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

Subm	ission Identification Number (SID)				
Taxpaye	er's name	Social sec	curity numb	per	
AMI'	THA PAYALA	882-	52-007	8	
Spouse	's name			urity numbe	r
Doub	Toy Datum Information Toy Year Ending December 21			bla a vi—i a av	`
Part		nter year yo	u are au	inorizing.	.)
	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	l 70	,557.
2	Total tax				,275.
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099				,095.
4	Amount you want refunded to you				,820.
5	Amount you owe				,020.
Part	•	nd keep a c	opy of y	our retu	ırn)
my know return of to send for any Agent of payme authori payme busines taxes to person	penalties of perjury, I declare that I have examined a copy of the income tax return (original or amer owledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I (original or amended) I am now authorizing. I consent to allow my intermediate service provider, trading my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for or delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to termint, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation as days prior to the payment (settlement) date. I also authorize the financial institutions involved in to receive confidential information necessary to answer inquiries and resolve issues related to tail identification number (PIN) below is my signature for the income tax return (original or amended on the payment Consent.	above are the ansmitter, or ele rejection of the U.S. Treasure tindicated in the ititution to debit inate the author requests must the processing the payment. I	amounts factronic retreatments and its contents and its contents the entry to rization. To the electronic description of the electronic further acceptance of the electronic receives and the electron	rom the in turn origina ssion, (b) the designated paration so to this acco fo revoke (ved no late ectronic parknowledge	come tax ktor (ERO) ne reason Financial ftware for bunt. This (cancel) a er than 2 ayment of that the
	ayer's PIN: check one box only				
X		ate mv PIN	_ , ,	7 8	as my
	ERO firm name signature on the income tax return (original or amended) I am now authorizing.	,	Enter five don't ente		,
	I will enter my PIN as my signature on the income tax return (original or amended) I a if you are entering your own PIN and your return is filed using the Practitioner PIN n below.	nethod. The E	RO must		
Your s	signature ► Date	03/20	0/2023		
Spous	se's PIN: check one box only	ı			
. Г	I authorize to enter or gener	ate my PIN			as my
	ERO firm name	,	Enter five		,
	signature on the income tax return (original or amended) I am now authorizing.		don't ente	r all zeros	
	I will enter my PIN as my signature on the income tax return (original or amended) I a if you are entering your own PIN and your return is filed using the Practitioner PIN n below.				
Spous	se's signature ▶ Date	>			
	Practitioner PIN Method Returns Only—continue be	low			
Part	Certification and Authentication — Practitioner PIN Method Only				
ERO's	S EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN.		9 6 6	1 9 8	9
		Don't	enter all ze	#10S	
authori	y that the above numeric entry is my PIN, which is my signature for the electronic individual incor ized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am s ements of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers	submitting this	return in a	accordance	
ERO's	s signature ► Date	•			
	ERO Must Retain This Form — See Instruction				
	Don't Submit This Form to the IRS Unless Requested				

Department of the Treasury-Internal Revenue Service U.S. Nonresident Alien Income Tax Return 2022 OMB No. 1545-0074

