IRS e-file Signature Authorization

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service

ERO must obtain and retain completed Form 8879. ▶ Go to www.irs.gov/Form8879 for the latest information.

Submission Identification Number (SID)

Taxpayer's name	Social security number
AKHIL CHALLA	785-23-7366
Spouse's name	Spouse's social security number
Part I Tax Return Information – Tax Year Ending December 31, 2023 (Ent	er year you are 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	1 121,747.
2 Total tax	2 19,295.
3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099	3 22,749.
4 Amount you want refunded to you	4 3,454.
5 Amount you owe	5

Part II Taxpayer Declaration and Signature Authorization (Be sure you get and keep a copy of your return)

Under penalties of periury. I declare that I have examined a copy of the income tax return (original or amended) I am now authorizing, and to the best of my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above are the amounts from the income tax return (original or amended) I am now authorizing. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution to debit the entry to this account. This authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate the authorization. To revoke (cancel) a payment, I must contact the U.S. Treasury Financial Agent at **1-888-353-4537**. Payment cancellation requests must be received no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I further acknowledge that the personal identification number (PIN) below is my signature for the income tax return (original or amended) I am now authorizing and, if applicable, my Electronic Funds Withdrawal Consent.

Taxpayer's PIN: check one box only

				FBO firm name		Ēr
X	l authorize	GLOBAL '	TAXES	LLC	to enter or generate my PIN	
-			-			≺

Ent	as my				
3	7	3	6	6	
	3 Ente	3 7 Enter fiv don't en	3 7 3 Enter five dia don't enter a	3 7 3 6 Enter five digits, don't enter all ze	3 7 3 6 6 Enter five digits, but don't enter all zeros

signature on the income tax return (original or amended) I am now authorizing.

I will enter my PIN as my signature on the income tax return (original or amended) I am now authorizing. Check this box only if you are entering your own PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Your signature

Date

Spouse's	PIN:	check	one	box on	ly
----------	------	-------	-----	--------	----

I authorize

to enter or generate my PIN

as mv Enter five digits, but don't enter all zeros

ERO firm name signature on the income tax return (original or amended) I am now authorizing.

I will enter my PIN as my signature on the income tax return (original or amended) I am now authorizing. Check this box only if you are entering your own PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Spouse's signature 🕨	Date 🕨
Practitioner PIN N	ethod Returns Only—continue below
Part III Certification and Authentication – Pr	actitioner PIN Method Only
ERO's EFIN/PIN. Enter your six-digit EFIN followed by y	bur five-digit self-selected PIN. 2 2 2 4 9 6 0 8 2 7 1 Don't enter all zeros

I certify that the above numeric entry is my PIN, which is my signature for the electronic individual income tax return (original or amended) I am now authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am submitting this return in accordance with the requirements of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers of Individual Income Tax Returns.

ERO's signature 🕨		Date 🕨	
ERO Must Retain Don't Submit This Form			
For Paperwork Reduction Act Notice, see your tax return instr	ructions. BAA	REV 03/07/24 PRO	Form 8879 (Rev. 01-2021)

