## 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	number /				
HARISH PODILI	830-02-	830-02-8715			
Spouse's name	Spouse's soci	al security numbe	er		
Part I Tax Return Information — Tax Year Ending December 31, 2023 (E	nter year you ar	e authorizing	J.)		
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			1,473.		
2 Total tax			3,095.		
<b>3</b> Federal income tax withheld from Form(s) W-2 and Form(s) 1099			4,207.		
4 Amount you want refunded to you			1,112.		
5 Amount you owe		5	ırn)		
Part II Taxpayer Declaration and Signature Authorization (Be sure you get as Under penalties of perjury, I declare that I have examined a copy of the income tax return (original or amer					
return (original or amended) I am now authorizing. I consent to allow my intermediate service provider, tra to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason fo for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial inst authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to term payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation business days prior to the payment (settlement) date. I also authorize the financial institutions involved in taxes to receive confidential information necessary to answer inquiries and resolve issues related to t personal identification number (PIN) below is my signature for the income tax return (original or amended Electronic Funds Withdrawal Consent.	r rejection of the tra- ne U.S. Treasury and t indicated in the ta- titution to debit the tinate the authorizal requests must be the processing of the payment. I furth	ansmission, (b) to dissensive dispensive dispensive dissensive di dissensive dissensive dissensive dispensive	the reason of Financial oftware for count. This (cancel) a ter than 2 ayment of e that the		
Taxpayer's PIN: check one box only			]		
▼ I authorize GLOBAL TAXES LLC to enter or gener	ate my PIN	8 7 1 5	as my		
ERO firm name signature on the income tax return (original or amended) I am now authorizing.	Ente	er five digits, but 't enter all zeros	ao my		
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 <b>and</b> your return is filed using the Practitioner PIN n below.					
Your signature ▶ Date	<b>-</b>				
Spouse's PIN: check one box only					
☐ I authorize to enter or gener	ate my PIN		as my		
ERO firm name signature on the income tax return (original or amended) I am now authorizing.	Ent	er five digits, but 't enter all zeros	<sub>j</sub> do my		
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 <b>and</b> your return is filed using the Practitioner PIN n below.					
Spouse's signature ▶ Date	•				
Practitioner PIN Method Returns Only—continue be	low				
Part III Certification and Authentication — Practitioner PIN Method Only					
<b>ERO's EFIN/PIN.</b> Enter your six-digit EFIN followed by your five-digit self-selected PIN.	2 2 4 9 6  Don't ente		7 1		
I certify that the above numeric entry is my PIN, which is my signature for the electronic individual incon authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am s requirements of the Practitioner PIN method and <b>Pub. 1345</b> , Handbook for Authorized IRS <i>e-file</i> Providers	submitting this retu	n in accordanc			
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 2023 OMB No. 1545-0074

