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

THE THE THE CONTROL CONTROL			
Submission Identification Number (SID)			
Taxpayer's name	Social s	ecurity numb	 ber
NIKHIL KUMAR NAYINI	853	-73-004	2
Spouse's name		's social secu	
Part I Tay Poturn Information Tay Your	Ending December 21 2022 (Enter year y	OLL ORO OLL	thorizing \
Part I Tax Return Information — Tax Year Enter whole dollars only on lines 1 through 5.	Ending December 31, 2023 (Enter year year year)	ou are au	trionzing.)
Note: Form 1040-SS filers use line 4 only. Leave lines 1	I 2 3 and 5 blank		
-		. [1]	77,078.
,			9,217.
	nd Form(s) 1099		11,731.
			2,514.
5 Amount you owe		. 5	
Part II Taxpayer Declaration and Signature	Authorization (Be sure you get and keep a	copy of y	our return)
Under penalties of perjury, I declare that I have examined a comy knowledge and belief, it is true, correct, and complete. I return (original or amended) I am now authorizing. I consent to send my return to the IRS and to receive from the IRS (a) a for any delay in processing the return or refund, and (c) the dayent to initiate an ACH electronic funds withdrawal (direct dipayment of my federal taxes owed on this return and/or a payauthorization is to remain in full force and effect until I notify payment, I must contact the U.S. Treasury Financial Agent business days prior to the payment (settlement) date. I also a taxes to receive confidential information necessary to answ personal identification number (PIN) below is my signature for Electronic Funds Withdrawal Consent.	further declare that the amounts in Part I above are the coallow my intermediate service provider, transmitter, or ean acknowledgement of receipt or reason for rejection of ate of any refund. If applicable, I authorize the U.S. Treas ebit) entry to the financial institution account indicated in ment of estimated tax, and the financial institution to deby the U.S. Treasury Financial Agent to terminate the autification at 1-888-353-4537. Payment cancellation requests musuthorize the financial institutions involved in the processiver inquiries and resolve issues related to the payment.	e amounts felectronic retained the transmissury and its control the tax prepition the entry thorization. The receiving of the elling of the elling of the accomplishment of the elling o	from the income tax turn originator (ERO) ssion, (b) the reason designated Financial paration software for to this account. This To revoke (cancel) a ved no later than 2 lectronic payment of cknowledge that the
Taxpayer's PIN: check one box only			
X lauthorize GLOBAL TAXES LLC	to enter or generate my PIN	3 0 0	0 4 2 as my
ERO firm name signature on the income tax return (original or			digits, but er all zeros
	ome tax return (original or amended) I am now auth turn is filed using the Practitioner PIN method. The		
Your signature ▶	Date ▶		
Spouse's PIN: check one box only			
I authorize	to enter or generate my PIN		as my
ERO firm name		Enter five	digits, but
signature on the income tax return (original or	amended) I am now authorizing.	don't ente	er all zeros
	ome tax return (original or amended) I am now auth turn is filed using the Practitioner PIN method. The		
Spouse's signature ▶	Date ►		
Practitioner PIN	Method Returns Only—continue below		
Part III Certification and Authentication — F	Practitioner PIN Method Only		
ERO's EFIN/PIN. Enter your six-digit EFIN followed by		9 6 0	8 2 7 1 eros
