# Form **8879**

(Rev. January 2021)

Department of the Treasury Internal Revenue Service

## IRS e-file Signature Authorization

▶ ERO must obtain and retain completed Form 8879.

► Go to www.irs.gov/Form8879 for the latest information.

OMB No. 1545-0074

IIILEITIAIT	level de Gel vice									
Submi	ssion Identification Number (SID)									
Taxpaye	r's name	Social security number								
HARI	I NARAYANA BHARGAV BUKKEY	001-29-2365								
Spouse'		Spouse's social security number								
D. 1	To Date of the Control of the Contro				• \					
Part	<u> </u>	year you	are au	tnoriz	ing.)					
	whole dollars only on lines 1 through 5. Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.									
1	Adjusted gross income		1 1		57	067.				
2	Total tax		2			619.				
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3			694.				
4	Amount you want refunded to you		4			075.				
5	Amount you owe		5		۷,	075.				
Part		eep a co	y of y	our r	eturr	<u>1)</u>				
return ( to send for any Agent t paymer authoriz paymer busines taxes to persona	wledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above original or amended) I am now authorizing. I consent to allow my intermediate service provider, transmart my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rededley in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U originate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indicated to fine taxes owed on this return and/or a payment of estimated tax, and the financial institution action is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminated the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation requised days prior to the payment (settlement) date. I also authorize the financial institutions involved in the or receive confidential information necessary to answer inquiries and resolve issues related to the pail identification number (PIN) below is my signature for the income tax return (original or amended) I are fine funds Withdrawal Consent.	tter, or elect ection of the S. Treasury cated in the on to debit the the authorizests must be processing of ayment. I fu	ronic retransmister in the securitar statistical experience of the experience of t	turn ori	ginato (b) the ated Fin softwaccou oke (ca o later ic payredge t	or (ERO) reason inancial vare for nt. This ancel) a than 2 ment of hat the				
					_					
	yer's PIN: check one box only	DINI 9	) 2 :	3   6	5					
×	I authorize GLOBAL TAXES LLC to enter or generate BERO firm name	Ě	nter five		but	as my				
	signature on the income tax return (original or amended) I am now authorizing.	a	on't ente	r all ze	ros					
	I will enter my PIN as my signature on the income tax return (original or amended) I am n if you are entering your own PIN <b>and</b> your return is filed using the Practitioner PIN meth below.									
Your s	ignature ▶ Date ▶									
Snous	e's PIN: check one box only									
Сроиз	I authorize to enter or generate	my PINI				as my				
	ERO firm name	Enter five digits, but								
	signature on the income tax return (original or amended) I am now authorizing.	d	on't ente	r all ze	ros					
	I will enter my PIN as my signature on the income tax return (original or amended) I am n if you are entering your own PIN <b>and</b> your return is filed using the Practitioner PIN meth below.		_			_				
Spous	e's signature ▶ Date ▶									
	Practitioner PIN Method Returns Only—continue below									
Part	Certification and Authentication — Practitioner PIN Method Only									
ERO's	<b>EFIN/PIN.</b> Enter your six-digit EFIN followed by your five-digit self-selected PIN. 5 8	7 2 7	8 6	1 9	8	9				
	2 1 1 1 1 1 2 1 1 1 1 2 1 1 1 1 1 1 1 1	Don't er								
authoriz	that the above numeric entry is my PIN, which is my signature for the electronic individual income to the taxpayer to file for tax year indicated above for the taxpayer (s) indicated above. I confirm that I am submements of the Practitioner PIN method and <b>Pub. 1345</b> , Handbook for Authorized IRS e-file Providers of Ir	itting this re	urn in a	accorda	anće v					
ERO's	signature ▶ Date ▶									
	ERO Must Retain This Form — See Instructions									
	Don't Submit This Form to the IRS Unless Requested To D	o So								

## **£1040**

Department of the Treasury—Internal Revenue Service (99)

U.S. Individual Income Tax Return

2020

OMB No. 1545-0074

IRS Use Only—Do not write or staple in this space.

