

Department of the Treasury Internal Revenue Service

Calendar Year — Due **04/15/2024**  2024 Form 1040-ES Payment Voucher 1

File only if you are making a payment of estimated tax by check or money order. Mail this voucher with your check or money order payable to the **United States Treasury**. Write your social security number and "2024 Form 1040-ES' on your check or money order. Do not send cash. Enclose, but do not staple or attach, your payment with this voucher.

Amount of estimated tax you are paying by check or money order.....

863.

REV 03/07/24 PRO

1555

323-57-2130 ANUJ KUMAR VERMA

951 18TH STREET SOUTH APT 201 BIRMINGHAM AL 35205



Department of the Treasury Internal Revenue Service

Calendar Year — Due **06/17/2024** 

2024 Form 1040-ES Payment Voucher 2

File only if you are making a payment of estimated tax by check or money order. Mail this voucher with your check or money order payable to the **United States Treasury**. Write your social security number and "2024 Form 1040-ES' on your check or money order. Do not send cash. Enclose, but do not staple or attach, your payment with this voucher.

Amount of estimated tax you are paying by check or money order.....

863.

REV 03/07/24 PRO

1555

323-57-2130 ANUJ KUMAR VERMA

951 18TH STREET SOUTH APT 201 BIRMINGHAM AL 35205



Department of the Treasury Internal Revenue Service

Calendar Year — Due **09/16/2024**  2024 Form 1040-ES Payment Voucher 3

File only if you are making a payment of estimated tax by check or money order. Mail this voucher with your check or money order payable to the **United States Treasury**. Write your social security number and "2024 Form 1040-ES' on your check or money order. Do not send cash. Enclose, but do not staple or attach, your payment with this voucher.

Amount of estimated tax you are paying by check or money order.....

863.

REV 03/07/24 PRO

1555

323-57-2130 ANUJ KUMAR VERMA

951 18TH STREET SOUTH APT 201 BIRMINGHAM AL 35205



Department of the Treasury Internal Revenue Service

Calendar Year — Due **01/15/2025** 

2024 Form 1040-ES Payment Voucher 4

File only if you are making a payment of estimated tax by check or money order. Mail this voucher with your check or money order payable to the **United States Treasury**. Write your social security number and "2024 Form 1040-ES' on your check or money order. Do not send cash. Enclose, but do not staple or attach, your payment with this voucher.

Amount of estimated tax you are paying by check or money order.....

863.

REV 03/07/24 PRO

1555

323-57-2130 ANUJ KUMAR VERMA

951 18TH STREET SOUTH APT 201 BIRMINGHAM AL 35205

Form 1040-V (2022) 2023 Page **2** 

IF you live in	THEN use this address to send in your payment
Alabama, Florida, Georgia, Louisiana, Mississippi, North Carolina, South Carolina, Tennessee, Texas	Internal Revenue Service P.O. Box 1214 Charlotte, NC 28201-1214
Arkansas, Connecticut, Delaware, District of Columbia, Illinois, Indiana, Iowa, Kentucky, Maine, Maryland, Massachusetts, Minnesota, Missouri, New Hampshire, New Jersey, New York, Oklahoma, Rhode Island, Vermont, Virginia, West Virginia, Wisconsin	Internal Revenue Service P.O. Box 931000 Louisville, KY 40293-1000
Alaska, Arizona, California, Colorado, Hawaii, Idaho, Kansas, Michigan, Montana, Nebraska, Nevada, New Mexico, North Dakota, Ohio, Oregon, Pennsylvania, South Dakota, Utah, Washington, Wyoming	Internal Revenue Service P.O. Box 802501 Cincinnati, OH 45280-2501
A foreign country, American Samoa, or Puerto Rico (or are excluding income under Internal Revenue Code section 933), or use an APO or FPO address, or file Form 2555 or 4563, or are a dual-status alien or nonpermanent resident of Guam or the U.S. Virgin Islands	Internal Revenue Service P.O. Box 1303 Charlotte, NC 28201-1303

MAIL FORM 1040-V TO THE INTERNAL REVENUE SERVICE CENTER AT THE ADDRESS LISTED BELOW.

Form **1040-V** 2023

▼ Detach Here and Mail With Your Payment and Return ▼

Department of the Treasury Internal Revenue Service

2023

# Form 1040-V Payment Voucher

► Use this voucher when making a payment with Form 1040.

- Do not staple this voucher or your payment to Form 1040.
- ► Make your check or money order payable to the 'United States Treasury.'
- ► Write your social security number (SSN) on your check or money order.

Enter the amount of your payment ...... 