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

For the year Ja	ın. 1–[Dec. 31, 2022, or other tax year begin	nning	, 2022,	ending	,	20	See separate instructions.
Filing Status		Single	, , ,	,	ng surviving spouse	` '	☐ Est	ate 🗌 Trust
Check only one box.		you checked the QSS box, enter the o		e ii the qualifying persoi	·			
Your first name	e and	middle initial	Last na	ame				entifying number ructions)
AMITHA			PAYA	LA			882-	52-0078
Home address	(num	ber and street). If you have a P.O. bo	ox, see ins	structions.				Apt. no.
2701 MAC	ARTH	UR BLVD			11	22		
City, town, or p	oost o	ffice. If you have a foreign address,	also comp	lete spaces below.		State		ZIP code
LEWISVIL	LE					TX		75067
Foreign countr	y nam	е	Foreigi	n province/state/county		Foreign	postal cod	de
Digital Asset		ny time during 2022, did you: (a) rec erwise dispose of a digital asset (or a						exchange, gift, or . Yes X No
Dependents	s					(4) Ch	eck the box	if qualifies for (see inst.):
•		(1) First name Last nam	е	(2) Dependent's identifying number	(3) Relationship to y	ou Chi	ld tax credi	t Credit for other dependents
If more than four	_							
instructions and							Щ_	
check here								
Income	1a	Total amount from Form(s) W-2, b	`	,				88,605.
-	b	Household employee wages not re						
	С	Tip income not reported on line 1a						
	d	Medicaid waiver payments not rep		()	,			
	е	Taxable dependent care benefits f						
Business	f	Employer-provided adoption bene		·				
Attach	g	Wages from Form 8919, line 6 .						
Form(s) W-2,	h	Other earned income (see instructi	,				. 1h	
1042-S,	į.	Reserved for future use					4.	
RRB-1042-S,	J	Reserved for future use			1 1		. 1j	
and 8288-A	K	Total income exempt by a treaty fr						
	_	()			1k		4-	00 605
Form(s)	Z	Add lines 1a through 1h	1	I			. 1z	88,605.
1099-R if	2a	·	2a 3a		kable interest		. 2b	
tax was	_				dinary dividends .			
	4a 5a		4a 5a		cable amount			
get a Form	5a 6	Reserved for future use						
W-2, see	7	Capital gain or (loss). Attach Sche						
Status Check only one box. Your first name at AMITHA Home address (reconstructions) City, town, or pooling tall Assets Dependents (see instructions): If more than four dependents, see instructions and check here Income Effectively Connected With U.S. Trade or Business Attach Form(s) W-2, 1042-S, SSA-1042-S, SSA-1042-S, and 8288-A here. Also attach Form(s) 1099-R if tax was withheld. If you did not get a Form W-2, see instructions.	8	Other income from Schedule 1 (Fo	•		•			-9,048.
	9	Add lines 1z, 2b, 3b, 4b, 5b, 7, and						79,557.
	10	Adjustments to income:	. 5. 11110 10	, Joan total officeritory c				10,001.
	а	From Schedule 1 (Form 1040), line	26		10a			
	b	Reserved for future use						
	c	Reserved for future use						
	d	Enter the amount from line 10a. Th					. 10d	
	11	Subtract line 10d from line 9. This		=				79,557.
	12	Itemized deductions (from Sched	dule A (Fo	rm 1040-NR)) or, for ce	tain residents of Inc	lia, standa	ard	
	40-	deduction (see instructions)				_US/India_Tre	eaty 12	12,950.
	13a	Qualified business income deducti						
	b	Exemptions for estates and trusts						
	C	Add lines 13a and 13b						
	14	Add lines 12 and 13c Subtract line 14 from line 11. If zer		ontor O. This is your to				12,950. 66,607.
	15	Subtract line 14 from line 11. If Zer	o or iess.	enter -u This is vour ta	xable income		. 10	1 00.0U/-

Tax and	16	Tax (see instructions). Check if any	from For	m(s): 1 🗌 88	1 4 2 🗌 497	2 3			16	10,275.
Credits	17	Amount from Schedule 2 (Form 10	040), line	3					17	0.
	18	Add lines 16 and 17							18	10,275.
	19	Child tax credit or credit for other	depende	ents from Sched	ule 8812 (Form 10	40) .			19	
	20	Amount from Schedule 3 (Form 10	040), line	8					20	
	21	Add lines 19 and 20							21	
	22	Subtract line 21 from line 18. If ze	ro or less	s, enter -0					22	10,275.
	23a	Tax on income not effectively con-				1 1				
		Schedule NEC (Form 1040-NR), lin	ne 15 .			23a				
	b	Other taxes, including self-employ line 21	•	·	, , , , , , , , , , , , , , , , , , , ,	23b				
	С	Transportation tax (see instruction	ns)			23c				
	d	Add lines 23a through 23c							23d	
	24	Add lines 22 and 23d. This is your	total ta	x					24	10,275.
Payments	25	Federal income tax withheld from	:							
•	а	Form(s) W-2				25a	12	,095.		
	b	Form(s) 1099				25b				
	С	Other forms (see instructions) .				25c				
	d	Add lines 25a through 25c							25d	12,095.
	е	Form(s) 8805							25e	·
	f	Form(s) 8288-A							25f	
	g	Form(s) 1042-S							25g	
	26	2022 estimated tax payments and							26	
	27	Reserved for future use				27				
	28	Additional child tax credit from Sc				28			-	
	29	Credit for amount paid with Form		` '		29			-	
	30	Reserved for future use				30				
	31	Amount from Schedule 3 (Form 10				31			-	
		,	,				dita		20	
	32 33	Add lines 28, 29, and 31. These at Add lines 25d, 25e, 25f, 25g, 26, and 25d, 25e, 25f, 25g, 26, and 25d, 25e, 25f, 25g, 26, and 25d, 25e, 25f, 25g, 26d, and 25d, 25e, 25f, 25g, 26d, and 25d, 25d, 25d, 25d, 25d, 25d, 25d, 25d	-						32	12 005
D - f	34	If line 33 is more than line 24, sub							33	12,095.
Refund						•	-			1,820.
Di	35a	Amount of line 34 you want refun							35a	1,820.
Direct deposit? See instructions.	b	Routing number 1 1 1 9			c Type:	Cnecki	ng 🗀	Savings		
	d	Account number 6 5 8 6								
	е	If you want your refund check ma								
		enter it here.								
	36	Amount of line 34 you want applie			ed tax	36				
Amount	37	Subtract line 33 from line 24. This		-	!					
You Owe	00	For details on how to pay, go to w	_	-		1 1			37	
	38	Estimated tax penalty (see instruc								□
Third	•	u want to allow another person to	discuss t		e IRS? See instru	ctions.		s. Compl		ow. 🗵 No
Party Designee	Desig			Phone				nal identifi	cation	
Designee	name				<u> </u>		numbe	` '	L	
0.		penalties of perjury, I declare that I have they are true, correct, and complete. De								
Sign	Yours	signature		Date	Your occupation					ent you an Identity
Here						NIO T		1		PIN, enter it here
					SOFTWARE E	NG IN	EEK	(see	inst.)	
	Phone		Duon	Email address		Dete		DTIN	1	01 1 1
Paid	Prepa		•	's signature		Date		PTIN		Check if:
Preparer					GUPTA TALLAM	03/04	4/2023	P02082	2703	Self-employed
Use Only		s name SYAMILRAMIANA GID						Phone n	, , ,	78)965-9522
Coc Ciny	Firm's	address 245 DOONEY CO	חסום ים יו	M NOTWORTS	т 00016			Firm's F	IN Q	4-3171965

