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

IIIGIIIai	nevertue Service					
Subm	ission Identification Number (SID)					
Taxpay	er's name	Social se	curity num	ber		
NAG	A SAI KUNCHAKURI	748-	22-336	7		
Spouse	's name	Spouse's social security number				
Part	, ,	year yo	u are au	thorizing.)	
	whole dollars only on lines 1 through 5.					
	Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.		ام ا	l = 4	210	
1	Adjusted gross income				,319.	
2	Total tax			+	,637.	
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		. 3		,403.	
4 5	Amount you want refunded to you		· — —	3	<u>,766.</u>	
Part				vour retu	rn)	
	penalties of perjury, I declare that I have examined a copy of the income tax return (original or amended)					
to send for any Agent payme author payme busine taxes person	(original or amended) I am now authorizing. I consent to allow my intermediate service provider, transmid my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejected delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U. to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indict of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution zation is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate nt, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation requises days prior to the payment (settlement) date. I also authorize the financial institutions involved in the to receive confidential information necessary to answer inquiries and resolve issues related to the pall identification number (PIN) below is my signature for the income tax return (original or amended) I are income Withdrawal Consort.	ection of the S. Treasu cated in the on to debit the authoriests must processin ayment. I	ne transmi ry and its ne tax pre the entry orization. t be rece g of the e further ad	ssion, (b) the designated paration soft to this according to the designation of the desig	ne reason Financial tware for bunt. This cancel) a er than 2 syment of that the	
	nic Funds Withdrawal Consent.					
	ayer's PIN: check one box only	an a DINI	2 3	3 6 7		
×	I authorize GLOBAL TAXES LLC to enter or generate r	my PIN		digits, but	as my	
	signature on the income tax return (original or amended) I am now authorizing.		don't ente	er all zeros		
	I will enter my PIN as my signature on the income tax return (original or amended) I am notify you are entering your own PIN and your return is filed using the Practitioner PIN methology.					
Your	signature ► <u>Naga Sai K</u> Date ► _	02/1	0/202	24		
Spous	se's PIN: check one box only					
Г	I authorize to enter or generate	my PIN			as my	
_	ERO firm name	y .	Enter five	digits, but	aomy	
	signature on the income tax return (original or amended) I am now authorizing.		don't ente	er all zeros		
	I will enter my PIN as my signature on the income tax return (original or amended) I am no if you are entering your own PIN and your return is filed using the Practitioner PIN methology.					
Spous	se's signature ▶ Date ▶					
	Practitioner PIN Method Returns Only—continue below					
Part	Certification and Authentication — Practitioner PIN Method Only					
ERO's	s EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN.	2 4 Don't	9 6 0 enter all z	8 2 7 eros	1	
author	y that the above numeric entry is my PIN, which is my signature for the electronic individual income ta ized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am submements of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS <i>e-file</i> Providers of Internal IRS e-file Providers of IRS	itting this	return in	accordance		
ERO's	s signature ► Date ►					
	ERO Must Retain This Form — See Instructions					
	Don't Submit This Form to the IRS Unless Requested To D	o 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 beginning, 2023, ending, 20 _					20	See separate instructions.					
Your first name and middle initial			Last na	ame				Your identifying number			
							(see inst	(see instructions)			
NAGA SAI			KUNC	HAKURI	748-	22-3367					
Home address	(numl	per and street). If you have a P.O. box	, see ins	tructions.				Apt. no.			
5400 W PA								327			
City, town, or po	ost o	ffice. If you have a foreign address, als	so comp	lete spaces below.		State		ZIP code			
AUSTIN						TX		78727			
Foreign country	nam	e	Foreigi	n province/state/county		Foreign	postal cod	de			
Filing Status	X	Single	arately (N	MFS) Qualify	ing surviving spouse	QSS)	☐ Est	ate Trust			
	If you checked the QSS box, enter the child's name if the qualifying person is a child but not your depende										
Check only one box.											
Digital Assets	Δt a	ny time during 2023, did you: (a) recei	ve (as a	reward award or navn	nent for property or se	rvices). c	or (b) sell (exchange or			
Digital Assets	othe	erwise dispose of a digital asset (or a f	inancial	interest in a digital asse	et)? (See instructions.)			. Yes X No			
Dependents						(4) Ch	eck the box	if qualifies for (see inst.):			
(see instructions):		(A) E: .		(2) Dependent's	(0) D 1 11 11 1	Chi	ild tax credi	t Credit for other			
	-	(1) First name Last name		identifying number	(3) Relationship to yo	ou		dependents			
If more than four											
dependents, see							$\overline{\Box}$				
instructions and check here											
Income	1a	Total amount from Form(s) W-2, box	1 (see i	nstructions)			. 1a	60,219.			
Effectively	b	Household employee wages not rep	`	,				,			
Connected	С	Tip income not reported on line 1a (s		` '							
With U.S.	d	Medicaid waiver payments not report	rted on F	Form(s) W-2 (see instruc	ctions)		. 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				
Attach	g	Wages from Form 8919, line 6					. 1g				
Form(s) W-2,	h	Other earned income (see instruction	ns) .				. 1h				
1042-S,	i	Reserved for future use									
SSA-1042-S, RRB-1042-S,	j	Reserved for future use			1 1		. <u>1j</u>				
and 8288-A	k	Total income exempt by a treaty from									
here. Also attach	_	line 1(e)			1k		1-	60,219.			
Form(s)	z 2a	Tax-exempt interest 2a	1	1	xable interest		. 1z	00,219.			
1099-R if		Qualified dividends 3a			dinary dividends .		. 3b				
tax was withheld.	4a	IRA distributions 4a			xable amount						
If you did not	5a	Pensions and annuities 5a			xable amount						
get a Form	6	Reserved for future use					. 6				
W-2, see instructions.	7	Capital gain or (loss). Attach Schedu	ıle D (Fo	rm 1040) if required. If r	not required, check he	ere	□ 7				
	8	Additional income from Schedule 1 (Form 10	040), line 10			. 8	-5,900.			
	9	Add lines 1z, 2b, 3b, 4b, 5b, 7, and 8	3. This is	your total effectively	connected income		. 9	54,319.			
	10	Adjustments to income from Schedincome	•		•		_				
	11	Subtract line 10 from line 9. This is y	our adju	usted gross income			. 11	54,319.			
	12	Itemized deductions (from Schedu	,	"		-					
		deduction (see instructions)			1 1	ndia Tre	eaty 12	13,850.			
	13a	Qualified business income deduction									
	b	Exemptions for estates and trusts or									
	C	Add lines 13a and 13b									
	14 15							13,850.			
	15	Subtract line 14 from line 11. If zero	or iess,	enter -u This is your ta	axable income .		. 15	40,469.			

