(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

	1.01.01.00						
Submi	ssion Identification Number (SID)						
Taxpaye	r's name	Social securi	ty numl	per			
SHAI	LINI BODE	843-63	-415	2			
Spouse's		Spouse's social security number					
Part	Tax Return Information — Tax Year Ending December 31, 2023 (Ente	r vear vou a	re au	thorizina.)		
	whole dollars only on lines 1 through 5.	your your			/		
	Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.						
1	Adjusted gross income		1	85	,164.		
2	Total tax		2		,999.		
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3	12	,706.		
4	Amount you want refunded to you		4		,707.		
5	Amount you owe		5				
Part	Taxpayer Declaration and Signature Authorization (Be sure you get and	keep a cop	y of y	our retu	rn)		
return (control to send for any Agent to paymer authorize paymer business taxes to personal	wiledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above original or amended) I am now authorizing. I consent to allow my intermediate service provider, transming return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejudelay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U or initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account independent of the processing the return and/or a payment of estimated tax, and the financial institution action is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation requires a days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processor of the payment (settlement) date. I also authorize the financial institutions related to the payment (settlement) below is my signature for the income tax return (original or amended) I as a force of the Withdrawal Occasion.	itter, or electricection of the to a.S. Treasury a icated in the to to debit the ethe authorizuests must be processing opayment. I fur	onic refransmised ax prepartion. The receiff the elastic accordance in the elastic accordance receiff the accordan	turn origina ssion, (b) the designated paration soft to this according for revoke (ved no late ectronic pasknowledge	tor (ERO) ne reason Financial itware for bunt. This cancel) a er than 2 syment of that the		
	nic Funds Withdrawal Consent. yer's PIN: check one box only						
X		my PIN 3	4 3	1 5 2	as my		
	ERO firm name signature on the income tax return (original or amended) I am now authorizing.	r En		digits, but er all zeros	domy		
	I will enter my PIN as my signature on the income tax return (original or amended) I am r if you are entering your own PIN and your return is filed using the Practitioner PIN metholow.						
Your s	ignature ▶ Date ▶ _						
Spous	e's PIN: check one box only						
	I authorize to enter or generate	my PIN			as my		
	ERO firm name	-	ter five	digits, but	aomy		
	signature on the income tax return (original or amended) I am now authorizing.	do	n't ente	r all zeros			
	I will enter my PIN as my signature on the income tax return (original or amended) I am r if you are entering your own PIN and your return is filed using the Practitioner PIN metholow.						
Spous	e's signature ▶ Date ▶						
	Practitioner PIN Method Returns Only—continue below	1					
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	2 4 9 Don't ent	6 0	8 2 7	1		
		Don't ent	J. UII 20				
authoriz	that the above numeric entry is my PIN, which is my signature for the electronic individual income to the 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 In	nitting this retu	urn in a	accordance			
ERO's	signature ▶ Date ▶						
	ERO Must Retain This Form — See Instructions						
	Don't Submit This Form to the IRS Unless Requested To I	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–D	ec. 31, 2023, or other tax year beginni	ng	:	2023,	ending	,	20		instructions.	
Your first name and middle initial			Last name Ye						our identifying number see instructions)		
SHALINI					843	843-63-4152					
Home address (numb	per and street). If you have a P.O. box,	see ins	tructions.						Apt. no.	
3699 EUCL	ID	DR									
City, town, or po	ost of	fice. If you have a foreign address, als	o comp	lete spaces belov	/.		State		ZIP o	code	
TROY							ΜI		480	183	
Foreign country	name	9	Foreigr	n province/state/c	ounty		Foreign	oostal co	de		
Filing Status		Single Married filing sepa				ng surviving spouse (state	☐ Trust	
Check only one box.									-		
Digital Assets		ny time during 2023, did you: (a) receiv rwise dispose of a digital asset (or a fi								ange, or Yes X No	
Dependents							(4) Ch	eck the bo	ox if qua	alifies for (see inst.):	
(see instructions):		(1) First name Last name		(2) Dependent identifying num		(3) Relationship to yo	Chil	d tax cre	ex credit Credit for oth dependents		
		(I) That hame		1401111171119114111		(b) Helationship to ye	<u> </u>			dependents	
If more than four										— H	
dependents, see instructions and											
check here								Ħ			
Income	1a	Total amount from Form(s) W-2, box	1 (see i	nstructions) .				. 18	<u>. T</u>	94,920.	
Effectively	b	Household employee wages not repo	•	,				. 11		, , , , , , , , , , , , , , , , , , , ,	
Connected	c	Tip income not reported on line 1a (s						. 10			
With U.S.	d	Medicaid waiver payments not report		*				. 10			
Trade or	е	Taxable dependent care benefits from	n Form	2441, line 26 .				. 16	,		
Business	f	Employer-provided adoption benefits	from F	orm 8839, line 29				. 11			
	g	Wages from Form 8919, line 6						. 19	,		
Attach Form(s) W-2,	h	Other earned income (see instruction	s) .					. 11	١		
1042-S,	i	Reserved for future use				1i					
SSA-1042-S,	j	Reserved for future use						. 1			
RRB-1042-S, and 8288-A here. Also	k	Total income exempt by a treaty from line 1(e)		`)-NR), i 	tem L, 1k					
attach	z	Add lines 1a through 1h						. 12	2	94,920.	
Form(s) 1099-R if	2a	Tax-exempt interest 2a			b Tax	able interest		. 2t)		
tax was	За	Qualified dividends 3a			b Ord	linary dividends		. 3Ł)		
withheld.	4a	IRA distributions 4a			b Tax	able amount		. 41	,		
If you did not	5a	Pensions and annuities 5a			b Tax	able amount		. 5k	<u> </u>		
get a Form W-2, see	6	Reserved for future use						. 6			
instructions.	7	Capital gain or (loss). Attach Schedul	e D (Fo	rm 1040) if require	ed. If no	ot required, check he	re [□	\perp		
	8	Additional income from Schedule 1 (I								-9,756.	
	9	Add lines 1z, 2b, 3b, 4b, 5b, 7, and 8	. This is	your total effect	ively c	onnected income		. 9		85,164.	
	10	Adjustments to income from Schedulincome	•	, .)		
	11	Subtract line 10 from line 9. This is yo	our adju	sted gross inco	me			. 11		85,164.	
	12	Itemized deductions (from Schedul deduction (see instructions)							2	13,850.	
	13a	Qualified business income deduction				1 1					
	b	Exemptions for estates and trusts on	ly (see i	nstructions) .		13b					
	С	Add lines 13a and 13b						. 13	С		
	14	Add lines 12 and 13c						. 14	ı 📗	13,850.	
	15	Subtract line 14 from line 11. If zero	or less,	enter -0 This is y	our ta :	kable income		. 15	5	71,314.	

