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

Submission Identification Number (SID)		
Taxpayer's name	Social securit	y number
ANUSRI KOTHA	872-35-	-4041
Spouse's name	Spouse's soci	ial security number
Part I Tax Return Information — Tax Year Ending December 31, 2023	Enter year you a	re authorizing.)
Enter 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 63,598.
2 Total tax		2 6,247.
3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3 9,447.
4 Amount you want refunded to you		4 3,200.
5 Amount you owe		5
Part II Taxpayer Declaration and Signature Authorization (Be sure you get Under penalties of perjury, I declare that I have examined a copy of the income tax return (original or an		
my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Parreturn (original or amended) I am now authorizing. I consent to allow my intermediate service provider, to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authoriz Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution acco payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial i authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to the payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellatiousiness days prior to the payment (settlement) date. I also authorize the financial institutions involved taxes to receive confidential information necessary to answer inquiries and resolve issues related to personal identification number (PIN) below is my signature for the income tax return (original or amend Electronic Funds Withdrawal Consent.	transmitter, or electron for rejection of the transmitter, and the U.S. Treasury are untindicated in the tain nstitution to debit the erminate the authorization requests must be d in the processing of the payment. I furti	onic return originator (ERO) ansmission, (b) the reason and its designated Financial ax preparation software for entry to this account. This ation. To revoke (cancel) a e received no later than 2 the electronic payment of her acknowledge that the
Taxpayer's PIN: check one box only		
▼ I authorize GLOBAL TAXES LLC to enter or ger	nerate my PIN	4 0 4 1 as my
ERO firm name signature on the income tax return (original or amended) I am now authorizing.	Ent	er five digits, but n't enter all zeros
I will enter my PIN as my signature on the income tax return (original or amended) if you are entering your own PIN and your return is filed using the Practitioner PIN below.		
Your signature ► _ Da	te ▶	
Spouse's PIN: check one box only		
l authorize to enter or ger	-	as my
ERO firm name signature on the income tax return (original or amended) I am now authorizing.		er five digits, but n't enter all zeros
I will enter my PIN as my signature on the income tax return (original or amended) if you are entering your own PIN and your return is filed using the Practitioner PIN below.		
Spouse's signature ▶ Da	te ►	
Practitioner PIN Method Returns Only—continue	below	
Part III Certification and Authentication — Practitioner PIN Method Only		
ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN.		6 0 8 2 7 1 er all zeros
I certify that the above numeric entry is my PIN, which is my signature for the electronic individual incauthorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I arrequirements of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS e-file Providence.	n submitting this retu	rn in accordance with the
ERO's signature ▶ Da	te ▶	
ERO Must Retain This Form — See Instruction		

