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

	3.0.0.00				
Submis	ssion Identification Number (SID)				
Taxpaye	r's name	Social securi	ty numl	per	
SIKE	HARA REDDY KONDAKINDI	307-53	-738	0	
Spouse's	s name	Spouse's soo	ial seci	urity numbe	r
Part	Tax Return Information — Tax Year Ending December 31, 2023 (Ente	 er year you a	re au	thorizina	1
	whole dollars only on lines 1 through 5.	er year you a	i e au	ilionzing.	· <i>)</i>
	Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.				
	Adjusted gross income		1 1	60	,176.
	Total tax		2		,499.
	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3		,318.
	Amount you want refunded to you		4		,819.
	Amount you owe		5		70221
Part		keep a cop	y of y	our retu	rn)
my kno return (or to send for any Agent to payment authorize payment business taxes to persona	penalties of perjury, I declare that I have examined a copy of the income tax return (original or amended wledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I abcoriginal or amended) I am now authorizing. I consent to allow my intermediate service provider, transmy return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for redelay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the loboration in the intermediate and ACH electronic funds withdrawal (direct debit) entry to the financial institution account in the formal f	we are the amounter, or electron of the transition of the transition to debit the transition to debit the authorizations must be processing of payment. I fur	ounts for the counts of the co	from the inturn original ssion, (b) the designated paration so to this according to the following part of the control of the c	come tax tor (ERO) ne reason Financial ftware for bunt. This (cancel) a er than 2 ayment of that the
	yer's PIN: check one box only				
X	-	3 my DINI	7 3	3 8 0	as my
	ERO firm name signature on the income tax return (original or amended) I am now authorizing.	ř En		digits, but er all zeros	as my
	I will enter my PIN as my signature on the income tax return (original or amended) I am if you are entering your own PIN and your return is filed using the Practitioner PIN met below.				
Your si	ignature ▶ Date ▶				
Spous	e's PIN: check one box only				
Spous	I authorize to enter or generate	my DINI			as my
	ERO firm name	-	ter five	digits, but	as IIIy
	signature on the income tax return (original or amended) I am now authorizing.			er all zeros	
	I will enter my PIN as my signature on the income tax return (original or amended) I am if you are entering your own PIN and your return is filed using the Practitioner PIN met below.				
Spouse	e's signature ▶ Date ▶				
	Practitioner PIN Method Returns Only—continue belov	v			
Part I	Certification and Authentication — Practitioner PIN Method Only				
ERO's	EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN. 2	2 4 9 Don't ent	6 0 er all ze	8 2 7	1
authoriz	that the above numeric entry is my PIN, which is my signature for the electronic individual income ted to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am subments of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS e-file Providers of	tax return (origi mitting this retu	nal or urn in a	amended) accordance	
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.