REV 03/07/24 PRO 1555

ANUJ KUMAR VERMA

951 18TH STREET SOUTH 201 BIRMINGHAM AL 35205

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

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

					0.0.2		., 50	ino or otapio iii tino opaco.
For the year Jar	n. 1–Dec	c. 31, 2023, or other tax year beginning		, 2023, end	ing	, 20	See se	parate instructions.
Your first name	and m	iddle initial	Last na	ame			Your so	cial security number
ANUJ KUI	MAR		VERM	ИA			323	57   2130
If joint return, s	pouse's	s first name and middle initial	Last na	ame			Spouse'	s social security number
Home address	(numbe	er and street). If you have a P.O. box, see	instructi	ions.		Apt. no.	Preside	ntial Election Campaign
		REET SOUTH			1	201		nere if you, or your
City, town, or p	oost offi	ce. If you have a foreign address, also co	mplete s	spaces below.	State	ZIP code		if filing jointly, want \$3 this fund. Checking a
BIRMING					AL	35205	box bel	ow will not change
Foreign countr	y name			Foreign province/state/o	county	Foreign postal code	your tax	or refund.
		1				1 11 11 11 11		You Spouse
Filing Status	S	Single				ousehold (HOH)	D. 1	
Check only		Married filing jointly (even if only or	(000)	,				
one box.	f ,	Married filing separately (MFS) ou checked the MFS box, enter the	nama	of value analysis. If you		surviving spouse		ld'a nama if tha
	-	alifying person is a child but not you		adont:		n or QSS box, em	er the chi	ia s name ii ine
Digital		ny time during 2023, did you: (a) rece	-					
Assets		lange, or otherwise dispose of a digi					ons.)	☐ Yes ⊠ No
Standard Deduction		eone can claim: You as a de		The spinish at a processor	e as a dependent			
Deduction		Spouse itemizes on a separate retur	n or you	u were a dual-status a	alleri			
Age/Blindnes	s You	: Were born before January 2, 1	959	Are blind Spo	ouse: Was bo	rn before January	2, 1959	☐ Is blind
Dependent	<b>s</b> (see	instructions):		(2) Social security		iib	ĺ	fies for (see instructions):
If more	(1) F	irst name Last name		number	to you	Child tax	credit	Credit for other dependents
than four dependents,								
see instruction	s							
and check	1					<u> </u>		
here L		T-1-1	4 /					
Income	1a	Total amount from Form(s) W-2, be					. 1a	
Attach Form(s)	b	Household employee wages not re Tip income not reported on line 1a					. 1b	
W-2 here. Also attach Forms	d	Medicaid waiver payments not rep			netructions)		. 1d	
W-2G and	e	Taxable dependent care benefits f			istructions,		. 1e	
1099-R if tax was withheld.	f	Employer-provided adoption bene					. 1f	
If you did not	g	Wages from Form 8919, line 6 .					. 1g	
get a Form	h	Other earned income (see instructi	ions)				. 1h	
W-2, see instructions.	i	Nontaxable combat pay election (s		ructions)	1	i		
	Z	Add lines 1a through 1h					. 1z	51,259.
Attach Sch. B	2a	Tax-exempt interest	2a		<b>b</b> Taxable interes	st	. 2b	
if required.	3a	Qualified dividends	3a		<b>b</b> Ordinary divide	ends	. 3b	
	4a	IRA distributions	4a		<b>b</b> Taxable amour	nt	. 4b	
Standard Deduction for—	5a	Pensions and annuities	5a		<b>b</b> Taxable amour	nt	. 5b	(
Single or	6a	Social security benefits	6a		<b>b</b> Taxable amour	nt	. 6b	
Married filing separately,	С	If you elect to use the lump-sum e						
\$13,850 Married filing	7	Capital gain or (loss). Attach Scheo						
jointly or	8	Additional income from Schedule					. 8	-6,837.
Qualifying surviving spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7,					. 9	44,422.
\$27,700 Head of	10	Adjustments to income from Sche					. 10	
household, \$20,800	11	Subtract line 10 from line 9. This is					. 11	
If you checked	12	Standard deduction or itemized		•	1.5		. 12	
any box under Standard	13	Qualified business income deducti	ion tron	1 Form 8995 or Form	вучо-A		. 13	+
Deduction, see instructions.	14 15	Add lines 12 and 13 Subtract line 14 from line 11. If zer	· ·		our taxable incom		. 14	
	10	Subtract line 14 from line 11. If Zer	o or ies	oo, enner -u Tills is yo	our <b>taxable incon</b>	ne	.   15	30,572.

Form 1040 (2023	3)			Page <b>2</b>
Tax and	16	Tax (see instructions). Check if any from Form(s): 1  8814  2  4972  3	16	3,449.
Credits	17	Amount from Schedule 2, line 3	17	
0.00.10	18	Add lines 16 and 17	18	3,449.
	19	Child tax credit or credit for other dependents from Schedule 8812	19	3,113.
	20	Amount from Schedule 3, line 8	20	
	21	Add lines 19 and 20	21	
	22	Subtract line 21 from line 18. If zero or less, enter -0	22	3,449.
	23	Other taxes, including self-employment tax, from Schedule 2, line 21	23	0.
	24	Add lines 22 and 23. This is your <b>total tax</b>	24	3,449.
Payments	25	Federal income tax withheld from:		
,	а	Form(s) W-2		
	b	Form(s) 1099		
	С	Other forms (see instructions)		
	d	Add lines 25a through 25c	25d	
f you have a	26	2023 estimated tax payments and amount applied from 2022 return	26	
qualifying child, attach Sch. EIC.	27	Earned income credit (EIC)		
allacii Scii. Eic.	28	Additional child tax credit from Schedule 8812		
	29	American opportunity credit from Form 8863, line 8		
	30	Reserved for future use		
	31	Amount from Schedule 3, line 15		
	32	Add lines 27, 28, 29, and 31. These are your <b>total other payments and refundable credits</b>	32	
	33	Add lines 25d, 26, and 32. These are your <b>total payments</b>	33	
Refund	34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you <b>overpaid</b>	34	
	35a	Amount of line 34 you want <b>refunded to you</b> . If Form 8888 is attached, check here	35a	
Direct deposit? See instructions.	b	Routing number X X X X X X X X X X X C Type: Checking Savings		
oce manuchons.	d	Account number   X   X   X   X   X   X   X   X   X		
	36	Amount of line 34 you want applied to your 2024 estimated tax		
Amount	37	Subtract line 33 from line 24. This is the <b>amount you owe</b> .		0.600
You Owe	_=	For details on how to pay, go to www.irs.gov/Payments or see instructions	37	3,609.
	38	Estimated tax penalty (see instructions)		
Third Party		you want to allow another person to discuss this return with the IRS? See tructions	alow	⊠ No
Designee		signee's Phone Personal identif		ĭ NO
	nar		Callon	
Sign		der penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the		
Here	bel	ief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which		, ,
11010	You			nt you an Identity
loint roturn?		POSTDOCTORAL FELLOW (see i		N, enter it here
Joint return? See instructions.	Sne	TOSTBOCTORAL FELLOW V		nt your spouse an
Keep a copy for	Op	Ident	ity Prote	ection PIN, enter it here
your records.		(see i	nst.)	
	Pho	one no. (205) 860-8317 Email address ANUJVERMABIOTECH@GMAIL.COM		

