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

20**23** OMB No. 1545-0074

								, 50	mile of otapie in the opace.	
For the year Jar	n. 1–Dec	c. 31, 2023, or other tax year beginning		, 2023, end	ling		, 20	See se	eparate instructions.	
Your first name and middle initial Last n				ame				Your s	Your social security number	
SAKET KU				KUMAR				384	43   1361	
	pouse's	s first name and middle initial	Last na						e's social security number	
Home address	(numbe	er and street). If you have a P.O. box, see	instruct	ions.			Apt. no.	Preside	ential Election Campaign	
UNIT 9,	438	OLD CONNECTICUT PATH							here if you, or your	
City, town, or p	ost offi	ce. If you have a foreign address, also co	mplete s	spaces below.	State		ZIP code		e if filing jointly, want \$3 o this fund. Checking a	
FRAMING	MAH				MA		01701		elow will not change	
Foreign countr	y name		Foreign province/state/cou		county		Foreign postal cod	de your ta	ax or refund.	
									You Spouse	
Filing Status	$\mathbf{x}$	Single				Head of he	ousehold (HOH)			
Check only		Married filing jointly (even if only or	ne had	income)						
one box.		Married filing separately (MFS)				Qualifying	surviving spous	e (QSS)		
		you checked the MFS box, enter the			u check	ed the HOH	l or QSS box, er	nter the ch	nild'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	pavme	nt for prope	rtv or services):	or (b) sell.		
Assets		nange, or otherwise dispose of a digi					-		☐ Yes 🏻 No	
Standard		neone can claim: You as a de					, ,			
Deduction		Spouse itemizes on a separate returi	•			•				
A /D!' I	-	<u> </u>						0.4050		
		: Were born before January 2, 19	959 <u>[</u>	Are blind Spo	ouse:	Was bor	n before Januar	-	☐ Is blind	
Dependent				(2) Social security	'   (	(3) Relationsh	iib İ.,	•	lifies for (see instructions):	
If more	(1) ⊦	(1) First name Last name		number		to you	Child tax	credit	Credit for other dependents	
than four dependents,								]		
see instruction	s							<u>]</u> 1		
and check	, —							<u>]</u> 1		
here L	J	T-t-1	1 /	:					- 120 001	
Income	1a	Total amount from Form(s) W-2, bo	•	,				. 1		
Attach Form(s)	b	Household employee wages not re	-					. 1		
W-2 here. Also attach Forms	C	Tip income not reported on line 1a						. 10		
W-2G and	d	Medicaid waiver payments not reported on Form(s) W-2 (see instructions)						. 10		
1099-R if tax was withheld.	e e	Employer-provided adoption benefits from Form 8839, line 29						. 1		
If you did not	f			·						
get a Form	g h	Wages from Form 8919, line 6.  Other earned income (see instructi	· ·					· 19		
W-2, see	i	Nontaxable combat pay election (s	,			 		. "	· ·	
instructions.	z	Add lines 1a through 1h	366 11131	ructions)		!!		. 1:	z 138,981.	
Attack Cab D		1	2a		 <b>h</b> Ταν:	 able interest	 t	. 2		
Attach Sch. B if required.	3a	'	3a			inary divider		. 3		
	4a		4a			able amoun		. 41		
Standard	5a		5a			able amoun		. 5		
Deduction for— Single or	6a		6a			able amoun		. 6		
Married filing	С	If you elect to use the lump-sum election method, check here (see instructions)								
separately, \$13,850	7	Capital gain or (loss). Attach Schedule D if required. If not required, check here							,	
Married filing jointly or	8	Additional income from Schedule 1, line 10							-13,774.	
Qualifying	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your <b>total income</b>							125,207.	
surviving spouse, \$27,700	10	Adjustments to income from Sche						. 10		
Head of household,	11	Subtract line 10 from line 9. This is						. 1		
\$20,800	12	Standard deduction or itemized	-	-				. 12		
If you checked any box under	13		siness income deduction from Form 8995 or Form 8995-A						3	
Standard Deduction,	14	Add lines 12 and 13						. 1	10.00	
see instructions.	15	Subtract line 14 from line 11. If zer	o or les	ss, enter -0 This is y	our tax	able incom	ne			