Form 1040-NR (2023)						Page 2
Tax and	16	Tax (see instructions). Check if any from Form(s): 1 8814	2 4972	2 3 🗌		16	4,637.
Credits	17	Amount from Schedule 2 (Form 1040), line 3			[17	0.
	18	Add lines 16 and 17			[18	4,637.
	19	Child tax credit or credit for other dependents from Schedule 8	8812 (Form 104	10)	[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 zero or less, enter -0			🛓	22	4,637.
	23a	Tax on income not effectively connected with a U.S. trade or b Schedule NEC (Form 1040-NR), line 15		23a			
	b	Other taxes, including self-employment tax, from Schedule 2	(Form 1040),				
		line 21		23b			
	С	Transportation tax (see instructions)	_	23c			
	d	Add lines 23a through 23c			[23d	
	24	Add lines 22 and 23d. This is your total tax				24	4,637.
Payments	25	Federal income tax withheld from:					
	а	Form(s) W-2	- F	25a	8,403.		
	b	Form(s) 1099		25b			
	С	Other forms (see instructions)	[25c			
	d	Add lines 25a through 25c				25d	8,403.
	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 2022 i	1			26	
	27	Reserved for future use		27			
	28	Additional child tax credit from Schedule 8812 (Form 1040)	- t	28			
	29	Credit for amount paid with Form 1040-C	H	29			
	30	Reserved for future use	Г	30			
	31	Amount from Schedule 3 (Form 1040), line 15	-	31			
	32	Add lines 28, 29, and 31. These are your total other payment			_	32	
	33	Add lines 25d, 25e, 25f, 25g, 26, and 32. These are your total				33	8,403.
Refund	34	If line 33 is more than line 24, subtract line 24 from line 33. Thi		•	+	34	3,766.
	35a	Amount of line 34 you want refunded to you . If Form 8888 is a				35a	3,766.
Direct deposit? See instructions.	b			Checking	Savings		
coo mondonono.	d	Account number 4 8 8 1 0 3 6 8 9 8 8					
	е	If you want your refund check mailed to an address outside the					
		enter it here.					
	36	Amount of line 34 you want applied to your 2024 estimated to	ax	36			
Amount	37	Subtract line 33 from line 24. This is the amount you owe . For details on how to pay, go to <i>www.irs.gov/Payments</i> or see	inetructione			27	
You Owe	38	Estimated tax penalty (see instructions)	1	38		37	
Third		u want to allow another person to discuss this return with the IF			es. Comple	te below	. 🗵 No
Party	,	·	io: oee msiruc		nal identific		. 🔼 110
Designee	Desig name				naridentilic er (PIN)	ation	
	Under	penalties of perjury, I declare that I have examined this return and accon they are true, correct, and complete. Declaration of preparer (other than		es and statement	s, and to the		
Sign	Your	signature Date Yo	our occupation		If the	IRS sent	you an Identity
Here		3.9.44.0	a. occupano				l, enter it here
		SI	TUDENT		(see ir	nst.)	
	Phone				T ===-		
Paid	Prepa	rer's name Preparer's signature		Date	PTIN	I -	neck if:
Preparer	SYAM	PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA RAM SAGAR GU	JPTA TALLAM	02/11/2024	P02082	703 L	Self-employed
Use Only	Firm's	name GLOBAL TAXES LLC			Phone no	(965-9522
	Firm's	address 245 ROONEY CT E BRUNSWICK NJ (08816		Firm's EIN	1 84-	3171965

