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	er's name	Social securi	ty numb	per	
KRIS	SHNA PRIYA DIRISALA	312-99	-555	4	
Spouse'	s name	Spouse's soo	ial secu	urity number	
Part	Tax Return Information — Tax Year Ending December 31, 2022 (Ente	_ er year you a	ro au	thorizing)	
	whole dollars only on lines 1 through 5.	ei yeai you a	ie au	uionzing.)	
	Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.				
1	Adjusted gross income		1	74,6	52.
2	Total tax		2	9,1	
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3	16,5	
4	Amount you want refunded to you		4		25.
5	Amount you owe		5		
Part	II Taxpayer Declaration and Signature Authorization (Be sure you get and	keep a cop	y of y	our return)	
my know return (to send for any Agent t payment authorize payment business taxes t persona	penalties of perjury, I declare that I have examined a copy of the income tax return (original or amended by by by an acknowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I about original or amended) I am now authorizing. I consent to allow my intermediate service provider, transfully return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for redelay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the ionitiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account in the of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution in the toric and effect until I notify the U.S. Treasury Financial Agent to terminant, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation resist days prior to the payment (settlement) date. I also authorize the financial institutions involved in the oreceive confidential information necessary to answer inquiries and resolve issues related to the alignment of the income tax return (original or amended) I are funded Withdrawal Careact.	ove are the amomitter, or electro- ejection of the tru.S. Treasury a dicated in the truicion to debit the tet the authoriza quests must be e processing of payment. I furi	ounts for the counts of the counts of the country for the coun	rom the income turn originator is sion, (b) the redesignated Fina caration softwar to this account for revoke (can ved no later the ectronic paymer knowledge that	ne tax (ERO) eason ancial are for t. This icel) a han 2 ent of at the
	nic Funds Withdrawal Consent. yer's PIN: check one box only				
X		e my PIN	5 5	5 5 4 as	s my
	ERO firm name signature on the income tax return (original or amended) I am now authorizing.	ř En		digits, but er all zeros	OTTTY
	I will enter my PIN as my signature on the income tax return (original or amended) I am if you are entering your own PIN and your return is filed using the Practitioner PIN met below.				
Your s	signature ► Konshnapriya Date ►	3/16/2023	3		
Spous	se's PIN: check one box only				
Spous	I authorize to enter or generate	my DIN			c mv
	ERO firm name	-	ter five	digits, but	s 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 if you are entering your own PIN and your return is filed using the Practitioner PIN met below.				
Spous	e's signature ▶ Date ▶				
	Practitioner PIN Method Returns Only—continue below	N			
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.	2 2 4 9 Don't ent	6 6 er all ze	1 9 8 9 eros	9
authori	that the above numeric entry is my PIN, which is my signature for the electronic individual income zed to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am subments of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS e-file Providers of	mitting this retu	ırn in a	accordance wit	
ERO's	signature ▶ Date ▶				
	ERO Must Retain This Form — See Instructions				
	Don't Submit This Form to the IRS Unless Requested To	Do So			