Form 1040-NR (2022)

SCHEDULE 1 (Form 1040)

Additional Income and Adjustments to Income

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service

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

Internal Revenue Service	Go to www.irs.gov/Form1040 for instructions and the latest information.		Sequence No. 01
Name(s) shown on Fo	Your soc	al security number	
AMITHA PAYALA		882-52	-0078

Par	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	ich Schedule E .	5	-9,048.
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 (4	
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:	0-		
0	Total ather income. Add lines On three tables	8z		
9 10	Total other income. Add lines 8a through 8z		10	-9,048.
IU	Compine lines i unioudii / and 5. chilef here and on form 1040. 1040-5K.	UI 1U4U-INTI. IIIIE 8	IU	-9 , 048.

Schedule 1 (Form 1040) 2022 Page **2**

Par	t II Adjustments to Income			
11	Educator expenses		11	
12	Certain business expenses of reservists, performing artists, and fee-basis go	vernment		
	officials. Attach Form 2106		12	
13	Health savings account deduction. Attach Form 8889		13	
14	Moving expenses for members of the Armed Forces. Attach Form 3903		14	
15	Deductible part of self-employment tax. Attach Schedule SE		15	
16	Self-employed SEP, SIMPLE, and qualified plans		16	
17	Self-employed health insurance deduction		17	
18	Penalty on early withdrawal of savings		18	
19a	Alimony paid		19a	
b	Recipient's SSN			
С	Date of original divorce or separation agreement (see instructions):			
20	IRA deduction		20	
21	Student loan interest deduction		21	
22	Reserved for future use		22	
23	Archer MSA deduction		23	
24	Other adjustments:			
а	Jury duty pay (see instructions)		-	
b	Deductible expenses related to income reported on line 8l from the			
	rental of personal property engaged in for profit		-	
С	Nontaxable amount of the value of Olympic and Paralympic medals			
	and USOC prize money reported on line 8m			
d	Reforestation amortization and expenses		-	
е	Repayment of supplemental unemployment benefits under the Trade Act of 1974			
f	Contributions to section 501(c)(18)(D) pension plans		-	
g	Contributions by certain chaplains to section 403(b) plans 24g		-	
_	Attorney fees and court costs for actions involving certain unlawful		-	
	discrimination claims (see instructions)			
i	Attorney fees and court costs you paid in connection with an award			
	from the IRS for information you provided that helped the IRS detect			
	tax law violations			
j	Housing deduction from Form 2555			
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form			
	1041)			
Z	Other adjustments. List type and amount:			
	24z			
25	Total other adjustments. Add lines 24a through 24z		25	
26	Add lines 11 through 23 and 25. These are your adjustments to income. Enter he			
	Form 1040 or 1040-SR, line 10, or Form 1040-NR, line 10a		26	

SCHEDULE NEC (Form 1040-NR)

Tax on Income Not Effectively Connected With a U.S. Trade or Business

Go to www.irs.gov/Form1040NR for instructions and the latest information.

Attach to Form 1040-NR.