For the year Jan	. 1-Dec	. 31, 2023, or other tax year beginning			, 2023, endi	ing		, 20)	See se	parate inst	tructions.
Your first name	and mi		Last n	amo								
AKHIL	and m									Your social security number		
-	ouse's	s first name and middle initial	CHA Last n									curity number
				amo						opease		
Home address	(numbe	er and street). If you have a P.O. box, see	instruc	tions.				Apt.	no.	Preside	ntial Electi	on Campaigr
6308 N N	IACAI	RTHUR BLVD						203	30		nere if you,	
City, town, or p	ost offi	ce. If you have a foreign address, also co	omplete	spaces bel	ow.	Stat	te	ZIP code	-			ntly, want \$3
IRVING						ТX	<u> </u>	75039		u o	o this fund. ow will not	Checking a change
Foreign country	name			Foreign pr	ovince/state/c	count	У	Foreign po	ostal code	1	or refund.	•
											You	Spouse
Filing Status		Single					Head of ho	ousehold	(HOH)			
Check only		Married filing jointly (even if only o	ne had	income)			_					
one box.		Married filing separately (MFS)					Qualifying	-	•	. ,		
		you checked the MFS box, enter the			pouse. If you	ı che	ecked the HOH	or QSS	box, ente	er the chi	ild's name	if the
	qu	alifying person is a child but not you	ur depe	endent:								
Digital	At ar	ny time during 2023, did you: (a) rec	eive (a	s a reward	l, award, or j	payn	nent for proper	ty or serv	vices); or	(b) sell,		
Assets	exch	ange, or otherwise dispose of a dig	ital ass	et (or a fir	nancial intere	est in	n a digital asse	t)? (See ii	nstructio	ns.)	Yes	🔀 No
Standard	Som	eone can claim: 🗌 You as a de	epende	nt 🗌	Your spouse	e as a	a dependent					
Deduction		Spouse itemizes on a separate retur	m or yo	ou were a o	dual-status a	alien						
Age/Blindness	You:	Were born before January 2, 1	959	🗌 Are bli	ind Spo	use:	: 🗌 Was bor	n before .	January 2	2, 1959	🗌 ls bl	lind
Dependents	-			(2) S	ocial security		(3) Relationshi		•		fies for (see	e instructions)
If more		irst name Last name		(, c	number		to you		Child tax c	redit	Credit for ot	her dependents
than four												
dependents,												
see instructions and check	5											
here												
Income	1a	Total amount from Form(s) W-2, b	ox 1 (s	ee instruc	tions)	•				. 1a	1	36,417.
Attach Form(s)	b	Household employee wages not re	eporteo	d on Form	(s) W-2	•				. 1b	,	
W-2 here. Also	С	Tip income not reported on line 1a	a (see ii	nstruction	s)	•				. 1c	;	
attach Forms W-2G and	d	Medicaid waiver payments not rep			, ,	nstru	ctions)			. 1d		
1099-R if tax	е	Taxable dependent care benefits f				•				. 1e		
was withheld.	f	Employer-provided adoption bene				•			• •	. <u>1f</u>		
lf you did not get a Form	g	0				•			• •	. <u>1g</u>		
W-2, see	h	Other earned income (see instruct	,			•	· · · ·	· · ·		. 1h	1	0.
instructions.	i	Nontaxable combat pay election (see ins	tructions)		•	1 i			- 4	1.	36,417.
	z 2a	Add lines 1a through 1h Tax-exempt interest	2a		· · · ·	ь т.	 axable interest	· · ·	• •	. 1z . 2b		50,417.
Attach Sch. B if required.	2a 3a	· ·	2a 3a				rdinary divider		• •	. 20 . 3b		
	4a		4a				axable amount		• •	. 30 . 4b		
Standard	-та 5а		5a				axable amount			. 5b		
Deduction for — Single or	6a		6a				axable amount			. 6b		
Married filing	c	If you elect to use the lump-sum e		method.					[
separately, \$13,850	7	Capital gain or (loss). Attach Sche				`	,		[7		
Married filing jointly or	8	Additional income from Schedule		•	•					. 8		14,670.
Qualifying	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7								. 9		21,747.
surviving spouse, \$27,700	10	Adjustments to income from Sche		-						. 10		
Head of household,	11	Subtract line 10 from line 9. This is								. 11		21,747.
\$20,800	12	Standard deduction or itemized	-							. 12		13,850.
If you checked any box under	13	Qualified business income deduct					5-A			. 13		
Standard Deduction,	14	Add lines 12 and 13								. 14		13,850.
see instructions.	15	Subtract line 14 from line 11. If zer	ro or le	ss, enter -	0 This is ye	our t	axable incom	e		. 15		07,897.

For Disclosure, Privacy Act, and Paperwork Reduction Act Notice, see separate instructions.

Form **1040** (2023)