BAA

SCHEDULE 1 (Form 1040)

Additional Income and Adjustments to Income

OMB No. 1545-0074

2023

Attachment Sequence No. 01

Your social security number

Department of the Treasury Internal Revenue Service

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.

NAGA	SAI KUNCHAKURI		748-22	2-336	57
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			5	-5,900.
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			
- 1	Income from the rental of personal property if you engaged in the rental				
	for profit but were not in the business of renting such property	81			
m	Olympic and Paralympic medals and USOC prize money (see				
	instructions)	8m			
n	Section 951(a) inclusion (see instructions)	8n			
0	Section 951A(a) inclusion (see instructions)	80			
р	Section 461(I) excess business loss adjustment	8p			
q	Taxable distributions from an ABLE account (see instructions)	8q			
r	Scholarship and fellowship grants not reported on Form W-2	8r			
s	Nontaxable amount of Medicaid waiver payments included on Form				
	1040, line 1a or 1d	8s ()		
t	Pension or annuity from a nonqualifed deferred compensation plan or				
	a nongovernmental section 457 plan	8t			
u	Wages earned while incarcerated	8u			
Z	Other income. List type and amount:				
		8z			
9	Total other income. Add lines 8a through 8z			9	
10	Combine lines 1 through 7 and 9. This is your additional income. Ente	r here and on	Form		

10

-5,900.