Go to www.irs.gov/Form1040 for instructions and the latest information.									
USE Office	Firm's address	245	ROONEY	CT	E BRUN	SWICK	NJ	08816	
Preparer Use Only	Firm's name	GLOE	BAL TAX	ES L	LC				
Droporor	SYAM PRIYA RA	AM SAGA	R GUPTA S	SYAM	PRIYA	RAM	SAGA	R GUP'I	

Preparer's signature

SYAM PRIYA RAM SAGAR GUPTA SYAM PRIYA RAM SAGAR GUPTA

Preparer's name

**Paid** 

04/04/2024

PTIN

P02082703

Firm's EIN

Date

Self-employed

Check if:

Phone no. (678) 965-9522

### 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
ANUJ KUMAR VERMA

Your social security number
323-57-2130

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	ach Schedule E .	5	<b>-8,</b> 133.
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:  Other Income from box 3 of 1099-Misc 1,296.			
	Other Income from box 3 of 1099-Misc 1,296.	<b>8z</b> 1,296.		
9	Total other income. Add lines 8a through 8z		9	1,296.
10	Combine lines 1 through 7 and 9. This is your <b>additional income</b> . Enter	r here and on Form		
	1040, 1040-SR, or 1040-NR, line 8		10	-6 <b>,</b> 837.

Schedule 1 (Form 1040) 2023 Page **2** 

#### Part II Adjustments to Income 11 11 12 Certain business expenses of reservists, performing artists, and fee-basis government 12 13 13 14 Moving expenses for members of the Armed Forces. Attach Form 3903 . . . . . 14 Deductible part of self-employment tax. Attach Schedule SE . . . . . . . . . . . 15 15 16 16 17 17 18 18 19a 19a Date of original divorce or separation agreement (see instructions): 20 20 21 Student loan interest deduction . . . . . . . . 21 22 22 23 Archer MSA deduction . . . . . 23 24 Other adjustments: Jury duty pay (see instructions) . . . . . . . . . . . . . . . . 24a **b** Deductible expenses related to income reported on line 8l from the c Nontaxable amount of the value of Olympic and Paralympic medals Reforestation amortization and expenses . . . . . . 24d Repayment of supplemental unemployment benefits under the Trade 24e Contributions to section 501(c)(18)(D) pension plans . . . 24f Contributions by certain chaplains to section 403(b) plans . . . **24g** h Attorney fees and court costs for actions involving certain unlawful 24h Attorney fees and court costs you paid in connection with an award from the IRS for information you provided that helped the IRS detect **24i 24**j k Excess deductions of section 67(e) expenses from Schedule K-1 (Form 24k **z** Other adjustments. List type and amount: 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 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.
Go to www.irs.gov/ScheduleE for instructions and the latest information.

OMB No. 1545-0074

2023

Attachment Sequence No. 13

Department of the Treasury Internal Revenue Service Name(s) shown on return

Your social security number

ANU	J KUMAR VERMA								323-	57-2130	)
Part	Note: If you a	re in the bus	m Rental Real Es iness of renting person Form 4835 on page 2	al property,		<b>e C</b> . See	e instrud	ctions. If you a	are an inc	dividual, rep	oort farm
			2023 that would req								
В	f "Yes," did you or	will you file	required Form(s) 10	99?						. 🗌 Ye	es 🗌 No
1a	Physical address	s of each pr	operty (street, city, s	state, ZIP co	ode)						
Α	H NO 23. F	ATZULLAG	ANJ THE NAWAB	GANJ BAF	RABANKT.	TJTTA	R PR	ADESH IN	22500	)1	7
В	11 110. 20, 11		1110 1111 111111111	OINTO DIN		01111		111	2200		
C											
1b	Type of Property (from list below)	abov	each rental real estate ve, report the number	er of fair ren	tal and			ir Rental Days		nal Use ays	QJV
A	3		onal use days. Chec u meet the requirem			Α		365		0	
В			ified joint venture. Se			В					
C			erraner and granteness is the supplemental service		ercologication of the	C					
1	of Property: Single Family Resid Multi-Family Resid		3 Vacation/Short-Te 4 Commercial	erm Rental	5 Land			Self-Rental Other (desci			
						-		Properti	es:		
Incon						Α	594.	В			С
3 4					4	5	94.				
	•	J			*						
Exper 5 6	Advertising				5		1				
7					7	1,0	23.				
8	-				3						
9					9						
10			fees		0						
11					1	8	374.				
12	Mortgage interest	paid to ba	nks, etc. (see instruc	tions) 1	2						
13	Other interest .			1	3						
14	Repairs			1	4	2,6	35.				
15	Supplies			1	5	2,9	965.				
16	Taxes			1	6						
17	Utilities				7	1,2	230.				
18	Depreciation expe	ense or dep	letion	1	8						
19					9						
20			hrough 19		.0	8,7	727.				
21	result is a (loss), s	see instruct	rents) and/or 4 (royal ions to find out if yo	u must	:1	-8,1	.33.				
22			loss after limitation, ns)	if any,	22 (	8,13	33.)	(		)(	
23a	Total of all amoun	nts reported	on line 3 for all rent	al propertie	s		23a		594.		
b			on line 4 for all roya				23b				
С	Total of all amoun	nts reported	on line 12 for all pro	perties .			23c				
d	Total of all amoun	nts reported	on line 18 for all pro	operties .			23d				
е	Total of all amoun	nts reported	on line 20 for all pro	operties .			23e	8	727.		
24			its shown on line 21								
25	Losses. Add royalt	ty losses fro	m line 21 and rental r	eal estate lo	sses from li	ne 22. E	inter to	tal losses her	e <b>25</b>	(	8,133.
26			royalty income or								
	nere. It Parts II. II	II. and IV. a	nd line 40 on page	ン do not a	uov ot viad	. also e	enter th	ns amount c	n I		

26

-8,133.

