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

	5.5.1.65 55.1.65				
Submis	ssion Identification Number (SID)				
Taxpayer	's name	Social securit	y numl	per	
SRI	RAGHU RAM VATRAM	857-20	-372	0	
Spouse's	name	Spouse's soc	ial seci	urity numbe	r
Part	Tax Return Information — Tax Year Ending December 31, (Enter	year you a	re au	thorizina	1
	/hole dollars only on lines 1 through 5.	your you u	i c aa	unonzing.	'/
	Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.				
	Adjusted gross income		1	81	,862.
2	Total tax		2	11	,075.
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3	14	,601.
4	Amount you want refunded to you		4	4	,383.
	Amount you owe		5		
Part I	Taxpayer Declaration and Signature Authorization (Be sure you get and k	eep a cop	y of y	our retu	rn)
return (c to send for any c Agent to paymen authoriz paymen business 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, transmit my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejected processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U. initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indict of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution ation is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate t, I must contact 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 payment confidential information necessary to answer inquiries and resolve issues related to the payment in Europe Mithdeward Concept.	tter, or electroction of the tree. Treasury a cated in the tree to debit the the authorizatests must be processing of ayment. I furl	onic refansion ansmission and its of ax prepartition. The receive the elements of the acceptance of th	turn origina ssion, (b) the designated paration soft to this according for revoke (ved no late ectronic pasknowledge	tor (ERO) ne reason Financial ftware for ount. This (cancel) a er than 2 ayment of e that the
	ic Funds Withdrawal Consent. yer's PIN: check one box only				
	l authorize GLOBAL TAXES LLC to enter or generate r	0	3 7	7 2 0	00 mv
	ERO firm name	En		digits, but er all zeros	as my
_	signature on the income tax return (original or amended) I am now authorizing.		01		
	I will enter my PIN as my signature on the income tax return (original or amended) I am no if you are entering your own PIN and your return is filed using the Practitioner PIN methodelow.				
Your si	gnature ► Date ►	03-13-2	021		
Chaus	\mathcal{F}				
Spous	e's PIN: check one box only	DINI			
	I authorize to enter or generate r		er five	digits, but	as my
	signature on the income tax return (original or amended) I am now authorizing.			r all zeros	
	I will enter my PIN as my signature on the income tax return (original or amended) I am not if you are entering your own PIN and your return is filed using the Practitioner PIN methodelow.		_		-
Spouse	e's signature ▶ Date ▶				
	Practitioner PIN Method Returns Only—continue below				
Part I	Certification and Authentication — Practitioner PIN Method Only				
ERO's	EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN. 5 8	7 2 7 Don't ent	8 6 er all ze	1 9 8 eros	9
authoriz	that the above numeric entry is my PIN, which is my signature for the electronic individual income taxed to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am subminents of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS e-file Providers of Income.	tting this retu	ırn in a	accordance	
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 [ou checked the MFS box, enter the reson is a child but not your dependent	name of									
Your first name	and m	iddle initial	Last na	me					Your	soci	al security	number
SRI RAG	HU R	AM	VATE	RAM					857	1-2	0-3720	J
If joint return, s	pouse's	s first name and middle initial	Last na	me					Spou	se's	social secu	urity number
	,	er and street). If you have a P.O. box, see	instruction	ons.				Apt. no.	•			n Campaign
8025 OH:					1			2210			re if you, o	or your ly, want \$3
	ost offi	ce. If you have a foreign address, also co	omplete s	paces below.	Sta			code	to go	to th	nis fund. C	Checking a
PLANO			Ι,		T:			5024	_		v will not o	hange
Foreign country	y name			Foreign province/sta	te/coun	ty	For	eign postal cod	le your	lax C	or refund. You	Spouse
At any time du	ıring 20	020, did you receive, sell, send, exc	hange, c	or otherwise acqui	re any	financial in	nterest in	n any virtual	currency	y?	☐ Yes	⊠ No
Standard Deduction	_	eone can claim:		•			ent					
Age/Blindness	s You:	Were born before January 2, 1	956	Are blind S	pouse	: Was	s born b	efore Januar	v 2, 195	6	☐ Is blir	nd
Dependents				(2) Social secu		(3) Relat				ualifies for (see instructions):		
If more		irst name Last name	number		,	to you		Child tax cred				er dependents
than four										\top		<u></u>
dependents,]			
see instruction and check	s —]			
here ►]]
	1	Wages, salaries, tips, etc. Attach	Form(s) \	W-2						1	8	9,175.
Attach	2a	Tax-exempt interest	2a		b T	axable int	erest			2b		3.
Sch. B if required.	3a	Qualified dividends	3a		b (Ordinary di	vidends			3b		24.
	4a	IRA distributions	4a		b T	axable an	nount .			4b		
	5a	Pensions and annuities	5a		b T	axable an	nount .			5b		
Standard	6a	Social security benefits	6a		b T	axable an	nount .			6b		
Deduction for— Single or	7	Capital gain or (loss). Attach Sche	dule D if	required. If not re	equired	, check he	ere .	•		7		-620.
Married filing	8	Other income from Schedule 1, lir	ne 9 .	9						8	_	6,420.
separately, \$12,400	9	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7,	and 8. T	his is your total i r	ncome				•	9	8	2,162.
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	ns if you take the standard deduction. See instructions 10b 300									
Head of	С	Add lines 10a and 10b. These are	your tot	al adjustments t	o inco	me			•	10c		300.
household, \$18,650	11	Subtract line 10c from line 9. This	is your a	adjusted gross in	come				•	11	8	1,862.
If you checked	12	Standard deduction or itemized	deduct	ions (from Sched	ule A)					12	1	2,400.
any box under Standard	13	Qualified business income deduct	tion. Atta	ach Form 8995 or	Form 8	3995-A .				13		
Deduction, see instructions.	14	Add lines 12 and 13								14		2,400.
	15	Taxable income. Subtract line 14	from lin	e 11. If zero or les	s, ente	er-0		<u></u> .		15	6	9,462.

