1040		artment of the Treasury—Internal Revenue Serv S. Individual Income Tax		turn	202	3	OMB No. 1545-	-0074	IRS Use O	nly—Do no	t write or st	taple in this space.	
For the year Jan	. 1–Dec	c. 31, 2023, or other tax year beginning			, 2023, ending , 20						separate instructions.		
Your first name	and mi	 iddle initial	Last r	name				Your	social se	curity number			
NAVEEN			PER	АМ								2917	
	oouse's	s first name and middle initial	Last r							-		I security number	
Home address	er and street). If you have a P.O. box, see	tions.				A	pt. no.	Presi	dential El	ection Campaigr			
3100 NOF	THS	IDE BLVD						8	107		Check here if you, or your		
City, town, or p	ost offi	ce. If you have a foreign address, also co	omplete	spaces be	paces below. State ZIP				ode		spouse if filing jointly, want \$3 to go to this fund. Checking a		
RICHARDS	ON				TX 7508							not change	
Foreign country	name			Foreign p	rovince/state/	count	ty	Foreig	n postal coc	le your t	tax or ref	_	
											∐ Y	ou Spouse	
Filing Status	X	Single					Head of ho	ouseh	old (HOH)				
Check only		Married filing jointly (even if only o	ne hac	l income)			_						
one box.		□ Married filing separately (MFS) □ Qualifying surviving spouse (QSS)											
		If you checked the MFS box, enter the name of your spouse. If you checked the HOH or QSS box, enter the child's name if the											
	qu	alitying person is a child but not you	ur aepe	endent:									
Digital	At ar	וץ time during 2023, did you: (a) rec	eive (a	s a reward	d, award, or	payr	ment for prope	rty or :	services);	or (b) sel	Ι,		
Assets	exch	ange, or otherwise dispose of a dig	ital ass	set (or a fi	nancial inter	est ir	n a digital asse	t)? (Se	e instruct	ions.)	Y	′es 🛛 No	
Standard	Som	eone can claim: 🗌 You as a de	pende	nt 🗌	Your spous	e as	a dependent						
Deduction		Spouse itemizes on a separate retur	n or yo	ou were a	dual-status	alien	۱						
Age/Blindness	You	: 🗌 Were born before January 2, 1	959	Are b	lind Spo	ouse	: 🗌 Was bor	n befc	ore Januar	y 2, 1959		ls blind	
Dependents	s (see	instructions):		(2)	Social security	,	(3) Relationshi	ip (4) Check the	box if qu	alifies for	(see instructions):	
-				number to you				Child tax	credit	Credit f	or other dependents		
than four													
and check	, 										_		
here 🗌													
Income	1a										1a	142,894.	
Attach Form(s)											1b		
W-2 here. Also		c Tip income not reported on line 1a (see instructions)								1c			
W-2G and										1d			
1099-R if tax		•			-			• •		-	1e		
								• •			1f 1g		
get a Form											ig 1h	0.	
			,							•			
			000 110								1z	142,894.	
Attach Sch. B		-	2a			bТ	axable interest				2b	1,041.	
if required.						b C	Ordinary divider	nds .			3b		
	4a	IRA distributions	4a				axable amount				4b		
	5a	Pensions and annuities	5a			bТ	axable amount	t		. 4	5b		
 Single or 	6a	Social security benefits	6a				axable amount				6b		
Married filing separately,	с	If you elect to use the lump-sum e	lection	n method,	check here	(see	instructions)						
\$13,850	7	Capital gain or (loss). Attach Sche	dule D	if require	d. If not requ	uired	, check here				7		
jointly or	8									. L	8	-14,340.	
surviving spouse,	9				our total ind	come	e			. L	9	129,595.	
\$27,700	10									· [-	10		
household,	11		-								11	129,595.	
If you checked	12										12	13,850.	
any box under Standard	13		ion fro	m Form 8	995 or Form	899	95-A				13		
City, town, or post office. If you have a foreign address, also complete spaces below. RICHARDSON Foreign country name Foreign province/st. Filing Status Single Check only Married filing jointly (even if only one had income) one box. Married filing separately (MFS) If you checked the MFS box, enter the name of your spouse. If qualifying person is a child but not your dependent: Digital At any time during 2023, did you: (a) receive (as a reward, award, Assets Assets someone can claim: You as a dependent Your spot Deduction Someone can claim: You as a dependent Your spot Age/Blindness You: Were born before January 2, 1959 Are blind Dependents (see instructions): (1) First name Last name number than four dependents, see instructions) Household employee wages not reported on Form(s) W-2, box 1 (see instructions) Household employee wages not reported on Form(s) W-2, see instructions. the duriad vaiver payments not reported on Form 8339, line if you did not get a Form Medicaid waiver payments not reported on Form 8339, line if required. You did not get a Form the Other earned income (see instructions). Add lines 1a through 1h </td <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>14 15</td> <td>13,850.</td>							14 15	13,850.					
	15	Subtract line 14 from line 11. If zero or less, enter -0 This is your taxable income										115,745.	

