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

Submi	ssion Identification Number (SID)					
Taxpaye	r's name	Social se	curity nu	nber		
JOSI	EPH DEVENDRANATH RAMAVARAPU	831-	27-47	75		
Spouse'	s name	Spouse's			number	
ANUI	RADHA KODAMANCHILI	971-	94-15	83		
Part	Tax Return Information — Tax Year Ending December 31, 2021 (Enter	year yo	u are a	uthor	izing.))
Enter v	whole dollars only on lines 1 through 5.	-			,	
Note:	Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.					
1	Adjusted gross income		. 1		72	,950.
2	Total tax		. 2		5	,275.
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		. 3		5	,970.
4	Amount you want refunded to you				2	,095.
5	Amount you owe		. 5			
Part	II Taxpayer Declaration and Signature Authorization (Be sure you get and k	eep a c	opy of	your	retu	<u>n) </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, transmit my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejected delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U. so initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the financial institution account indication is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate and, 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 part of the payment (PIN) below is my signature for the income tax return (original or amended) I are financial withdrawal Consent.	tter, or election of the stream of the stream of the cated in the auth ests must processing ayment. It	ectronic he transr ry and it he tax property the entropication of the further	return on ission of design eparation of the thin	originat , (b) the nated I on soft s acco voke (cono late onic pay vledge	or (ERO) e reason innancial ware for unt. This cancel) a r than 2 yment of that the
	yer's PIN: check one box only					
X		nv PIN	7 4	7 7	5	as my
	ERO firm name signature on the income tax return (original or amended) I am now authorizing.	,	Enter fiv don't er			ao my
	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 method below.					
Your s	ignature ▶ Date ▶					
C	ele DINI, elecale que hay aule.					
• –	e's PIN: check one box only	DINI	1 1	5 8		
X	I authorize GLOBAL TAXES LLC to enter or generate r	ny PIN	4 1 Enter fiv			as my
	signature on the income tax return (original or amended) I am now authorizing.		don't er			
	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 method below.					
Spous	e's signature ▶ Date ▶					
	Practitioner PIN Method Returns Only—continue below					
Part	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 Don't	7 8 t enter all	5 1 zeros	9 8	9
authoriz	that the above numeric entry is my PIN, which is my signature for the electronic individual income taged to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am submitments of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS e-file Providers of In	tting this	return ir	accor	dance	
ERO's	signature ▶ Date ▶					
	FRO Must Retain This Form — See Instructions					

Don't Submit This Form to the IRS Unless Requested To Do So

E 1040 Department of the Treasury—Internal Revenue Service (99)
U.S. Individual Income Tax Return

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

Filing Status Check only one box.	If yo	Single Married filing jointly uchecked the MFS box, enter the notion is a child but not your dependent	- ame of	ried filing separately f your spouse. If yo		_		. ,	_			
Your first name and middle initial Last name You									Your social security number			
JOSEPH I	DEVE	NDRANATH	RAM	AVARAPU					831-	27-477	5	
If joint return, s	pouse's	first name and middle initial	Last n	ame					Spouse	's social sec	curity number	
ANURADHA	A		KOD	AMANCHILI					971-	94-158	3	
Home address	(numbe	er and street). If you have a P.O. box, see	instruc	tions.				Apt. no.	Preside	ntial Election	on Campaign	
4980 USA	AA BI	LVD						714		nere if you,		
City, town, or p	ost offic	ce. If you have a foreign address, also co	mplete	spaces below.	Sta	ite	ZIP	code			ntly, want \$3	
SAN ANTO	ONIO				T	X	78	240	0	o this fund. ow will not	Checking a change	
Foreign country	y name			Foreign province/sta	te/coun	ty	Fore	eign postal code		or refund.	•	
At any time du	ring 20	021, did you receive, sell, exchange,	or oth	erwise dispose of	any fina	ancial interest i	in an	y virtual curre	ncy?	Yes	⊠ No	
Standard Deduction	_	eone can claim:				a dependent						
Age/Blindness	You:	Were born before January 2, 1	957	Are blind	Spouse	: Was boi	rn be	fore January 2	2, 1957	☐ Is bl	ind	
Dependents	s (see	instructions):		(2) Social secu	rity	(3) Relationsh	qin	(4) ✓ if qu	ualifies fo	r (see instru	ctions):	
-		irst name Last name		number	,	to you	٠ ا	Child tax cr			her dependents	
If more than four dependents,												
see instructions and check	s —											
here ▶ □												
	1	Wages, salaries, tips, etc. Attach F	orm(s)	W-2					. 1	,	79,950.	
Attach	2a	Tax-exempt interest	2a		b T	axable interes	t		. 2b	,		
Sch. B if	3a	Qualified dividends	3a		b C	Ordinary divide	nds		. 3b	,		
required.	4a	IRA distributions	4a		b Taxable amount				. 4b	,		
	5a	Pensions and annuities	5a		b T	axable amoun	t.		. 5b	,		
Standard	6a	Social security benefits	6a		b T	axable amoun	t.		. 6b	,		
Deduction for—	7 Capital gain or (loss). Attach Schedule D if required. If not required, check here					7						
Single or Married filing	8	Other income from Schedule 1, line	e 10		٠				. 8		-7,000.	
separately, \$12,550	9	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7, a	and 8.	This is your total in	ncome				9		72,950.	
• Married filing	10	Adjustments to income from Schee	dule 1,	line 26					. 10			
jointly or Qualifying	11	Subtract line 10 from line 9. This is	your a	adjusted gross inc	ome				▶ 11	,	72,950.	
widow(er),	12a	Standard deduction or itemized	deduc	tions (from Sched	ule A)	12:	a	25,100	o. 📉			
\$25,100 Head of	b	Charitable contributions if you take		•	,	ructions) 12	b	600	J.			
household, \$18,800	С	Add lines 12a and 12b							. 120		25,700.	
If you checked	13	Qualified business income deducti	on fror	m Form 8995 or Fo	rm 899	95-A			. 13		<u> </u>	
any box under Standard	14	Add lines 12c and 13							. 14		25,700.	
Deduction, see instructions.	15	Taxable income. Subtract line 14	from li	ne 11. If zero or les	ss, ente	er -0			. 15	_	47,250.	
ooc monucions.											_	

