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



For the year Jan	ı. 1–Dec	c. 31, 2023, or other tax year beginning		, 2023, end	ling		, 20		See se	parate inst	tructions.
Your first name	and mi	iddle initial	Last na	ame					Your so	cial securit	y number
VARUN CH	HOWDA	ARY	TALI	LURI					068	69 6	745
If joint return, s	pouse'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 Election	on Campaign
21068 DF	REXE	L ST								here if you,	•
City, town, or p	ost offi	ce. If you have a foreign address, also co	mplete s	spaces below.	Stat	te	ZIP code		•	٠,	itly, want \$3 Checking a
ELKHORN					NE		68022			ow will not	
Foreign country	/ name			Foreign province/state/o	county	y	Foreign postal of	code	your tax	x or refund.	_
										You	Spouse
Filing Status	; 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 (C	QSS)		
	If y	ou checked the MFS box, enter the	name	of your spouse. If you	u che	cked the HOH	l or QSS box,	enter	the chi	ild's name	if the
	qu	alifying person is a child but not you	ır depei	ndent:							
Digital	At ar	ny time during 2023, did you: (a) rece	eive (as	a reward, award, or	navr	nent for prope	rty or services	a): or (b) sell.		
Assets		lange, 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 return	•			•					
A /DI' l		_		_				0	4050		
	•	Were born before January 2, 19	959 [T ·	ouse:		n before Janu			∐ Is bli	
Dependents				(2) Social security number	'	(3) Relationsh to you	ip (4) Check				instructions): her dependents
If more	(1) F	irst name Last name		number		to you	Offilia		Juit	Credit for oth	
than four dependents,										L	
see instructions	s									L L	
and check here	ı —									L L	
-	10	Total amount from Form(s) W 2 h	ov 1 (oc	a instructions)					10	<u>_</u>	<u> </u>
Income	1a h	Total amount from Form(s) W-2, be	`	,					1a 1b		30,034.
Attach Form(s)	b	Household employee wages not reported on Form(s) W-2							10		
W-2 here. Also attach Forms	c d	Tip income not reported on line 1a (see instructions) Medicaid waiver payments not reported on Form(s) W-2 (see instructions)							1d		
W-2G and	e	Taxable dependent care benefits f	* * * * * * * * * * * * * * * * * * * *						1e		
1099-R if tax was withheld.	f	Employer-provided adoption bene		•					1f		
If you did not	g g	Wages from Form 8919, line 6.							1g		
get a Form	9 h	Other earned income (see instructi							1h		0.
W-2, see instructions.	i	Nontaxable combat pay election (s	,			1i	i				
instructions.	z	Add lines to through th							1z	, (66,034.
Attach Sch. B	 2a	1	2a		b Ta	xable interest	· · ·		2b		
if required.	3a	'	3a			rdinary divider			3b		
	4a		4a			axable amount			4b	,	
Standard Deduction for—	5a		5a		b Ta	axable amount	t		5b	,	
Single or	6a	Social security benefits	6a			axable amount			6b	,	
Married filing separately,	С	If you elect to use the lump-sum election method, check here (see instructions)									
\$13,850	7	Capital gain or (loss). Attach Schedule D if required. If not required, check here							7		
 Married filing jointly or 	8	Additional income from Schedule 1, line 10						8			
Qualifying surviving spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7,	dd lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income						9	(66,034.
\$27,700	10	Adjustments to income from Schedule 1, line 26							10	ı <u> </u>	
 Head of household, 	11	Subtract line 10 from line 9. This is your adjusted gross income						11	- (66,034.	
\$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 deduction from Form 8995 or Form 8995-A						13			
Standard Deduction,	14	Add lines 12 and 13							14	. 1	13,850.
see instructions.	15	Subtract line 14 from line 11. If zer	o or les	s, enter -0 This is y	our t a	axable incom	e		15	,	52,184.