Form 1040 (2020))									Page 2
	16	Tax (see instructions). Check	if any from Form	ı(s): 1 881	4 2 🗌 4972	3 🗌			. 16	11,075.
	17	Amount from Schedule 2, lir	ne 3						. 17	
	18	Add lines 16 and 17							. 18	11,075.
	19	Child tax credit or credit for	other dependen	ts					. 19	
	20	Amount from Schedule 3, lir	ne 7						. 20	
	21	Add lines 19 and 20							. 21	
	22	Subtract line 21 from line 18							. 22	11,075.
	23	Other taxes, including self-e	,						. 23	0.
	24	Add lines 22 and 23. This is			•			Ċ	▶ 24	11,075.
	25	Federal income tax withheld	-					•		11,073.
	а	Form(s) W-2				25a	1 4	,60	1	
	b	Form(s) 1099				25b		. , 00		
	c	Other forms (see instruction				25c				
	d	Add lines 25a through 25c	•						. 25d	14,601.
		2020 estimated tax paymen								14,001.
 If you have a L qualifying child, 	26							•	. 20	
attach Sch. EIC.	<u>27</u> 28	Earned income credit (EIC)								
 If you have nontaxable combat pay, 						28			_	
	29	American opportunity credit		-		29		0.5	_	
see instructions.	30	Recovery rebate credit. See				30		85	/ •	
	31	Amount from Schedule 3, line 13								0.5.5
	32	Add lines 27 through 31. These are your total other payments and refundable credits								857.
	33	Add lines 25d, 26, and 32. These are your total payments								15,458.
Refund	34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid							. 34 35a	4,383.
	35a	Amount of line 34 you want refunded to you. If Form 8888 is attached, check here ▶ ☐ Routing number 0 2 2 0 0 0 0 4 6 ▶ c Type: ★ Checking Savings								4,383.
Direct deposit? See instructions.	►b				► c Type: 🗵] Check	king	Savin	gs	
coo mondonono.	▶ d	Account number 9 8 7								
	36	Amount of line 34 you want	applied to your	2021 estimate	ed tax ►	36				
Amount	37	Subtract line 33 from line 24	. This is the am	ount you owe	now				▶ 37	
You Owe For details on		Note: Schedule H and Sch	·	•	•	of the t	axes you	owe 1	for	
how to pay, see		2020. See Schedule 3, line 1	•			1 1	Ì			
instructions.	38	Estimated tax penalty (see in				38				
Third Party		you want to allow another	•							□
Designee		structions						•	ete below.	X No
		signee's ne ▶		Phone no. ▶				onal id ber (Pl	entification	
Ciara		der penalties of perjury, I declare t	that I have evamine		l accompanying sch	nedules s				et of my knowledge and
Sign		ief, they are true, correct, and com								
Here	Yo	ur signature		Date	Your occupation	1	If the IRS sent you an Identity			
	k	1/CDDD			·					IN, enter it here
Joint return?		V. Dri Kajher Kour		03-13-2021	SOFTWARE :	ENGIN	IEER	(see inst.)	
See instructions. Keep a copy for	Sp	ouse's signature. If 🛦 joint return, I	both must sign.	Date	Spouse's occupat	tion				nt your spouse an
your records.	,								see inst.) ►	ection PIN, enter it here
		one no.		Email address					,,,	
_		eparer's name	Preparer's signat	Email address		Date		PTIN	1	Check if:
Paid		•	1 .		מווטייא ייאדד אוא		16/2021			Self-employed
Preparer		PRIYA RAM SAGAR GUPTA TALLAM		NAUNG INAN	GUPIA IALLAM	1 03/0	06/2021		082703	
Use Only		m's name ► GLOBAL TA		n (1,1,1,1,1,1,1,1,1,1,1,1,1,1,1,1,1,1,1,	~ (7) 20041					(678)965-9522
		m's address ▶ 2530 Pebb		II Cumming					Firm's EIN	
Go to www.irs.go	ov/Forn	n1040 for instructions and the late	est information.		BAA	REV	03/01/21 PR)		Form 1040 (2020)