I certify that the above numeric entry is my PIN, which is my authorized to file for tax year indicated above for the taxpay requirements of the Practitioner PIN method and Pub. 1345, F	ver(s) indicated above. I confirm that I am submitting this	s return in a	accordance with the
ERO's signature ▶	Date►		
	tain This Form — See Instructions		
Don't Submit This Fo	rm 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 Jar	n. 1–D	ec. 31, 2023, or other tax year beginn	ing	, 2023,	ending	,	20		See separate instructions.
Your first name	and r	niddle initial	Last na	ame			Your id	entify	ing number
NIKHIL KU			NAYI				853-	73-	0042
	•	per and street). If you have a P.O. box	, see ins	tructions.					Apt. no.
2813 WEST				lata ana ana la ala		01-1-		7ID -	2508
• • •	ost ot	fice. If you have a foreign address, als	so comp	lete spaces below.		State		ZIP c	
IRVING	nom		Foreign	n province/state/county		TX Foreign p	nontal and	750	163
Foreign country	Папп	2	Foreigi	r province/state/county		roreign	Jostai Cot	Je	
Filing									
Status		Single		,	ng surviving spouse (,		tate	☐ Trust
Check only	lf y	ou checked the QSS box, enter the o	child's na	ame if the qualifying pers	on is a child but not	your depe	endent:		
one box.									
Digital Assets	At a	ny time during 2023, did you: (a) recei	ive (as a	reward, award, or payme	ent for property or se	ervices); o	r (b) sell,	excha	ange, or
	otherwise dispose of a digital asset (or a financial interest in a digital asset)? (See instructions.)								Yes X No
Dependents						(4) Ch	eck the box	if qua	alifies for (see inst.):
(see instructions):		(1) First name Last name		(2) Dependent's identifying number	(3) Relationship to yo	Chil	d tax credi	it	Credit for other dependents
		(I) I iist hame Last hame		identifying namber	(b) Helationship to yo	,,,			dependents
If more than four									
dependents, see instructions and							\dashv		
check here									H
Income	1a	Total amount from Form(s) W-2, box	(1 (see i	nstructions)			. 1a	T	94,898.
Effectively	b	Household employee wages not rep	•	,					21,0201
Connected	c	Tip income not reported on line 1a (s		• •					
With U.S.	d	Medicaid waiver payments not repo		•					
Trade or	е	Taxable dependent care benefits fro		` '	,				
Business	f	Employer-provided adoption benefit	s from F	orm 8839, line 29 .			. 1f		
	g	Wages from Form 8919, line 6					. 1g		
Attach Form(s) W-2,	h	Other earned income (see instruction	ns) .				. 1h		
1042-S,	i	Reserved for future use			1i				
SSA-1042-S,	j	Reserved for future use					. <u>1j</u>		
RRB-1042-S, and 8288-A here. Also	k	Total income exempt by a treaty from line 1(e)							
attach	z	Add lines 1a through 1h					. 1z		94,898.
Form(s) 1099-R if	2a	Tax-exempt interest 2a	a	b Tax	able interest		. 2b		
tax was	За	Qualified dividends 3a	3	b Ord	inary dividends .		. 3b		
withheld.	4a	IRA distributions 4a	3	b Tax	able amount		. 4b		
If you did not	5a	Pensions and annuities 5a	a	b Tax	able amount		. 5b		
get a Form W-2, see	6	Reserved for future use							
instructions.	7	Capital gain or (loss). Attach Schedu	•	, ,	•	_			
	8	Additional income from Schedule 1	•	•					-17,820.
	9	Add lines 1z, 2b, 3b, 4b, 5b, 7, and	8. This is	your total effectively c	onnected income		. 9	-	77,078.
	10	Adjustments to income from Sched income	,	, ·					
	11	Subtract line 10 from line 9. This is y	our adju	sted gross income			. 11		77,078.
	12	Itemized deductions (from Schedudeduction (see instructions)							13,850.
	13a	Qualified business income deduction							,
	b	Exemptions for estates and trusts of							
	c	Add lines 13a and 13b					. 13c		
	14								13,850.
	15	Subtract line 14 from line 11. If zero					_		63,228.