Form 1040-NR (2	2023)					Page 2
Tax and	16	Tax (see instructions). Check if any from Form(s): 1 8814 2 497	2 3 🗌		16	10,999.
Credits	17	Amount from Schedule 2 (Form 1040), line 3			17	0.
	18	Add lines 16 and 17			18	10,999.
	19	Child tax credit or credit for other dependents from Schedule 8812 (Form 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	10,999.
	23a	Tax on income not effectively connected with a U.S. trade or business from				
		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	10,999.
Payments	25	Federal income tax withheld from:				
-	а	Form(s) W-2	25a 12	2,706.		
	b	Form(s) 1099	25b			
	С	Other forms (see instructions)	25c			
	d	Add lines 25a through 25c			25d	12,706.
	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 return			26	_
	27	Reserved for future use	27			
	28	Additional child tax credit from Schedule 8812 (Form 1040)	28			
	29	Credit for amount paid with Form 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 total other payments and refunda	ble credits		32	
	33	Add lines 25d, 25e, 25f, 25g, 26, and 32. These are your total payments .			33	12,706.
Refund	34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount	nt you overpaid		34	1,707.
	35a	Amount of line 34 you want refunded to you. If Form 8888 is attached, check	k here		35a	1,707.
Direct deposit?	b	Routing number 0 7 1 9 2 1 8 9 1 c Type:	Checking	Savings		
See instructions.	d	Account number 4 6 9 2 4 7 0 9 5 9				
	е	If you want your refund check mailed to an address outside the United Stat	es not shown on	page 1,		
		enter it here.				
	36	Amount of line 34 you want applied to your 2024 estimated tax	36			
Amount	37	Subtract line 33 from line 24. This is the amount you owe .				
You Owe		For details on how to pay, go to www.irs.gov/Payments or see instructions .			37	
	38	Estimated tax penalty (see instructions)	38			
Third	Do yo	ou want to allow another person to discuss this return with the IRS? See instru	ctions. \square Ye	es. Compl	ete belov	v. 🛛 No
Party	Desig	nee's Phone	Persoi	nal identifi	cation	
Designee	name	no.	numbe	er (PIN)		
		penalties of perjury, I declare that I have examined this return and accompanying schedules of perjury, I declare that I have examined this return and accompanying schedules of perjury.				
Sign	bellet,	they are true, correct, and complete. Declaration of preparer (other than taxpayer) is bas				,
Sign	Your	signature Date Your occupation				t you an Identity
Here		HADOOP DEV	TT.ODFR	(see		N, enter it here
	Phone			1000		
		arer's name Preparer's signature	Date	PTIN		Check if:
Paid	•	M PRIYA RAM SAGAR GUPTA SYAM PRIYA RAM SAGAR GUPTA	04/04/2024	P02082	-	Self-employed
Preparer		-	01/01/2024	Phone no		
Use Only	riiiii S	s name GLOBAL TAXES LLC	٠. (٥/٤	3)965-9522		