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 2023 OMB No. 1545-0074

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

For the year Jan. 1-Dec. 31, 2023, or other tax year beginn		inning	ning, 2023, ending, 20 _					See separate instructions.	
Your first name and middle initial		Last na	Last name					tifying number	
					(see instructions)				
ANUSRI			KOTH	A				872-3	5-4041
Home address	(num	ber and street). If you have a P.O. b	ox, see ins	tructions.					Apt. no.
1337 BROM	IE D	RIVE							
City, town, or po	ost o	ffice. If you have a foreign address,	also comp	lete spaces below.			State	ZI	P code
LEANDER							TX	7	8641
Foreign country	nam	e	Foreig	n province/state/county			Foreign po	ostal code	
Filing	×	Single Married filing se	eparately (N	ΛFS) □ Qualifviι	na survi	ving spouse ((QSS)	☐ Estat	e 🗌 Trust
Status		you checked the QSS box, enter th			Ū	o .	,		
,							·		
-	۸+ ۵	nu time during 2002, did you (a) re		roward award ar paym	ant for r		n ilono), or	(b) call av	ahanga ar
Digital Assets		ny time during 2023, did you: (a) re erwise dispose of a digital asset (or							Yes X No
Dependents	<u> </u>	, ,							qualifies for (see inst.):
ANUSRI Home address (number and 1337 BROME DRIVE City, town, or post office. If y LEANDER Foreign country name Filing Status Check only one box. Digital Assets At any time otherwise didenter in the productions and check here □ Income 1a Total at Effectively be House Connected compendents, see instructions and check here □ Income 1a Total at Medica compendents in Reservable			(2) Dependent's		Child	tax credit	Credit for other		
(,		(1) First name Last name		identifying number	(3) Re	lationship to yo	J 011110		dependents
If more than four									
	1a	Total amount from Form(s) W-2, b	nox 1 (see i	nstructions)				1a	72,048.
	_	Household employee wages not i	`	,				1b	, = , 0 10 •
_		Tip income not reported on line 1	•	` '				1c	
	d	Medicaid waiver payments not re	`	,				1d	
	е	Taxable dependent care benefits	from Form	2441, line 26				1e	
Business	f	Employer-provided adoption ben	efits from F	orm 8839, line 29 .				1f	
Attack	g	Wages from Form 8919, line 6 .						1g	
	h	Other earned income (see instruc	tions) .			 1i		1h	
•	i	Reserved for future use							
•	j	Reserved for future use	1j						
and 8288-A	k	Total income exempt by a treaty f							
	_	line 1(e)				1k		1z	72,048.
		Tax-exempt interest	2a	1	· · · · · · · · · · · · · · · · · · ·	erest		2b	72,040.
		Qualified dividends	3a			vidends		3b	
	_	IRA distributions	4a		•	nount		4b	
If you did not							5b		
•	6	Reserved for future use						6	
	7	Capital gain or (loss). Attach Sche	edule D (Fo	rm 1040) if required. If n	ot requii	red, check he	e 🗆	7	
	8	Additional income from Schedule	1 (Form 10	040), line 10				8	-8,450.
	9	Add lines 1z, 2b, 3b, 4b, 5b, 7, ar	nd 8. This is	your total effectively c	onnect	ed income .		9	63,598.
	10	Adjustments to income from Schincome	•	orm 1040), line 26. Thes	-	-		10	
	11	Subtract line 10 from line 9. This	s your adju	usted gross income				11	63,598.
	12	Itemized deductions (from School deduction (see instructions).	,	**					13,850.
	13a	Qualified business income deduc				13a	•		,
		Exemptions for estates and trusts				13b			
	С	Add lines 13a and 13b						13c	
	14								13,850.
	15	Subtract line 1/1 from line 11 If zo	ro or less	enter -0- This is your to	vabla in	como		15	49 748