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 c		e ii the qualifying persoi	·			
Your first name	e and	middle initial	Last na	ame				entifying number ructions)
KRISHNA	PRIY	ZA	DIRI	SALA			312-	99-5554
Home address	(num	ber and street). If you have a P.O. bo	x, see ins	structions.				Apt. no.
15566 SE	5TH	CT			15	566		
City, town, or p	oost o	ffice. If you have a foreign address, a	also comp	lete spaces below.		State		ZIP code
BELLEVUE						WA		98007
Foreign countr	y nam	e	Foreig	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.):
(see instructions		(1) First name Last name	е	(2) Dependent's identifying number	(3) Relationship to y	ou Ch	ild tax credit	Credit for other dependents
If more than fou	_							
dependents, see							Щ_	
instructions and								
check here							Ц	
Income	1a	Total amount from Form(s) W-2, bo	`	,				84,091.
Effectively	b	Household employee wages not re						
Connected	С	Tip income not reported on line 1a	`	,				
With U.S.	d	Medicaid waiver payments not rep		()	,			
Trade or	е	Taxable dependent care benefits for						
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, SSA-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 fro						
here. Also attach	_	line 1(e)			1k		4-	04 001
Form(s)	Z	Add lines 1a through 1h	1	I			. 1z	84,091.
1099-R if	2a	· —	2a 3a		kable interest		. 2b	
tax was withheld.	_				dinary dividends .			
If you did not	4a 5a	-	4a 5a		cable amount			
get a Form	5a 6	Reserved for future use						
W-2, see	7	Capital gain or (loss). Attach Sched						
instructions.	8	Other income from Schedule 1 (Fo	•		•			-9,439.
	9	Add lines 1z, 2b, 3b, 4b, 5b, 7, and						74,652.
	10	Adjustments to income:		, Juli Local Ollocavery C				/ 17,002.
	а	From Schedule 1 (Form 1040), line	26		10a			
	b	Reserved for future use						
	С	Reserved for future use						
	d	Enter the amount from line 10a. Th					. 10d	
	11	Subtract line 10d from line 9. This		=				74,652.
	12	Itemized deductions (from Sched	dule A (Fo	rm 1040-NR)) or, for ce	tain residents of Inc		ard	
	10-	deduction (see instructions)				"nn/ rfinta" II	eaty 12	12,950.
	13a	Qualified business income deducti						
	b	Exemptions for estates and trusts					40-	
	C 1/	Add lines 13a and 13b Add lines 12 and 13c						10.050
	14 15	Subtract line 14 from line 11. If zero						12,950. 61,702.
	10		O OI 1000.	United to a fillion to votil La	AUDIO 111001116 .		. 10	U + / U / -

Tax and	16	Tax (see instructions). Check if ar	y from Foi	rm(s): 1 🗌 88	314 2 [4972	2 3			16	9,197.
Credits	17	Amount from Schedule 2 (Form	1040), line	3						17	0.
	18	Add lines 16 and 17								18	9,197.
	19	Child tax credit or credit for other	r depende	ents from Sched	ule 8812 (Fo	orm 104	lO) .			19	
	20	Amount from Schedule 3 (Form	1040), line	8						20	
	21	Add lines 19 and 20								21	
	22	Subtract line 21 from line 18. If z	ero or les	s, enter -0						22	9,197.
	23a	Tax on income not effectively co Schedule NEC (Form 1040-NR),					23a				
	b	Other taxes, including self-empline 21	•		,	,,	23b				
	С	Transportation tax (see instruction					23c				
	d	Add lines 23a through 23c				_				23d	
	24	Add lines 22 and 23d. This is you								24	9,197.
Payments	25	Federal income tax withheld from									3, 23
dymonio	а	Form(s) W-2					25a	16	,522.		
	b	Form(s) 1099				Г	25b		, === .		
	С	Other forms (see instructions) .				Г	25c				
	d	Add lines 25a through 25c								25d	16,522.
	e	Form(s) 8805								25e	
	f	Form(s) 8288-A								25f	
	g	Form(s) 1042-S								25g	
	26	2022 estimated tax payments ar								26	
	27	Reserved for future use		• •		1	27				
	28	Additional child tax credit from S				Г	28				
	29	Credit for amount paid with Forr		•	,	- F	29				
	30	Reserved for future use					30				
	31	Amount from Schedule 3 (Form					31				
	32	Add lines 28, 29, and 31. These				_		dits		32	
	33	Add lines 25d, 25e, 25f, 25g, 26,	-							33	16,522.
Refund	34	If line 33 is more than line 24, su		•						34	7,325.
riciana	35a	Amount of line 34 you want refu					•	-		35a	7,325.
Direct deposit?	b	Routing number 0 2 1 1			c Type:				Savings		,, ====
See instructions.	b Routing number 0 2 1 1 0 0 3 6 1 c Type: ☑ Checking ☐ Savings d Account number 7 6 6 3 0 9 3 1 1							ourgo			
	e										
	Ū	ontor it have					0 1101 0		pago i,		
	36	Amount of line 34 you want app		ur 2023 estimat			36				
Amount	37	Subtract line 33 from line 24. Thi									
You Owe		For details on how to pay, go to				tions .				37	
	38	Estimated tax penalty (see instru	ictions) .			.	38				
Third	Do yo	u want to allow another person to	discuss t	his return with th	ne IRS? See	instruc	tions.	☐ Ye	s. Comp	lete bel	ow. 🛛 No
Party	Desig	·		Phone					ıal identif		
Designee	name							. numbe			
		penalties of perjury, I declare that I ha they are true, correct, and complete. [
Sign	Yours	signature		Date	Your occup	pation			If the	e IRS se	ent you an Identity
Here									l l		PIN, enter it here
					SOFTWARE	DEVEL	OPMENT	ENGINE	ER (see	inst.)	
	Phone		D.	Email address		Т	D :	-	DT'A		
Paid	Prepa	rer's name	Preparer	's signature			Date	_	PTIN		Check if:
Preparer				RIYA RAM SAGAI	R GUPTA TA	ALLAM	03/15	5/2023	P02082		Self-employed
Use Only	Firm's name SYANLERBYALRAMANAS GUITE TALLAM Phone no							78)965-9522			
Coo Ciny	Firm's address 245 ROONEY CT E BRUNSWICK NJ 08816						Firm's E	IN 8	4-3171965		