For Disclosure, Privacy Act, and Paperwork Reduction Act Notice, see separate instructions.

Form **1040** (2023)

Form 1040 (2023	5)								Page 2
Tax and	16	Tax (see instructions). Check	if any from Form	(s): 1 🗌 881	4 2 4972	3		16	21,179.
Credits	17	Amount from Schedule 2, lin	e3					17	
	18	Add lines 16 and 17					[18	21,179.
	19	Child tax credit or credit for	other dependent	ts from Sched	ule 8812			19	
	20	Amount from Schedule 3, lin	e8					20	
	21	Add lines 19 and 20						21	
	22	Subtract line 21 from line 18	. If zero or less,	enter -0			[22	21,179.
	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	21,179.
Payments	25	Federal income tax withheld							
,	а	Form(s) W-2				25a 22	,015.		
	b	Form(s) 1099				25b			
	с	Other forms (see instructions	s)			25c			
	d	Add lines 25a through 25c	<i>.</i>					25d	22,015.
If you have a	26	2023 estimated tax payment	s and amount a	pplied from 20	22 return		[26	
qualifying child,	27	Earned income credit (EIC)				27			
attach Sch. EIC.	28	Additional child tax credit fror				28			
	29	American opportunity credit	from Form 8863	, line 8		29			
	30	Reserved for future use .		-		30			
	31	Amount from Schedule 3. lin				31			
	32	Add lines 27, 28, 29, and 31						32	
	33	Add lines 25d, 26, and 32. T						33	22,015.
Refund	34	If line 33 is more than line 24						34	836.
norana	35a	Amount of line 34 you want	-			, ,	. П İ	35a	836.
Direct deposit?	b	Routing number 1 1 1					Savings		
See instructions.	d	Account number 4 8 8							
	36	Amount of line 34 you want a							
Amount	37	Subtract line 33 from line 24	•••••			36			
You Owe	57	For details on how to pay, g						37	
	38	Estimated tax penalty (see in				38			
Third Party		you want to allow another							
Designee		structions	•				omplete be	elow.	🗙 No
_ • • • . j •	De	signee's		Phone		Pers	onal identific	cation	
	nai			no.			oer (PIN)		
Sign		der penalties of perjury, I declare the							
Here		belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which							, .
	Yo	ur signature		Date	Your occupation				, ,
Joint return?					SOFTWARE	ENGINEER	(see in		
See instructions.	Sp	ouse's signature. If a joint return, i	ooth must sign.	Date	Spouse's occupat		If the I	RS sen	t your spouse an
Keep a copy for	- 1-	,					Identit	ty Prote	836.
your records.							(see in	ist.)	
	Ph	one no. (945) 527-068	5	Email address	PERAM.NAVE	EN12@GMAIL.CO	M		
Paid	Pre	eparer's name	Preparer's signat	ure		Date	PTIN	T	Check if:
Preparer	SYA	M PRIYA RAM SAGAR GUPTA	SYAM PRIY	a ram sac	GAR GUPTA	04/05/2024	P02082	703	Self-employed
Use Only	Fir	m's name GLOBAL TAX	XES LLC				Phone	∍no. (678)965-9522
	Fir	m's address 245 ROONE	Y CT E BRU	NSWICK N	J 08816		Firm's	EIN	84-3171965
Go to www.irs.go	ov/Forn	n1040 for instructions and the late	st information.		BAA	REV 03/07/24 PRO			Form 1040 (2023)

SCHEDULE	1
(Form 1040)	

Department of the Treasury

Additional Income and Adjustments to Income

Attach to Form 1040, 1040-SR, or 1040-NR.

Go to www.irs.gov/Form1040 for instructions and the latest information.

OMB No. 1545-0074

202 23 Attachment Sequence No. **01** Your social security number

Internal Revenue Service	
Name(s) shown on Fo	orm 1040, 1040-SR, or 1040-NR
NAVEEN PERAM	