84-3171965

Firm's EIN

SCHEDULE 1 (Form 1040)

Additional Income and Adjustments to Income

OMB No. 1545-0074

2023

Attachment

Department of the Treasury Internal Revenue Service

SHALINI BODE

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 soc	ial security number
	843-63	_4152

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	ach Schedule E .	5	-9,756.
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		
ĥ	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			
	1040, 1040-SR, or 1040-NR, line 8		10	-9,756.

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 SHALINI BODE 843-63-4152 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) 15%	(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							
9							
10	Gambling—Residents of Canada only. Enter net income in column (c).						
_	If zero or less, enter -0						
a	Winnings	100					
b 11	Losses	10c					
• • •	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 Propert	ty		
losses to exchange within to	nly the capital gains and from property sales or ges that are from sources he United States and not (a) Kind of property and description (if necessary, attach statement of descriptive details not shown below) (b) Date acquired mm/dd/yyy		(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	, l						
exchan	property sales or ges that are effectively						
						()	
	797, or both. 18 Capital gain. Combine columns (f) and (g) of line 17	'. Ente	er the net gain here	e and on line 9 abo	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 sh	nown on Form 1040-NR				Your identifying	number			
SHAL	INI BODE				843-63-41	.52			
Α	Of what country or countries w	vere you a citizen or nation	al during the tax y	ear? INDIA					
В	In what country did you claim	residence for tax purpose	s during the tax y	ear? United States					
С	Have you ever applied to be a	t) of the United States? .		☐ Yes	⊠ No				
D	Were you ever:								
1.	A U.S. citizen?					☐ Yes	⊠ No		
2.	A green card holder (lawful per	rmanent resident) of the Ur	ited States? .			☐ Yes	⊠ No		
	If you answer "Yes" to (1) or (2), see Pub. 519, chapter 4,	for expatriation ru	les that apply to you.					
E	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 yearF1								
F	Have you ever changed your v If you answered "Yes," indicat		tus) or U.S. immig			☐ Yes	⊠ No		
G	List all dates you entered and	left the United States durin							
	Note: If you're a resident of C				ient intervals,				
	check the box for Canada or	Mexico and skip to item I	1	\square Canada	Mexico				
	Date entered United States	Date departed United Stat	es	Date entered United State			d States		
	mm/dd/yy	mm/dd/yy		mm/dd/yy	n	nm/dd/yy			
Н	Give number of days (including								
_	2021	, 2022	, an	d 2023365	·	S			
ı	Did you file a U.S. income tax					⊠ Yes	☐ No		
	If "Yes," give the latest year ar					□ v	⊠ No		
J	Are you filing a return for a trust If "Yes," did the trust have a U					∐ Yes	∠ NO		
	U.S. person, or receive a contr					Yes	☐ No		
K	Did you receive total compens					☐ Yes	□ No No		
K	If "Yes," did you use an alterna		-			Yes	□ No		
L	Income Exempt From Tax—If					_			
-	complete (1) through (3) below				tax treaty with	a lorcigii	country,		
1.	Enter the name of the country,				claimed the tre	atv benefi	t. and the		
	amount of exempt income in th					,	-,		
	(a) Cou	ntrv	(b) Tax treaty art	icle (c) Number of month	ns (d) Amo	ount of exe	empt		
	`,	•	,	claimed in prior tax ye	ears income in	n current ta	ax year		
							_		
	(e) Total. Enter this amount of								
	Were you subject to tax in a fo			• •		∐ Yes	∐ No		
3.	Are you claiming treaty benefit		•			∐ Yes	⊠ No		
	If "Yes," attach a copy of the C	Competent Authority deterr	nination letter to y	our return.					
М	Check the applicable box if:	1 /			101.1				
1.	This is the first year you are multiplier with a U.S. trade or business u						onnected		
a	You have made an election in	, ,							
2.	States as effectively connected								
	Ciaroo do circotivoly confliction						<u> </u>		