Form 1040 (202)	3)								Page Z	
Tax and	16	Tax (see instructions). Check if a	ny from Form	(s): 1 881	4 2 🗌 4972	з 🗌		16	6,786.	
Credits	17	Amount from Schedule 2, line 3	3					17		
	18	Add lines 16 and 17						18	6,786.	
	19	Child tax credit or credit for oth	er dependent	s from Sched	ule 8812			19		
	20	Amount from Schedule 3, line 8	3					20		
	21	Add lines 19 and 20						21		
	22	Subtract line 21 from line 18. If	zero or less, e	enter -0				22	6,786.	
	23	Other taxes, including self-emp	loyment tax, f	from Schedule	e 2, line 21			23	0.	
	24	Add lines 22 and 23. This is you	ır total tax					24	6 , 786.	
Payments	25	Federal income tax withheld fro	om:							
	а	Form(s) W-2				25a	8 , 877.			
	b	Form(s) 1099				25b				
	С	Other forms (see instructions)				25c				
	d	Add lines 25a through 25c .						25d	8 , 877.	
If you have a	26	2023 estimated tax payments a	ınd amount ap	oplied from 20	22 return			26		
qualifying child, attach Sch. EIC.	27	Earned income credit (EIC) .			No .	27				
allach Sch. ElC.	28	Additional child tax credit from S	chedule 8812			28				
	29	American opportunity credit fro	m Form 8863	, line 8		29				
	30	Reserved for future use				30				
	31	Amount from Schedule 3, line 1	5			31				
	32	Add lines 27, 28, 29, and 31. Th	nese are your	total other pa	ayments and refu	ındable credits		32		
	33	Add lines 25d, 26, and 32. Thes	se are your to	tal payments				33	8 , 877.	
Refund	34	If line 33 is more than line 24, so	ubtract line 24	4 from line 33.	This is the amoun	nt you overpaid		34	2,091.	
	35a	Amount of line 34 you want refu			is attached, ched	ck here	🗆	35a	2,091.	
Direct deposit?	b	Routing number 1 0 4 0			c Type:	Checking	Savings			
See instructions.	d	Account number 8 4 1 2	8 8 0	6 1 2						
	36	Amount of line 34 you want app	lied to your 2	2024 estimate	ed tax	36				
Amount You Owe	37	Subtract line 33 from line 24. The For details on how to pay, go to						37		
	38	Estimated tax penalty (see instr	_	-		38				
Third Party Designee		you want to allow another pe	erson to disc	uss this retur	n with the IRS?		Complete	below.	⊠ No	
gc	De	signee's		Phone		Per	sonal ident	ification		
		me		no.			ber (PIN)			
Sign Here		der penalties of perjury, I declare that I lief, they are true, correct, and complet								
11010	Yo	Your signature		Date Your occupation				If the IRS sent you an Identity Protection PIN, enter it here		
					COMPTIMED ON	OMENO ANTATA		tection P e inst.)	IN, enter it here	
Joint return? See instructions.	Sn	Spouse's signature. If a joint return, both must sign.		Date	Spouse's occupati	TEMS ANALIST .			nt vour enquee an	
Keep a copy for your records.		opouse's signature. II a joint return, both must sign.		Spouse's occupation				If the IRS sent your spouse an Identity Protection PIN, enter it here (see inst.)		
	Ph	one no. (716) 768-9919		Email address	VARUNTALLU	RI@GMAIL.C	MC			
Paid	Pre	eparer's name Pr	eparer's signatu	ure		Date	PTIN		Check if:	
Preparer	SYAN	M PRIYA RAM SAGAR GUPTA TALLAM SY	'AM PRIYA	RAM SAGAR	GUPTA TALLAM	03/02/2024	P0208	2703	Self-employed	
Use Only	Fir	Firm's name GLOBAL TAXES LLC Pho						none no. (678) 965-9522		
————	Fir	m's address 245 ROONEY	CT E BRU	NSWICK N	J 08816		Firn	n's EIN	84-3171965	
o	/-	40406 : 1 1: 111 1 1 1:							= 1040 ()	

Good Life. Great Service.

DEPARTMENT OF REVENUE

Nebraska Individual Income Tax Return for the taxable year January 1, 2023 through December 31, 2023 or other taxable year: , 2023 through