Form 1040 (2023	3)								Page 2
Tax and	16	Tax (see instructions). Check	if any from Form	(s): 1 🗌 881	4 2 4972	3 🗌		16	19,295.
Credits	17	Amount from Schedule 2, lin	e3					17	
	18	Add lines 16 and 17						18	19,295.
	19	Child tax credit or credit for	other dependen	ts from Sched	ule 8812			19	
	20	Amount from Schedule 3, lin	e8					20	
	21	Add lines 19 and 20						21	
	22	Subtract line 21 from line 18	. If zero or less,	enter -0				22	19,295.
	23	Other taxes, including self-e						23	0.
	24	Add lines 22 and 23. This is						24	19,295.
Payments	25	Federal income tax withheld							,
. aymente	а	Form(s) W-2				25a 22	2,749.		
	b	Form(s) 1099				25b			
	С	Other forms (see instructions				25c			
	d	Add lines 25a through 25c	,					25d	22,749.
	26	2023 estimated tax payment						26	,
If you have a l qualifying child,	27	Earned income credit (EIC)				27	•••		
attach Sch. EIC.	28	Additional child tax credit from				28			
	29	American opportunity credit				29			
	30	Reserved for future use .		-		30			
	31	Amount from Schedule 3, lin				31			
	32	Add lines 27, 28, 29, and 31				-		32	
	33	Add lines 25d, 26, and 32. T		-	-		• •	33	22,749.
Defined	34	If line 33 is more than line 24					•••	34	3,454.
Refund	34 35a		-			, .	· ·	34 35a	3,454.
Direct deposit?	b 35a	Amount of line 34 you want						3 58	5,151.
See instructions.		Routing number 1 0 1 1 0 0 4 5 c Type: Checking Savings Account number 5 1 8 0 0 9 9 7 5 3 7 2 Image: Checking Image: Checking Savings							
	d								
	36	Amount of line 34 you want a				36			
Amount You Owe	37	Subtract line 33 from line 24 For details on how to pay, g						07	
rou Owe	0 0					1 1	• •	37	
	38	Estimated tax penalty (see in	*			38			
Third Party		you want to allow another					omplete b	alour	× No
Designee							•		
	nai	signee's me		Phone no.			onal identifi ber (PIN)	cation	
Sign	Un	der penalties of perjury, I declare th	nat I have examined	d this return and	accompanying sche	edules and statemen	ts, and to th	e best	of my knowledge and
Here	bel	ief, they are true, correct, and com	plete. Declaration of	of preparer (othe	r than taxpayer) is b	ased on all informati	on of which	prepare	er has any knowledge.
пеге	Yo	ur signature		Date	Your occupation		If the	IRS ser	nt you an Identity
									N, enter it here
Joint return?				SENIOR SOFIWARE ENGINEER .				nst.)	
See instructions. Keep a copy for	Sp	ouse's signature. If a joint return, t	ooth must sign.	Date	Spouse's occupat	ion			nt your spouse an ection PIN, enter it here
your records.							(see in	,	
	Ph	one no. (913) 940-578	6	Email address	акнітснатт.	A14@GMAIL.CO	 M		
		eparer's name	Preparer's signat			Date	PTIN		Check if:
Paid		M PRIYA RAM SAGAR GUPTA			CAR CIIDWA	03/28/2024	P02082	702	Self-employed
Preparer		m's name GLOBAL TAX		A TATA DA	JUIL OUL IN	100/20/2024			678) 965-9522
Use Only			Y CT E BRU	NOWICK N	J 08816		Firm's		0101903-9322
Go to warne in a		n1040 for instructions and the late		TIONICI IN					Form 1040 (2023)
GO 10 WWW.115.90	JVII OITI	TO TO INSTRUCTORS and the late	at mitorridtion.		BAA	REV 03/07/24 PRO			Form 1040 (2023)

SCHEDULE	1
(Form 1040)	

Additional Income and Adjustments to Income

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

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

OMB No. 1545-0074 2023

Department of the Treasury Attachment Sequence No. **01** Internal Revenue Service Name(s) shown on Form 1040, 1040-SR, or 1040-NR Your social security number 785-23-7366

AKHIL CHALLA Additional Income

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		5	-14 , 670.
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		
ο	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:			
9	Total other income. Add lines 8a through 8z		9	
10	Combine lines 1 through 7 and 9. This is your additional income . Enter	here and on Form		
	1040, 1040-SR, or 1040-NR, line 8		10	-14,670.
For Pa	perwork Reduction Act Notice, see your tax return instructions.		Schedu	le 1 (Form 1040) 2023

Par	t II Adjustments to Income		
11	Educator expenses	11	
12	Certain business expenses of reservists, performing artists, and fee-basis government		
	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 8I 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 24d		
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	_	
h	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:		
05	Tatal athen adjustments. Add lines 04a through 04a	05	
25 06	Total other adjustments. Add lines 24a through 24z	25	
26	Add lines 11 through 23 and 25. These are your adjustments to income . Enter here and on Form 1040, 1040-SR, or 1040-NR, line 10	06	
		26	
	BAA REV 03/07/24 PRO	Schedule	1 (Form 1040) 2023

SCHEDULE	Ε
(Form 1040)	

Supplemental Income and Loss

OMB No. 1545-0074

(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.