Filing Status Check only one box.	If yo	Single Married filing jointly but checked the MFS box, enter the son is a child but not your dependent	name of y	ed filing separately your spouse. If you	•	_		•	. –	_				
Your first name	and m	iddle initial	Last na	ne					١	our so	cial securit	ty number		
HARI NA	RAYA	NA BHARGAV	BUKK	EY					(	001-29-2365				
If joint return, spouse's first name and middle initial Last na				me					8	Spouse's social security number				
Home address	•	er and street). If you have a P.O. box, se H DRIVE	e instruction	ons.				Apt. no.		Check h	nere if you,	•		
		ce. If you have a foreign address, also c	complete s	paces below.	Sta			code		•	0,	ntly, want \$3 Checking a		
LAS VEG					N	-		9119			ow will not	•		
Foreign country name				oreign province/stat	e/cour	ity	Fo	reign postal c	ode )	our tax	or refund.			
At any time du	ring 20	020, did you receive, sell, send, exc	change, o	r otherwise acquir	e any	financial i	nterest i	n any virtua	al curr	ency?	Yes	⊠ No		
Standard Deduction		neone can claim:	•				ent							
Age/Blindness	You	: Were born before January 2,	1956	Are blind S	pouse	e: Wa	s born b	efore Janua	ary 2,	1956	☐ Is bli	ind		
Dependents	s (see	instructions):		(2) Social secur	ity	(3) Relat	ionship	(4) 🗸	if qua	lifies fo	r (see instru	ctions):		
If more		irst name Last name		number to you			ou	Child t		- 1		her dependents		
than four										[				
dependents, see instruction								[			[			
and check								[			[			
here ▶														
	1	Wages, salaries, tips, etc. Attach	Form(s) \	V-2						1	(	62,000.		
Attach Sch. B if	2a	Tax-exempt interest	2a		b 7	Taxable int	erest			2b				
required.	3a	Qualified dividends	3a	5.	b	Ordinary di	vidends			3b		<u>5.</u>		
	4a	IRA distributions	4a		b 7	Taxable an	nount .	i		4b	<u> </u>			
	5a	Pensions and annuities	5a		b 7	Taxable an	nount .			5b	<u> </u>			
Standard	6a	Social security benefits	6a		b 7	Taxable an	nount .			6b				
Deduction for— Single or	7	Capital gain or (loss). Attach Scho	edule D if	required. If not re-	quirec	l, check he	ere .		▶ □	7		312.		
Married filing	8	Other income from Schedule 1, li	ne 9							8		-5,000.		
separately, \$12,400	9	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7	, and 8. T	his is your <b>total in</b>	come				. ▶	9	Ę	57,317.		
Married filing	10	Adjustments to income:												
jointly or Qualifying	а	From Schedule 1, line 22												
widow(er), \$24,800	b	Charitable contributions if you take	Charitable contributions if you take the standard deduction. See instructions 10b 250.											
Head of	С	Add lines 10a and 10b. These are	e your <b>tot</b>	al adjustments to	inco	me			. ▶	100	>	250.		
household, \$18,650	11	Subtract line 10c from line 9. This	s is your a	djusted gross in	come				. ▶	11	Ē	57,067.		
If you checked	12	Standard deduction or itemized	d deducti	ons (from Schedu	le A)					12	. ]	12,400.		
any box under Standard	13	Qualified business income deduc	tion. Atta	ch Form 8995 or F	orm 8	3995-A .				13				
Deduction, see instructions.	14	Add lines 12 and 13								14		12,400.		
550 monuotions.	15	Taxable income. Subtract line 14	4 from lin	e 11. If zero or less	s, ente	er-0				15	. 4	44,667.		