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

40 2023 Alabama Individual Income Tax Return





RESIDENTS & PART-YEAR RESIDENTS For the year Jan. 1 - Dec. 31, 2023, or other tax year: Beginning: Ending: Your social security number Spouse's SSN if joint return 323-57-2130 Check if primary is deceased Check if spouse is deceased Primary's deceased date (mm/dd/yyyy) Spouse's deceased date (mm/dd/yyyy) Initial • ANUJ KUMAR VERMA Spouse's first name ► CHECK BOX IF AMENDED RETURN • Present home address (number and street or P.O. Box number) • 951 18TH STREET SOUTH 201 City, town, or post office ZIP code Foreign Country Check if address BIRMINGHAM •35205 is outside U.S. Filing Status/ 1 • X \$1,500 Single \$1,500 Married filing separate. Complete Spouse SSN • NRA **Exemptions** 4 • \$3,000 Head of Family (with qualifying person). Complete Schedule HOF 2 • \$3,000 Married filing joint **5a** Alabama Income Tax Withheld (from Schedule W-2, line 18, column G) . . . . . . . . . A - Alabama tax withheld B - Income **5b** Wages, salaries, tips, etc. (from Schedule W-2, line 18, column I plus J):..... 5a • 5b 51,259 Income 6 Interest and dividend income (also attach Schedule B if over \$1,500) ...... 6 and 7 Other income (from page 2, Part I, line 8)..... 7 -6,837 Adjustments 8 Total income. Add amounts in the income column for line 5b through line 7 ...... 8 44,422 9 Total adjustments to income (from page 2, Part II, line 16) 9 10 Adjusted gross income. Subtract line 9 from line 8..... 10 44,422 11 Box a or b MUST be checked. Check box a, if you itemize deductions, and enter amount from Schedule A, line 27. **Deductions** Check box b. If you do not itemize deductions, and enter standard deduction (see instructions) If claiming a deduction on line 12, you must attach page 1,2 and Schedule 1 of your Federal Re-• a Itemized Deductions • b X Standard Deduction ....... 2,500 12 Federal tax deduction (see instructions) DO NOT ENTER THE FEDERAL TAX WITHHELD FROM YOUR FORM W-2(S) 12 3,449 turn, if applicable. 13 1,500 14 Dependent exemption (from page 2, Part III, line 2)..... **Total deductions.** Add lines 11, 12, 13, and 14..... 15 7,449 Taxable income. Subtract line 15 from line 10 36**,**973 Income Tax due. Enter amount from tax table or check if from • Form NOL-85A ..... 17 1,808 Tax Net tax due Alabama. Check box if computing tax using Schedule OC • , otherwise enter amount from line 17.... 18 1,808 Additional taxes (from Schedule ATP, Part I, Line 3) ...... 19 Staple Form(s) W-2, 19 0 W-2G, and/or 1099 Alabama Election Campaign Fund. You may make a voluntary contribution to the following: here. Attach Scheda Alabama Democratic Party \$1 \$2 none..... 20a ule W-2 to return. **b** Alabama Republican Party \$1 \$2 none.... 21 Total tax liability and voluntary contribution. Add lines 18, 19, 20a, and 20b ..... 1,808 22 . 2023 estimated tax payments/Automatic Extension Payment ..... 23 24 **Payments** Refundable Credits. Enter the amount from Schedule OC, Section F, line F4 . . . Total payments. Add lines 22, 23, 24, 25, and 26. 27 2,315 28 Amended Returns Only — Previous refund (see instructions) 28 29 Adjusted Total Payments. Subtract line 28 from line 27 ..... 29 2,315 If line 21 is larger than line 29, subtract line 29 from line 21, and add line 31 and enter AMOUNT YOU OWE. **AMOUNT** Place payment, along with Form 40V, loose in the mailing envelope. (FORM 40V MUST ACCOMPANY PAYMENT.) 30 YOU OWE 32 If line 29 is larger than line 21, subtract line 21 from line 29, and enter AMOUNT OVERPAID 32 507 **OVERPAID Donations** Total Donation Check-offs from Schedule DC, line 2..... 35 REFUNDED TO YOU. (CAUTION: You must sign this return on the reverse side.) **REFUND** If line 32 is greater than zero, subtract lines 31, 33, and 34 from line 32 ......

507

35

For Direct Deposit, check here • X and complete Part V, Page 2.