2023
Attachment Seguence No. 13

ARKEL CHALLA 785-23-7366 Part1 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 mental income or loss from from 4930 on page 2, line 40. A Did you make any payments in 2023 that would require you to file Form(s) 10997. See instructions. If you are an individual, report farm mental income or loss from from 4930 on page 2, line 40. A Did you make any payments in 2023 that would require you to file Form(s) 10997. See instructions. If you are the full required Form(s) 10997. Ves. X No B If "Yes," did you or will you file required Form(s) 10997. Ves. X No C If Propention in the requirements to line as a qualified joint venture. See instructions. A B If you met the requirements to line as a qualified joint venture. See instructions. To Self-Rental 1 Single Family Residence 3 Vacation/Short-Term Rental 5 Land 7 Self-Rental 2 Multi-Family Residence 3 Vacation/Short-Term Rental 6 Royatties 8 Other (describe) Income: A B C C A covertising 5 5 A veetising 5 A covertising 5 1 1 1 <th>Name(s</th> <th colspan="7">ame(s) shown on return Y</th> <th colspan="3">Your social security number</th>	Name(s	ame(s) shown on return Y							Your social security number		
Note: if you are in the business of renting personal property, use Schedule C. See instructions. If you are an individual, report farm maintenance in the business of renting personal you to file Form(s) 1099? See instructions. Yes No A Did you make any payments in 2023 that would require you to file Form(s) 1099? See instructions. Yes No Yes No B If "Yes," did you or will you file required Form(s) 1099? See instructions. Yes No Yes No B If "Yes," did you or will you file required Form(s) 1099? See instructions. Yes No Yes No B If "Yes," did you or will you file required Form(s) 1099? See instructions. Yes No Yes No B If "Yes," did you or will you file required Form(s) 1099? See instructions. Yes No Yes No B If "Yes," did you or will you file required Form(s) 1099? See instructions. Yes No Yes No B If Type of Property: C. Total of Property: Fair Rental Personal Use days. Check the QJV box only if you meet the requirements to file as a qualified joint venture. See instructions. Properties: Type of Property: 1 Single Family Residence 3 Vacation/Short-Term Rental 5 Land 7 Self-Rental Is may farming received	AKH1	KHIL CHALLA						785-23-7366			
B If "Yes," did you or will you file required Form(s) 10997 Image: Content of the second		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							
In Physical address of each property (street, city, state, ZIP code) A MADINAGUDA HYDERABAD TELANGANA IN 500049 B C C C Top of Property (from list below) 2 For each rental real estate property listed above, report the number of fair rental and personal use days. Check the QJV box only if you meet the requirements to file as a qualified joint venture. See instructions. A B Type of Property: 1 Single Family Residence 3 Vacation/Short-Term Rental 6 Royatties 5 Land 7 Self-Rental 7 Self-Rental 8 Other (describe) Income: A B C 3 748. B C 4 B C 5 4 B C 6 6 6 6 6 6 6 6 7 1, 524. 8 9 10 11 1, 085. 12 11 1, 085. 13 4, 600. 13 0ther interest 16 -7 14 2, 748. 13 4, 600. 14 2, 748. 14<											
A MADINAGUDA HYDERABAD TELANGANA IN 500049 B C C Fair Rental real estate property listed dowe, report the number of fair rental and personal use days. Check the QJV box only if you meet the requirements to file as a qualified joint venture. See instructions. Fair Rental Days Days QJV B Qualified joint venture. See instructions. A 3 65 0 0 Type of Property: 1 Single Family Residence 3 Vacation/Short-Term Rental 6 Land 7 Self-Rental 8 Other (describe) Income: A B C 3 748. 8 C S Adventising 5 A B C 3 748. 9 Issuance . 9 . 9 9 9 9 9 Issuance . . 10 1,524. 8 9											
B C Fair Rental Personal Use Days QJV A 3 above, report the number of fair rental and personal use days. Check the QJV box only if you meet the requirements to file as a qualified joint venture. See instructions. A 36.5 0 0 Type of Property: 1 Single Family Residence 3 Vacation/Short-Term Rental 5 Land 7 Self-Rental 0 0 Income: 3 Vacation/Short-Term Rental 5 Land 7 Self-Rental 8 Other (describe) 0 Income: 3 Vacation/Short-Term Rental 5 Land 7 Self-Rental 8 Other (describe) 0 Income: 3 Rents received 3 Vacation/Short-Term Rental 5 Land 7 Alter. 8 0 S Advertising 5 5 0	Δ										