Tour socia	al security r
685-42-	-2917

Part 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. Attach Schedule E	5	-14,340.
6	Farm income or (loss). Attach Schedule F.	6	
7	Unemployment compensation	7	
8	Other income:		
а	Net operating loss)	
b	Gambling		
С	Cancellation of debt		
d	Foreign earned income exclusion from Form 2555 8d ()	
е	Income from Form 8853		
f	Income from Form 8889		
g	Alaska Permanent Fund dividends		
h	Jury duty pay		
i	Prizes and awards		
j	Activity not engaged in for profit income		
k	Stock options		
1	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)		
n	Section 951(a) inclusion (see instructions)		
ο	Section 951A(a) inclusion (see instructions)		
р	Section 461(I) excess business loss adjustment		
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)	
t	Pension or annuity from a nonqualifed deferred compensation plan or		
	a nongovernmental section 457 plan		
u	Wages earned while incarcerated		
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 here and on Form		
	1040, 1040-SR, or 1040-NR, line 8	10	-14,340.
For Pa	perwork Reduction Act Notice, see your tax return instructions.	Schedu	le 1 (Form 1040) 2023

otice, see your ta aperwo retu Schedule 1 (Form 1040) 2023

Par	t II Adjustments to Income		
11	Educator expenses	11	
12	Certain business expenses of reservists, performing artists, and fee-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	Jury duty pay (see instructions)		
b	Deductible expenses related to income reported on line 8I 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		
h	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 on		
	Form 1040, 1040-SR, or 1040-NR, line 10	26	
	BAA REV 03/07/24 PRO	Schedule	1 (Form 1040) 2023

SCHEDULI	ΞE
(Form 1040)	

Supplemental Income and Loss

OMB No. 1545-0074

(From rental real estate, royalties, partnerships, S corporations, estates, trusts, REMICs, etc.)

De Int

Attach to Form 10/0, 10/0-SP, 10/0-NP, or 10/1

2023
Attachment Sequence No. 13

	nent of the Treasury Revenue Service		Go to www.irs.gov/ScheduleE fo		,			nformation.		Attachme Sequenc	ent ce No. 13	
ame(s)) shown on return								Your soci	ial security n	number	
AVE	EN PERAM								685-4	2-2917		
Part			s From Rental Real Estate a									
	Note: If you a	ire in t	he business of renting personal prope	erty, use	Schedule	c . See	e instru	ctions. If you a	are an indi	vidual, repo	ort farm	
			ss from Form 4835 on page 2, line 40			0000 0		-+				
			ents in 2023 that would require you									
			ou file required Form(s) 1099?							. <u> </u>	s 🗌 No	
1a	Physical address	s of e	ach property (street, city, state, Z	IP cod	e)							
Α	19-1678, 3R	D FI	OOR, 4TH LE POSTALCOLO	NY T	IRUPATI	AND	HRA	PRADESH	IN 517	501		
В												
С												
1b	Type of Property	2	For each rental real estate prop	erty lis	ted		Fa	air Rental	Personal Use		QJV	
	(from list below)		above, report the number of fair					Days	Da	ays	QJV	
Α	3		personal use days. Check the C			Α		365		0		
В			if you meet the requirements to qualified joint venture. See instr			В						
С			quained joint venture. See instr	uctions	5.	С						
pe	of Property:								·	· · · ·		
1	Single Family Resi	dence	e 3 Vacation/Short-Term Re	ntal	5 Land	l	7	Self-Rental				
	Multi-Family Resid				6 Roya	alties	8	Other (desc	ribe)			
	•				-							
						•		Propert	les:	1	С	
com				0		<u>A</u>	572.	В				
3				3		Ċ)/2.			<u> </u>		
4		a		4								
-	ises:			-								
5	•			5								
6			structions)	6								
7	-		ance	7		2,6	578.			<u> </u>		
8				8								
9				9								
0			sional fees	10								
1	-			11		2,1	50.					
2		-	to banks, etc. (see instructions)	12								
3				13								
4	-			14			396.					
5				15		2,3	861.					
6				16								
7				17			287.					
8		ense	or depletion	18		2,6	540.					
9	Other (list)			. 19								
20			nes 5 through 19	20		15,0)12.					
21			ne 3 (rents) and/or 4 (royalties). If									
			structions to find out if you must			1						
_				21	-	-14,3	\$40.			<u> </u>		
2			estate loss after limitation, if any,									
	-		tructions)	22	(14,34		()	(
3a			ported on line 3 for all rental prop				23a		672.	-		
b			ported on line 4 for all royalty pro	-			23b			-		
С			ported on line 12 for all properties				23c			-		
d			ported on line 18 for all properties				23d		2,640.			
е			ported on line 20 for all properties				23e	15	5,012.			
24			amounts shown on line 21. Do no		-							
25	Losses. Add royal	ty los	ses from line 21 and rental real esta	te loss	es from lin	e 22. E	inter to	otal losses her	re 25	(1	L4 , 340.	

26 Total rental real estate and royalty income or (loss). Combine lines 24 and 25. Enter the result here. If Parts II, III, and IV, and line 40 on page 2 do not apply to you, also enter this amount on Schedule 1 (Form 1040), line 5. Otherwise, include this amount in the total on line 41 on page 2 -14,340. NPA For Paperwork Reduction Act Notice, see the separate instructions.