		_
<b>T</b> ( )	10	Page <b>2</b>
Tax (see instructions). Check if any from Form(s): 1 8814 2 4972 3	16	20,126.
Amount from Schedule 2, line 3	17	00 106
Add lines 16 and 17	18	20,126.
Child tax credit or credit for other dependents from Schedule 8812	19	
Amount from Schedule 3, line 8	20	
Add lines 19 and 20	21	
Subtract line 21 from line 18. If zero or less, enter -0	22	20,126.
Other taxes, including self-employment tax, from Schedule 2, line 21	23	0.
Add lines 22 and 23. This is your <b>total tax</b>	24	20,126.
Federal income tax withheld from:		
Form(s) W-2		
Form(s) 1099		
Other forms (see instructions)		
Add lines 25a through 25c	25d	26,759.
2023 estimated tax payments and amount applied from 2022 return	26	
Earned income credit (EIC)		
Additional child tax credit from Schedule 8812		
American opportunity credit from Form 8863, line 8		
Reserved for future use		
Amount from Schedule 3, line 15		
Add lines 27, 28, 29, and 31. These are your total other payments and refundable credits	32	
Add lines 25d, 26, and 32. These are your <b>total payments</b>	33	26 <b>,</b> 759.
If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you <b>overpaid</b>	34	6,633.
Amount of line 34 you want <b>refunded to you</b> . If Form 8888 is attached, check here	35a	6,633.
Routing number 0 2 1 0 0 0 0 2 1 c Type: X Checking Savings		
Account number 7 7 3 6 3 5 8 9 8		
Amount of line 34 you want applied to your 2024 estimated tax 36		
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	37	
Estimated tax penalty (see instructions)		
you want to allow another person to discuss this return with the IRS? See ructions	below.	⊠ No
gnee's Phone Personal iden e no. number (PIN)	tification	

	20	<b>20</b> Amount from Schedule 3, line 8							
	21	Add lines 19 and 20							
	22	Subtract line 21 from line 18. If zero or less, enter -0							20,126.
	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	20,126.
<b>Payments</b>	25	Federal income tax withheld	I from:						
	а	Form(s) W-2				25a	26 <b>,</b> 759	9.	
	b	Form(s) 1099				25b			
	С	Other forms (see instructions	s)			25c			
	d	Add lines 25a through 25c						. 25d	26 <b>,</b> 759.
If you have a	26	2023 estimated tax payment	. 26						
qualifying child, attach Sch. EIC. 1	27	Earned income credit (EIC)							
ditacii con. Eic.	28	Additional child tax credit from	m Schedule 8812	2		28			
	29	American opportunity credit	from Form 8863	3, line 8		29			
	30	Reserved for future use							
	31	Amount from Schedule 3, lin							
	32	Add lines 27, 28, 29, and 31. These are your total other payments and refundable credits							
	33	Add lines 25d, 26, and 32. These are your <b>total payments</b>							26,759.
Refund	34	If line 33 is more than line 24						. 34	6,633.
	35a	Amount of line 34 you want			3 is attached, che	ck here	[	35a	6,633.
Direct deposit?	b	Routing number 0 2 1			<b>c</b> Type:	] Checking [	Saving	ıs	
See instructions.	d	Account number 7 7 3							
	36	Amount of line 34 you want a	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	nstructions) .			38			
Third Party Designee		you want to allow another structions	•		rn with the IRS?		Complet	te below.	⊠ No
	De nar	signee's me		Phone no.			ersonal ide umber (PIN	entification I)	
Sign Here	Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.								
TICIC	Yo	Your signature		Date				e IRS sent you an Identity tection PIN, enter it here	
Joint return?					SENIOR SOFTWARE ENGINEER (Se		ee inst.)		
See instructions. Keep a copy for your records.	Sp	Spouse's signature. If a joint return, <b>both</b> must sign.		Date	Spouse's occupat	tion If the IRS sent your spouse Identity Protection PIN, enter (see inst.)			
	Ph	Phone no. (585) 483-4618 Email address SAKET.THEPRINCE@GMAIL.COM							
	Pre	eparer's name	Preparer's signat	ture		Date	PTIN		Check if:
Paid	SYA	YAM PRIYA RAM SAGAR GUPTA SYAM PRIYA RAM SAGAR GUPTA 04/06/2024 P02082					082703	Self-employed	
Preparer	Fir							hone no. (	(678) 965-9522
Use Only	Fir							irm's EIN	84-3171965
Go to www.irs.go	ov/Forn	n1040 for instructions and the late	est information.		BAA	REV 03/07/24 PR	0		Form <b>1040</b> (2023)

Form 1040 (2023)

Tax and Credits

## 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

Attach to Form 1040, 1040-SR, or 1040-NR. Go to www.irs.gov/Form1040 for instructions and the latest information.