FORM 1040N

2023

	Your First Name and Initial	Last Name		Please Do Not Write In Th	nis Spac	е	
Ħ	VARUN CHOWDARY	TALLURI					
Print	If a Joint Return, Spouse's First Name and Initial	Last Name					
oe or							
e Ty	Current Mailing Address (Number and Street or PO B						
Please Type	21068 DREXEL ST						
础	City	State	ZIP Code				
	ELKHORN	NE	68022				
	Your Social Security Number Spous	se's Social Security Number		High School D	District C	ode	
	0 6 8 6 9 6 7 4 5			2 8 2 8	0	1 0	
	During 2023, did you receive, sell, exchange,	gift, or otherwise dispos	se of a digital asset	or a financial interest in a	digital as	sset? Yes	X No
_						/	
(1) Farmer/Rancher (2) Active Military	(1) Deceased	Taxpayer(s) -			/	
		(first name	& date of death):			/	
_	1 Federal Filing Status:					,	
		ed, filing separately-Sp	ouse's SSN:	(4) ☐ H	ead of H	Household	
	(2) Married, filing jointly and Full					surviving spous	se (QSS)
	2a Check if YOU were: (1) ☐ 65 or (older (2) Blind	2b Check he	ere if someone (such as			
	SPOUSE was: (3) 65 or 6	` '		use as a dependent: (1)		(2) ☐ Spc	
_	3 Type of Return:			. , ,			
	· ·	I-year resident from	/	, 2023 to /	, 2	023 (attach Sch	edule III)
	()	sident (attach Schedul			,	`	,
_	4 Nebraska personal exemptions. (Enter						
	a Yourself. If someone can claim you		1 1 /			1a 1	
	b Spouse. Married filing jointly returns						
	C Dependents, if more than three		Dependent's				
	First Name	Last Name	Social Security N				
			Coolai Coolain,				
				Total number of			
				dependents liste		1 0	
	Total Nebraska personal exemptions –	add lines 4a 4h and 4	1 _C	dopondonto not	Ja	4	1
	5 Federal adjusted gross income (AGI) (I			Oo not leave blank		5 66,0	
-	6 Nebraska standard deduction (if you ch				1	0 00,0	
	see instructions; otherwise, enter \$7,900						
	qualifying surviving spouse; \$7,900 if marr						
	household)			6 7,900.	00		
	7 Total itemized deductions (line 17, Fede	eral Schedule A – see	instructions)		00		
	8 State and local income taxes (line 5a, S				00		
	9 Nebraska itemized deductions (line 7 m				00		
1	Nebraska standard deduction or the Ne				100		
	(the larger of line 6 or line 9)				1	0 7,9	00. 00
1	1 Nebraska income before adjustments (_		
	2 Adjustments increasing federal AGI (lin				00	33,1	
	3 Adjustments decreasing federal AGI (lin				00		
	4 Nebraska Taxable Income (enter line 1						
	complete lines 15 and 16. Partial-year i	•				4 58,1	34. 00
1	5 Nebraska income tax (Partial-year resid		· ·			30,1	34.
	from line 9, Nebraska Schedule III. Pap			e.			
	All others must use Tax Calculation Sci	•			00		
1	6 Nebraska other tax calculation:			2,300.	100		
	a Federal Tax on Lump-Sum Distribution	ns (Federal Form 4972)	16 a \$				
	b Federal tax on early distributions (les		- σ σ σ				
	Form 5329 or line 8, Sch. 2, Federal F		16 b \$				
	c Total (add lines 16a and 16b)						
	Residents multiply line 16c by 29.6%						
	Partial-year residents and nonresiden						
	Nebraska Schedule III			16	00		
1	7 Total Nebraska tax before Nebraska pe				00		
	Do not pay the amount on this line. Pay				1	7 2,9	06. 00
	Do not pay the amount on this life. I as	, the amount nominine			1		~ ~ · UU