Form 1040 (2020	))									Page	2
	16	Tax (see instructions). Check	if any from Form	(s): <b>1</b> 881	4 <b>2</b> 🗌 4972	3 🗌			. 16	5,619	
	17	Amount from Schedule 2, lin	ne 3						. 17		
	18	Add lines 16 and 17							. 18	5,619	
	19	Child tax credit or credit for	other dependen	ts					. 19		
	20	Amount from Schedule 3, lin	ne 7						. 20		
	21	Add lines 19 and 20							. 21		
	22	Subtract line 21 from line 18	. If zero or less,	enter -0					. 22	5,619	
	23	Other taxes, including self-e	mployment tax,	from Schedule	e 2, line 10 .				. 23	0	
	24	Add lines 22 and 23. This is	your <b>total tax</b>						▶ 24	5,619	_
	25	Federal income tax withheld	from:								
	а	Form(s) W-2				25a	7	,69	4.		
	b	Form(s) 1099				25b					
	С	Other forms (see instructions	s)			25c					
	d	Add lines 25a through 25c	,						. 25d	7,694	
	26	2020 estimated tax payment							. 26		_
<ul> <li>If you have a L qualifying child,</li> </ul>	27	Earned income credit (EIC)				27					_
attach Sch. EIC. • If you have	28	Additional child tax credit. A				28					
nontaxable	29	American opportunity credit				29					
combat pay, see instructions.	30	Recovery rebate credit. See		•		30					
	31	Amount from Schedule 3, lir				31					
	32	Add lines 27 through 31. The					edits		▶ 32		
	33	Add lines 25d, 26, and 32. T	•							7,694	_
	34	If line 33 is more than line 24						•	. 34	2,075	_
Refund	35a	Amount of line 34 you want				-	-	•	35a	2,075	_
Direct deposit?	> b	Routing number 3 2 2				Chec		Savin		2,013	-
See instructions.	►d	Account number 3 5 8			l l l		Killy	Saviii	iys		
	36	Amount of line 34 you want			nd tov	36					
Amarint		•							. 27		_
Amount You Owe	37	Subtract line 33 from line 24		•					▶ 37		
For details on		Note: Schedule H and Schedule SE filers, line 37 may not represent all of the taxes you owe for									
how to pay, see	00	2020. See Schedule 3, line 12e, and its instructions for details.									
instructions.	38	Estimated tax penalty (see in									
Third Party		you want to allow another	•				□ Vaa C		ata balaw	X No	
Designee				Phone			☐ Yes. Co	•		_	
		signee's me ▶		no.				onai id oer (Pl	dentification IN) ►		П
Sign	Un	der penalties of perjury, I declare t	hat I have examine		d accompanying so	hedules	and stateme	nts. ar	nd to the bes	st of my knowledge a	d
		lief, they are true, correct, and com									
Here	Yo	ur signature		Date	Your occupation				If the IRS se	nt you an Identity	
	k.									IN, enter it here	_
Joint return?				5.	SOFTWARE		NEER	-	(see inst.)		
See instructions. Keep a copy for	Sp	ouse's signature. If a joint return, I	ooth must sign.	Date	Spouse's occupa	ation				nt your spouse an ection PIN, enter it he	ere
your records.									(see inst.) ▶		Ĭ
	———Ph	one no.		Email address							
		eparer's name	Preparer's signat	l .		Date		PTIN	V	Check if:	_
Paid		I PRIYA RAM SAGAR GUPTA TALLAM	'		GUPTA TALLA		26/2021	P02	082703	Self-employed	
Preparer		m's name ► GLOBAL TA				1 2 = 7	-,			(678)965-9522	_
Use Only		m's address ► 2530 Pebb		n Cummin	a GA 30041				Firm's EIN		_
Go to want ire		m1040 for instructions and the late					/ 00/04/04 DD 0		5 E 7	Form <b>1040</b> (20	
GO TO WWW.IIS.go	JV/I-Off	in 040 for instructions and the late	or illiorridilori.		BAA	KE/	/ 02/21/21 PRC	,		rom 1040 (20	∠U)