For the year Jan. 1-Dec. 31, 2023, or other tax year beginn				ning, 2023, ending, 20					See separate instructions.		
Your first name and middle initial									Your identifying number		
			(8						(see instructions)		
SIKHARA F	REDE	Υ	KOND	AKINDI				307-5	3-7380		
Home address (number and street). If you have a P.O. box, see instructions.							Apt. no.				
1021 WIND	WAR	D PSG TALL BRIDGE									
City, town, or p	ost of	fice. If you have a foreign address, als	so comp	lete spaces below	<i>/</i> .		State	Z	IP code		
SAINT CHA	RLE	S					MO	6	3303		
Foreign country	nam	e	Foreigr	n province/state/c	ounty		Foreign p	ostal code	e		
Filing Status								☐ Esta	te 🗌 Trust		
Check only	117	you checked the QSS box, enter the o	niia's na	ame if the qualifyir	ng pers	ion is a child but not	your aepe	enaent:			
one box.											
Digital Assets		ny time during 2023, did you: (a) recei rwise dispose of a digital asset (or a f						(b) sell, ex			
Dependents				(2) 5			(4) Ch	eck the box it	f qualifies for (see inst.):		
(see instructions):		(1) First name Last name		(2) Dependent identifying num		(3) Relationship to yo	Chil	d tax credit	Credit for other dependents		
		(i) i i i i i i i i i i i i i i i i i i		, , ,		(c) Helationionip to ye					
If more than four								H			
dependents, see instructions and								Ä			
check here								一			
Income	1a	Total amount from Form(s) W-2, box	1 (see i	nstructions) .				. 1a	67,397.		
Effectively	b	Household employee wages not rep	•	,					•		
Connected	С	Tip income not reported on line 1a (s		` ,				. 1c			
With U.S.	d	Medicaid waiver payments not report		•	nstruct	ions)		. 1d			
Trade or	е	Taxable dependent care benefits fro	m Form	2441, line 26 .				. 1e			
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	. 1h								
1042-S,	i	Reserved for future use									
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				<u> 1k </u>		. 1z	67,397.		
Form(s)	2a	Tax-exempt interest 2a	ı		b Tax	able interest		. 2b	•		
1099-R if tax was	За	Qualified dividends 3a	_			linary dividends		. 3b			
withheld.	4a	IRA distributions 4a			b Tax	able amount		. 4b			
If you did not	5a	Pensions and annuities 5a			b Tax	able amount		. 5b			
get a Form W-2, see	6	Reserved for future use	. 6								
instructions.	7	Capital gain or (loss). Attach Schedu	ıle D (Fo	rm 1040) if require	d. If n	ot required, check he	re [7			
	8	Additional income from Schedule 1	. 8	-7,221.							
	9	Add lines 1z, 2b, 3b, 4b, 5b, 7, and 8	3. This is	your total effect	ively c	onnected income .		. 9	60,176.		
10 Adjustments to income from Schedule 1 (Form 1040), line 26. These are your total income						•					
	11	Subtract line 10 from line 9. This is y	our adj u	ısted gross incor	ne			. 11	60,176.		
	12	Itemized deductions (from Schedu deduction (see instructions)							13,850.		
	13a	Qualified business income deduction				1 1					
	b	Exemptions for estates and trusts or									
	С	Add lines 13a and 13b	• .	•				. 13c			
	14								13,850.		
	15	Subtract line 14 from line 11. If zero	or less,	enter -0 This is y	our ta :	kable income		. 15	46,326.		

Form 1040-NR (2023)										Page 2
Tax and	16	Tax (see instructions). Check if ar	ny from For	rm(s): 1 88	314 2	4972	2 3			16	5,499.
Credits	17	Amount from Schedule 2 (Form	1040), line	3						17	0.
	18	Add lines 16 and 17								18	5,499.
	19	Child tax credit or credit for other	er depende	ents from Sched	ule 8812 (F	orm 104	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	5,499.
	23a	Tax on income not effectively co Schedule NEC (Form 1040-NR),					23a				
	b	Other taxes, including self-empl line 21	•	•	•	, · ·	23b				
	С	Transportation tax (see instruction	ons)				23c				
	d	Add lines 23a through 23c								23d	
	24	Add lines 22 and 23d. This is yo	ur total ta :	x						24	5,499.
Payments	25	Federal income tax withheld from	n:								
-	а	Form(s) W-2					25a		9,318.		
	b	Form(s) 1099					25b				
	С	Other forms (see instructions) .					25c				
	d	Add lines 25a through 25c								25d	9,318.
	е	Form(s) 8805								25e	<u> </u>
	f	Form(s) 8288-A								25f	<u> </u>
	g	Form(s) 1042-S								25g	<u> </u>
	26	2023 estimated tax payments ar	nd amount	applied from 20	22 return .					26	
	27	Reserved for future use					27				
	28	Additional child tax credit from S	Schedule 8	812 (Form 1040)		28				
	29	Credit for amount paid with Forn	n 1040-C				29				
	30	Reserved for future use					30				
	31	Amount from Schedule 3 (Form	1040), line	15			31				
	32	Add lines 28, 29, and 31. These	are your to	otal other paym	ents and r	efunda	ble cre	dits .		32	<u> </u>
	33	Add lines 25d, 25e, 25f, 25g, 26	, and 32. T	hese are your to	tal payme	nts .				33	9,318.
Refund	34	If line 33 is more than line 24, su	btract line	24 from line 33.	This is the	amoun	t you o	verpaid		34	3,819.
	35a	Amount of line 34 you want refu	nded to y	ou . If Form 8888	3 is attache	d, chec	k here		🗆	35a	3,819.
Direct deposit?	b	Routing number 0 8 1 0	0 0	0 3 2	c Type	e: 🔀	Checkii	ng 🗌	Savings		
See instructions.	d	Account number 3 5 4 0	1 2	4 0 3 6	1 3						
	е	If you want your refund check m	nailed to ar	n address outsic	le the Unite	ed State	s not s	hown on	page 1,		
		enter it here.									
	36	Amount of line 34 you want app	lied to you	ur 2024 estimat	ed tax .		36				
Amount	37	Subtract line 33 from line 24. Th		-							
You Owe		For details on how to pay, go to	www.irs.g	ov/Payments or	see instruc	ctions .				37	
	38	Estimated tax penalty (see instru	ıctions) .				38				<u>_</u>
Third	Do yo	u want to allow another person to	discuss t	his return with th	ne IRS? See	e instruc	ctions.	∐ Y	es. Comp	lete bel	low. 🗵 No
Party Designee	Designame			Phone no.					nal identif er (PIN)	ication	
		penalties of perjury, I declare that I ha they are true, correct, and complete. I									
Sign	Your	signature		Date	Your occu	upation			If th	e IRS s	ent you an Identity
Here											PIN, enter it here
	SOFTWARE ENGINEER (see						inst.)				
	Phone		Drone	Email address		-	Dot-		DTINI	-	Observation of
Paid		rer's name		's signature	33.03=		Date		PTIN	202	Check if:
Preparer		I PRIYA RAM SAGAR GUPTA		PRIYA RAM :	SAGAR G	UPTA	03/15	5/2024	P0208		Self-employed
Use Only		name GLOBAL TAXES							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 Sequence No. 01