10	Nebr. personal exemption credit for residents only (\$157 times the number on line 4) $\ldots\ldots$	18	157.	00			
19	Credit for tax paid to another state, line 6, Nebraska Schedule II						
	(attach Nebraska Schedule II and a copy of the other state's return)	19		00			
	Credit for the elderly or disabled (attach copy of Federal Schedule R)			00			
21	Community Development Assistance Act credit (attach Form CDN)	21		00			
22	Form 3800N nonrefundable credit (attach Form 3800N)	22		00			
23	Nebraska child/dependent care nonrefundable credit, only if line 5 is more						
	than \$29,000 (attach a copy of Federal Form 2441 and see instructions)	23		00			
24	Credit for financial institution tax (attach Form NFC)	24		00			
25	Employer's credit for expenses incurred for TANF (ADC) recipients (see instr.)	25		00			
26	Designated extremely blighted area tax credit (attach Form 1040N-EB)	26		00			
27	NE employer tax credit for employing convicted felons. Enter certificate number from						
	Form ETC-A	27		00			
28	Total nonrefundable credits (add lines 18 through 27)				28	157.	00
	Nebraska tax after nonrefundable credits. Subtract line 28 from line 17 (if line 28 is more than						
	result is greater than your federal tax liability, see instructions. If entering federal tax, check be		1		29	2,749.	00
30	Total Nebraska income tax withheld (attach 2023 Forms, see instructions)						
	a W-2 \$ 3,618. b K-1N \$						
	c W-2G,1099-R, 1099-MISC, 1099-NEC, etc \$ 0 • d PTET credit from K-1N	30	3,618.	00			
31	2023 estimated income tax payments (include any 2022 overpayment credited to 2023 and						
	any payments submitted with an extension request)	31		00			
32				00			
	Nebraska child/dependent care refundable credit, if line 5 is \$29,000 or less	-					
	(attach a copy of Form 2441N).	33		00			
34	Beginning Farmer credit from Form 1099 BFC (NDA NextGen)			00			
	Nebraska earned income credit. Enter number of qualifying children 97	0.7			1		
00	Federal credit 98 \$00 x .10 (10%) (see instructions)	35		00			
36	Credit for school district property taxes (attach Form PTC)			00			
	Credit for community college property taxes (attach Form PTC)			00			
	Credit for qualified Volunteer Emergency Responders (see instructions)			00			
	Stillborn child tax credit (attach Birth Resulting in Stillbirth Certificate and see instructions)			00			
	Total refundable credits (add lines 30 through 39)				40	3,618.	00
					10	0,0101	
41	Penalty for undernayment of estimated tay (see instructions). If you calculated a Form 2210N	nana	Ity of -()- or greater			I	
41	Penalty for underpayment of estimated tax (see instructions). If you calculated a Form 2210N or used the annualized income method, attach Form 2210N, and check this box. 96				41		00
	or used the annualized income method, attach Form 2210N, and check this box $\ 96 \ \boxed{\ } \ldots$					2 749	00
42	or used the annualized income method, attach Form 2210N, and check this box 96 Total tax and penalty. Add lines 29 and 41				41 42	2,749.	00
42	or used the annualized income method, attach Form 2210N, and check this box 96 Total tax and penalty. Add lines 29 and 41	 ons)				2,749.	
42	or used the annualized income method, attach Form 2210N, and check this box 96 Total tax and penalty. Add lines 29 and 41 Use tax due on taxable purchases where applicable sales tax was not collected. (see instruction Enter purchases subject to state tax 91 \$ State tax 92 \$ (purchases x 5.5%)	 ons) %);				2,749.	
42	or used the annualized income method, attach Form 2210N, and check this box 96 Total tax and penalty. Add lines 29 and 41 Use tax due on taxable purchases where applicable sales tax was not collected. (see instruction in the purchases subject to state tax 91 \$ State tax 92 \$ (purchases x 5.59). Enter purchases subject to local tax 93 \$ Local tax 94 \$ (purchases x local tax 94 \$)	 ons) %);				2,749.	
42	or used the annualized income method, attach Form 2210N, and check this box 96 Total tax and penalty. Add lines 29 and 41 Use tax due on taxable purchases where applicable sales tax was not collected. (see instruction in the context of the context	ons) %); al rate	of %)		42		00
42 43	or used the annualized income method, attach Form 2210N, and check this box 96 Total tax and penalty. Add lines 29 and 41 Use tax due on taxable purchases where applicable sales tax was not collected. (see instruction of the purchases subject to state tax 91 \$ State tax 92 \$ (purchases x 5.5% Enter purchases subject to local tax 93 \$ Local tax 94 \$ (purchases x local 95 Local code (see local rate schedule); Add state and local taxes and enter on line 43. If no use tax is due, enter -0- on line 43	ons) %); al rate	of %)			2,749.	
42 43	or used the annualized income method, attach Form 2210N, and check this box 96 Total tax and penalty. Add lines 29 and 41 Use tax due on taxable purchases where applicable sales tax was not collected. (see instruction of the purchases subject to state tax 91 \$	ons); al rate	of %) 42 and 43		42		00
