<b>1040</b>		artment of the Treasury—Internal Revenue Servi S. Individual Income Tax		turn	202	3	OMB No. 1545	-0074	IRS Use O	nly—Do	o not wi	ite or stap	le in this space.
For the year Jan. 1–Dec. 31, 2023, or other tax year beginning					, 2023, ending				, 20 See separate instruction			structions.	
Your first name and middle initial Last na										Your social security number			
MOUNIKA	MOUNIKA PASU				SUMARTHI					0	82	89	0521
	first name and middle initial	name					_			security number			
Home address	(numbe	er and street). If you have a P.O. box, see	instruc	ctions.				A	pt. no.	Pre	esider	ntial Elec	tion Campaign
_12440 AI	LAME I	DA TRACE CIR						1	534				u, or your
City, town, or p	ost offic	ce. If you have a foreign address, also co	mplete	spaces be	low.	Sta	te	ZIP c	ode				bintly, want \$3 d. Checking a
AUSTIN					TX			787	78727 b				ot change
Foreign country name			Foreign province/state/county			ty	Foreign postal code y			your tax or refund.			
											You	i Spouse	
Filing Status	; 🗵	Single					Head of he	ouseh	old (HOH)				
Check only		Married filing jointly (even if only one had income)											
one box.		Married filing separately (MFS)     Qualifying surviving spouse (QSS)											
		ou checked the MFS box, enter the			pouse. If you	l che	ecked the HOH	l or Q	SS box, ei	nter th	ie chil	d's nam	ne if the
	qu	alifying person is a child but not you	ir dep	endent:									
Digital	At an	ny time during 2023, did you: (a) rece	e <mark>ive (</mark> a	s a reward	d, award, or	payr	ment for prope	rty or	services);	or (b)	sell,		
Assets	exch	ange, or otherwise dispose of a digi	tal as	set (or a fi	nancial intere	est ir	n a digital asse	t)? (Se	e instruct	ions.)		<b>Yes</b>	s 🛛 No
Standard	Som	eone can claim: 🗌 You as a de	pende	ent 🗌	Your spouse	e as	a dependent						
Deduction	<u> </u>	Spouse itemizes on a separate retur	n or y	ou were a	dual-status	alien							
Age/Blindnes	s You:	Were born before January 2, 1	959	Are b	lind Spo	ouse	: 🗌 Was bor	n befo	ore Januar	y 2, 19	959	Is	blind
Dependent	s (see	instructions):		(2) 5	Social security	9	(3) Relationsh	ip (4					ee instructions):
If more	(1) Fi	(1) First name Last name			number to you			Child tax credit			t	Credit for	other dependents
than four													
dependents, see instruction	s ——			-						<u> </u>			
and check								_		]			
here	<u> </u>					_						Ţ.,	
Income	1a	Total amount from Form(s) W-2, be				••••	• •	· · ·	•	1a		144,929.	
Attach Form(s)	b	Household employee wages not re							•7	1b	+		
W-2 here. Also attach Forms	C d	Tip income not reported on line 1a								1c 1d			
W-2G and	d	Taxable dependent care benefits for		on Form(s) W-2 (see instructions)					•				
1099-R if tax	e f	Employer-provided adoption bene				•	· · · ·		· · ·	-	1e 1f		
was withheld.	1						•••••••••••••••••••••••••••••••••••••••	• •	· · ·	•		20 ar	
get a Form	g h	Wages from Form 8919, line 6 . Other earned income (see instruct	ions)		· · · ·	• •		• •		•	1g 1h	-	0.
W-2, see	i	Nontaxable combat pay election (s		structions)		• •	· · · · ·	ì		•			
instructions.	z	Add lines 1a through 1h									1z		144,929.
Attach Sch. B	2a	° I	2a		· · · · ·	ь т	axable interest				2b		2,129.
if required.	3a		3a		77.		rdinary divider				3b		100.
	4a		4a				axable amount				4b		
Standard	5a		5a				axable amount				5b		
<ul> <li>Deduction for –</li> <li>Single or</li> </ul>	6a	and the second sec	6a			<b>b</b> Taxable 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	1	3,676.	
<ul> <li>Married filing jointly or</li> </ul>	8	Additional income from Schedule	-					21	8	-	-79,620.		