Form 1040-NR (2023)										Page 2
Tax and	16	Tax (see instructions). Check if any	from For	m(s): 1 88	314 2	4972	: 3			16	9,217.
Credits	17	Amount from Schedule 2 (Form 10	040), line	3						17	0.
	18	Add lines 16 and 17								18	9,217.
	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	9,217.
	23a	Tax on income not effectively conschedule NEC (Form 1040-NR), lir					23a				
	b	Other taxes, including self-employ line 21		•	•	, .	23b				
	С	Transportation tax (see instruction	ns)				23c				
	d	Add lines 23a through 23c								23d	
	24	Add lines 22 and 23d. This is your	total ta	x						24	9,217.
Payments	25	Federal income tax withheld from:	:								
-	а	Form(s) W-2				[25a	1	1,731.		
	b	Form(s) 1099				[25b				
	С	Other forms (see instructions) .				[25c				
	d	Add lines 25a through 25c								25d	11,731.
	е	Form(s) 8805								25e	
	f	Form(s) 8288-A								25f	
	g	Form(s) 1042-S								25g	
	26	2023 estimated tax payments and	l 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				-	29				
	30	Reserved for future use					30				
	31	Amount from Schedule 3 (Form 10	, .				31				
	32	Add lines 28, 29, and 31. These ar								32	
	33	Add lines 25d, 25e, 25f, 25g, 26, a								33	11,731.
Refund	34	If line 33 is more than line 24, sub					-	-		34	2,514.
	35a	Amount of line 34 you want refund								35a	2,514.
Direct deposit? See instructions.	b	Routing number 1 1 1 9				e: 🔀 (Check	ing $_{_{_{!}}}$	Savings		
See instructions.	d	Account number 7 8 7 3									
	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 instructure want to allow another person to describe the second se				o inatruo	38		es. Comp	loto bo	ow. 🗵 No
Third Party	•	•	มเรเนธร เเ			e ilistruc	lions.				ow. 🔼 No
Designee	Designame			Phone no.					nal identifi er (PIN)	ication	
	name no. number (PIN) Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which produces the statements of the statements of the statements.										
Sign	Your	signature	1	Date	Your occu	upation			If the	e IRS s	ent you an Identity
Here		3							Prot	ection	PIN, enter it here
					SOFTWA	ARE EN	IGIN	EER	(see	inst.)	
	Phone			Email address		,			I ==:		
Paid	Prepa	rer's name	Preparer'	's signature			Date		PTIN		Check if:
Preparer				PRIYA RAM	SAGAR G	UPTA	04/0	3/2024	P02082	2703	Self-employed
Use Only		name GLOBAL TAXES L							Phone n		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