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

or the year Jan. 1-Dec. 31, 2023, or other tax year beginn			ning, 2023, ending, 20							eparate ctions.	
Your first name	and r	middle initial	Last name Y					Your ide	our identifying number		
			(s						(see instructions)		
HARISH			PODI	PODILI						5	
Home address (	numl	per and street). If you have a P.O. bo	x, see ins	structions.			•		Ap	ot. no.	
6804 HENN	EMA	N WAY							4055		
City, town, or post office. If you have a foreign address, also complete spaces below.							Z	ZIP code			
MCKINNEY						Т	X		75070		
Foreign country	nam	e	Foreig	n province/state/county		Fo	reign po	ostal code	€		
Filing	×	Single Married filing sep	oaratelv (N	MFS) Qualifvi	ng surviving spou	se (QS	SS)	☐ Esta	te [	Trust	
Status	If you checked the QSS box, enter the child's name if the qualifying person is a child but not your depen										
Check only one box.											
	۸+ ۵	nu timo durina 2002, did vou (a) rac	-i.v. /o. o.	roward award as accom	ant for property o			(b) call o	, change		
Digital Assets		ny time during 2023, did you: (a) recervise dispose of a digital asset (or a						(b) seii, e.		or No	
Dependents		g				,				or (see inst.):	
(see instructions):				(2) Dependent's				tax credit		for other	
(		(1) First name Last name	9	identifying number	(3) Relationship t	o you	Orma		dep	endents	
If more than four								<u> </u>		<del> </del>	
dependents, see										<u> </u>	
instructions and check here								$\vdash$		<del> </del>	
Income	1a	Total amount from Form(s) W-2, bo	v 1 (see i	netructions)				1a	4	<u> </u>	
Effectively	b	Household employee wages not re	•	,				1b		7,207.	
Connected	c	Tip income not reported on line 1a	•	` '				1c			
With U.S.	d	Medicaid waiver payments not rep		•				1d			
Trade or	е	Taxable dependent care benefits fr	om Form	2441, line 26				1e			
Business	f	Employer-provided adoption benef	its from F	Form 8839, line 29 .				1f			
A44	g	g         Wages from Form 8919, line 6									
Attach Form(s) W-2,	h										
1042-S,	i Reserved for future use										
SSA-1042-S, RRB-1042-S,	j Reserved for future use										
and 8288-A	k Total income exempt by a treaty from Schedule OI (Form 1040-NR), item L,										
here. Also attach	_	line 1(e)			1k			4-	4	9,267.	
Form(s)	z 2a							1z 2b	4.	9,207.	
1099-R if tax was	2 <i>a</i> 3a	· —	Ba Ba		dinary dividends	•		3b			
withheld.	4a										
If you did not	5a		ia i		cable amount .			4b 5b			
get a Form	6										
W-2, see instructions.	7 Capital gain or (loss). Attach Schedule D (Form 1040) if required. If not required, check here										
	8	Additional income from Schedule 1 (Form 1040), line 10							_'	7,794.	
	9	Add lines 1z, 2b, 3b, 4b, 5b, 7, and	8. This is	your <b>total effectively o</b>	onnected incom	е.		9	4	1,473.	
	Adjustments to income from Schedule 1 (Form 1040), line 26. These are your <b>total adjustments to income</b>										
	11	Subtract line 10 from line 9. This is						10	4	1,473.	
	12 Itemized deductions (from Schedule A (Form 1040-NR)) or, for certain residents of India, standard									3,850.	
	deduction (see instructions)										
	b Exemptions for estates and trusts only (see instructions)										
	c	Add lines 13a and 13b	• •	•				13c			
	14							14	1	3,850.	
	15	Subtract line 1/1 from line 11. If zero	or loce	enter -0- This is your ta	vahla incoma			15	2	7 623	

Form 1040-NR (	2023)										Page <b>2</b>
Tax and	16	Tax (see instructions). Check if any	from For	m(s): <b>1</b> 88	314 <b>2</b>	4972	3			16	3,095.
Credits	17	Amount from Schedule 2 (Form 10	040), line	3						17	0.
	18	Add lines 16 and 17								18	3,095.
	19	Child tax credit or credit for other	depende	ents from Sched	ule 8812 (F	orm 104	0) .			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 zer	ro or less	s, enter -0						22	3,095.
	23a	Tax on income not effectively conr Schedule NEC (Form 1040-NR), lir					23a				
	b	Other taxes, including self-employ line 21		•	•	, · ·	23b				
	С	Transportation tax (see instruction	s)			[	23c				
	d	Add lines 23a through 23c								23d	
	24	Add lines 22 and 23d. This is your	total tax	x						24	3,095.
Payments	25	Federal income tax withheld from:									
•	а	Form(s) W-2				[	25a		4,207.		
	b	Form(s) 1099				[	25b				
	С	Other forms (see instructions) .				[	25c				
	d	Add lines 25a through 25c								25d	4,207.
	е	Form(s) 8805								25e	
	f	Form(s) 8288-A								25f	
	g	Form(s) 1042-S								25g	
	26	2023 estimated tax payments and	amount	applied from 20	22 return .					26	
	27	Reserved for future use				[	27				
	28	Additional child tax credit from Sc	hedule 8	812 (Form 1040	)	[	28				
	29	Credit for amount paid with Form				- H	29				
	30	Reserved for future use				[	30			4	
	31										
	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, a								33	4,207.
Refund	34	If line 33 is more than line 24, subt					-	-		34	1,112.
	35a	Amount of line 34 you want refund								35a	1,112.
Direct deposit? See instructions.	b	Routing number 0 6 2 0				e: 🔀 (	Check	ng 🗌	Savings		
See instructions.	d	Account number 8 4 8 8									
	е	If you want your refund check ma							. •		
		enter it here.				·					
	36	Amount of line 34 you want applie					36				
Amount	37	Subtract line 33 from line 24. This For details on how to pay, go to w		-		otiono					
You Owe	20		-	-		, , , , , , , , , , , , , , , , , , ,	20			37	
Thind	38 Do vo	Estimated tax penalty (see instruction want to allow another person to determine the control of				o inotruo	38 tions		es. Comp	loto bo	low. 🗵 No
Third Party	•	•	มอดนออ เเ			e iristruc	lions.				iow. 🔼 No
Designee	Designame			Phone no.					nal identif er (PIN)	ication	
	Under	penalties of perjury, I declare that I have they are true, correct, and complete. De-		this return and a				statement	s, and to th		
Sign	Your	signature	ĺ	Date	Your occu	upation			If th	e IRS s	ent you an Identity
Here		5.9.1414.0		24.0		аранон.			Prot	ection	PIN, enter it here
					STUDEN	JT			(see	inst.)	
	Phone			Email address		-			T		
Paid	Prepa	rer's name	Preparer'	's signature			Date		PTIN		Check if:
Preparer	פעמא ספועה פאמס פונסיה   פעמא ספועה פאמס פונסיה   פעמא ספועה פאמס פונסיה   און איז   פעמא ספועה   און איז ו						P0208	2703	Self-employed		
Use Only	Firm's	s name GLOBAL TAXES L							Phone n	10. (6	78)965-9522
	Firm's address 245 ROONEY CT E BRUNSWICK NJ 08816 Firm's EIN										

