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

Subm	ission Identification Number (SID)					
Taxpaye	er's name	Social securit	y numbe	er		
	RISH MOTEY		330-27-7530			
Spouse		Spouse's social security number				
Part	, \	year you a	e auth	norizing.)		
	whole dollars only on lines 1 through 5.					
	Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.		1 1			
1	Adjusted gross income		1		935.	
2	Total tax		2		644.	
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3		973.	
4 5	Amount you want refunded to you		5	2,	329.	
Part	Amount you owe	een a con		nur retur	m)	
	penalties of perjury, I declare that I have examined a copy of the income tax return (original or amended)					
to send for any Agent to payme authori payme busines taxes to person	(original or amended) I am now authorizing. I consent to allow my intermediate service provider, transmit my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejected an acknowledgement of receipt or reason for rejected an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the financial taxes owed on this 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 ant, 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 oreceive confidential information necessary to answer inquiries and resolve issues related to the part of the income tax return (original or amended) I are nic Funds Withdrawal Consent.	ction of the trans. Treasury are cated in the tan to debit the the authorizates must be processing of ayment. I furt	ansmiss and its de ax prepa entry to tion. To receive the ele her ack	sion, (b) the esignated for a ration soft of this according to revoke (condition of the condition of the con	e reason Financial ware for unt. This cancel) a r than 2 yment of that the	
	yer's PIN: check one box only					
×		nv PIN 7	7 5	3 0	as my	
	ERO firm name	ř Ent		igits, but all zeros	ao my	
	signature on the income tax return (original or amended) I am now authorizing.			0.00		
	I will enter my PIN as my signature on the income tax return (original or amended) I am not if you are entering your own PIN and your return is filed using the Practitioner PIN method below.					
Your s	signature ▶ Date ▶					
Spous	se's PIN: check one box only					
	I authorize to enter or generate r	ny PIN			as my	
	ERO firm name			igits, but all zeros		
	signature on the income tax return (original or amended) I am now authorizing.	w outhorizin	og Ch	ook this h	ov onl v	
L	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.					
Snous	e's signature ▶ Date ▶					
Opous	Practitioner PIN Method Returns Only—continue below					
Part	-					
	EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN. 2 2	2 4 9 Don't ente	6 0 er all zer	8 2 7 os	1	
authori	that the above numeric entry is my PIN, which is my signature for the electronic individual income ta zed 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 e-file Providers of In	tting this retu	rn in ac	ccordance		
ERO'∘	s signature ► Date ►					
<u> </u>	ERO Must Retain This Form — See Instructions					