SCHEDULE 1 (Form 1040)

Department of the Treasury Internal Revenue Service

Additional Income and Adjustments to Income

OMB No. 1545-0074

2020
Attachment
Sequence No. 01

► 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
SRI RAGHU RAM VATRAM

Your social security number 857-20-3720

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. Attach Schedule E	5	-6,420.
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, line 8	9	6 420
Par	Ine 8	. .	-6,420.
		10	
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 adjustments to income. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 10a	22	
	on Form 1040, 1040-31, OF 1040-1111, IIIIC 10d	~~	

SCHEDULE D (Form 1040)

Capital Gains and Losses

► 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.

OMB No. 1545-0074

Attachment Sequence No. 12

Department of the Treasury Internal Revenue Service (99) Name(s) shown on return

SRI RAGHU RAM VATRAM

Your social security number 857-20-3720

Did you dispose of any investment(s) in a qualified opportunity fund during the tax year? If "Yes," attach Form 8949 and see its instructions for additional requirements for reporting your gain or loss. Short-Term Capital Gains and Losses - Generally Assets Held One Year or Less (see instructions) Part I See instructions for how to figure the amounts to enter on the (h) Gain or (loss) (g) Adjustments Subtract column (e) lines below. Proceeds Cost to gain or loss from from column (d) and This form may be easier to complete if you round off cents to Form(s) 8949, Part I, combine the result (sales price) (or other basis) whole dollars. with column (g) line 2. column (a) 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 Box A checked 21,292. 21,912. -620. Totals for all transactions reported on Form(s) 8949 with Box B checked 3 Totals for all transactions reported on Form(s) 8949 with Short-term gain from Form 6252 and short-term gain or (loss) from Forms 4684, 6781, and 8824 4 Net short-term gain or (loss) from partnerships, S corporations, estates, and trusts from 5 Short-term capital loss carryover. Enter the amount, if any, from line 8 of your Capital Loss Carryover 6 Net short-term capital gain or (loss). Combine lines 1a through 6 in column (h). If you have any longterm capital gains or losses, go to Part II below. Otherwise, go to Part III on the back 7 -620. Part II Long-Term Capital Gains and Losses - Generally Assets Held More Than One Year (see instructions) See instructions for how to figure the amounts to enter on the (h) Gain or (loss) (g) Adjustments Subtract column (e) (d) (e) lines below. Proceeds to gain or loss from from column (d) and Cost This form may be easier to complete if you round off cents to Form(s) 8949, Part II, (sales price) (or other basis) combine the result whole dollars. line 2. column (a) with column (a) 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 Totals for all transactions reported on Form(s) 8949 with Box E checked 10 Totals for all transactions reported on Form(s) 8949 with 11 Gain from Form 4797, Part I; long-term gain from Forms 2439 and 6252; and long-term gain or (loss) 11 12 Net long-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1 12 13 14 Long-term capital loss carryover. Enter the amount, if any, from line 13 of your Capital Loss Carryover 14

15 Net long-term capital gain or (loss). Combine lines 8a through 14 in column (h). Then, go to Part III

BAA

15

Schedule D (Form 1040) 2020 Page 2

Part III **Summary** 16 Combine lines 7 and 15 and enter the result 16 -620. • 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. Are lines 15 and 16 both gains? 17 ☐ **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 620.) 21 • (\$3,000), or if married filing separately, (\$1,500) Note: When figuring which amount is smaller, treat both amounts as positive numbers. 22 Do you have qualified dividends on Form 1040, 1040-SR, or 1040-NR, line 3a? ☐ 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.