## SCHEDULE 1 (Form 1040)

## **Additional Income and Adjustments to Income**

OMB No. 1545-0074

2023

Attachment
Seguence No. 01

Department of the Treasury Internal Revenue Service

HARISH PODILI

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. <b>01</b>
Your soc	ial security number
830-02	-8715

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	ich Schedule E .	5	-7,794.
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 (	)	
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 <b>additional income</b> . Enter			
	1040, 1040-SR, or 1040-NR, line 8		10	-7,794.

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	_			
	· · · · · · · · · · · · · · · · · · ·	24c			
d		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	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				
	tax law violations	24i			
j	Housing deduction from Form 2555	24j			
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form				
		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 <b>adjustments to income</b> Form 1040, 1040-SR, or 1040-NR, line 10	e. Enter	here and on	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

HARISH PODILI 830-02-8715 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 3 4 Motion picture or TV copyright royalties . . . . . . . . . . . . . . 5 Real property income and natural resources royalties 6 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 (f) LOSS 16 (a) Kind of property and description (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 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)

Department of the Treasury

Internal Revenue Service

### 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

Attachment Sequence No. 7C

Name shown on Form 1040-NR Your identifying number 830-02-8715 HARISH PODILI Of what country or countries were you a citizen or national during the tax year? \_INDIA\_\_\_\_\_\_ Α In what country did you claim residence for tax purposes during the tax year? United States В С Have you ever applied to be a green card holder (lawful permanent resident) of the United States? . . . . . . X No Were you ever: ☐ Yes X No 1. A U.S. citizen? X No If you answer "Yes" to (1) or (2), see Pub. 519, chapter 4, for expatriation rules that apply to you. Ε 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 year. F1 X No F Have you ever changed your visa type (nonimmigrant status) or U.S. immigration status? . . . . . . . . . . . . Yes If you answered "Yes," indicate the date and nature of the change: G List all dates you entered and left the United States during 2023. See instructions. Note: If you're a resident of Canada or Mexico AND commute to work in the United States at frequent intervals, Date entered United States Date departed United States **Date entered United States Date departed United States** mm/dd/yy mm/dd/yy mm/dd/yy mm/dd/yy Give number of days (including vacation, nonworkdays, and partial days) you were present in the United States during: н 2021 \_\_\_\_\_\_, 2022 \_\_\_\_\_\_, and 2023 \_\_\_\_\_\_365 \_\_\_. Did you file a U.S. income tax return for any prior year? . . . . . . . . . . . . . . X Yes ☐ No ı If "Yes," give the latest year and form number you filed: 1040NR X No Yes J If "Yes," did the trust have a U.S. or foreign owner under the grantor trust rules, make a distribution or loan to a □ No Yes ⊠ No Κ Yes No If "Yes," did you use an alternative method to determine the source of this compensation? . . . . . . . . . . . . Income Exempt From Tax-If you are claiming exemption from income tax under a U.S. income tax treaty with a foreign country, L complete (1) through (3) below. See Pub. 901 for more information on tax treaties. Enter the name of the country, the applicable tax treaty article, the number of months in prior years you claimed the treaty benefit, and the amount of exempt income in the columns below. Attach Form 8833 if required. See instructions. (a) Country (b) Tax treaty article (c) Number of months (d) Amount of exempt claimed in prior tax years income in current tax vear (e) Total. Enter this amount on Form 1040-NR, line 1k. Do not enter it anywhere else on line 1 No 2. Were you subject to tax in a foreign country on any of the income shown in 1(d) above? Yes X No If "Yes," attach a copy of the Competent Authority determination letter to your return. Check the applicable box if: 1. This is the first year you are making an election to treat income from real property located in the United States as effectively connected 2. You have made an election in a previous year that has not been revoked, to treat income from real property located in the United 