Form 1040-NR (2023)										Page 2
Tax and	16	Tax (see instructions). Check if ar	y from For	rm(s): 1 88	314 2 [497	2 3			16	6,247.
Credits	17	Amount from Schedule 2 (Form	1040), line	3						17	0.
	18	Add lines 16 and 17								18	6,247.
	19	Child tax credit or credit for other	er depende	ents from Sched	ule 8812 (F	orm 10	40) .			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 less	s, enter -0						22	6,247.
	23a	Tax on income not effectively co	nnected w	rith a U.S. trade	or business	from					
		Schedule NEC (Form 1040-NR),	line 15 .				23a				
	b	Other taxes, including self-emple	•		•	,					
		line 21					23b			4	
	С	Transportation tax (see instruction	,				23c				
	d	Add lines 23a through 23c								23d	
	24	Add lines 22 and 23d. This is you		x						24	6,247.
Payments	25	Federal income tax withheld from									
	a	Form(s) W-2					25a		9,447.	-	
	b	Form(s) 1099					25b			-	
	C	Other forms (see instructions) .				l.	25c			05.1	0 447
		d Add lines 25a through 25c								25d	9,447.
	e	Form(s) 8805								25e	
	f	Form(s) 8288-A								25f	
	g 26	Form(s) 1042-S								25g 26	
	20 27	Reserved for future use					27			20	
	28	Additional child tax credit from S					28			-	
	29	Credit for amount paid with Forr		•	,		29			1	
	30	•			30						
	31	Reserved for future use								1	
	32	Add lines 28, 29, and 31. These are your total other payments and refundable credits								32	
	33	Add lines 25d, 25e, 25f, 25g, 26,								33	9,447.
Refund	34	If line 33 is more than line 24, su								34	3,200.
	35a	Amount of line 34 you want refunded to you . If Form 8888 is attached, check here								35a	3,200.
Direct deposit?	b	Routing number 0 8 1 0 0 0 3 2 c Type: Solvings									
See instructions.	d	Account number 3 5 5 0 1 0 1 0 5 9 2 5									
	е	If you want your refund check mailed to an address outside the United States not shown on page							page 1,		
		enter it here.									
	36	Amount of line 34 you want app					36				
Amount	37	Subtract line 33 from line 24. Thi									
You Owe		For details on how to pay, go to www.irs.gov/Payments or see instructions								37	
	38										
Third	Do yo	u want to allow another person to	discuss t	his return with th	ne IRS? See	instruc	ctions.	∐ Y ∈	es. Comp	lete be	low. 🗵 No
Party	•	ignee's Phone Personal identifi							ication		
Designee	name	ame nonumber (PIN) nder penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to th									
		penalties of perjury, I declare that I hat they are true, correct, and complete. I									
Sign				Date	Your occu	,					ent you an Identity
Here	Your signature			Date	1001 0000	раноп			I .		PIN, enter it here
11010				DEVELOPER				(see	inst.)		
	Phone	e no.		Email address							
Paid	Prepa	rer's name	Preparer	's signature			Date		PTIN		Check if:
Preparer	SYAM	PRIYA RAM SAGAR GUPTA TALLAM	SYAM PR	IYA RAM SAGAI	R GUPTA T.	ALLAM	02/1	1/2024	P02082	2703	Self-employed
Use Only	Firm's name CIODλI ΨλΥΕC IIC Phone r							Phone n	o . (6	78) 965-9522	
OSE OILLY	Firm's	address 245 ROONEY C	T E BF	RUNSWICK N	J 08816				Firm's E	IN 8	4-3171965
											1010 110

SCHEDULE 1 (Form 1040)

Additional Income and Adjustments to Income

OMB No. 1545-0074

2023
Attachment
Sequence No. 01

Department of the Treasury Internal Revenue Service

ANUSRI KOTHA

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.

Your social security number 872-35-4041

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. Att	ach Schedule E .	5	-8,450.
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		
I	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. This is your additional income. Enter			
	1040. 1040-SR. or 1040-NR. line 8		10	-8,450.

Schedule 1 (Form 1040) 2023 Page **2**

Par	t II Adjustments to Income				
11	Educator expenses			11	
12	Certain business expenses of reservists, performing artists, and fee-				
	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	, , , , , , , , , , , , , , , , , , ,	24a			
b	Deductible expenses related to income reported on line 8l from the				
		24b			
С	Nontaxable amount of the value of Olympic and Paralympic medals	04			
_1	· · · · · · · · · · · · · · · · · · ·	24c		_	
d		24d			
е	Repayment of supplemental unemployment benefits under the Trade Act of 1974	24e			
f		24f			
g	Contributions by certain chaplains to section 403(b) plans	24g			
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				
	-	24i			
j		24j			
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form				
		24k			
Z	Other adjustments. List type and amount:	24z			
0 -					
25 26	Total other adjustments. Add lines 24a through 24z	 E		25	
26	Add lines 11 through 23 and 25. These are your adjustments to income .	. ∟nter	nere and on		
	Form 1040, 1040-SR, or 1040-NR, line 10			26	

SCHEDULE NEC (Form 1040-NR)

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

Attachment

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service

Name shown on Form 1040-NR

Attach to Form 1040-NR. Go to www.irs.gov/Form1040NR for instructions and the latest information. Sequence No. 7B