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

Par	t II Adjustments to Income				
11	Educator expenses			11	
12	Certain business expenses of reservists, performing artists, and fee-				
	officials. Attach Form 2106			12	
13	Health savings account deduction. Attach Form 8889			13	
14	Moving expenses for members of the Armed Forces. Attach Form 3903			14	
15	Deductible part of self-employment tax. Attach Schedule SE			15	
16	Self-employed SEP, SIMPLE, and qualified plans			16	
17	Self-employed health insurance deduction			17	
18	Penalty on early withdrawal of savings			18	
19a	Alimony paid			19a	
b	Recipient's SSN				
С	Date of original divorce or separation agreement (see instructions):				
20	IRA deduction			20	
21	Student loan interest deduction			21	
22	Reserved for future use			22	
23	Archer MSA deduction			23	
24	Other adjustments:				
а	, , , , , , , , , , , , , , , , , , ,	24a			
b	Deductible expenses related to income reported on line 8l from the				
		24b			
С	Nontaxable amount of the value of Olympic and Paralympic medals	04			
_1	· · · · · · · · · · · · · · · · · · ·	24c		_	
d		24d		-	
е	Repayment of supplemental unemployment benefits under the Trade Act of 1974	24e			
f		24f			
g	Contributions by certain chaplains to section 403(b) plans	24g			
h	Attorney fees and court costs for actions involving certain unlawful				
	discrimination claims (see instructions)	24h			
i	Attorney fees and court costs you paid in connection with an award				
	from the IRS for information you provided that helped the IRS detect				
	-	24i			
j		24j			
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form				
		24k			
Z	Other adjustments. List type and amount:	24z			
				-	
25	Total other adjustments. Add lines 24a through 24z			25	
26	Add lines 11 through 23 and 25. These are your adjustments to income .	. Enter	nere and on		
	Form 1040, 1040-SR, or 1040-NR, line 10			26	

SCHEDULE NEC (Form 1040-NR)

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

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 NAGA SAI KUNCHAKURI 748-22-3367 Enter **amount of income** under the appropriate rate of tax. See instructions.

Nature of Income		(a) 100/	(b) 150/	(a) 200/	(d) Other (specify)			
			(a) 10% (b) 15% (c) 30%		(c) 30%	%	%	
1	Dividends and dividend equivalents:							
а	Dividends paid by U.S. corporations	1a						
b	Dividends paid by foreign corporations	1b						
С	Dividend equivalent payments received with respect to section 871(m) transactions	1c						
2	Interest:							
а	Mortgage	2a						
b	Paid by foreign corporations	2b						
С	Other	2c						
3	Industrial royalties (patents, trademarks, etc.)	3						
4	Motion picture or TV copyright royalties	4						
5	Other royalties (copyrights, recording, publishing, etc.)	5						
6	Real property income and natural resources royalties	6						
7	Pensions and annuities	7						
8	Social security benefits	8						
9	Capital gain from line 18 below	9						
10	Gambling—Residents of Canada only. Enter net income in column (c). If zero or less, enter -0							
а	Winnings	1						
b	Losses	10c						
11	Gambling—Residents of countries other than Canada. Note: Enter winnings only. Losses aren't allowed	11						
12	Other (specify):							
		12						
13	Add lines 1a through 12 in columns (a) through (d)	13						
14	Multiply line 13 by rate of tax at top of each column	14						
15	Tax on income not effectively connected with a U.S. trade or business. Add colum					NR, line 23a 15		
	Capital Gains and Losses F	rom	Sales or Excha	nges of Proper	ty			
losses f	nly the capital gains and rom property sales or ges that are from sources he United States and not hand to the capital gains and consider the capital gains and gest that are from sources he United States and not hand to the capital gains and gest that are from sources he united States and not hand to the capital gains and gest that are from sources he united States and not hand the capital gains and gest that are from sources he united States and not hand the capital gains and gest that are from sources he united States and not hand the capital gains and gest that are from sources he united States and not hand the capital gains and gest that are from sources he united States and not hand the capital gains and gest that are from sources he united States and not hand the capital gains and gest that are from sources he united States and not hand the capital gains and gest that are from sources he united States and not hand the capital gains and gest that are from sources he united States and not hand the capital gains and gest that are from sources have the capital gains and gest that are from sources have the capital gains and gest that are from sources have the capital gains and gest that are from sources have the capital gains and gest that are from sources have the capital gains and gest that are from sources have the capital gains and gest that are from sources have the capital gains and gest that are from sources have the capital gains and gest that the capital gains are greatly as the capital gains and gest that the capital gains are greatly as the capital gains and gest that the capital gains are greatly as the capital gains and gest that the capital gains are greatly as the capital gains and greatly as the capital gains are greatly as the capital gains and greatly as the capital gains are greatly as the capital		(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. s. Do not include a gain							
or loss	on disposing of a U.S. real y interest; report these							
	nd losses on Schedule D							
Report	property sales or							
	ges that are effectively ted with a U.S. business 17 Add columns (f) and (g) of line 16				17	1		
on Sche	adule D (Form 1040), 797, or both. 17 Add Columns (f) and (g) of line 16		 er the net gain here			<u> (</u>		
1 01111 4	191, or boun. To Capital gain. Combine columns (i) and (g) or line 17		or and fice gain field	and on mic 3 abo	2 v 5. 11 a 10 55, el lle	· · · 10		

