🗌 Ye	es 🗌 No		
1a	Physical address of each property (street, city, state, ZI	P code	e)								
A	1-5-1120/5 FLAT NO 104 URBAN ELEGANCE	OT.D	ΔT.WΔT.	TN 50	0001	5				_	
B	1 3 1120/3 1 HII NO 101 ONDIN BELONNOL	0110	7111111111	111 0	0001					_	
										_	
1b	Type of Property (from list below) 2 For each rental real estate properation above, report the number of fair		and D a			air Rental Days	Person Da		QJV	QJV	
Α	personal use days. Check the Q			Α		365		0			
В	if you meet the requirements to qualified joint venture. See instru			В							
С	quaimed 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	cribe)				
						Propert				_	
Incon	ne.			Α		В			С	_	
3	Rents received	3			54.					_	
4	Royalties received	4								_	
Expe										_	
5	Advertising	5									
6	Auto and travel (see instructions)	6									
7	Cleaning and maintenance	7		2,7	61.						
8	Commissions	8									
9	Insurance	9									
10	Legal and other professional fees	10									
11	Management fees	11		2,5	43.						
12	Mortgage interest paid to banks, etc. (see instructions)	12									
13	Other interest	13									
14	Repairs	14		2,8	97.						
15	Supplies	15		2,4	30.						
16	Taxes	16									
17	Utilities	17		2,2	46.						
18	Depreciation expense or depletion	18		2,5	50.						
19	Other (list)	19									
20	Total expenses. Add lines 5 through 19	20		15,4	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 Form 6198			-14 , 7	73.						
22	Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions)	22		14,77		()	(
23a	Total of all amounts reported on line 3 for all rental prope				23a	,	654.				
b	Total of all amounts reported on line 4 for all royalty prop				23b						
C	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		2,550.				
е	Total of all amounts reported on line 20 for all properties				23e		5,427.				
24	Income. Add positive amounts shown on line 21. Do no						. 24				
25	Losses. Add royalty losses from line 21 and rental real estat		•		nter to	tal losses he		(14,773.		
26	Total rental real estate and royalty income or (loss).									ĺ	
-	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 appl	y to you,	also e	nter t	his amount			- 14 , 773		