#### **SCHEDULE 1** (Form 1040)

**Additional Income and Adjustments to Income** 

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service

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

HARI NARAYANA BHARGAV BUKKEY

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

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

001-29-2365

Par	t I Additional Income		
1	Taxable refunds, credits, or offsets of state and local income taxes	1	
<b>2</b> a	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	-5,000.
6	Farm income or (loss). Attach Schedule F	6	
7	Unemployment compensation	7	
8	Other income. List type and amount ▶		
		8	
9	Combine lines 1 through 8. Enter here and on Form 1040, 1040-SR, or 1040-NR,		
Par	t II Adjustments to Income	9	-5,000.
		1	
10	Educator expenses	10	
11	Certain business expenses of reservists, performing artists, and fee-basis government officials. Attach Form 2106	11	
12	Health savings account deduction. Attach Form 8889	12	
13	Moving expenses for members of the Armed Forces. Attach Form 3903	13	
14	Deductible part of self-employment tax. Attach Schedule SE	14	
15	Self-employed SEP, SIMPLE, and qualified plans	15	
16	Self-employed health insurance deduction	16	
17	Penalty on early withdrawal of savings	17	
18a	Alimony paid	18a	
b	Recipient's SSN		
С	Date of original divorce or separation agreement (see instructions) ▶		
19	IRA deduction	19	
20	Student loan interest deduction	20	
21	Tuition and fees deduction. Attach Form 8917	21	
22	Add lines 10 through 21. These are your <b>adjustments to income.</b> Enter here and on Form 1040, 1040-SR, or 1040-NR, line 10a	22	

#### **SCHEDULE D** (Form 1040)

### **Capital Gains and Losses**

OMB No. 1545-0074

Attachment Sequence No. **12** 

Department of the Treasury Internal Revenue Service (99)

HARI NARAYANA BHARGAV BUKKEY

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

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

▶ Use Form 8949 to list your transactions for lines 1b, 2, 3, 8b, 9, and 10. Name(s) shown on return Your social security number 001-29-2365

	you dispose of any investment(s) in a qualified opportunity es," attach Form 8949 and see its instructions for additiona	•	•	_			
Pa	rt I Short-Term Capital Gains and Losses – Ge	nerally Assets I	Held One Year	or Less (se	e ins	tructions)	
lines This	instructions for how to figure the amounts to enter on the below.  form may be easier to complete if you round off cents to le dollars.	(d) Proceeds (sales price)	(g) Adjustmento gain or loss Form(s) 8949, line 2, colum	from Part I,	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)		
1a	Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b.						
1b	Totals for all transactions reported on Form(s) 8949 with <b>Box A</b> checked	506.	194.			312.	
2	Totals for all transactions reported on Form(s) 8949 with <b>Box B</b> checked						
3	Totals for all transactions reported on Form(s) 8949 with <b>Box C</b> checked						
4	Short-term gain from Form 6252 and short-term gain or (le	oss) from Forms 4	684, 6781, and 88	324	4		
5	Net short-term gain or (loss) from partnerships, Schedule(s) K-1	S corporations,	estates, and tr	rusts from	5		
6	Short-term capital loss carryover. Enter the amount, if an <b>Worksheet</b> in the instructions	y, from line 8 of y	our <b>Capital Loss</b>	Carryover	6	( )	
7	Net short-term capital gain or (loss). Combine lines 1a term capital gains or losses, go to Part II below. Otherwise				7	312.	
Pa	rt II Long-Term Capital Gains and Losses – Ger	nerally Assets H	leld More Than	One Year	(see	instructions)	
See instructions for how to figure the amounts to enter on the lines below.  This form may be easier to complete if you round off cents to whole dollars.		(d) Proceeds (sales price)	Proceeds Cost to (sales price) (or other basis) Fo		its from Part II, n (g)	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)	
8a	Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions).						