PARTI	1	Alimony received				1 •	
	2	Business income or (loss) (attach Federal Schedule C or C-Ea	Z) (see instructions)			2 •	
	3	Gain or (loss) from sale of Real Estate, Stocks, Bonds, etc. (a	ttach Schedule D)			3 •	
Other	4	Retirement Income (attach Schedule RS)				4 •	
Income	5	Rents, royalties, partnerships, estates, trusts, etc. (attach Sch	edule E)			5 •	-8,133
(See	6	Farm Income or (loss) (attach Federal Schedule F)				6 •	
instructions)	7	Other income (state nature and source — see instructions) $\_$				7 •	1,296
	8	Total other income. Add lines 1 through 7. Enter here and al	so on page 1, line 7			8 •	-6,837
PART II		Your IRA deduction				1a •	
	b	Spouse's IRA deduction				1b •	
	2	Payments to a Keogh retirement plan and self-employment St	EP deduction			2	
	3	Penalty on early withdrawal of savings				3	
	4	Alimony paid. Recipient's last name		SSN •		4	
A .P L L.	5	Adoption expenses		<mark></mark>		5	
Adjustments to Income	6	Moving Expenses (Attach Federal Form 3903) to:					
(See			State ZIP			6 •	
instructions)	7	Self-employed health insurance deduction				7 •	
	8	Payments to Alabama College Counts 529 Fund or Alabama I	-			8 •	
	9	Health insurance deduction for small employer employee (see				9 •	
	10	Costs to retrofit or upgrade home to resist wind or flood dama				10 •	
	11	Deposits to a catastrophe savings account				11 •	
	12	Contributions to a health savings account				12 •	
	13	Deposits to an Alabama First-Time and Second Chance Home	,			13 •	
	14	Firefighter's Insurance Premium				14 •	
	15	Contributions to an Achieving a Better Life Experience (ABLE)	-			15 •	
	16	Total adjustments. Add lines 1 through 15. Enter here and als				16 •	
PART III	1	Total number of dependents from Schedule DS, line 1b				1 •	
Dependents	2	Amount allowed. Multiply total number of dependents claime					
		in the instructions. Enter amount here and on page 1, line 14				2	
PART IV	1	Residency Check only one box ▶ ● 🗶 Full Year • [			2023 throug		2023.
General	2	Did you file an Alabama income tax return for the year 2022?	● Yes • X	No If no, state reason $\underline{T}$	DON'T HA	AVE IN	COME
Information	3	Give name and address of present employer(s). Yours $\underline{\text{UNIV}}$	ERSITY OF ALABA	MA AT BIRMINGHAM	BHAM MAIN	CAMPUS E	BIRMINGHAM AL 35294
All Taxpayers		Your Spouse's					
Must	4	Enter the Federal Adjusted Gross Income ● \$	44,422 and	Federal Taxable Income	\$	30,57	as reported on your
Complete This	_	2023 Federal Individual Income Tax Return.					- Dv - Dv
Section.	5	Do you have income which is reported on your Federal return,		our Alabama return (other t	nan your state ta	ax retuna)?	Yes X No
(See		If yes, enter source(s) and amount(s) below: (other than state	income tax retund)		18		
instructions)		Source •				ount	
DADTV		Source ●  For Direct Deposit of your refund, complete 1, 2, 3, and 4 belo	Nu /Coo instructions to	ago if you qualify )	Am	ount	
PART V	1			Savings <b>3</b> Account No	ımher: ¬-o	00005	0.6.4.1.0
Direct Deposit	4	Routing Number: 262086561 2 Type: 2 Type: 12 Type: 2 Type: 12 Type			7000	00825	96410
	-	DOB		Iss date _	Exp	date	
Drivers License Info		(mm/dd/yyyy) Your state DDL	_	(mm/dd/yyyy) = Iss date	(mm.	/dd/yyyy) = _ date	
LICENSE IIIIO		(mm/dd/yyyy) Spouse state DL#	# •	(mm/dd/yyyy) -	(mm.	/dd/yyyy)	
	•	Lauthorize a representative of the Department of Revenue to discus-	s my return and attachme	nts with my preparer			
	Unde	r penalties of perjury, I declare that I have examined this return and a	ccompanying schedules a	and statements, and to the best	of my knowledge	and belief, the	ey are true, correct, and com-
0'	<u> </u>	Declaration of preparer (other than taxpayer) is based on all informatio signature	n of which preparer has a  Date	ny Knowledge.  Daytime Telephone Number	Your Occupa	ation	
In Black Ink	Tour	ngriature	Date	Dayanie reiephone Namber			AL FELLOW
Keep a copy of this return	Snous	e's Signature (if joint return, BOTH must sign)	Date	Daytime Telephone Number	Spouse's Oc		TH THEOW
for your	Spout	o o organisa o n jour rotaru, po m mot oignj	Sp0030 3 00	озраноп			
records.	Prens	rer's Signature	Date	Check if Self-employed Prep	arer's SSN or PTIN		E.I. Number
Paid		AM PRIYA RAM SAGAR GUPTA	04/04/2024		2082703		84-3171965
	Firms	s Name (or yours employed) GLOBAL TAXES LLC		Daytime	8) 965-95	22 ZI	
Use Only		ss 245 ROONEY CT E BRUNSWICK NJ		. 5000000000000000000000000000000000000	,		··· <u>· · · · · · · · · · · · · · · · · </u>







# ALABAMA DEPARTMENT OF REVENUE INCOME TAX ADMINISTRATION DIVISION Additional Taxes & Penalties

2023

NAME(S) AS	SHOW	N ON THE TAX RETURN	SOCIAL S	ECURITY I	NUMBER	
ANUJ K	UMAI	R VERMA	323-	57-21	30	
PART I	Ad	ditional Taxes				
	1	Consumer Use Tax (see instructions). If you certify that no use tax is due, check box ● 🗶	,	1 •	_	0
	2	Catastrophe savings tax (see instructions)		2 •	7	
	3	Total Additional Taxes. Add line 1 and line 2. Enter here and also on Form 40, page 1, line 19		3 •		0
PART II	Per	nalties				
	1	Estimated Tax Penalty (see instructions). Farmers and Fishermen that meets IRC §6654, check box ● □		1 •		
	2	First-time Second chance Home Buyer Savings Account penalty (from Schedule HBC, Part IV, Line 4)		2 •		
	3	Total penalties. Add line 1 and line 2. Enter here and also on Form 40, page 1, line 31		3 •		





2023



# Alabama Department of Revenue Wages, Salaries, Tips, etc.

Schedule W-2 must be completed fully and included with your return in order to receive proper credit for your Alabama income tax withheld. Attach a copy of all withholding statements to your return.

NAME(S)	AS SHOWN	ON TAX RETURN
ANUJ	KUMAR	VERMA

PRIMARY'S SOCIAL SECURITY NO. SPOUSE'S SOCIAL SECURITY NO.