	16	Tax (see instructions). Check if any from Form	(s): 1 881	4 2 🗌 4972	3 🔲			16	5,275.		
	17	Amount from Schedule 2, line 3				·		17			
	18	Add lines 16 and 17						18	5,275.		
	19	Nonrefundable child tax credit or credit for o	ther depender	nts from Schedule	8812			19			
	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	5,275.		
	23	Other taxes, including self-employment tax,	from Schedule	2, line 21				23	0.		
	24	Add lines 22 and 23. This is your total tax						24	5,275.		
	25	Federal income tax withheld from:									
	а	Form(s) W-2			25a	5,9	970.				
	b	Form(s) 1099			25b						
	С	Other forms (see instructions)			25c						
	d	Add lines 25a through 25c						25d	5,970.		
	26	2021 estimated tax payments and amount a						26	·		
If you have a liqualifying child,	27a	Earned income credit (EIC)			27a						
attach Sch. EIC.		Check here if you were born after Janu									
		January 2, 2004, and you satisfy all the	e other requi	rements for							
		taxpayers who are at least age 18, to claim t	1 1	structions ►							
	b	Nontaxable combat pay election									
	С	Prior year (2019) earned income									
	28	Refundable child tax credit or additional child			28						
	29	American opportunity credit from Form 8863	•		29						
	30	Recovery rebate credit. See instructions .			30	1,4	100.	.			
	31	Amount from Schedule 3, line 15			31						
	32	Add lines 27a and 28 through 31. These are						32	1,400.		
	33	Add lines 25d, 26, and 32. These are your to					. •	33	7,370.		
Refund	34	If line 33 is more than line 24, subtract line 2			•	-		34	2,095.		
	35a	Amount of line 34 you want refunded to you			ck here Check		▶ ∐ vings	35a	2,095.		
Direct deposit? See instructions.	►b	Routing number 1 1 1 0 0 0 0 0									
oco inolitaciono.	▶ d	Account number 5 8 6 0 3 7 9 4 8 4 4 2									
	36	Amount of line 34 you want applied to your			36						
Amount	37	Amount you owe. Subtract line 33 from line			1 1	ructions .		37			
You Owe	38	Estimated tax penalty (see instructions) .			38						
Third Party		you want to allow another person to disc ructions				Yes. Com	nlata b	مامير	X No		
Designee		iquee's	Phone			Persona	•		INO		
		ne >	no.			number					
Sign	Und	er penalties of perjury, I declare that I have examine	ed this return and	I accompanying sch	edules a	nd statements,	and to	the bes	t of my knowledge and		
Here	bel	ef, they are true, correct, and complete. Declaration of	of preparer (other	than taxpayer) is ba	ased on a	all information of	of which	prepare	er has any knowledge.		
Here	You	r signature	Date	Your occupation					nt you an Identity		
	N				337 C T 33	THE D	1	ction Pl nst.) ▶	N, enter it here		
Joint return? See instructions.	Sp.	use's signature. If a joint return, both must sign.	Date	SOFTWARE I		IEEK	,		t vour spouse an		
Keep a copy for	Spo	use's signature. If a joint return, both must sign.	Date	Spouse's occupat	1011				ection PIN, enter it here		
your records.			HOME MAKER					nst.) ▶			
	Pho	ne no. (210)740-7866	Email address	DEVENDRANATH.	JOSEPH	@GMAIL.COM					
Doid	Pre	parer's name Preparer's signat	ure		Date		TIN		Check if:		
Paid	SYAM	PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA	RAM SAGAR	GUPTA TALLAM	02/1	1/2022 P	02082	703	Self-employed		
Preparer	Firr							e no. (678)965-9522		
Use Only	Firr	n's address ▶ 2530 Pebble Creek L	n Cumming	g GA 30041			Firm's	s EIN 🕨	30-1017196		
Go to www.irs.go	ov/Form	1040 for instructions and the latest information.		BAA	REV 02	/05/22 PRO			Form 1040 (2021)		