42 43 44	or used the annualized income method, attach Form 2210N, and check this box 96 Total tax and penalty. Add lines 29 and 41 Use tax due on taxable purchases where applicable sales tax was not collected. (see instruction Enter purchases subject to state tax 91 \$ State tax 92 \$ (purchases x 5.5% Enter purchases subject to local tax 93 \$ Local tax 94 \$ (purchases x local 95 Local code (see local rate schedule); Add state and local taxes and enter on line 43. If no use tax is due, enter -0- on line 43 Total amount due. If line 40 is less than total of lines 42 and 43, subtract line 40 from total of Pay this amount in full. For electronic or credit card payment check box here and see instruction.	ons) %); al rate lines	of %) 42 and 43	••••	43	0.	00
42 43 44 45	or used the annualized income method, attach Form 2210N, and check this box 96 Total tax and penalty. Add lines 29 and 41 Use tax due on taxable purchases where applicable sales tax was not collected. (see instruction Enter purchases subject to state tax 91 \$	ons) %); al rate lines ctions	of %) 42 and 43		42		00
42 43 44 45 46	or used the annualized income method, attach Form 2210N, and check this box 96 Total tax and penalty. Add lines 29 and 41	ons) %); al rate lines ctions and 46	of %) 42 and 43	••••	43	0.	00
42 43 44 45 46 47	or used the annualized income method, attach Form 2210N, and check this box 96 Total tax and penalty. Add lines 29 and 41 Use tax due on taxable purchases where applicable sales tax was not collected. (see instruction Enter purchases subject to state tax 91 \$	ons) %); al rate lines ctions and 46 47	42 and 43 43 from line 40	00	43	0.	00
42 43 44 45 46 47	or used the annualized income method, attach Form 2210N, and check this box 96 Total tax and penalty. Add lines 29 and 41	ons) %); al rate lines ctions and 46 47	of %) 42 and 43 43 from line 40	00	43 44 45	0.	00
42 43 44 45 46 47 48	or used the annualized income method, attach Form 2210N, and check this box 96 Total tax and penalty. Add lines 29 and 41	ons) %); al rate lines ctions and 4 46 47	of %) 42 and 43 43 from line 40	00	43 44 45	0. 869.	00
42 43 44 45 46 47 48	or used the annualized income method, attach Form 2210N, and check this box 96 Total tax and penalty. Add lines 29 and 41	ons) %); al rate lines ctions and 4 46 47	of %) 42 and 43 43 from line 40	00	43 44 45	0. 869. 869.	00
42 43 44 45 46 47 48	or used the annualized income method, attach Form 2210N, and check this box 96 Total tax and penalty. Add lines 29 and 41	ons) %); al rate lines ctions and 4 46 47	of %) 42 and 43 43 from line 40	00	43 44 45	0. 869.	00
42 43 44 45 46 47 48	Total tax and penalty. Add lines 29 and 41	ons) %); al rate lines ctions and 4 46 47	of %) 42 and 43 43 from line 40	00	43 44 45	0. 869. 869.	00
42 43 44 45 46 47 48 49 49	Total tax and penalty. Add lines 29 and 41	bons) %); al rate blines ctions and 46 47 46 47 lines	42 and 43 43 from line 40	00 00	43 44 45 48 2 = \$	869. 869. Savings Direct Deposi	00 00 00 00
42 43 44 45 46 47 48 49 49	or used the annualized income method, attach Form 2210N, and check this box 96 Total tax and penalty. Add lines 29 and 41	bothe	42 and 43 43 from line 40	00 00 00	43 44 45 48 2 = \$	869. 869. Savings Direct Deposi	00 00 00 00
42 43 44 45 46 47 48 49 49	Total tax and penalty. Add lines 29 and 41	bothe	of %) 42 and 43 43 from line 40 erally be issued by 1 = Checking 1 est of my knowledge ar LLURI@GMAIL.	00 00 00	43 44 45 48 2 = \$	869. 869. Savings Direct Deposi	00 00 00 00
42 43 44 45 46 47 48 49 49	Total tax and penalty. Add lines 29 and 41. Use tax due on taxable purchases where applicable sales tax was not collected. (see instruction Enter purchases subject to state tax 91 \$	bothe	of %) 42 and 43 43 from line 40 erally be issued by 1 = Checking 1 est of my knowledge ar LLURI@GMAIL.	00 00 00	43 44 45 48 2 = \$	869. 869. Savings Direct Deposi	00 00 00 00
42 43 44 45 46 47 48 49 49	or used the annualized income method, attach Form 2210N, and check this box 96 Total tax and penalty. Add lines 29 and 41	bothe	42 and 43 43 from line 40	00 00 00	43 44 45 48 2 = \$	869. 869. Savings Direct Deposi	00 00 00 00
42 43 44 45 46 47 48 49 49 49 5 6 6 6 6 9 9 9 9 9 9 9 9 9 9 9 9 9 9	or used the annualized income method, attach Form 2210N, and check this box 96 Total tax and penalty. Add lines 29 and 41	bothe bothe bases 8270	42 and 43 43 from line 40	00 00 00	43 44 45 48 2 = \$	869. 869. Savings Direct Deposi	00 00 00 00
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42 43 44 45 46 47 48 49 49 49 Shis relation responses to the second response to the second re	Total tax and penalty. Add lines 29 and 41 Use tax due on taxable purchases where applicable sales tax was not collected. (see instruction instruction in the period of t	bothe bothe bothe Services 827(42 and 43 43 from line 40 erally be issued by 1 = Checking LLURI@GMAIL.	00 00 00	43 44 45 48 2 = \$	869. 869. Savings Direct Deposite true, correct, and comp	00 00 00 00