323-57-2130

	Α	B	С	D Schedule	E	F Alabama	G		Н	I	J
	Employee's Social Security Number	Employer's Identification Number (EIN)	Statutory Employee	C/C-EZ	State Code	Employer's State ID Number	Alabama State Income Tax Withheld		Federal Wages (Box 1 of Form W-2)	Alabama State Wages (Box 16 of Form W-2)	Additional Taxable Wages – Other States
1	•323-57-2130	• 636005396	• 🗌	• 🗌	• <sub>AL</sub>	0000052813	• 2,315	•	51,259	• 51 <b>,</b> 259	•
2	•	•	• 🗌	•	•	•	•	•		•	•
3	•	•	• 🗆	• 🗆	•	•	•	•		•	•
4	•	•	• 🗆	• 🗆	•	•	•	•		•	•
5	•	•	• 🗆	• 🗆	•	•	•	•		•	•
6	•	•	• 🗆 🕯	• 🗆	•	•	•	•		•	•
7	•	•	• 🗆		•	•	•	•		•	•
8	•	•	• 🕕	• 🗆	•	•	•	•		•	•
9	•	•	• 🗆		•	•	•	•		•	•
10	•	•	• 🗆	•	•	•	•	•		•	•
11	•	•	•	•	•	•	•	•		•	•
12	•	•	•	•	•	•	•	•		•	•
13	•	•	• 🔽	• 🗌	•	•	•	•		•	•
14	•	•		•	•	•	•	•		•	•
15	•	•	• 🗌	• 🗌	•	•	•	•		•	•
16	TOTAL ALABAMA TAX WI	THHELD FROM W-2s. Tota	al lines 1-15,	Column G	and enter	he amount here	• 2,315				
17	ALABAMA TAX WITHHELD										
	from all Form 1099s and Form these statements				•		• 0				
18	TOTAL WAGES AND TOTAL						<u> </u>				
	See instructions						• 2,315	•	51,259	• 51 <b>,</b> 259	•

## THIS SCHEDULE CAN ONLY BE SUBMITTED AND/OR PRINTED VIA LANDSCAPE





# Alabama Department of Revenue Supplemental Income and Loss

2023

(From Rental Real Estate, Royalties, Partnerships, S Corporations, Estates, Trusts, REMICs, etc.)

► ATTACH TO FORM 40. ► SEE INSTRUCTIONS FOR SCHEDULE E (FORM 40).

	ne(s) shown on return										social security	number	
AN	UJ KUMAR VERMA								323	<u>5</u>	7-2130		
P	ART I Income or Loss From Rental Real Estate and Ro Note: If you are operating under a Federal Employe			rt inco	me and expenses from	ı your	business	of renting <sub>l</sub>	person	al pro	perty on Sche	dule C or	C-EZ.
1	Show the kind and location of each Rental Real Estate Pro	perty:					2 For	each renta	ıl real e	estate	property	Ye	s No
Α	VACATION/SHORT-TERM						liste	d on line 1	, <mark>did y</mark> d	ou or	your family	Α	X
A	H NO. 23, FAIZULLAGANJ		HE NAWABGANJ				use	it during th	ne tax y	ear f	or personal	Α	^
В							purp	oses for m	nore tha	an th	e greater of:	В	
							• 14	days, or					
٥							• 10	% of the to	tal day	s ren	ted at fair	С	
_							rer	ntal value?					
					Properties						/	otals	
Inc	ome:		A		В			С			(Add Column		<del></del>
3	Rents received	3	594	_		00			0	-	3	59	4 00
4	Royalties received	4		00		00			0	0	4		00
Exp	penses:												
5	Advertising	5		00		00			0	_			
6	Auto and travel	6		00		00		<u> </u>	0	0			
7	Cleaning and maintenance	7	1,023			00			0	0			
8	Commissions	8		00		00			0				
9	Insurance	9		00		00			0	_			
10	Legal and other professional fees	10		00		00			0				
11	Management fees	11	874	/		00			0	_			
12	Mortgage interest	12		00		00					12	_	00
13	Other interest	13		00		00			0	_			
14	Repairs	14	2,635	_		00			0	_			
15	Supplies	15	2,965			00			0				
16	Taxes	16		00		00			0				
17	Utilities	17	1,230			00			0	_			
18	Other (list)	18		00		00			0	_			
		$\vdash$		00		00			0				
				00		00			0				
				00		00			0				
				00		00			0	_			
19	Add lines 5 through 18	19	8,727	00		00			0		19	8 <b>,</b> 72	
20	Depreciation expense or depletion	20		00		00					20	_	00
21		21	8,727	00		00			0	0			
22	Income or (loss). Subtract line 21 from line 3 (rents) or												
	line 4 (royalties)	22	-8,133	00		00			0	0			
	Total Real Estate and Royalty income or (loss). Add columns	_		ente	r the result here			·		.		-8 <b>,</b> 13	3   00
Ρ.	ART II Income from Partnerships, S Corporations, Est	ates, a	and Trusts		(h) Sarthe or 7.	Corpora	(i)	LIIIPI			(j)	mount	
	(g) Name and Address				Check One Check One	Por		Identifi Num			A	mount	
_					Check One	20%	99						
													100
_												_	00
													00
												_	00
													00
							++						00
													00
24	TOTAL INCOME EDOM DADTNEDQUIDG & CORDODATIO	NC F	CTATEC AND TOLICE	<b>6</b> ۷%	d the amounts in solu-	nn /i\	Enter the						100
	TOTAL INCOME FROM PARTNERSHIPS, S CORPORATIO total here and include on line 25 below.									24			00
	total nere and include on line 23 below.									24			100
25	TOTAL INCOME OR (LOSS). Combine lines 23 and 24. Ente	or tha t	otal here and on Form	40 na	go 2 Part Llina E					25		-8 <b>,</b> 13	3 00
	TOTAL INCOME OT (LOGG). Combine lines 23 and 24. Eith	ıııı <del>c</del> l	olai nele ana dii Fuilli	τυ, μα						20		0,13	J 00



# Alabama Department of Revenue

2023

INCOME TAX ADMINISTRATION DIVISION

## Taxpayer E-file Opt Out Election Form

### **General Information**

Tax preparers who prepare 11 or more individual income tax returns in any calendar year are required by Alabama Rule 810-3-27-.09, in that calendar year and for each subsequent year thereafter, to file all acceptable Alabama individual income tax returns using electronic medium. Filing paper returns with 2D barcode technology will no longer be allowed in meeting this requirement.