NIKHIL KUMAR NAYINI

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. 01
Your soci	ial security number
853-73	-0042

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	-17,820.
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 (<u>)</u>	
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 . Ente	r here and on Form		1
	1040, 1040-SR, or 1040-NR, line 8		10	-17,820.

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				
16	Self-employed SEP, SIMPLE, and qualified plans				
17	Self-employed health insurance deduction				
18	Penalty on early withdrawal of savings				
19a	Alimony paid				
b	Recipient's SSN				
С	Date of original divorce or separation agreement (see instructions):				Į.
20	IRA deduction				
21	Student loan interest deduction				
22	Reserved for future use				
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	the state of the s	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			Į.
25	Total other adjustments. Add lines 24a through 24z				
26	Add lines 11 through 23 and 25. These are your adjustments to income . Form 1040, 1040-SR, or 1040-NR, line 10	. Enter	r here and	on 26	
	1 OITH 1070, 1070-011, 01 1070-1111, 11110-10	• •		. 20	

SCHEDULE NEC (Form 1040-NR)

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

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service

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

Name shown on Form 1040-NR Your identifying number NIKHIL KUMAR NAYINI 853-73-0042 Enter **amount of income** under the appropriate rate of tax. See instructions.

Nature of Income				(a) 10%	(b) 15%	(c) 30%	(d) Other (specify)			
					(a) 10%	(b) 15%	(6) 30%	%	%	
1	Dividends and divide	end ec	juivalents:							
а	Dividends paid by U.	.S. co	rporations		1a					
b	Dividends paid by fo	reign	corporations		1b					
С	Dividend equivalent p	ayme	nts received with respect to section 871(m)	transactions	1c					
2	Interest:									
а	Mortgage				2a					
b	Paid by foreign corp	oratio	ns		2b					
С	Other				2c					
3	Industrial royalties (p	atents	s, trademarks, etc.)		3					
4	Motion picture or TV	сору	right royalties		4					
5	Other royalties (copy	rights	, recording, publishing, etc.)		5					
6	Real property income	e and	natural resources royalties		6					
7	Pensions and annuit	ies .			7					
8	Social security benef	fits .			8					
9			elow		9					
10	Gambling—Resident If zero or less, ente	ts of C r -0	Canada only. Enter net income in column (c).						
а	Winnings									
b	Losses				10c					
11	Note: Enter winnings	s only.	ountries other than Canada. Losses aren't allowed		11					
12	Other (specify):									
					12					
13	•		columns (a) through (d)		13					
14			f tax at top of each column		14					
15	Tax on income not e	ffectiv	rely connected with a U.S. trade or busine						NR, line 23a 15	
			Capital Gains an	d Losses F	rom	Sales or Excha	inges of Proper	ty		I
losses f exchang within t	nly the capital gains and from property sales or ges that are from sources the United States and not	16	(a) Kind of property and description (if necessary, attach statement of descriptive details not shown below)	(b) Date acqu mm/dd/yy		(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).
	ely connected with a U.S. ss. Do not include a gain									
or loss	on disposing of a U.S. real y interest; report these									
gains a	nd losses on Schedule D									
(Form 1	property sales or									
exchan	ges that are effectively									
	ted with a U.S. business edule D (Form 1040),		Add columns (f) and (g) of line 16 .							
	797, or both.	18	Capital gain. Combine columns (f) and	l (g) of line 17	. Ente	er the net gain here	e and on line 9 ab	ove. If a loss, ente	r -0 18	

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

Name	shown on Form 1040-NR				Your identifying	number					
NI	KHIL KUMAR NAYINI				853-73-00						
Α	Of what country or countries were you a citiz	en or national d	luring the tax y	ear? INDIA							
В	In what country did you claim residence for	tax purposes di	uring the tax y	ear? United States							
С	Have you ever applied to be a green card holder (lawful permanent resident) of the United States?										
D	1. A U.S. citizen?										
				⊠ No ⊠ No							
2	If you answer "Yes" to (1) or (2), see Pub. 519, chapter 4, for expatriation rules that apply to you.										
Е	•	•	•		tor vour II S						
_	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										
F	Have you ever changed your visa type (nonin If you answered "Yes," indicate the date and	nmigrant status) nature of the cl) or U.S. immiç hange:	gration status?		∐ Yes	⊠ No				
G	List all dates you entered and left the United	States during 2	023. See instr	uctions.							
	Note: If you're a resident of Canada or Mexi				_						
	check the box for Canada or Mexico and s		7		☐ Mexico						
		d United States dd/yy		Date entered United State mm/dd/yy		rted United nm/dd/yy	d States				
	ППП/аа/уу	du/yy	-	ППП/аа/уу	"	пп/аа/уу					
			-								
			-								
			1								
Н	Give number of days (including vacation, nonw	orkdays, and pa	artial days) you	were present in the United S	States during:						
	2021, 2022		, an	d 2023 365	·						
I	Did you file a U.S. income tax return for any page 15 "Yes," give the latest year and form number					⊠ Yes	☐ No				
J	Are you filing a return for a trust?					☐ Yes	⊠ No				
	If "Yes," did the trust have a U.S. or foreign										
	U.S. person, or receive a contribution from a	U.S. person? .				☐ Yes	☐ No				
K	Did you receive total compensation of \$250,0		-			☐ Yes	⊠ No				
	If "Yes," did you use an alternative method to			-			☐ No				
L	Income Exempt From Tax—If you are claim complete (1) through (3) below. See Pub. 901	for more inform	mation on tax t	reaties.	-		-				
1	 Enter the name of the country, the applicable amount of exempt income in the columns below 				claimed the tre	aty benefi	t, and the				
	(a) Country	(k	b) Tax treaty an	ticle (c) Number of month claimed in prior tax ye	, , ,						
	(e) Total. Enter this amount on Form 1040-N	IR line 1k Don	not enter it any	where else on line 1							
2	2. Were you subject to tax in a foreign country		-			☐ Yes	No				
	3. Are you claiming treaty benefits pursuant to a	•		` '			⊠ No				
	If "Yes," attach a copy of the Competent Aut		-								
М	Check the applicable box if:										
1	 This is the first year you are making an election with a U.S. trade or business under section 8 										
2	You have made an election in a previous you States as effectively connected with a U.S. tr	ear that has no	t been revoke	d, to treat income from re	al property loc	ated in th	ne 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