Form 1040 (2021)

Page **2**

SCHEDULE 1 (Form 1040)

Additional Income and Adjustments to Income

OMB No. 1545-0074

2021

Attachment Sequence No. 01

Department of the Treasury Internal Revenue Service

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

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

Sequence No. 01

Your social security number

J RA	MAVARAPU & A KODAMANCHILI		831-2	:/-4/	775
Par	t I Additional Income				
1	Taxable refunds, credits, or offsets of state and local income taxe	s		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, tr Schedule E			5	-7,000.
6	Farm income or (loss). Attach Schedule F			6	
7	Unemployment compensation			7	
8	Other income:				
а	Net operating loss	8a ()		
b	Gambling income	8b			
С	Cancellation of debt	8c			
d	Foreign earned income exclusion from Form 2555	8d ()		
е	Taxable Health Savings Account distribution	8e			
f	Alaska Permanent Fund dividends	8f			
g	Jury duty pay	8g			
h	Prizes and awards	8h			
i	Activity not engaged in for profit income	8i			
j	Stock options	8j			
k	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	8k			
Ι	Olympic and Paralympic medals and USOC prize money (see				
	instructions)	81			
m	Section 951(a) inclusion (see instructions)	8m			
n	Section 951A(a) inclusion (see instructions)	8n			
0	Section 461(I) excess business loss adjustment	80			
р	Taxable distributions from an ABLE account (see instructions) .	8p			
Z	Other income. List type and amount ▶	0-			
0	Total other income. Add lines 2s through 27	8z		0	
9 10	Total other income. Add lines 8a through 8z		 R or	9	
. •	Communication in the state of the and on Form I	5 75, 15 75 5	, 🕠		

1040-NR, line 8

-7,000.

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Schedule 1 (Form 1040) 2021 Page **2**

Par	Adjustments to Income			
11	Educator expenses		11	
12	Certain business expenses of reservists, performing artists, and fee-officials. Attach Form 2106			
13	Health savings account deduction. Attach Form 8889		13	
14	Moving expenses for members of the Armed Forces. Attach Form	3903	14	
15	Deductible part of self-employment tax. Attach Schedule SE		15	
16	Self-employed SEP, SIMPLE, and qualified plans		16	
17	Self-employed health insurance deduction		17	
18	Penalty on early withdrawal of savings		18	
19a	Alimony paid		19a	
b	Recipient's SSN	>	_	
С	Date of original divorce or separation agreement (see instructions)	•		
20	IRA deduction		20	
21	Student loan interest deduction		21	
22	Reserved for future use		22	
23	Archer MSA deduction		23	
24	Other adjustments:			
а	Jury duty pay (see instructions)	24a		
b	Deductible expenses related to income reported on line 8k from the rental of personal property engaged in for profit	24b		
С	Nontaxable amount of the value of Olympic and Paralympic medals and USOC prize money reported on line 8l	24c		
d	Reforestation amortization and expenses	24d		
е	Repayment of supplemental unemployment benefits under the Trade Act of 1974	24e		
f	Contributions to section 501(c)(18)(D) pension plans	24f		
g	Contributions by certain chaplains to section 403(b) plans	24 g		
h	Attorney fees and court costs for actions involving certain unlawful discrimination claims (see instructions)	24h		
i	Attorney fees and court costs you paid in connection with an award from the IRS for information you provided that helped the IRS detect tax law violations	24i		
j	Housing deduction from Form 2555	24 j		
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form 1041)	24k		
z	Other adjustments. List type and amount ▶	24z		
25	Total other adjustments. Add lines 24a through 24z		25	
26	Add lines 11 through 23 and 25. These are your adjustments here and on Form 1040 or 1040-SR, line 10, or Form 1040-NR, line			

SCHEDULE E (Form 1040)

Department of the Treasury

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 Attachment

Internal Revenue Service (99) Sequence No. 13 Name(s) shown on return Your social security number 831-27-4775 J RAMAVARAPU & A KODAMANCHILI Income or Loss From Rental Real Estate and Royalties Note: If you are in the business of renting personal property, use Part I Schedule C. See instructions. If you are an individual, report farm rental income or loss from Form 4835 on page 2, line 40. A Did you make any payments in 2021 that would require you to file Form(s) 1099? See instructions **B** If "Yes," did you or will you file required Form(s) 1099? Physical address of each property (street, city, state, ZIP code) Α KUKATPALLY HYDERABAD TELANGANA IN 500072