Don't Submit This Form to the IRS Unless Requested To Do So

E1040-NR 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 Jai	า. 1–🏻	ec. 31, 2023, or other tax year beginr	ning	, 2023,	ending	, 2	0	See separate instructions.
Your first name and middle initial			Last name Yo					tifying number
							(see instructions)	
SOURISH			MOTE	Y			330-2	7-7530
Home address	(num	per and street). If you have a P.O. box	, see ins	tructions.				Apt. no.
30 GOLF V	/EIW	DR						A4
City, town, or p	ost o	fice. If you have a foreign address, al	so comp	lete spaces below.		State	ZI	P code
NEWARK						DE	1	9702
Foreign country	/ nam	e	Foreig	n province/state/county		Foreign po	ostal code	
Filing		Single	arately (N	ΛFS) □ Qualifvi	ng surviving spouse ((OSS)	☐ Estat	e 🔲 Trust
Status		you checked the QSS box, enter the		,	0 01 1	,		
Check only		,		1 , 01	ĺ	•		
one box.	1		. ,			. ,		
Digital Assets		ny time during 2023, did you: (a) rece rwise dispose of a digital asset (or a					(D) Sell, exc	
Dependents					, , ,			qualifies for (see inst.):
(see instructions)				(2) Dependent's		Child	tax credit	Credit for other
,		(1) First name Last name		identifying number	(3) Relationship to you	1 0		dependents
If more than four							<u> </u>	
dependents, see								
instructions and check here							<u> </u>	
		Tababa and the Face (2) W.O. ha	4 / '	11				02.020
Income	1a	Total amount from Form(s) W-2, box	`	,			1a	82,039.
Effectively	b	Household employee wages not rep		` '			1b	
Connected	C C	Tip income not reported on line 1a (Medicaid waiver payments not repo		,			1c	
With U.S.	d	Taxable dependent care benefits from		()	,		1d	
Trade or	e •	Employer-provided adoption benefit		•			1e 1f	
Business	f g	Wages from Form 8919, line 6		·			1g	
Attach	h	Other earned income (see instruction					1h	
Form(s) W-2, 1042-S,	i	Reserved for future use	,					
SSA-1042-S,	i	Reserved for future use					1j	
RRB-1042-S,	, k	Total income exempt by a treaty from			1 1		,	
and 8288-A here. Also	•	line 1(e)			1k			
attach	z	Add lines 1a through 1h					1z	82,039.
Form(s)	2a	Tax-exempt interest 2	1	1	xable interest		2b	•
1099-R if tax was	За	Qualified dividends 3	а	b Ord	dinary dividends		3b	
withheld.	4a	IRA distributions 4		b Tax	xable amount		4b	
If you did not	5a	Pensions and annuities 5a	a	b Tax	xable amount		5b	
get a Form W-2, see	6	Reserved for future use					6	
instructions.	7	Capital gain or (loss). Attach Schedu	ule D (Fo	rm 1040) if required. If n	ot required, check her	e 🗆	7	
	8	Additional income from Schedule 1	(Form 10	040), line 10			8	-12,104.
	9	Add lines 1z, 2b, 3b, 4b, 5b, 7, and	8. This is	your total effectively of	connected income .		9	69 , 935.
	10	Adjustments to income from Scheolincome	•	,.	•		10	
	11	Subtract line 10 from line 9. This is y	our adj u	sted gross income			11	69 , 935.
	12	Itemized deductions (from Schedu						
		deduction (see instructions)			1 1	ndia Trea	ty 12	13,850.
	13a	Qualified business income deduction	n from F	orm 8995 or Form 8995	-A . 13a			
	b	Exemptions for estates and trusts o	nly (see	nstructions)	13b			
	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 your ta	xable income		15	56 , 085.