As a taxpayer receiving services from a tax preparer who is required by Alabama law to file all acceptable Alabama individual income tax returns using electronic medium you may elect to "Opt Out." That is, you may elect to not file your return using an electronic medium. Returns submitted electronically are processed faster, more accurately, and at a lower cost to the Department. If you elect to "Opt Out," you are required to complete this form, which must be attached to your original paper individual income tax return. The paper return must have a 2D barcode on it when submitted to the Department with this form.

By signing this form, you have elected to: NOT file your return electronically.

### Reason for election: TAXPAYER'S SIGNATURE SPOUSE'S SIGNATURE (IF FILING JOINT RETURN) DATE DATE 04/04/2024 TAXPAYER'S NAME (PLEASE PRINT) SPOUSE'S NAME (IF FILING JOINT RETURN) (PLEASE PRINT) ANUJ KUMAR VERMA SPOUSE'S SSN (IF FILING JOINT RETURN) PRIMARY'S SSN 323-57-2130 PREPARER'S FEIN / PTIN / SSN PREPARER'S OR FIRM'S NAME DATE SYAM PRIYA RAM SAGAR GUPTA 84-3171965 04/04/2024

### Instructions for Paid Tax Preparers

If you are complying with Alabama Rule 810-3-27-.10 by offering electronic filing, you must file all acceptable Alabama individual income tax returns electronically. If the taxpayer elects not to file electronically, then the taxpayer must complete this form. Attach this form to the taxpayer's Alabama individual income tax return.

If you are complying with Alabama Rule 810-3-27-.10 and the taxpayer elects not to file electronically, you must submit the taxpayer's Alabama individual income tax return with the 2D barcode printed on the return.

I	ncome	Worksheet		2023
				Security Number
me will	not be inc	cluded in your return	۱)	
nis worl	ksheet to	remove non Alabam	na source income. R	Resident and
#	State name	Gross earnings	Alabama wages	Alabama tax withheld
	<u>AL</u>	51,259.	51,259.	2,315.
	ne 5 o me will le from ling inc nis worl during	ne 5 of Form 4 me will not be included from your Alab ling income and his worksheet to during electronic state # State name	ling income and plan to attempt to elnis worksheet to remove non Alabam during electronic filing if you exclude    State   Gross   earnings	ne 5 of Form 40/40NR me will not be included in your return) the from your Alabama return.  ling income and plan to attempt to electronically file your nis worksheet to remove non Alabama source income. Reduring electronic filing if you exclude income by marking the state of th

### Other Income for Form 40/40NR

# Special Type Indicator (X = Income will not be included in your return) Check this box to exclude income from your Alabama return.

Description	#	Total amount	Alabama amount
	_		
al			

51,259.

51,259.

2,315.

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

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

						0.000		30 0, 2	,	nto or otapio in timo opasor	
For the year Jar	n. 1–Dec	c. 31, 2023, or other tax year beginning		, 2023, end	ling		, 20	s	See sep	parate instructions.	
Your first name and middle initial Last name				ame				Y	Your social security number		
ANUJ KUMAR V			VERI	VERMA					323	57   2130	
If joint return, s	pouse's	s first name and middle initial	Last na	ame				s	pouse's	s social security number	
Home address	(numbe	er and street). If you have a P.O. box, see	instruct	tions.			Apt. no.	P	resider	ntial Election Campaign	
951 18TE	H STI	REET SOUTH					201			nere if you, or your	
City, town, or p	ost offi	ce. If you have a foreign address, also co	mplete	spaces below.	Sta	te	ZIP code			if filing jointly, want \$3 this fund. Checking a	
BIRMING	MAH				35205	b		ow will not change			
Foreign countr	y name		Foreign province/state/county Foreign		Foreign postal	code y	our tax	or refund.			
		1								You Spouse	
Filing Status	s 🗵	Single					ousehold (HC	)H)			
Check only	L	Married filing jointly (even if only or	ne had	income)							
one box.		Married filing separately (MFS)					surviving sp				
		ou checked the MFS box, enter the			u che	ecked the HOF	l or QSS box	, enter t	he chi	d's name if the	
	qu	alifying person is a child but not you	ır depe	naent:							
Digital	At ar	ny time during 2023, did you: (a) rec	eive (as	a reward, award, or	payn	nent for prope	rty or service	s); or (b	) sell,		
Assets	exch	ange, or otherwise dispose of a dig	ital ass	et (or a financial intere	est ir	n a digital asse	et)? (See instr	uctions.	.)	☐ Yes ☒ No	
Standard	Som	eone can claim:	pender	nt	e as	a dependent					
Deduction		Spouse itemizes on a separate retur	n or yo	u were a dual-status	alien						
Age/Blindnes	s You	: Were born before January 2, 1	959	Are blind Spo	ouse	: Was bor	n before Jan	uary 2,	1959	☐ Is blind	
Dependent				(2) Social security	,	(3) Relationsh	(4) Chaol			fies for (see instructions):	
If more		irst name Last name		number		to you		I tax crec	lit	Credit for other dependents	
than four											
dependents,											
see instruction and check	s —										
here	]										
Income	1a	Total amount from Form(s) W-2, b	ox 1 (se	ee instructions)					1a	51,259.	
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	Medicaid waiver payments not reported on Form(s) W-2 (see instructions)						1d			
1099-R if tax	е	Taxable dependent care benefits f	able dependent care benefits from Form 2441, line 26						1e		
was withheld.	f	Employer-provided adoption bene	fits from	m Form 8839, line 29					1f		
If you did not get a Form	g	•							1g		
W-2, see	h	Other earned income (see instructi	,						1h	0.	
instructions.	i	Nontaxable combat pay election (s	see inst	tructions)		<u>1i</u>				51 050	
	Z	Add lines 1a through 1h	: i						1z		
Attach Sch. B if required.	2a	'	2a			axable interest			2b		
ii required.	3a		3a			rdinary divider			3b		
Standard	4a		4a			axable amoun			4b		
Deduction for—	5a		5a			axable amoun			5b		
Single or Married filing	6a	,	6a			axable amoun	τ		6b		
separately, \$13,850	C	If you elect to use the lump-sum e			•	,		. 📙	7	4	
Married filing	7	Capital gain or (loss). Attach Schedule D if required. If not required, check here						7	-6,837.		
jointly or Qualifying	8 9	Additional income from Schedule 1, line 10						9	44,422.		
surviving spouse, \$27,700	10		Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your <b>total income</b>							44,422.	
Head of	11		Adjustments to income from Schedule 1, line 26								
household, \$20,800	12	Standard deduction or itemized	-						11		
If you checked any box under	13	Qualified business income deducti				 5-A			13		
Standard	14	Add lines 12 and 13							14		
Deduction, see instructions.	15	Subtract line 14 from line 11. If zer	o or les	ss, enter -0 This is v	 our <b>t</b>	axable incom	 ne		15		
	-										