C 1b Type of Property (from list below) 2 For each rental real estate property listed above, report the number of fair rental and personal use days. Check the QJV box only if you meet the requirements to file as a qualified joint venture. See instructions. A 365 0 □ Type of Property: 1 Single Family Residence 3 Vacation/Short-Term Rental 5 Land 7 Self-Rental 8 Other (describe) Income: Properties: A B C 3 Rents received 4 Commercial 6 Royalties 600 C 4 Royalties received 4 Royalties received 5 Advertising 5 Adv	В										
A 3 September A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3	С										
B qualified joint venture. See instructions. B C C C C C C C C C C C C C C C C C C	1b		2 For each rental real estate prop above, report the number of fai	perty lis	sted al and						QJV
B qualified joint venture. See instructions. C C C C C C C C C C C C C C C C C C C	Α	3	if you meet the requirements to	UJV bo	ox only	Α		365		0	
Type of Property: 1 Single Family Residence 3 Vacation/Short-Term Rental 5 Land 7 Self-Rental 2 Multi-Family Residence 4 Commercial 6 Royalties 8 Other (describe) Income: Properties: A B C 3 Rents received	В					В					
1 Single Family Residence 3 Vacation/Short-Term Rental 5 Land 7 Self-Rental 2 Multi-Family Residence 4 Commercial 6 Royalties 8 Other (describe) Income: Properties: A B C 3 Rents received	С					С					
1 Single Family Residence 3 Vacation/Short-Term Rental 5 Land 7 Self-Rental 2 Multi-Family Residence 4 Commercial 6 Royalties 8 Other (describe) Income: Properties: A B C 3 Rents received	Туре	of Property:									
Income: Properties: A B C 3 Rents received			3 Vacation/Short-Term Rental	5 Lar	nd		7 Self-	Rental			
Income: Properties: A B C 3 Rents received	2 Mu	Iti-Family Residence	4 Commercial	6 Ro	yalties		8 Othe	r (describe	e)		
4 Royalties received		-	Properties:		,						С
4 Royalties received	3	Rents received		3			600.				
Expenses:	4			4							
5 Advertising 5	Expe										
• ravortioning	5	Advertising		5							
6 Auto and travel (see instructions) 6	6	Auto and travel (see i	nstructions)	6							
7 Cleaning and maintenance	7	Cleaning and mainter	nance	7		1,	000.				
8 Commissions	8	Commissions		8							
9 Insurance	9	Insurance		9							
10 Legal and other professional fees	10	Legal and other profe	essional fees	10							
11 Management fees	11	Management fees .		11		1,	000.				
12 Mortgage interest paid to banks, etc. (see instructions) 12	12	Mortgage interest pai	id to banks, etc. (see instructions)	12							
13 Other interest	13	Other interest		13							
14 Repairs	14	Repairs		14		1,	500.				
15 Supplies	15	Supplies		15		1,	800.				
16 Taxes	16	Taxes		16							
17 Utilities	17	Utilities		17		2,	300.				
18 Depreciation expense or depletion	18			18							
19 Other (list) ► 19	19	Other (list)		19							
20 Total expenses. Add lines 5 through 19 20 7 , 600 .	20	Total expenses. Add	lines 5 through 19	20		7,	600.				
21 Subtract line 20 from line 3 (rents) and/or 4 (royalties). If	21	Subtract line 20 from	line 3 (rents) and/or 4 (royalties). If								
result is a (loss), see instructions to find out if you must											
file Form 6198				21		-7,	000.				
22 Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions)	22			22	(7,0	000.)	()(
23a Total of all amounts reported on line 3 for all rental properties 23a 600.	23a		·	rties					60	0.0	
b Total of all amounts reported on line 4 for all royalty properties 23b	b						23b				
c Total of all amounts reported on line 12 for all properties	С						23c				
d Total of all amounts reported on line 18 for all properties	d						23d				
e Total of all amounts reported on line 20 for all properties	е						23e		7,60	00.	
24 Income. Add positive amounts shown on line 21. Do not include any losses	24										
25 Losses. Add royalty losses from line 21 and rental real estate losses from line 22. Enter total losses here . 25 (7,000	25	Losses. Add royalty lo	osses from line 21 and rental real estate	losses	from lir	ne 22. E	nter tota	al losses he	re .	25 (7,000.
26 Total rental real estate and royalty income or (loss). Combine lines 24 and 25. Enter the result	26	• •							-		

here. If Parts II, III, IV, and line 40 on page 2 do not apply to you, also enter this amount on

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

-7,000.

26