Form 1040-NR (2022)

SCHEDULE 1 (Form 1040)

Additional Income and Adjustments to Income

OMB No. 1545-0074

2022
Attachment
Sequence No. 01

Department of the Treasury Internal Revenue Service Attach to Form 1040, 1040-SR, or 1040-NR.

Go to www.irs.gov/Form1040 for instructions and the latest information.

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

KRISHNA PRIYA DIRISALA

Go to www.irs.gov/Form1040 for instructions and the latest information.

Sequence No. 01

Your social security number

312-99-5554

Par	t I Additional Income			
1	Taxable refunds, credits, or offsets of state and local income taxes		1	
2a	Alimony received		2a	
b	Date of original divorce or separation agreement (see instructions):			
3	Business income or (loss). Attach Schedule C		3	
4	Other gains or (losses). Attach Form 4797		4	
5	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Atta		5	-9,439.
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		
- 1	Income from the rental of personal property if you engaged in the rental			
	for profit but were not in the business of renting such property	81		
m	Olympic and Paralympic medals and USOC prize money (see			
	instructions)	8m		
n	Section 951(a) inclusion (see instructions)	8n		
0	Section 951A(a) inclusion (see instructions)	80		
р	Section 461(I) excess business loss adjustment	8p		
q	Taxable distributions from an ABLE account (see instructions)	8q		
r	Scholarship and fellowship grants not reported on Form W-2	8r		
S	Nontaxable amount of Medicaid waiver payments included on Form			
	1040, line 1a or 1d	8s ()	
t	Pension or annuity from a nonqualifed deferred compensation plan or			
	a nongovernmental section 457 plan	8t		
u	Wages earned while incarcerated	8u		
Z	Other income. List type and amount:			
		8z		
9	Total other income. Add lines 8a through 8z		9	
10	Combine lines 1 through 7 and 9. Enter here and on Form 1040, 1040-SR	, or 1040-NR, line 8	10	-9,439.

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

Department of the Treasury Internal Revenue Service

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

KRISHNA PRIYA DIRISALA

Enter amount of income under the appropriate rate of tax. See instructions.