Form 1040-NR (2023)										Page 2
Tax and	16	Tax (see instructions). Check if an	y from For	rm(s): 1	814 2	4972	2 3			16	7,644.
Credits	17	Amount from Schedule 2 (Form 1	1040), line	3						17	0.
	18	Add lines 16 and 17								18	7,644.
	19	Child tax credit or credit for othe	r depende	ents from Sched	ule 8812 (F	orm 104	0) .			19	
	20	Amount from Schedule 3 (Form 1	1040), line	8						20	
	21	Add lines 19 and 20								21	
	22	Subtract line 21 from line 18. If ze	ero or less	s, enter -0						22	7,644.
	23a	Tax on income not effectively cor	nnected w	rith a U.S. trade	or business	s from					
		Schedule NEC (Form 1040-NR), I	ine 15 .				23a				
	b	Other taxes, including self-emplo	•		•	′					
		line 21				- F	23b				
	C	Transportation tax (see instruction	,				23c				
	d	Add lines 23a through 23c								23d	
	24	Add lines 22 and 23d. This is you		x			• •			24	7,644.
Payments	25	Federal income tax withheld from							0 0 0 0		
	a	Form(s) W-2				- H	25a		9 , 973.		
	b	Form(s) 1099					25b				
	C	Other forms (see instructions) .				_	25c			054	0 072
	d	Add lines 25a through 25c Form(s) 8805								25d 25e	9,973.
	e f	Form(s) 8288-A								25e	
		Form(s) 1042-S								25g	
	g 26	2023 estimated tax payments an								26	
	27	Reserved for future use				1	27			20	
	28	Additional child tax credit from S					28				
	29	Credit for amount paid with Form		•	,	- F	29				
	30	Reserved for future use				- H	30				
	31	Amount from Schedule 3 (Form 1					31				
	32	Add lines 28, 29, and 31. These a				_		edits .		32	
	33	Add lines 25d, 25e, 25f, 25g, 26,								33	9,973.
Refund	34	If line 33 is more than line 24, sul								34	2,329.
	35a	Amount of line 34 you want refu	nded to y	ou. If Form 888	3 is attache	d, check	here		🗆	35a	2,329.
Direct deposit?	b	Routing number 2 7 2 4	7 1	8 5 2	с Туре	e: 🛛 (Checki	ng 🗌	Savings		
See instructions.	d	Account number 1 3 6 4	5 7	9 0 1							
	е	If you want your refund check m	ailed to ar	n address outsi	de the Unite	ed State	s not s	hown or	page 1,		
		enter it here.									
	36	Amount of line 34 you want appl	ied to you	ur 2024 estimat	ed tax .		36				
Amount	37	Subtract line 33 from line 24. This		-							
You Owe		For details on how to pay, go to	_	-		ctions .				37	
	38	Estimated tax penalty (see instru					38				
Third	•	u want to allow another person to	discuss t			e instruc	tions.		es. Compl		ow. 🗵 No
Party Designee	Desig			Phone)				nal identifi	cation	
Designee	name	penalties of perjury, I declare that I have		no.					er (PIN)	a b aat a	f my lengueladas and
		they are true, correct, and complete. D									
Sign	Your	signature		Date	Your occu	upation			If the	RS s	ent you an Identity
Here		5.9.1.4.4.1				арапо					PIN, enter it here
					AUTOMA	ATION	ENG	INEER	(see	inst.)	
	Phone		_	Email address					l nervi		
Paid	Prepa	rer's name	Preparer'	's signature			Date		PTIN		Check if:
Preparer		I PRIYA RAM SAGAR GUPTA		PRIYA RAM	SAGAR G	UPTA	03/2	8/2024	P02082		Self-employed
Use Only		s name GLOBAL TAXES I							Phone n	,,,	78) 965-9522
	Firm's address 245 ROONEY CT E BRUNSWICK NJ 08816 Firm's EIN							IN			

SCHEDULE 1 (Form 1040)

Additional Income and Adjustments to Income

2023
Attachment
Sequence No. 01

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service

SOURISH MOTEY

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.

Your social security number 330-27-7530

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	-12,104.
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 ()	
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 . Enter	here and on Form		
	1040, 1040-SR, or 1040-NR, line 8		10	-12,104.

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-basis government	nent	
	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		
15	Deductible part of self-employment tax. Attach Schedule SE		
16	Self-employed SEP, SIMPLE, and qualified plans		
17	Self-employed health insurance deduction	. 17	
18	Penalty on early withdrawal of savings		
19a	Alimony paid		a
b	Recipient's SSN		
С	Date of original divorce or separation agreement (see instructions):		
20	IRA deduction		
21	Student loan interest deduction		
22	Reserved for future use		
23	Archer MSA deduction	. 23	
24	Other adjustments:		
а	Jury duty pay (see instructions)		
b	Deductible expenses related to income reported on line 8l from the		
	rental of personal property engaged in for profit		
С	Nontaxable amount of the value of Olympic and Paralympic medals		
	and USOC prize money reported on line 8m		
d	Reforestation amortization and expenses		
е	Repayment of supplemental unemployment benefits under the Trade Act of 1974		
f	Contributions to section 501(c)(18)(D) pension plans		
g	Contributions by certain chaplains to section 403(b) plans 24g		
_	Attorney fees and court costs for actions involving certain unlawful		
	discrimination claims (see instructions)		
i	Attorney fees and court costs you paid in connection with an award		
	from the IRS for information you provided that helped the IRS detect		
	tax law violations		
j	Housing deduction from Form 2555		
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form		
	1041)		
Z	Other adjustments. List type and amount:		
	24z		
25	Total other adjustments. Add lines 24a through 24z		
26	Add lines 11 through 23 and 25. These are your adjustments to income. Enter here and		
	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