SCHEDULE OI (Form 1040-NR)

Other Information

Attach to Form 1040-NR.

Go to www.irs.gov/Form1040NR for instructions and the latest information. Department of the Treasury Answer all questions.

OMB No. 1545-0074 Attachment Sequence No. **7C**

Internal Revenue Service

Name shown on Form 1040-NR Your							
NAGA	SAI KUNCHAKURI				748-22-33	367	
Α	Of what country or countries w	vere you a citizen or nationa	al during the tax y	/ear? INDIA			
В	In what country did you claim	residence for tax purposes	s during the tax y	ear? United States			
С	Have you ever applied to be a	nt) of the United States? .		☐ Yes	⊠ No		
D	Were you ever:					_	_
	A U.S. citizen?				⊠ No		
2.	A green card holder (lawful per	· · · · · · · · · · · · · · · · · · ·				∐ Yes	⊠ No
_	If you answer "Yes" to (1) or (2		•				
E	If you had a visa on the last of immigration status on the last of	day of the tax year. $F1$					
F	Have you ever changed your v If you answered "Yes," indicat	risa type (nonimmigrant sta e the date and nature of the	tus) or U.S. immi e change:	gration status?	· · · ·	∐ Yes	⊠ No
G	List all dates you entered and	left the United States durin	g 2023. See instr	uctions.			
	Note: If you're a resident of C						
	check the box for Canada or				Mexico		1
	Date entered United States mm/dd/yy	Date departed United Stat mm/dd/yy	es	Date entered United State mm/dd/yy		rted United nm/dd/yy	d States
	Tillin dan yy	Tillin dan y y		ППГ/ СС/ УУ		пп/аа/уу	
			_				
Н	Give number of days (including	vacation, nonworkdays, and	 d partial days) you	were present in the United	States during:		
		, 2022					
I	Did you file a U.S. income tax If "Yes," give the latest year ar	return for any prior year?.				⊠ Yes	□No
J	Are you filing a return for a trus	st?				☐ Yes	⊠ No
	If "Yes," did the trust have a U.S. person, or receive a contr	J.S. or foreign owner unde	er the grantor trus	st rules, make a distribution	n or loan to a	Yes	□No
K	Did you receive total compens	·				☐ Yes	⊠ No
••	If "Yes," did you use an alterna					☐ Yes	□ No
L	Income Exempt From Tax-If complete (1) through (3) below	you are claiming exempt	ion from income	tax under a U.S. income		a foreign	
1.	Enter the name of the country, amount of exempt income in the	the applicable tax treaty art	icle, the number of	of months in prior years you	claimed the tre	aty benefit	t, and the
	(a) Cou		(b) Tax treaty ar		hs (d) Am	ount of exe	empt
	(4)	y	(b) rax troaty ar	claimed in prior tax ye		n current ta	•
	(a) Tatal Fatauth:	- Forms 1040 ND " 44 D	 	nubara ala lin - 4			
•	(e) Total. Enter this amount of		-				□ No
	Were you subject to tax in a for Are you claiming treaty benefit					∐ Yes □ Yes	⊔ No ⊠ No
ა.	If "Yes," attach a copy of the (·	•			⊔ res	∠ NO
М	Check the applicable box if:	Joinpotont Additiontly determ	imation letter to	your roturn.			
	This is the first year you are many	aking an election to treat in	ncome from real r	property located in the Unit	ed States as eff	fectively co	onnected
= =	with a U.S. trade or business u						. 🗆
2.	You have made an election in States as effectively connected						e United
For Par	perwork Reduction Act Notice,			RAA REV 02/05/24 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.