Nature of Income		(a) 10%	(b) 15%	(a) 200/	(d) Other (specify)			
	Nature of income		(a) 10%	(b) 13%	(c) 30%	%	%	
1	Dividends and dividend equivalents:							
а	Dividends paid by U.S. corporations	1a						
b	Dividends paid by foreign corporations	1b						
С	Dividend equivalent payments received with respect to section 871(m) transactions	1c						
2	Interest:							
а	Mortgage	2a						
b	Paid by foreign corporations	2b						
С	Other	2c						
3	Industrial royalties (patents, trademarks, etc.)	3						
4	Motion picture or TV copyright royalties	4						
5	Other royalties (copyrights, recording, publishing, etc.)	5						
6	Real property income and natural resources royalties	6						
7	Pensions and annuities	7						
8	Social security benefits	8						
9	Capital gain from line 18 below	9						
10	Gambling—Residents of Canada only. Enter net income in column (c). If zero or less, enter -0							
а	AAF.							
b	Winnings Losses	10c						
11	Gambling winnings—Residents of countries other than Canada.							
	Note: Losses not allowed	11						
12	Other (specify):							
		12						
13	Add lines 1a through 12 in columns (a) through (d)	13						
14	Multiply line 13 by rate of tax at top of each column	14						
15	Tax on income not effectively connected with a U.S. trade or business. Add column					-NR, line 23a 15		
	Capital Gains and Losses F	-rom	Sales or Excha	nges of Proper	ty	T		
losses f	hely the capital gains and from property sales or ges that are from sources be United States and not the capital gains and comproperty sales or ges that are from sources be United States and not the capital gains and good in the capital gains and		(c) Date sold mm/dd/yyyy	(d) Sales price	(e) Cost or other basis	(f) LOSS If (e) is more than (d), subtract (d) from (e).	(g) GAIN If (d) is more than (e), subtract (e) from (d).	
effectiv	ely connected with a U.S.							
or loss	s. Do not include a gain on disposing of a U.S. real							
	y interest; report these nd losses on Schedule D							
(Form 1	040).							
	property sales or ges that are effectively							
connec	ted with a U.S. business 17 Add columns (f) and (g) of line 16					()		
	18 Capital gain. Combine columns (f) and (g) of line 17	'. Ente	er the net gain here	e and on line 9 abo	ove. If a loss, ente	r -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.

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service

Name shown on Form 1040-NR

Attachment Sequence No. **7C** Answer all questions. Your identifying number

KRI	SHNA PRIYA DIRISALA			312-99-5554								
Α	Of what country or countries were you a citizen or national during the tax year? INDIA											
В	In what country did you claim residence for tax purposes during the tax year? United States											
С	Have you ever applied to be a green card holder (lawful permanent resident) of the United States?											
D	Were you ever:											
1.	1. A U.S. citizen?											
2.	A green card holder (lawful permanent resident) of the U	nited States?		🗌 Yes 🛛 🛚	10							
	If you answer "Yes" to (1) or (2), see Pub. 519, chapter 4	, for expatriation rule	s that apply to you.									
E	If you had a visa on the last day of the tax year, enter your visa type. If you didn't have a visa, enter your U.S. immigration status on the last day of the tax yearF1											
F	Have you ever changed your visa type (nonimmigrant status) or U.S. immigration status?											
G	List all dates you entered and left the United States during 2022. See instructions.											
	Note: If you're a resident of Canada or Mexico AND cocheck the box for Canada or Mexico and skip to item	mmute to work in th	e United States at frequ	ent intervals, Mexico								
	Date entered United States Date departed United States mm/dd/yy mm/dd/yy	tes	Date entered United State mm/dd/yy	Date departed United State mm/dd/yy	es							
Н	Give number of days (including vacation, nonworkdays, an 2020, 2021											
I	Did you file a U.S. income tax return for any prior year? . If "Yes," give the latest year and form number you filed:			🗵 Yes 🗌 N	10							
J	Are you filing a return for a trust?	· · · · · · ·		Yes 🗵 N	10							
	If "Yes," did the trust have a U.S. or foreign owner und U.S. person, or receive a contribution from a U.S. person	er the grantor trust r	ules, make a distributior	or loan to a	No							
K	Did you receive total compensation of \$250,000 or more If "Yes," did you use an alternative method to determine	during the tax year?	·	🗌 Yes 🗵 N	No							
L	Income Exempt From Tax—If you are claiming exempt complete (1) through (3) below. See Pub. 901 for more in	tion from income tax	x under a U.S. income									
1.	Enter the name of the country, the applicable tax treaty ar	ticle, the number of n	nonths in prior years you	claimed the treaty benefit, and	the							
	amount of exempt income in the columns below. Attach F	· · · · · · · · · · · · · · · · · · ·										
	(a) Country	(b) Tax treaty article	e (c) Number of month claimed in prior tax ye		ır							
	(e) Total. Enter this amount on Form 1040-NR, line 1k. I	On not enter it anywh	nere else on line 1		—							
2.	Were you subject to tax in a foreign country on any of th	•		Yes N	No.							
	Are you claiming treaty benefits pursuant to a Competer			□ Yes ⊠ N								
0.	If "Yes," attach a copy of the Competent Authority deter											
М	Check the applicable box if:	acion lottor to you										
	This is the first year you are making an election to treat i with a U.S. trade or business under section 871(d). See i		perty located in the Unite		ted							
2.		s not been revoked,	to treat income from re	al property located in the Un	ited							