Form **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

2020
Attachment
Sequence No. 12A

Internal Revenue Service

Name(s) shown on return

Department of the Treasury

Social security number or taxpayer identification number

857-20-3720

SRI RAGHU RAM VATRAM

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 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 broker and may even tell you which box to check.

Part I Short-Term. Transactions involving capital assets you held 1 year or less are generally short-term (see 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 F	orm 1099-B				
1 (a) Description of property	(b) Date acquired	(c) Date sold or	(d) Proceeds	(e) Cost or other basis. See the Note below	Adjustment, if If you enter an enter a co	(h) Gain or (loss). Subtract column (e)	
(Example: 100 sh. XYZ Co.)	(Mo., day, yr.)	disposed of (Mo., day, yr.)	(sales price) (see instructions)	and see Column (e) in the separate instructions	(f) Code(s) from instructions	(g) Amount of adjustment	from column (d) and combine the result with column (g)
APEX CLEARING	06/05/20	12/01/20	30.	10.			20.
ROBINHOOD SECURITIES LLC	08/21/20	08/21/20	21,262.	21,902.			-640.
2 Totals. Add the amounts in columns negative amounts). Enter each total Schedule D, line 1b (if Box A above above is checked), or line 3 (if Box 6	al here and inc is checked), lir	lude on your ne 2 (if Box B	21,292.	21,912.			-620.

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

Attachment Sequence No. **13**

Department of the Treasury Internal Revenue Service (99) Name(s) shown on return

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

Your social security number

	RAGHU RAM VATRAM								57-20-			
Part		om Rental Real Estate and Roy			•				• .			, use
	Schedule C. See instr	ructions. If you are an individual, repo	ort farn	n rental i	ncome o	or loss f	rom Form 48	335 or	n page 2	line 4	0	
A Dic	d you make any payments	in 2020 that would require you to	file Fo	orm(s) 1	099? S	ee inst	ructions .			<u> </u>	∕es ∑	No
B If "	Yes," did you or will you fi	ile required Form(s) 1099?								□ \	es [No
1a	Physical address of each	h property (street, city, state, ZIP	, code	;)								
Α	SATRAMPADU ELURU	ANDHRAPRADESH IN 5340	07									
В												
С												
1b	Type of Property 2		erty li	sted		Fair	Rental	Per	rsonal l	Jse		Įγ
	(from list below)								Days		G	.U V
Α	3	if you meet the requirements to	file as	s a	Α	185			()		
В		qualified joint venture. See inst	ruction	ns.	В							
С					С							
Туре	of Property:											
1 Sing	gle Family Residence	3 Vacation/Short-Term Rental	5 Lar	nd		7 Self-	Rental					
2 Mul	ti-Family Residence	4 Commercial	6 Ro	yalties		8 Othe	r (describe))				
Incom		Properties:			Α		E				С	
3	Rents received		3			380.						
4			4									
Expen												
5	Advertising		5									
6	Auto and travel (see instr	ructions)	6									
7	Cleaning and maintenand	ce	7			750.						
8			8									
9			9									
10		onal fees	10									
11	Management fees		11			900.						
12	Mortgage interest paid to	b banks, etc. (see instructions)	12									
13			13									
14	Repairs		14		1,	850.						
15	Supplies		15			700.						
16			16									
17	Utilities		17		1,	600.						
18		depletion	18									
19	Other (list)	· 	19									
20		s 5 through 19	20		6,	800.						
21	Subtract line 20 from line	e 3 (rents) and/or 4 (royalties). If										
		ructions to find out if you must										
	file Form 6198		21		-6,	420.						
22	Deductible rental real est	tate loss after limitation, if any,										
	on Form 8582 (see instru	, , ,	22	(-6,4	20.)	()(
23a	Total of all amounts repo	rted on line 3 for all rental proper	rties			23a		3	80.			
b	Total of all amounts repo	rted on line 4 for all royalty prope	erties			23b						
С	Total of all amounts repo	rted on line 12 for all properties				23c						
d	Total of all amounts repo	rted on line 18 for all properties				23d						
е	Total of all amounts repo	rted on line 20 for all properties				23e		6,8	00.			
24	Income. Add positive an	mounts shown on line 21. Do not	t inclu	de any	losses				24			
25	Losses. Add royalty losses	s from line 21 and rental real estate	losses	s from lin	ne 22. E	nter tota	al losses her	е.	25 (6,	420.
26	Total rental real estate	and royalty income or (loss).	Combi	ine lines	s 24 an	d 25. E	nter the re	sult				
		and line 40 on page 2 do not a										
		line 5. Otherwise, include this an							26		-6	,420.