Name(s) shown on Form 1040, 1040-SR, or 1040-NR
SAKET KUMAR

Your social security number
384-43-1361

Par	t 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. Att		5	-13,774.
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 (	<u>)</u>	
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> . Ente			46
	1040, 1040-SR, or 1040-NR, line 8		10	-13,774.

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-b	basis government		
	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	The state of the s			
		24c	-	
d		24d	-	
е	Repayment of supplemental unemployment benefits under the Trade Act of 1974	24e		
f	Contributions to section 501(c)(18)(D) pension plans	24f		
g		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			
	tax law violations	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		
25	Total other adjustments. Add lines 24a through 24z		25	
26	Add lines 11 through 23 and 25. These are your <b>adjustments to income</b> .			
	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.)

Attachment

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service

Attach to Form 1040, 1040-SR, 1040-NR, or 1041. Go to www.irs.gov/ScheduleE for instructions and the latest information. Sequence No. 13

Name(s) shown on return Your social security number SAKET KUMAR 384-43-1361 **Income or Loss From Rental Real Estate and Royalties** Part I Note: If you are in the business of renting personal property, use Schedule C. See instructions. If you are an individual, report farm rental income or loss from Form 4835 on page 2, line 40. Did you make any payments in 2023 that would require you to file Form(s) 1099? See instructions . . . . . В 1a Physical address of each property (street, city, state, ZIP code) S/O HRIDAY NARAYAN SINGH BAGHELWAN BIHAR IN 802114 A В C 1b Type of Property **Fair Rental Personal Use** For each rental real estate property listed QJV (from list below) above, report the number of fair rental and **Davs Days** personal use days. Check the QJV box only Α Α 365 0 if you meet the requirements to file as a В В qualified joint venture. See instructions. C C Type of Property: 1 Single Family Residence 3 Vacation/Short-Term Rental 5 Land 7 Self-Rental 8 Other (describe) 2 Multi-Family Residence 4 Commercial 6 Royalties **Properties:** Α В C Income: 624. 3 Rents received . 4 Royalties received . 4 **Expenses:** 5 5 Advertising 6 Auto and travel (see instructions) 6 2,965. 7 7 Cleaning and maintenance . . . 8 Commissions . . . . 8 9 9 Insurance . . . 10 10 Legal and other professional fees 11 11 2,165. 12 12 Mortgage interest paid to banks, etc. (see instructions) 13 13 14 3,415. 14 Repairs . . . . . . . . 15 15 3,965. 16 16 Taxes 17 Utilities . . . . . . . . 17 1,888. 18 18 Depreciation expense or depletion . . . . . . 19 19 Other (list) 20 20 14,398. Total expenses. Add lines 5 through 19 . . . . . 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 -13,774. file Form 6198 . . . . . . . . . . . . . . . . . 21 22 Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions) . . . . . . . . 22 13,774.) 624. 23a Total of all amounts reported on line 3 for all rental properties 23a Total of all amounts reported on line 4 for all royalty properties 23b Total of all amounts reported on line 12 for all properties 23c Total of all amounts reported on line 18 for all properties 23d e Total of all amounts reported on line 20 for all properties . 23e 14,398. 24 **Income.** Add positive amounts shown on line 21. **Do not** include any losses 24 25 Losses. Add royalty losses from line 21 and rental real estate losses from line 22. Enter total losses here 25 13,774. Total rental real estate and royalty income or (loss). Combine lines 24 and 25. Enter the result 26 here. If Parts II, III, and IV, and line 40 on page 2 do not apply to you, also enter this amount on

-13**,**774.

Schedule 1 (Form 1040), line 5. Otherwise, include this amount in the total on line 41 on page 2 ...