OMB No. 1545-0074

2022

Attachment
Sequence No. 7B

Name shown on Form 1040-NR
AMITHA PAYALA

Department of the Treasury Internal Revenue Service

Your identifying number 882-52-0078

Enter a	amount of income und	er the	appropriate rate of tax. See instructions.							
			Nature of Income			(a) 10%	(b) 15%	(c) 30%	(d) Other	(specify)
		Is and dividend equivalents: Is paid by U.S. corporations				(a) 1070	(6) 1070	(6) 00 70	%	%
1	Dividends and divide	end ec	quivalents:							
а	Dividends paid by U.	S. co	rporations		1a					
b	Dividends paid by fo	reign	corporations		1b					
С	Dividend equivalent p	ayme	nts received with respect to section 871(m) tran	nsactions	1c					
2	Interest:									
а					2a					
b	Paid by foreign corp	oratio	ns		2b					
С					2c					
3					3					
4	•		•		4					
5					5					
6					6					
7					7					
8	•				8					
9		ds paid by foreign corporations dequivalent payments received with respect to section 871(m) transations dequivalent payments received with respect to section 871(m) transations dequivalent payments received with respect to section 871(m) transations dequivalent payments received with respect to section 871(m) transations dequivalent payments received with respect to section 871(m) transations dequivalent payments received with respect to section 871(m) transations dequivalent payments received with respect to section 871(m) transations dequivalent payments received with respect to section 871(m) transations dequivalent payments received with respect to section 871(m) transations dequivalent payments received with respect to section 871(m) transations received		9						
10	Gambling—Resident If zero or less, ente	ts of C r -0	Canada only. Enter net income in column (c).							
а	Winnings									
b	Losses				10c					
11	Gambling winnings	-Resid	dents of countries other than Canada.		44					
12					11					
12					12					
13					13					
14	_				14					
15						through (d) of line 1	/ Enter the total here	and on Form 10/0	-NR. line 23a 15	
	Tax on moonic not c	iicotii							TVIT, IIITO ZOG	
Enter o	nly the capital gains and	16	(a) Kind of property and description						(f) LOSS	(a) CAIN
losses f	from property sales or ges that are from sources he United States and not	10	(if necessary, attach statement of	(b) Date acq mm/dd/yy		(c) Date sold mm/dd/yyyy	(d) Sales price	(e) Cost or other basis	If (e) is more than (d), subtract (d) from (e).	(g) GAIN If (d) is more than (e), subtract (e) from (d).
effectiv	effectively connected with a U.S. business. Do not include a gain									
or loss	on disposing of a U.S. real									
gains a	y interest; report these nd losses on Schedule D									
(Form 1										
	property sales or ges that are effectively									
connec	ted with a U.S. business edule D (Form 1040),							17		
	797, or both.	18	Capital gain. Combine columns (f) and (g)) of line 17	7. Ente	er the net gain he	re and on line 9 abo	ove. If a loss, ente	er -0 18	

SCHEDULE OI (Form 1040-NR)

Other Information

Go to www.irs.gov/Form1040NR for instructions and the latest information.

Attach to Form 1040-NR.

Answer all questions.