SOURISH MOTEY

Name shown on Form 1040-NR

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

Your identifying number

330-27-7530

Enter **amount of income** under the appropriate rate of tax. See instructions. (d) Other (specify) Nature of Income (a) 10% **(b)** 15% (c) 30% % % Dividends and dividend equivalents: Dividends paid by U.S. corporations 1a 1b Dividend equivalent payments received with respect to section 871(m) transactions 1c 2 Interest: 2a 2b 2c C 3 4 5 Real property income and natural resources royalties . . . 6 7 8 9 10 Gambling-Residents of Canada only. Enter net income in column (c). If zero or less, enter -0-. Winnings _____ 10c Losses Gambling-Residents of countries other than Canada. 11 Other (specify): 12 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 15 Tax on income not effectively connected with a U.S. trade or business. Add columns (a) through (d) of line 14. Enter the total here and on Form 1040-NR, line 23a Capital Gains and Lossos From Salas or Evolundes of Property

Enter only the capital gains and losses from property sales or exchanges that are from sources within the United States and not effectively connected with a U.S. business. Do not include a gain or loss on disposing of a U.S. rea property interest; report these gains and losses on Schedule D (Form 1040).

Report property sales or exchanges that are effectively connected with a U.S. business on Schedule D (Form 1040). Form 4797, or both.

	Capital Gallis and Losses From Sales of Exchanges of Property									
l es it	16	(a) Kind of property and description (if necessary, attach statement of descriptive details not shown below)	(b) Date acquired mm/dd/yyyy	(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).		
S.										
al										
,										
,	17	Add columns (f) and (g) of line 16 .				17	()			
	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, enter	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

Department of the Treasury Internal Revenue Service

Name shown on Form 1040-NR

Attachment Sequence No. **7C**

Your identifying number

SOU	RISH MOTEY	330-27-7530								
Α	Of what country or countries were you a citizen	ear? INDIA								
В	In what country did you claim residence for	tax purposes du	uring the tax ye	ar? United States						
С	Have you ever applied to be a green card ho				⊠ No					
D	Were you ever:									
1	•			Yes	⊠ No					
2	A green card holder (lawful permanent resid				⊠ No					
	If you answer "Yes" to (1) or (2), see Pub. 51	•								
Е	If you had a visa on the last day of the tax	•			er your U.S.					
	immigration status on the last day of the tax	vear ⊞1			•					
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 during 2								
	Note: If you're a resident of Canada or Mex				ent intervals,					
	check the box for Canada or Mexico and	skip to item H .		\square Canada	☐ Mexico					
	Date entered United States Date departe	ed United States] [Date entered United State	Date depa	arted United	States			
	mm/dd/yy mm	n/dd/yy		mm/dd/yy	1	mm/dd/yy				
			1 [
] [
			1							
			1 [
Н	Give number of days (including vacation, non-	workdays, and pa	artial days) you v	vere present in the United S	States during:					
	2021, 2022		, and	1 2023 365	·					
ı	Did you file a U.S. income tax return for any	prior year?				X Yes	☐ No			
	If "Yes," give the latest year and form number	er you filed:		1040NR						
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	a U.S. person?.				☐ Yes	☐ No			
K	Did you receive total compensation of \$250,	000 or more dur	ing the tax year	?		☐ Yes	⊠ No			
	If "Yes," did you use an alternative method t	o determine the	source of this o	compensation?		☐ Yes	☐ No			
L	Income Exempt From Tax-If you are clair				ax treaty with	a foreign	country,			
	complete (1) through (3) below. See Pub. 90									
1	2,				claimed the tre	eaty benefi	t, and the			
	amount of exempt income in the columns bel	ow. Attach Form	8833 if required	d. See instructions.						
	(a) Country	(k) Tax treaty artic			ount of exe				
				claimed in prior tax ye	ars income i	n current ta	ax year			
										