Your identifying number

ANUSRI KOTHA 872-35-4041 Enter **amount of income** under the appropriate rate of tax. See instructions. (d) Other (specify) Nature of Income (a) 10% **(b)** 15% (c) 30% % % Dividends and dividend equivalents: Dividends paid by U.S. corporations 1a 1b Dividend equivalent payments received with respect to section 871(m) transactions 1c 2 Interest: 2a 2b 2c C 3 4 5 Real property income and natural resources royalties . . . 6 7 7 8 9 10 Gambling-Residents of Canada only. Enter net income in column (c). If zero or less, enter -0-. Winnings _____ 10c Losses Gambling-Residents of countries other than Canada. 11 Other (specify): 12 12 13 Add lines 1a through 12 in columns (a) through (d) 13 14 14 Tax on income not effectively connected with a U.S. trade or business. Add columns (a) through (d) of line 14. Enter the total here and on Form 1040-NR, line 23a 15 Capital Gains and Losses From Sales or Exchanges of Property Enter only the capital gains and 16 (a) Kind of property and description (f) LOSS (g) GAIN (b) Date acquired (c) Date sold (d) Sales price (e) Cost or losses from property sales or (if necessary, attach statement of If (e) is more than (d), If (d) is more than (e), mm/dd/yyyy mm/dd/yyyy other basis exchanges that are from sources descriptive details not shown below) subtract (d) from (e). subtract (e) from (d). within the United States and not effectively connected with a U.S. business. Do not include a gain or loss on disposing of a U.S. real property interest; report these gains and losses on Schedule D (Form 1040). Report property sales or exchanges that are effectively connected with a U.S. business 17 Add columns (f) and (g) of line 16 on Schedule D (Form 1040). 18 Capital gain. Combine columns (f) and (g) of line 17. Enter the net gain here and on line 9 above. If a loss, enter -0-18 Form 4797, or both.

SCHEDULE OI (Form 1040-NR)

Other Information

Attach to Form 1040-NR.

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

Answer all questions.

OMB No. 1545-0074

2023

Attachment
Sequence No. 7C

Department of the Treasury Internal Revenue Service

	snown on Form 1040-NR		Your identifying number						
	SRI KOTHA				872-35-40				
Α	Of what country or countries were	you a citizen or national	I during the tax ye	ar? <u>INDIA</u>					
В	In what country did you claim resid	dence for tax purposes	during the tax yea	ar? United States					
С	Have you ever applied to be a gree	en card holder (lawful pe	ermanent resident)	of the United States? .		☐ Yes	⊠ No		
D	Were you ever:								
1	A U.S. citizen?					☐ Yes	⊠ No		
2	A green card holder (lawful permar	nent resident) of the Uni	ted States?			☐ Yes	⊠ No		
	If you answer "Yes" to (1) or (2), se	e Pub. 519, chapter 4, f	or expatriation rule	es that apply to you.					
Е	If you had a visa on the last day of				er your U.S.				
	immigration status on the last day of	of the tax year. $_{ m F1}$			-				
F	Have you ever changed your visa type (nonimmigrant status) or U.S. immigration status?								
	If you answered "Yes," indicate the		-1						
G	List all dates you entered and left t	the United States during							
	Note: If you're a resident of Canad	da or Mexico AND com	mute to work in the	he United States at frequ	ent intervals,				
	check the box for Canada or Me	xico and skip to item H		🗌 Canada					
	Date entered United States Da	ate departed United State	s	Date entered United States	s Date depar	rted Unite	d States		
	mm/dd/yy	mm/dd/yy		mm/dd/yy	m	nm/dd/yy			
н	Give number of days (including vaca	ation, nonworkdays, and	partial days) you w	vere present in the United S	States during:				
	2021	, 2022	, and	2023 365					
ı	Did you file a U.S. income tax retur	rn for any prior year?.				⊠ Yes	☐ No		
	If "Yes," give the latest year and fo	orm number you filed:	1	.040NR					
J	Are you filing a return for a trust? .					☐ Yes	⊠ No		
	If "Yes," did the trust have a U.S.								
	U.S. person, or receive a contributi	tion from a U.S. person?				☐ Yes	☐ No		
K	Did you receive total compensation	n of \$250,000 or more d	luring the tax year	?		☐ Yes	⊠ No		
	If "Yes," did you use an alternative	method to determine th	ne source of this c	ompensation?		☐ Yes	☐ No		
L	Income Exempt From Tax-If you				ax treaty with	a foreign	country,		
	complete (1) through (3) below. See								
1	Enter the name of the country, the a				claimed the tre	aty benefi	t, and the		
	amount of exempt income in the co	olumns below. Attach For	m 8833 if required	I. See instructions.					
	(a) Country		(b) Tax treaty artic			mount of exempt			
				claimed in prior tax yea	ars income in	current ta	ax year		
	(-) T-4-1 F : !!: :	4040 ND !' 41 D		hana alaa					
_	(e) Total. Enter this amount on Fo		•						
2	, ,					∐ Yes	∐ No		
3	Are you claiming treaty benefits pu	•	•			∐ Yes	⊠ No		
	If "Yes," attach a copy of the Comp	petent Authority determ	ination letter to yo	ur return.					
М	Check the applicable box if:								
1	This is the first year you are making with a U.S. trade or business unde						onnected		
_									
2	You have made an election in a p States as effectively connected wit								
	States as effectively conflected wit	ura U.S. IIaue or busine	saa uriuer section	or itu). See instructions.			· · <u> </u>		