Department of the Treasury Internal Revenue Service

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

SIKHARA REDDY KONDAKINDI

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 307-53-7380

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. Att	ach Schedule E .	5	-7,221.
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	10	-7 221

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 SIKHARA REDDY KONDAKINDI 307-53-7380 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 equ	uivalents:							
а	Dividends paid by U.	S. corp	porations		1a					
b	Dividends paid by fo	reign c	orporations		1b					
С	Dividend equivalent p	aymen	ts received with respect to section 871(m	n) transactions	1c					
2	Interest:									
а	Mortgage				2a					
b	Paid by foreign corp	oration	s		2b					
С					2c					
3	Industrial royalties (p	atents,	trademarks, etc.)		3					
4	Motion picture or TV	copyri	ght royalties		4					
5	Other royalties (copy	rights,	recording, publishing, etc.)		5					
6	Real property incom-	e and r	natural resources royalties		6					
7	Pensions and annuit	ies .			7					
8	Social security benef	fits .			8					
9	Capital gain from line	e 18 be	low		9					
10		s of Ca	anada only. Enter net income in column							
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			tax at top of each column		14					
15	Tax on income not e	ffective	ely connected with a U.S. trade or busin						-NR, line 23a 15	
			Capital Gains a	ind Losses F	rom	Sales or Excha	nges of Proper	ty	1	I
Enter only the capital gains and losses from property sales or exchanges that are from sources within the United States and not		16	(a) Kind of property and description (if necessary, attach statement of descriptive details not shown below)	(b) Date acquemm/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									
	on disposing of a U.S. real y interest; report these									
gains and losses on Schedule D (Form 1040).										
•	property sales or									
exchan	ges that are effectively							<u> </u>		
on Sche	ted with a U.S. business edule D (Form 1040),	17 /	Add columns (f) and (g) of line 16 .					17		
Form 4	797, or both.	18 (Capital gain. Combine columns (f) an	id (g) of line 17	. Ente	er the net gain here	e and on line 9 ab	ove. It a loss, ente	r -0 18	

SCHEDULE OI (Form 1040-NR)