NIK	HIL KUMAR NAYINI						853-7	3-0042		
Par										
	Note: If you are in the business of renting personal proper rental income or loss from Form 4835 on page 2, line 40.	rty, use	Schedule	c . See	instru	ctions. If you a	are an indiv	vidual, rep	ort farm	
Α	Did you make any payments in 2023 that would require you		Form(s) 1	10992.5	See ins	structions			e X No	
	If "Yes," did you or will you file required Form(s) 1099?									
 1a										
_ <u>A</u>	SVR BRUNDAVAN, BLOCK-A, 303 TEACHERS COI	LONY	SIDDIE	ът. ' .Т.	ŁLAN(GANA IN S	502103			
B C										
_	Time of Dispositive Q. Farranch monthly and activity areas		1			in Donated	D	-111		
1b	Type of Property (from list below) 2 For each rental real estate properties above, report the number of fair				га	ir Rental Days	Person Da		QJV	
A	personal use days. Check the Q			Α		365		0		
В	if you meet the requirements to			В		303				
C	qualified joint venture. See instru	uctions	i.	C						
Туре	of Property:				l					
	Single Family Residence 3 Vacation/Short-Term Ren	ntal	5 Lanc	d	7	Self-Rental				
2	Multi-Family Residence 4 Commercial		6 Roya	alties	8	Other (descr	ribe)			
						Properti				
Inco	mer			Α		В	C 3.		С	
3	Rents received	3			80.					
4	Royalties received	4								
Ехре	nses:									
5	Advertising	5								
6	Auto and travel (see instructions)	6		3	30.					
7	Cleaning and maintenance	7		1,845.						
8	Commissions	8								
9	Insurance	9								
10	Legal and other professional fees	10								
11	Management fees	11		1,4	60.					
12	Mortgage interest paid to banks, etc. (see instructions)	12								
13 14	Other interest	13 14		4,9	55					
15	Repairs	15		5,2						
16	Taxes	16		J , Z	10.					
17	Utilities	17		4,7	00.					
18	Depreciation expense or depletion	18		•						
19	Other (list)	19								
20	Total expenses. Add lines 5 through 19	20		18,5	00.					
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		-17,8	20.					
22	Deductible rental real estate loss after limitation, if any,		,	15 00	, ,	,	,	,		
000	on Form 8582 (see instructions)	22	(-	17,82		(680.	(
23a b	Total of all amounts reported on line 3 for all rental properties of all amounts reported on line 4 for all royalty properties.			•	23a 23b		000.			
C	Total of all amounts reported on line 4 for all properties			•	23c					
d	Total of all amounts reported on line 18 for all properties				23d					
e	Total of all amounts reported on line 20 for all properties				23e	18	,500.			
24	Income. Add positive amounts shown on line 21. Do no		de any lo	sses			. 24			
25	Losses. Add royalty losses from line 21 and rental real estat		-		nter to	tal losses her		(17,820.	
26	Total rental real estate and royalty income or (loss).	Combi	ne lines	24 and	25. E	nter the resu	ılt			
	here. If Parts II, III, and IV, and line 40 on page 2 do no	ot apply	y to you,	also e	nter th	nis amount d				
	Schedule 1 (Form 1040), line 5. Otherwise, include this a	mount	in the to	tal on li	ne 41	on page 2	. 26		-17,820.	