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.

Attachment Sequence No. 13

OMB No. 1545-0074

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

Your social security number

ANU	SRI KOTHA	872-35-4041									
Pai							•				
	Note: If you are in the business of renting personal proper rental income or loss from Form 4835 on page 2, line 40.	ty, use	Schedule	C . See	instru	ctions. If you a	are an in	dividual, rep	ort farm		
Α		to file	Form(c)	10002 S	oo inc	structions			s X No		
		you make any payments in 2023 that would require you to file Form(s) 1099? See instructions									
	If "Yes," did you or will you file required Form(s) 1099?										
1a											
A	MLA COLONY BANJARA HILLS HYDERABAD TELANGANA IN 500034										
B											
C	Type of Property 2 For each rental real estate property listed Fair Rental Personal Use										
1b		or each rental real estate property list bove, report the number of fair rental a						onal Use	QJV		
	(from list below) above, report the number of fair personal use days. Check the Qu		, and				L	Days ^			
A B	if you meet the requirements to f			A B		365		0			
	qualified joint venture. See instru	ıctions	S.	С							
	of Property:			C							
	Single Family Residence 3 Vacation/Short-Term Ren	tal	5 Lanc	1	7	Self-Rental					
	Multi-Family Residence 4 Commercial	tai	6 Roya			Other (desc	ribe)				
	Tradit Farmy Hooldones Footminered.		0 11030								
_						Propert	ies:	_			
Inco				Α		В			С		
3	Rents received	3		4	50.						
4	Royalties received	4									
=xpe 5	enses: Advertising	5									
6	Advertising	6									
7	Cleaning and maintenance	7		900.							
8	Commissions	8									
9	Insurance	9									
10	Legal and other professional fees	10									
11	Management fees	11		1,5	00.						
12	Mortgage interest paid to banks, etc. (see instructions)	12		, -							
13	Other interest	13									
14	Repairs	14	1,850.								
15	Supplies	15		2,1	50.						
16	Taxes	16									
17	Utilities	17	,								
18	Depreciation expense or depletion	18									
19	Other (list)	19									
20	Total expenses. Add lines 5 through 19	20	20 8,900.								
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		-8,4	5.0						
22	Deductible rental real estate loss after limitation, if any,	21		0,1	50.						
22	on Form 8582 (see instructions)	22	(-8 , 45	.n \	()(1		
23a		$\overline{}$	1	0,73	23a	1	450.	/\			
b					23b		100.				
c					23c						
d					23d						
е					23e	8	3,900.				
24	Income. Add positive amounts shown on line 21. Do not						. 24	_			
25	Losses. Add royalty losses from line 21 and rental real estate	e losse	es from lin	e 22. Er	nter to	tal losses her	e 25	5 (8,450.)		
26	Total rental real estate and royalty income or (loss).										
	here. If Parts II, III, and IV, and line 40 on page 2 do no										
	Schedule 1 (Form 1040), line 5. Otherwise, include this ar	mount	in the to	tal on li	ne 41	on page 2	. 26	6	-8 , 450.		