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.

2023	
Attachment Sequence No. 13	

OMB No. 1545-0074

NAG	A SAI KUNCHAKURI						748-2	2-3367	
Par	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.	rtv. use 🕄		e C. See	instru	ctions. If you	are an indi	vidual, rep	ort farm
Α								. \(\sum \text{Ye}	s 🛛 No
	If "Yes," did you or will you file required Form(s) 1099?								
1a	Physical address of each property (street, city, state, ZII								
	3-9-109/3,39/40,ROAD NO.13 CENTRAL BANK			LD MIV	י מגי	ז ע ט ע ט ט ט ט ט ט	י חיביד או	CANA T	NI 500060
A B	3-9-109/3,39/40,ROAD NO.13 CENTRAL BANK	V COT	JNI, I	LB NAC	JAK,	TIDERABAL), IELAN	GANA I	N 300066
C	+								
1b	Type of Property (from list below) 2 For each rental real estate property above, report the number of fair				Fa	ir Rental Days		nal Use nys	QJV
Α	personal use days. Check the Q			Α		365		0	
В	if you meet the requirements to qualified joint venture. See instru			В					
С	qualified joint venture. See institu	uctions.		С					
Туре	of Property:								
1	Single Family Residence 3 Vacation/Short-Term Ren	ntal	5 Land	b	7	Self-Rental			
2	Multi-Family Residence 4 Commercial		6 Roya	alties	8	Other (desc	ribe)		
						Propert			
Incor	ne	-		Α		В	103.		С
3	Rents received	3			50.				
4	Royalties received	4			-				
	nses:	+ - +							
5	Advertising	5							
6	Auto and travel (see instructions)	6							
7	Cleaning and maintenance	7		7	50.				
8	Commissions	8							
9	Insurance	9							
10	Legal and other professional fees	10							
11	Management fees	11		9	50.				
12	Mortgage interest paid to banks, etc. (see instructions)	12							
13	Other interest	13							
14	Repairs	14		1,0	50.				
15	Supplies	15		1,5	50.				
16	Taxes	16							
17	Utilities	17		1,9	50.				
18	Depreciation expense or depletion	18							
19	Other (list)	19							
20	Total expenses. Add lines 5 through 19	20		6,2	50.				
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		-5, 9	0.0				
22	Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions)	22 (-5,90		()	()
23a	Total of all amounts reported on line 3 for all rental prope	erties			23a		350.		
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	(5,250.		
24	Income. Add positive amounts shown on line 21. Do not	t include	e any lo	sses			. 24		
25	Losses. Add royalty losses from line 21 and rental real estat	te losses	from lir	ne 22. E	nter to	tal losses he	re 25	(5,900.)
26	Total rental real estate and royalty income or (loss).	Combin	ne lines	24 and	25. E	nter the res	ult		
	here. If Parts II, III, and IV, and line 40 on page 2 do no Schedule 1 (Form 1040), line 5. Otherwise, include this all	ot apply	to you	, also e	nter tl	nis amount (-5,900.