C Type of Property (from list below) 2 For each rental real estate property listed above, report the number of fair rental and personal use days. Check the QUV box only if you meet the requirements to file as an qualified joint venture. See instructions. Fair Rental Personal Use Days QuV A 3 3 4 365 0 1 Type of Property: 1 Single Family Residence 3 Vacation/Short-Term Rental 5 Land 7 Self-Rental 8 1 1 Single Family Residence 3 Vacation/Short-Term Rental 5 Land 7 Self-Rental 8 0 1 1 Multi-Family Residence 3 Vacation/Short-Term Rental 5 Land 7 Self-Rental 8 0 1 1 1 0 1 1 0 1 1 1 0 1 1 1 0 1 1 1 0 1											
Ib Type of Property (from list below) 2 For each rental real estate property listed above, report the number of fair rental and personal use days. Check the QJV box only if you meet the requirements to file as a qualified joint venture. See instructions. Fair Rental Personal Use Days QJV Type of Property: 1 Single Family Residence 3 Vacation/Short-Term Rental 5 Land 7 Self-Rental 0 0 0 0 Type of Property: 1 Single Family Residence 3 Vacation/Short-Term Rental 5 Land 7 Self-Rental 8 Other (describe) 0 <td></td>											
A 3 personal use days. Check the QJV box only if you meet the requirements to file as qualified joint venture. See instructions. A 3 65 0 0 B qualified joint venture. See instructions. A 3 65 0 0 Type of Property: 1 Single Family Residence 3 Vacation/Short-Term Rental 5 Land 6 Royatties 8 Other (describe) Income: A B C C 1 C 1 C Income: A B C 3 7 48. B C Income: A B C 3 7 48. B C A dvertising . . 6 . 7 1, 524. C Gommissions . . 9 . 10 . 10 . 10 . 11 1, 085. 11 1, 085. 11 1, 085. 12 13 4, 600. 14 2, 748. 15 3, 430. 16 11 1, 085. 11 1, 085. 11 1, 085. 11 1, 085. 11 1, 085. <th< th=""><td></td><td></td><td></td><td></td><td colspan="3"></td><td colspan="2"></td><td>QJV</td></th<>										QJV	
B if you meet the requirements to file as a qualified joint venture. See instructions. B Image: C Image: C <thimage: c<="" th=""> <thimage: c<="" th=""> Image: C</thimage:></thimage:>	Δ								•		
C qualitied joint venture. See instructions. C I Type of Property: 1 Single Family Residence 3 Vacation/Short-Term Rental 5 Land 7 Self-Rental 2 Multi-Family Residence 4 Commercial 6 Royalties 8 Other (describe) Income: A B C 3 Rents received 3 748. A 4 Royalties received 4		if you meet the requirements to f							0		
Type of Property: 1 Single Family Residence 3 Vacation/Short-Term Rental 5 Land 7 Self-Rental 2 Multi-Family Residence 4 Commercial 6 Royalties 8 Other (describe) Income: A B C 3 Rents received 4 3 748. 4 Royalties received 4 6 5 Advertising 5 6 6 Auto and travel (see instructions) 7 1, 524. 8 Commissions 7 1, 524. 9 Insurance 9 10 10 Legal and other professional fees 10 11 11 Management fees 13 4, 600. 13 Other interest 14 2, 748. 15 Supplies 15 3, 430. 16 Taxes 16 17 17 Utilities 19 12 20 Total expenses. Add lines 5 through 19 12 21 Subtract line 20 form line 3 (rents) and/or 4 (royalties). 12 22 (14, 670.)(////////////////////////////////////		qualified joint venture. See instru	qualified joint venture. See instructions								
1 Single Family Residence 3 Vacation/Short-Term Rental 5 Land 7 Self-Rental 2 Multi-Family Residence 4 Commercial 6 Royalties 8 Other (describe) Income: A B C 3 Rents received 4 - - 4 Royalties received 4 - - 5 Advertising - 4 - 6 Auto and travel (see instructions) - 6 - 7 Cleaning and maintenance 7 1, 524 - 8 Commissions - 8 - - 9 Insurance 11 1, 085 - - 10 Legal and other professional fees 11 1, 085 - - 11 Management fees - 11 1, 085 - - 13 Other interest - 13 4, 600 - - 14 Repairs 15 3, 430 - - - - 14 Repairs - 16 - - - - - - - - - - - - <td></td> <td>of Property:</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td>		of Property:									
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c Total of all amounts reported on line 12 for all properties				• • •	•			/40.			
e Total of all amounts reported on line 20 for all properties							15	418			
24 Income. Add positive amounts shown on line 21. Do not include any losses											
				-		• •	 al losses here		(14,670.)	
26 Total rental real estate and royalty income or (loss). Combine lines 24 and 25. Enter the result									\		
here. If Parts II, III, and IV, and line 40 on page 2 do not apply to you, also enter this amount on	20	here. If Parts II, III, and IV, and line 40 on page 2 do no	t appl	ly to you,	also e	nter th	is amount on	ו		-14,670.	