This form may be easier to complete if you round off cents to whole dollars.		Proceeds (sales price)	3		Part II,	from column (d) and combine the result with column (g)
8a	Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b.					
8b	Totals for all transactions reported on Form(s) 8949 with <b>Box D</b> checked					
9	Totals for all transactions reported on Form(s) 8949 with <b>Box E</b> checked					
10	Totals for all transactions reported on Form(s) 8949 with <b>Box F</b> checked					
11	Gain from Form 4797, Part I; long-term gain from Forms from Forms 4684, 6781, and 8824	, ,	11			
12	Net long-term gain or (loss) from partnerships, S corporat	dule(s) K-1	12			
13	Capital gain distributions. See the instructions		13			
14	Long-term capital loss carryover. Enter the amount, if any <b>Worksheet</b> in the instructions	-	14	( )		
15	15					

BAA

Schedule D (Form 1040) 2020 Page 2

#### Part III **Summary** 16 Combine lines 7 and 15 and enter the result 16 312. • If line 16 is a gain, enter the amount from line 16 on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 17 below. • If line 16 is a loss, skip lines 17 through 20 below. Then, go to line 21. Also be sure to complete • If line 16 is zero, skip lines 17 through 21 below and enter -0- on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 22. 17 Are lines 15 and 16 both gains? ☐ **Yes.** Go to line 18. No. Skip lines 18 through 21, and go to line 22. 18 If you are required to complete the 28% Rate Gain Worksheet (see instructions), enter the amount, if any, from line 7 of that worksheet . . . . . . . . . . . 18 19 If you are required to complete the Unrecaptured Section 1250 Gain Worksheet (see instructions), enter the amount, if any, from line 18 of that worksheet . 19 20 Are lines 18 and 19 both zero or blank and are you not filing Form 4952? ☐ Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Forms 1040 and 1040-SR, line 16. Don't complete lines 21 and 22 below. and 22 below. If line 16 is a loss, enter here and on Form 1040, 1040-SR, or 1040-NR, line 7, the smaller of: 21 • The loss on line 16; or 21 • (\$3,000), or if married filing separately, (\$1,500) Note: When figuring which amount is smaller, treat both amounts as positive numbers. Do you have qualified dividends on Form 1040, 1040-SR, or 1040-NR, line 3a? 22 X Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Forms 1040 and 1040-SR, line 16. No. Complete the rest of Form 1040, 1040-SR, or 1040-NR.

# 8949

### Sales and Other Dispositions of Capital Assets

▶ Go to www.irs.gov/Form8949 for instructions and the latest information.

▶ File with your Schedule D to list your transactions for lines 1b, 2, 3, 8b, 9, and 10 of Schedule D.

OMB No. 1545-0074 Attachment Sequence No. 12A

Department of the Treasury Internal Revenue Service

statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your

Social security number or taxpayer identification number 001-29-2365 HARI NARAYANA BHARGAV BUKKEY Before you check Box A, B, or C below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute broker and may even tell you which box to check. Short-Term. Transactions involving capital assets you held 1 year or less are generally short-term (see Part I instructions). For long-term transactions, see page 2. Note: You may aggregate all short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 1a; you aren't required to report these transactions on Form 8949 (see instructions). You must check Box A. B. or C below. Check only one box. If more than one box applies for your short-term transactions. complete a separate Form 8949, page 1, for each applicable box. If you have more short-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need. X (A) Short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see Note above) (B) Short-term transactions reported on Form(s) 1099-B showing basis wasn't reported to the IRS (C) Short-term transactions not reported to you on Form 1099-B Adjustment, if any, to gain or loss. 1 If you enter an amount in column (a). (h) enter a code in column (f). Cost or other basis Gain or (loss). (d) (c) (a) (b) Date sold or Proceeds See the **Note** below See the separate instructions. Subtract column (e) Description of property Date acquired (sales price) from column (d) and disposed of and see Column (e) (Example: 100 sh. XYZ Co.) (Mo., day, yr.) combine the result (Mo., day, yr.) (see instructions) in the separate (g) Code(s) from Amount of adjustment instructions with column (a) instructions ROBINHOOD SECURITIES LLC 08/02/20 09/09/20 506. 194. 312.