#### **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.

Your social security number

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

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

Attachment Sequence No. 13

OMB No. 1545-0074

HAR	ISH PODILI						830-0	2-8715		
Par										
	Note: If you are in the business of renting personal proper	rty, use <b>S</b>	Schedule	<b>C</b> . See	instru	ctions. If you	are an indi	vidual, rep	ort farm	
_	rental income or loss from Form 4835 on page 2, line 40.	4- 61- F		0000	\ !				- <b>V</b> IN-	
	Did you make any payments in 2023 that would require you									
В	f "Yes," did you or will you file required Form(s) 1099? .							. <u> </u>	s No	
1a	Physical address of each property (street, city, state, ZII	P code)								
Α	17-1-391/60/NSW/1,SAIDABAD HYDERABAD T	TELANG	BANA I	N 500	0059					
В										
С										
1b	Type of Property 2 For each rental real estate property	erty listed	d		Fa	ir Rental	Person	nal Use	QJV	
	(from list below) above, report the number of fair						Da	ıys	401	
A	personal use days. Check the Quif you meet the requirements to		only	Α		365		0		
B	qualified joint venture. See instru			В						
C				С						
	of Property:									
	Single Family Residence 3 Vacation/Short-Term Ren		5 Land			Self-Rental				
2	Multi-Family Residence 4 Commercial		6 Roya	alties	8	Other (desc	ribe)			
						Propert	ies:			
Incon	ne:			Α		<u>.</u> В			С	
3	Rents received	3		3	50.					
4	Royalties received	4								
Expe										
5	Advertising	5								
6	Auto and travel (see instructions)	6								
7	Cleaning and maintenance	7		1,5	60.					
8	Commissions	8								
9	Insurance	9								
10	Legal and other professional fees	10								
11	Management fees	11		1,3	00.					
12	Mortgage interest paid to banks, etc. (see instructions)	12								
13	Other interest	13								
14	Repairs	14		1,9						
15	Supplies	15		2,2	50.					
16	Taxes	16								
17	Utilities	17		1,1	00.					
18	Depreciation expense or depletion	18								
19	Other (list)	19								
20	Total expenses. Add lines 5 through 19	20		8,1	44.					
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			-7,7	0.4					
00	file <b>Form 6198</b>	21		- / , /	24.					
22	on <b>Form 8582</b> (see instructions)	00 /		7 70		1	\	/	,	
220	Total of all amounts reported on line 3 for all rental prope	22 (		-7,79		(	350.	(	<i></i>	
23a	Total of all amounts reported on line 3 for all rental properties of all amounts reported on line 4 for all royalty properties.			•	23a		330.			
b	Total of all amounts reported on line 4 for all royalty prop Total of all amounts reported on line 12 for all properties				23b 23c					
c d	Total of all amounts reported on line 12 for all properties  Total of all amounts reported on line 18 for all properties				23d					
a e	Total of all amounts reported on line 20 for all properties				23a	9	3,144.			
24	Income. Add positive amounts shown on line 21. <b>Do not</b>				206		. 24			
25	Losses. Add royalty losses from line 21 and rental real estat		-		· · ·	tal losses he	-	(	7,794.)	
26	Total rental real estate and royalty income or (loss).							\	1,124.	
20	here. If Parts II, III, and IV, and line 40 on page 2 do no									
	Schedule 1 (Form 1040) line 5. Otherwise include this a						06		_7 701	