_	(e) Total. Enter this amount on Form 1040-		-							
	Were you subject to tax in a foreign country	-				∐ Yes	∐ No			
3	Are you claiming treaty benefits pursuant to	•	=			∐ Yes	⊠ No			
	If "Yes," attach a copy of the Competent Au	tnority determina	ation letter to yo	our return.						
М	Check the applicable box if:		f •		-1 04-1	£ 1.				
1	This is the first year you are making an elect						onnected			
_	with a U.S. trade or business under section	. ,								
2	You have made an election in a previous y States as effectively connected with a U.S. t	rear that has no	τ peen revoked	i, to treat income from re	ai property lo	cated in th	ie United			
	Giaico ao enectively connected with a U.S. I	iade of business	Juliuei Sectioni	or ituj. Oce instructions.	· · · ·		· <u> </u>			

SCHEDULE E (Form 1040)

Department of the Treasury

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.

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

Attachment Sequence No. 13

OMB No. 1545-0074

Internal Revenue Service Name(s) shown on return SOURISH MOTEY

Your social security number 330-27-7530

500.	KISH MOTEL						330-2	7-7550				
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 S		C. See	instrud	ctions. If you a	re an indi	vidual, rep	ort farm			
Α									es XII	Nο		
	If "Yes," did you or will you file required Form(s) 1099?									No		
1a	Physical address of each property (street, city, state, ZII											
Α	SRIVENKATESHWARA COLONY NARAYANAGUDA T	TELANO	GANA I	N 50	0029							
В												
С												
1b	Type of Property (from list below) 2 For each rental real estate properabove, report the number of fair	rental a					al Personal Use Days			QJV		
Α	personal use days. Check the Q			Α		365		0]		
В	if you meet the requirements to find a qualified joint venture. See instru			В]		
С		30110113.		С]		
1	of Property: Single Family Residence 3 Vacation/Short-Term Ren Multi-Family Residence 4 Commercial	ntal	5 Land 6 Roya			Self-Rental Other (descr						
						Propertie	es:					
Incor				Α		В			С			
3	Rents received	3		6	52.							
_ 4	Royalties received	4										
-	nses:	_										
5	Advertising	5										
6	Auto and travel (see instructions)	6		2 (00							
7	Cleaning and maintenance	7		2,6	89.							
8	Commissions	8										
9	Insurance	9										
10	Legal and other professional fees	10			1.0							
11	Management fees	11		2,4	10.							
12	Mortgage interest paid to banks, etc. (see instructions)	12										
13	Other interest	13			1.0							
14	Repairs	14			46.							
15	Supplies	15		2,5	13.							
16	Taxes	16		0 0	0.0							
17	Utilities	17		2,3	98.							
18	Depreciation expense or depletion	18										
19	Other (list)	19		10 7	F.C.							
20	Total expenses. Add lines 5 through 19	20		12,7	56.							
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	_	-12 , 1	04.							
22	Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions)	22 (12,10	4.)	()	()		
23a	Total of all amounts reported on line 3 for all rental prope	erties			23a		652.					
b	Total of all amounts reported on line 4 for all royalty prop	perties			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	12	,756.					
24	Income. Add positive amounts shown on line 21. Do not	t include	any los	sses			. 24					
25	Losses. Add royalty losses from line 21 and rental real estat		-		nter to	tal losses here	25	(12,10	4.)		
26	Total rental real estate and royalty income or (loss).	Combin	e lines 2	24 and	25. E	nter the resu	lt					
	here. If Parts II, III, and IV, and line 40 on page 2 do no Schedule 1 (Form 1040), line 5. Otherwise, include this at						n 26		-12.1	0.4		