2022 Attachment Sequence No. 7C

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service

	snown on Form 1040-NR			Your identifying						
	THA PAYALA			882-52-00						
Α	Of what country or countries were you a citizen or nation	al during the tax yea	ar?_INDIA							
В	In what country did you claim residence for tax purpose	s during the tax yea	ar? India							
С	Have you ever applied to be a green card holder (lawful p	permanent resident)	of the United States? .		∐ Yes	⊠ No				
D	Were you ever:					_				
	. A U.S. citizen?				∐ Yes	⊠ No				
2	. A green card holder (lawful permanent resident) of the Ur			∐ Yes	⊠ No					
	If you answer "Yes" to (1) or (2), see Pub. 519, chapter 4,	•								
Ε	If you had a visa on the last day of the tax year, enter immigration status on the last day of the tax yearF1_									
F	Have you ever changed your visa type (nonimmigrant stall f you answered "Yes," indicate the date and nature of the	∐ Yes	⊠ No							
G	List all dates you entered and left the United States durin	g 2022. See instruc	tions.							
	Note: If you're a resident of Canada or Mexico AND con			ent intervals,						
	check the box for Canada or Mexico and skip to item I	<u>1.</u> <u>.</u>	\square Canada	Mexico						
	Date entered United States Date departed United State mm/dd/yy mm/dd/yy	es	Date entered United State mm/dd/yy		rted Unite nm/dd/yy	d States				
Н	Give number of days (including vacation, nonworkdays, and									
	2020, 2021	, and 2	2022 365							
I	Did you file a U.S. income tax return for any prior year? .				X Yes	☐ No				
J	If "Yes," give the latest year and form number you filed: 1040NR Are you filing a return for a trust?									
	If "Yes," did the trust have a U.S. or foreign owner under				Yes	⊠ No				
	U.S. person, or receive a contribution from a U.S. person	?		Yes	□No					
Κ	Did you receive total compensation of \$250,000 or more				☐ Yes	⊠ No				
	If "Yes," did you use an alternative method to determine				☐ Yes	☐ No				
L	Income Exempt From Tax—If you are claiming exempt complete (1) through (3) below. See Pub. 901 for more in			tax treaty with	a foreign	country,				
1	Enter the name of the country, the applicable tax treaty an amount of exempt income in the columns below. Attach Fe	icle, the number of r	months in prior years you	claimed the tre	aty benefi	t, and the				
	(a) Country	(b) Tax treaty articl		s (d) Am	ount of exe	exemnt				
	(4) 334)	claimed in prior tax								
	-									
	(e) Total. Enter this amount on Form 1040-NR, line 1k. D	-								
2	Were you subject to tax in a foreign country on any of the		• •		∐ Yes	∐ No				
3	Are you claiming treaty benefits pursuant to a Competent	=				☐ No				
	If "Yes," attach a copy of the Competent Authority deterr	nination letter to you	ur return.							
М	Check the applicable box if:									
	 This is the first year you are making an election to treat ir with a U.S. trade or business under section 871(d). See in 	nstructions				🗆				
2	You have made an election in a previous year that has States as effectively connected with a U.S. trade or busing									

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.

2022 Attachment Sequence No. 13

OMB No. 1545-0074

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

AMITHA PAYALA

Your social security number 882-52-0078

Par	Income or Loss From Rental Real Esta Note: If you are in the business of renting personal rental income or loss from Form 4835 on page 2, li	proper	ty, use	yalties Schedule	C . See	instru	ctions. If you a	are an indi	vidual, rep	ort farn	n
Α	Did you make any payments in 2022 that would requi		to file	Form(s) 1	099? S	See in:	structions .		. \(\text{Ye}	s X	No
	If "Yes," did you or will you file required Form(s) 1099										No
1a	Physical address of each property (street, city, sta										
Α	18/B,2NDCROSS,VENKATEGOWDA KEMPAPU	JRA,	BENO	GALURU	KARN	ATAK	A IN 560	024			
В		,									
С											
1b		For each rental real estate property lis above, report the number of fair renta					air Rental Days		nal Use nys	Q	JV
A	personal use days. Check	the Q	JV box	c only	Α		365		0	Г	7
В	if you meet the requiremen				В						
С	qualified joint venture. See	ınstru	ictions	5.	С						
Туре	of Property:								'		
	Single Family Residence 3 Vacation/Short-Tender 4 Commercial	m Ren	tal	5 Land 6 Roya			Self-Rental Other (desc	ribe)			
							Propert	ies:			
Inco					Α		В			С	
3	Rents received		3		6	24.					
4	Royalties received		4								
_	enses:										
5	Advertising		5								
6	Auto and travel (see instructions)		6								
7	Cleaning and maintenance		7		2,5	45.					
8	Commissions		8								
9	Insurance		9								
10	Legal and other professional fees		10								
11	Management fees		11		2,2	53.					
12	Mortgage interest paid to banks, etc. (see instruction		12								
13	Other interest		13		1 0	2.0					
14	Repairs		14			32.					
15	Supplies		15		1,6	45.					
16	Taxes		16		1 /	0.7					
17	Utilities		17		1,4	97.					
18	Depreciation expense or depletion		18								
19 20	Other (list)		20		9,6	7.2					
	Total expenses. Add lines 5 through 19		20		9,0	12.					
21	Subtract line 20 from line 3 (rents) and/or 4 (royalti result is a (loss), see instructions to find out if you file Form 6198	must	21		-9,0	48.					
22	Deductible rental real estate loss after limitation, in on Form 8582 (see instructions)	,	22	(-9,04		()	(,
23a					· .	23a		624.			
b						23b					
С						23c					
d						23d					
е						23e	g	9,672.			
24	Income. Add positive amounts shown on line 21.							. 24			
25	Losses. Add royalty losses from line 21 and rental re-			•		nter t	otal losses he		(9,04	18.
26	Total rental real estate and royalty income or (I here. If Parts II, III, IV, and line 40 on page 2 de	loss).	Comb	ine lines	24 and	25. E	nter the resu	ult			
	Schedule 1 (Form 1040), line 5. Otherwise, include							. 26		-9,0)48.