2 Totals. Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts). Enter each total here and include on your Schedule D, line 1b (if Box A above is checked), line 2 (if Box B 506. 194. above is checked), or line 3 (if Box C above is checked) ▶ 312.

Note: If you checked Box A above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See Column (g) in the separate instructions for how to figure the amount of the adjustment.

#### **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.

OMB No. 1545-0074

2020

Attachment

Department of the Treasury Internal Revenue Service (99)

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

Attachment Sequence No. 13

	snown on return								r social se		number				
	RI NARAYANA BHARGAV BUKKEY  art I Income or Loss From Rental Real Estate and Royalties Note: If you are in the business o									001-29-2365					
Part			-								-	е			
	Schedule C. See	instructions. If you are an individual, rep	ort far	m rental i	ncome (	or loss f	rom Form 48	<b>35</b> on	page 2, li	ne 40.					
A Dic	l you make any payme	nts in 2020 that would require you to	o file F	orm(s) 1	099? S	ee insti	ructions .			Ye	s 🛛 N	Vo.			
B If "	Yes," did you or will yo	ou file required Form(s) 1099?								☐ Ye	s 🗌 N	No			
1a	Physical address of	each property (street, city, state, ZII	P code	e)											
Α		COLONY, H.B C HYDERABAD		-	IN	50004	0								
В															
С															
1b	Type of Property	2 For each rental real estate pro	nerty	listad		Fair	Rental	Pers	sonal Us	e					
	(from list below)	above, report the number of fa	air rental and				Davs		Days		QJV				
Α	3	above, report the number of fe personal use days. Check the if you meet the requirements t	QJV k	ox only	Α		365		0						
В	3 	qualified joint venture. See ins	tructio	ns.	В		303				$\overline{}$				
C	<u> </u>	, , , , , , , , , , , , , , , , , , , ,		-	С						-				
	of Property:														
	gle Family Residence	3 Vacation/Short-Term Rental	Elo	nd		7 Calf	Dontal								
	•					7 Self-									
Incom	ti-Family Residence	4 Commercial Properties:		oyalties		8 Othe	r (describe)								
					Α	250	В				С				
3			3			350.									
4			4												
Expen			_												
5			5												
6	· · · · · · · · · · · · · · · · · · ·	nstructions)	6												
7		nance	7			600.									
8			8												
9			9												
10		ssional fees	10												
11			11			800.									
12		d to banks, etc. (see instructions)	12												
13			13												
14			14			200.									
15			15		⊥,	400.									
16			16												
17			17		⊥,	350.									
18		e or depletion	18												
19			19			250									
20	•	lines 5 through 19	20		5,	350.									
21		line 3 (rents) and/or 4 (royalties). If													
		instructions to find out if you must	- 1		_	000									
	file <b>Form 6198</b>		21		-5,	000.									
22		estate loss after limitation, if any,		,		٠	,					,			
00	on Form 8582 (see in	· ·	22	(	-5,0	00.)	(		)(			)			
23a		eported on line 3 for all rental prope				23a		35	50.						
b		eported on line 4 for all royalty prop				23b									
C		eported on line 12 for all properties				23c									
d		eported on line 18 for all properties				23d									
е		eported on line 20 for all properties				23e		5,35							
24		e amounts shown on line 21. <b>Do no</b>		,				.	24						
25	Losses. Add royalty lo	sses from line 21 and rental real estate	e losse	s trom lin	ie 22. E	nter tota	ai losses here	• •	25 (		5,00	υ.)			
26		ate and royalty income or (loss).													
		V, and line 40 on page 2 do not						on	00		г о	0.0			
	Schedule 1 (Form 102	10) line 5. Otherwise include this a	thoun.	T IN THE TO	าเลเ ดก	IIDE 41	on page 2	- 1	26		-5.00	UU.			