SCHEDULE E (Form 1040)

Supplemental Income and Loss

(From rental real estate, royalties, partnerships, S corporations, estates, trusts, REMICs, etc.)

Department of the Treasury Internal Revenue Service

Attach to Form 1040, 1040-SR, 1040-NR, or 1041, Go to www.irs.gov/ScheduleE for instructions and the latest information. Attachment Sequence No. 13

OMB No. 1545-0074

Name(s) shown on return Your social security number 312-99-5554 KRISHNA PRIYA DIRISALA Part I Income or Loss From Rental Real Estate and Royalties Note: If you are in the business of renting personal property, use Schedule C. See instructions. If you are an individual, report farm rental income or loss from Form 4835 on page 2, line 40. Did you make any payments in 2022 that would require you to file Form(s) 1099? See instructions . If "Yes," did you or will you file required Form(s) 1099? ☐ Yes ☐ No 1a Physical address of each property (street, city, state, ZIP code) HYDERABAD, VIBHAV APARTMENTS H.B COLONY, MOULA-ALI TELANGANA IN 500040 Α В C 1b Type of Property **Fair Rental Personal Use** For each rental real estate property listed QJV (from list below) above, report the number of fair rental and **Davs Davs** personal use days. Check the QJV box only Α Α 365 0 if you meet the requirements to file as a В В qualified joint venture. See instructions. С C Type of Property: 3 Vacation/Short-Term Rental 1 Single Family Residence 5 Land 7 Self-Rental 8 Other (describe) 2 Multi-Family Residence 4 Commercial 6 Royalties **Properties:** Α В C Income: 3 524. 4 Royalties received 4 **Expenses:** 5 5 Advertising 6 Auto and travel (see instructions) 6 7 Cleaning and maintenance. 7 2,415. 8 Commissions 8 9 9 Insurance . . 10 10 Legal and other professional fees 11 Management fees 11 1,632. 12 Mortgage interest paid to banks, etc. (see instructions) 12 13 13 2,109. 14 14 Repairs 15 Supplies 15 1,966. 16 16 Taxes 17 Utilities 17 1,841. 18 18 Depreciation expense or depletion Other (list) 19 19 20 20 Total expenses. Add lines 5 through 19 9,963. 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 -9,439. 22 Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions) -9.439.) 524. Total of all amounts reported on line 3 for all rental properties Total of all amounts reported on line 4 for all royalty properties 23b Total of all amounts reported on line 12 for all properties 23c 23d Total of all amounts reported on line 18 for all properties 9,963. Total of all amounts reported on line 20 for all properties 23e 24 **Income.** Add positive amounts shown on line 21. **Do not** include any losses 24

25

26

9,439.

-9,439.

25

26

Losses. Add royalty losses from line 21 and rental real estate losses from line 22. Enter total losses here

Total rental real estate and royalty income or (loss). Combine lines 24 and 25. Enter the result

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