Qualifying	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7,	1. A.								9		71,214.
\$27,700 <b>10</b> Adjustments to income from Schedule 1, line 26											10		
<ul> <li>Head of household,</li> </ul>	lead of										11		71,214.
<ul> <li>\$20,800</li> <li>If you checked any box under</li> <li>13</li> <li>Gualified business income deduction from Form 8995 or Form 8995-A</li> </ul>									•	12		13,850.	
										13			
Standard Deduction,	14	Add lines 12 and 13							14		13,850.		
see instructions.	15	5 Subtract line 14 from line 11. If zero or less, enter -0 This is your taxable income									15		57 <b>,</b> 364.

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> 🗌 8814	<b>2</b> 4972	3	16	7,753.		
Credits	17	Amount from Schedule 2, line 3				17			
	18	Add lines 16 and 17				18	7,753.		
	19	Child tax credit or credit for other dependents	from Schedu	ıle 8812		19			
	20	Amount from Schedule 3, line 8				20	3.		
	21	Add lines 19 and 20				21	3.		
	22	Subtract line 21 from line 18. If zero or less, er	nter -0			22	7,750.		
	23	Other taxes, including self-employment tax, fro				<b>23</b>	0.		
	24	Add lines 22 and 23. This is your <b>total tax</b> .				24	7,750.		
Payments	25	Federal income tax withheld from:				- 1 0			
	а	Form(s) W-2				513.			
	b	Form(s) 1099			25b				
	C	Other forms (see instructions)			25c		1 510		
	d	Add lines 25a through 25c				<u>25</u> d	1,513.		
If you have a	26	2023 estimated tax payments and amount app			 Let le	26	<u> </u>		
qualifying child, attach Sch. EIC.	27	Earned income credit (EIC)			27				
	28	Additional child tax credit from Schedule 8812			28				
	29	American opportunity credit from Form 8863,			29	$\sim$			
	30	Reserved for future use			30				
	31	Amount from Schedule 3, line 15			31				
	32	Add lines 27, 28, 29, and 31. These are your to		-		32	1,513.		
Refund	33	Add lines 25d, 26, and 32. These are your tota				33	1,515.		
	34 05 o	If line 33 is more than line 24, subtract line 24				34 . 🗌 35a	<u> </u>		
Direct deposit?	35a b	Amount of line 34 you want <b>refunded to you.</b> Routing number $ X   X   X   X   X   X   X   X   X$		c Type:		avings			
See instructions.	b	Account number X X X X X X X X X X				wings			
	36	Amount of line 34 you want applied to your 20			36				
Amount	37	Subtract line 33 from line 24. This is the <b>amou</b>			30				
You Owe	31	For details on how to pay, go to www.irs.gov/l		see instructions		37	6,516.		
	38	Estimated tax penalty (see instructions)			38	279.	.,		
Third Party	Do	you want to allow another person to discu			? See				
Designee		tructions	· · · ·			nplete below.	X No		
Ū		signee's	Phone		al identification				
	na	ne der penalties of perjury. I declare that I have examined t	no.		numbe				
Sign			rer has any knowledge and						
Here			Date	Your occupation	1	ne IRS sent you an Identity			
	10		Jale	Tour occupation		btection PIN, enter it here			
Joint return?				SOFTWARE	DEVELOPER	(see inst.)	(see inst.)		
See instructions. Keep a copy for	Sp	ouse's signature. If a joint return, both must sign.	Date	Spouse's occupa	tion		f the IRS sent your spouse an		
your records.							entity Protection PIN, enter it here be inst.)		
	Ph	one no. (717) 562-9331	Email address	MOUNTRADZ	56@GMAIL.COM		<u> </u>		
		parer's name Preparer's signatur		MOUNTRAFT		PTIN	Check if:		
Paid		4 PRIYA RAM SAGAR GUPTA SYAM PRIYA	02082703						
Preparer		n's name GLOBAL TAXES LLC			03/17/2024 E	Phone no.	(678) 965-9522		
Use Only			ISWICK NJ	J 08816		Firm's EIN	(0107303 3022		
Go to www.irs.au		1040 for instructions and the latest information.		BAA	REV 03/04/24 PRO		Form <b>1040</b> (2023)		
5									