Department of the Treasury

Name shown on Form 1040-NR

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** Your identifying number

SIK	SIKHARA REDDY KONDAKINDI 307-53-7380										
Α	Of what country or countries were you a citizen or national during the tax year? INDIA										
В	In what country did you claim residence for tax purpose	s during the tax yea	r? United States								
С	Have you ever applied to be a green card holder (lawful permanent resident) of the United States?										
D	Were you ever:	,									
1	•				Yes	⊠ No					
2	. A U.S. citizen?										
	If you answer "Yes" to (1) or (2), see Pub. 519, chapter 4,					⊠ No					
Е	If you had a visa on the last day of the tax year, enter y			ter vour U.S.							
	immigration status on the last day of the tax year.										
F	Have you ever changed your visa type (nonimmigrant status) or U.S. immigration status?										
	If you answered "Yes," indicate the date and nature of the change:										
G	List all dates you entered and left the United States durin	a 2023. See instruct	tions.								
-	Note: If you're a resident of Canada or Mexico AND cor	•		ent intervals.							
	check the box for Canada or Mexico and skip to item I			☐ Mexico							
	Date entered United States	es	Date entered United State	s Date depar	ted United	1 States					
	mm/dd/yy mm/dd/yy		mm/dd/yy		m/dd/yy						
Н	Give number of days (including vacation, nonworkdays, and	d partial days) you we	ere present in the United S	States during:							
	2021, 2022										
ı	Did you file a U.S. income tax return for any prior year? .				⊠ Yes	☐ No					
	If "Yes," give the latest year and form number you filed:										
J	Are you filing a return for a trust?				☐ Yes	⊠ No					
	If "Yes," did the trust have a U.S. or foreign owner unde										
	U.S. person, or receive a contribution from a U.S. person				☐ Yes	☐ No					
Κ	Did you receive total compensation of \$250,000 or more	during the tax year?)		☐ Yes	⊠ No					
	If "Yes," did you use an alternative method to determine	-			☐ Yes	☐ No					
L	Income Exempt From Tax-If you are claiming exempt				a foreign	country,					
	complete (1) through (3) below. See Pub. 901 for more in					-					
1	Enter the name of the country, the applicable tax treaty art	icle, the number of r	months in prior years you	claimed the trea	aty benefit	, and the					
	amount of exempt income in the columns below. Attach Fo	orm 8833 if required.	. See instructions.								
	(a) Country	(b) Tax treaty articl	e (c) Number of month	s (d) Amo	unt of exe	mpt					
			claimed in prior tax ye	ars income in	current ta	x year					
	(e) Total. Enter this amount on Form 1040-NR, line 1k. D	-									
	Were you subject to tax in a foreign country on any of the				☐ Yes	☐ No					
3	Are you claiming treaty benefits pursuant to a Competent	-			☐ Yes	⊠ No					
	If "Yes," attach a copy of the Competent Authority determ	nination letter to you	ur return.								
M	Check the applicable box if:										
1	This is the first year you are making an election to treat in with a U.S. trade or business under section 871(d). See in				-	nnected					
2	You have made an election in a previous year that has					e United					
	States as effectively connected with a U.S. trade or busin										

REV 03/07/24 PRO

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.

OMB No. 1545-0074

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

Your social security number

SIKE	IARA REDDY KONDAKINDI						307-5	3-7380	
Parl	Income or Loss From Rental Real Estate an Note: If you are in the business of renting personal proper rental income or loss from Form 4835 on page 2, line 40.			c . See	instru	ctions. If you ar	e an indiv	vidual, rep	ort farm
В	f "Yes," did you or will you file required Form(s) 1099? .							. 🗌 Ye	s 🗌 No
1a	Physical address of each property (street, city, state, ZIF	ode	e)						
Α	2-4-1033/7 NAGOLE TELANGANA IN 500035								
В									
С									
1b	Type of Property (from list below) 2 For each rental real estate properabove, report the number of fair	rental	and						
Α	personal use days. Check the Q			Α		365		0	
В	if you meet the requirements to f qualified joint venture. See instru			В					
С	qualified joint venture. See institu	ICLIONS).	С					
Type	of Property:								
	Single Family Residence 3 Vacation/Short-Term Ren Multi-Family Residence 4 Commercial	tal	5 Land 6 Roya	-		Self-Rental Other (descri	be)		
						Propertie	es:		
Incon	ne:			Α		В			С
3	Rents received	3		5	60.				
4	Royalties received	4							
Expe									
5	Advertising	5							
6	Auto and travel (see instructions)	6							
7	Cleaning and maintenance	7		1,1	00.				
8	Commissions	8							
9	Insurance	9							
10	Legal and other professional fees	10							
11	Management fees	11		1,2	30.				
12	Mortgage interest paid to banks, etc. (see instructions)	12							
13	Other interest	13							
14	Repairs	14		2,0					
15	Supplies	15		1,8	52.				
16	Taxes	16							
17	Utilities	17		1,5	44.				
18	Depreciation expense or depletion	18							
19	Other (list)	19			0.1				
20	Total expenses. Add lines 5 through 19	20		7,7	81.				
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		-7,2	21.				
22	Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions)	22	(-7,22		()	()
23a	Total of all amounts reported on line 3 for all rental prope	rties			23a		560.		
b	Total of all amounts reported on line 4 for all royalty prop				23b				
С	Total of all amounts reported on line 12 for all properties				23c				
d	Total of all amounts reported on line 18 for all properties				23d				
е	Total of all amounts reported on line 20 for all properties				23e	7	,781.		
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	ie 22. Ei	nter to	tal losses here	25	(7,221.)
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						n - 26		-7,221.