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

SHAL	INI BODE							843-6	3-4152		
Part		Loss From Rental Real Estate an									
	Note: If you a	are in the business of renting personal proper or loss from Form 4835 on page 2, line 40.	rty, use	Schedule	C . See	instru	ctions. If you a	are an indi	vidual, rep	ort farm	l
A [payments in 2023 that would require you	to file	Form(s) 1	0002 5	oo inc	tructions			s V	No.
		will you file required Form(s) 1099?									No
					• •					,3 <u> </u>	10
1a	-	s of each property (street, city, state, ZII									
Α	UPPERGUDA ST	TREET HYDERABAD TELANGANA 1	IN 50)1511							
В											
С		T				1		I		1	
1b	Type of Property	2 For each rental real estate prope				Fa	ir Rental	Person		QJ	V
	(from list below)	above, report the number of fair personal use days. Check the Q			Α		Days	Da			
A	3		if you meet the requirements to file as				365		0	<u> </u>	<u></u>
B C		qualified joint venture. See instru			B C						<u>]</u>
	of Property:				C						
	Single Family Resid	dence 3 Vacation/Short-Term Ren	tal	5 Land	I	7	Self-Rental				
	Multi-Family Resid		ıtaı	6 Roya			Other (desc	riha)			
	widiti-i airiliy riesid	erice 4 Commercial		- O HOye	iiiics						
							Propert	ies:			
Incom					Α		В			С	
3			3		5	47.					
4		d	4								
Exper			l _								
5			5								
6	,	see instructions)	6		1 2	4.77					
7		ntenance	7		1,3	4/.					
8			8								
9			9								
10		professional fees	10		0	<i>c</i> 1					
11 12		s	12		8	64.					
13			13								
14			14		1,0	32					
15			15		1,4						
16			16		-,-						
17			17		2.0	16.					
18		ense or depletion	18			17.					
19			19								
20	Total expenses. A	Add lines 5 through 19	20		10,3	03.					
21	Subtract line 20 fr	rom line 3 (rents) and/or 4 (royalties). If									
		see instructions to find out if you must									
	file Form 6198 .		21		-9,7	56.					
22	Deductible rental	real estate loss after limitation, if any,									
	on Form 8582 (se	ee instructions)	22	(-9,75	6.)	()	(
23a		nts reported on line 3 for all rental prope				23a		547.			
b		nts reported on line 4 for all royalty prop				23b					
С		nts reported on line 12 for all properties				23c					
d		nts reported on line 18 for all properties				23d		3,617.			
e		nts reported on line 20 for all properties				23e	10),303.			
24	•	sitive amounts shown on line 21. Do not		-				. 24	/	0 77	
25	-	ty losses from line 21 and rental real estate							(9,75	ь.
26		estate and royalty income or (loss).									

-9,756.

26

Schedule 1 (Form 1040), line 5. Otherwise, include this amount in the total on line 41 on page 2