Form 1040 (2023	3)								Page <b>2</b>	
Tax and	16	Tax (see instructions). Check	if any from Form	n(s): <b>1</b> 881	4 <b>2</b> 4972	3 🗌		16	3,449.	
Credits	17	Amount from Schedule 2, li	•	. ,				17		
	18	Add lines 16 and 17						18	3,449.	
	19	Child tax credit or credit for	other dependen	ts from Sched	ule 8812			19	,	
	20	Amount from Schedule 3, li	·					20		
	21	Add lines 19 and 20						21		
	22	Subtract line 21 from line 18	3. If zero or less,	enter -0				22	3,449.	
	23	Other taxes, including self-	employment tax,	from Schedule	e 2, line 21			23	0.	
	24	Add lines 22 and 23. This is						24	3,449.	
Payments	25	Federal income tax withhele							,	
,	а	Form(s) W-2				25a				
	b	Form(s) 1099				25b				
	С	Other forms (see instruction				25c				
	d	Add lines 25a through 25c						25d		
If you have a	26	2023 estimated tax paymer						26		
qualifying child,	27	Earned income credit (EIC)				27				
attach Sch. EIC.	28	Additional child tax credit from				28				
	29	American opportunity credi	from Form 8863	3. line 8		29				
	30	Reserved for future use .		•		30		1		
	31	Amount from Schedule 3, li				31		1		
	32	Add lines 27, 28, 29, and 3				ndable credits		32		
	33	Add lines 25d, 26, and 32.	-					33		
Refund	34	If line 33 is more than line 2						34		
	35a	Amount of line 34 you want	35a							
Direct deposit?	b	Routing number X X X					Savings			
See instructions.	d	Account number X X X								
	36	Amount of line 34 you want				36				
Amount	37	Subtract line 33 from line 24	4. This is the <b>am</b>	ount you owe						
You Owe		For details on how to pay, o						37	3,609.	
	38	Estimated tax penalty (see	nstructions) .			38	160.			
Third Party Designee		you want to allow anothe tructions	r person to disc		n with the IRS?	_	omplete l	below.	⊠ No	
Ū		signee's	Phone Personal ident				fication			
	nar			no.			ber (PIN)			
Sign Here		nder penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the slief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which						h prepar	er has any knowledge.	
	Yo	Your signature		Date Your occupation			I	If the IRS sent you an Identity Protection PIN, enter it here		
laint ratura?							ee inst.)			
Joint return? See instructions. Keep a copy for	Sp	Spouse's signature. If a joint return, <b>both</b> must sign.		Date Spouse's occupation If the Ider			ne IRS sent your spouse an ontity Protection PIN, enter it here			
your records.							(see	inst.)		
	Ph	one no. (205) 860-831	.7	Email address	ANUJVERMABIO'	rech@gMail.co	MC			
Paid	Pre	parer's name	Preparer's signat	ture		Date	PTIN		Check if:	
Prenarer	SYA	M PRIYA RAM SAGAR GUPTA	SYAM PRIY	A RAM SAC	GAR GUPTA	04/04/2024	P0208	2703	Self-employed	

Firm's name

Firm's address

GLOBAL TAXES LLC

245 ROONEY CT E BRUNSWICK NJ 08816

**Preparer** 

**Use Only** 

Phone no. (678) 965-9522

Firm's EIN

### 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 ANUJ KUMAR VERMA

Your social security number 323-57-2130

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	-8,133.
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 (	<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:  Other Income from box 3 of 1099-Misc 1,296.	1 000		
^	Uther Income from box 3 of 1099-Misc 1,296.	<b>8z</b> 1,296.	_	1 206
9	Total other income. Add lines 8a through 8z		9	1,296.
10	Combine lines 1 through 7 and 9. This is your <b>additional income</b> . Ente 1040, 1040-SR, or 1040-NR, line 8	r nere and on Form	10	-6.837.
	1040. 1040-00. UE 1040-ND. IIIICO		1 IU	-0,03/.

Page 2 Schedule 1 (Form 1040) 2023

Par	Adjustments to Income						
11	Educator expenses					11	
12	Certain business expenses of reservists, performing artists, and fee-b						
	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						
		4b					
С	The state of the s						
	· · · · · · · · · · · · · · · · · · ·	4c					
d		4d					
е	Repayment of supplemental unemployment benefits under the Trade						
	<del>-</del>	4e				-	
f		24f				-	
g	· · · · · · · · · · · · · · · · · · ·	4g				-	
h	Attorney fees and court costs for actions involving certain unlawful						
	,	24h				-	
İ	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	\a:					
	<u> </u>	24i				-	
J		24j				-	
K	Excess deductions of section 67(e) expenses from Schedule K-1 (Form	1412					
_	1041)	24k					
Z							
25		4z				25	
25 26	Total other adjustments. Add lines 24a through 24z				 d.on	25	
20	E 4040 4040 OD 4040 ND II 40		ı ilel	e an	u OII	26	
				<u> </u>	• •		le 1 (Form 1040) 0000
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