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	sission Identification Number (SID)							
Taxpay	er's name	Social securit	y numbe	r				
SAI	MANISH PODDUTURI	PODDUTURI 022-37-1630						
Spouse	s name	Spouse's soc		ity number				
Par	Tax Return Information — Tax Year Ending December 31, 2023 (Enter	year you a	re auth	orizing.)				
Enter	whole dollars only on lines 1 through 5.							
Note:	Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.							
1	Adjusted gross income		1		119.			
2	Total tax		2		933.			
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3	3,	777.			
4	Amount you want refunded to you		4		844.			
5 Dowl	Amount you owe		5 s					
Part	penalties of perjury, I declare that I have examined a copy of the income tax return (original or amended)							
return to sen- for any Agent payme author payme busine taxes persor	owledge 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, transmid my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for reject y 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 indicent of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution ization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate ent, 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 payment (PIN) below is my signature for the income tax return (original or amended) I amonic Funds Withdrawal Consent.	ter, or electro- ction of the tr S. Treasury are cated in the ta n to debit the the authoriza- ests must be processing of ayment. I furt	enic returnansmiss and its de lax preparentry to attion. To the receive the electric recking and the recking and the second and the second areas and the recking and the second areas areas and the recking areas	rn originate sion, (b) the esignated F tration soft this account revoke (ced no later ctronic pay nowledge	or (ERO) e reason inancial ware for unt. This ancel) a rethan 2 rement of that the			
	ayer's PIN: check one box only							
	I authorize GLOBAL TAXES LLC to enter or generate r	nv PIN 7	1 6	3 0	as my			
£	ERO firm name signature on the income tax return (original or amended) I am now authorizing.	ř Ent		gits, but all zeros	ao my			
	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	signature ▶ Date ▶							
Snou	se's PIN: check one box only							
Spou		av DINI			00 1001			
L	I authorize to enter or generate r	_	er five di	aits. but	as my			
	signature on the income tax return (original or amended) I am now authorizing.			all zeros				
	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.							
Spous	se's signature ▶ Date ▶							
	Practitioner PIN Method Returns Only—continue below							
Part	III 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 2	2 4 9 Don't ente		8 2 7 os	1			
author	by that the above numeric entry is my PIN, which is my signature for the electronic individual income ta rized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am submit rements of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS e-file Providers of In	tting this retu	rn in ac	cordance				
EBO'	s signature ▶ Date ▶							
LNU S	ERO Must Retain This Form — See Instructions							
	LITO MUSE HELANT THIS FULLI — SEE HISH UCLIVIIS							

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 Ja	า. 1–🏻	ec. 31, 2023, or other tax year beginn	ning	, 2023,	ending	, 2	.0	See separate instructions.	
Your first name	and i	niddle initial	Last name Y					tifying number	
							(see instructions)		
SAI MANIS	SH		PODD	UTURI	022-3	7-1630			
Home address	(num	per and street). If you have a P.O. box	, see ins	tructions.				Apt. no.	
3801 W SI	PRIN	G CREEK PKWY						1824	
City, town, or p	ost o	fice. If you have a foreign address, al	so comp	lete spaces below.		State	ZI	P code	
Plano						TX	7.	5023	
Foreign country	/ nam	e	Foreig	n province/state/county		Foreign po	ostal code		
Filing		Single	arately (N	ΛΕS) □ Qualifyi	ng surviving spouse (C	288)	☐ Estat	e 🗌 Trust	
Status		you checked the QSS box, enter the	• •	•	0 0	,		o 🗀 must	
Check only	"	you oncolled the QCC Box, office the	orma o m	arrio il tiro qualifyirig por	son to a orma backtor y	rour dopoi	140111.		
one box.									
Digital Assets		ny time during 2023, did you: (a) rece erwise dispose of a digital asset (or a t					(b) sell, exc		
D		wise dispose of a digital asset (of a	iiiaiiciai	linterest in a digital asse				qualifies for (see inst.):	
Dependents				(2) Dependent's				Credit for other	
(see instructions) If more than four	·	(1) First name Last name		identifying number			tax credit	dependents	
If mare than form									
dependents, see									
instructions and									
check here							Ц		
Income	1a	Total amount from Form(s) W-2, box	`	,			1a	45,459.	
Effectively	b	Household employee wages not rep		` '			1b		
Connected	С	Tip income not reported on line 1a (1c		
With U.S.	d	Medicaid waiver payments not repo		` ' '	,		1d		
Trade or	е	Taxable dependent care benefits fro		•			1e		
Business	f	Employer-provided adoption benefit		•			1f		
Attach	g	Wages from Form 8919, line 6					1g		
Form(s) W-2,	h :	Other earned income (see instructio	,				1h		
1042-S, SSA-1042-S,	i :	Reserved for future use					4:		
RRB-1042-S,	J	Total income exempt by a treaty from			1 1		1j		
and 8288-A	k	line 1(e)			1k				
here. Also attach	z	Add lines 1a through 1h					1z	45,459.	
Form(s)	2a	Tax-exempt interest 2	1	1	kable interest		2b	10, 103.	
1099-R if tax was	3a	Qualified dividends 3a	_		dinary dividends		3b		
withheld.	4a	IRA distributions 4			kable amount		4b		
If you did not	5a	Pensions and annuities 5a	а	b Tax	kable amount		5b		
get a Form	6	Reserved for future use					6		
W-2, see 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	8	-5,340.					
	9	Add lines 1z, 2b, 3b, 4b, 5b, 7, and	8. This is	your total effectively o	connected income .		9	40,119.	
	10	Adjustments to income from Schedincome			•		10		
	11	Subtract line 10 from line 9. This is y	our adj u	usted gross income			11	40,119.	
	12	Itemized deductions (from Schedu	ıle A (Fo	rm 1040-NR)) or, for ce	rtain residents of India	a, standar	d		
		deduction (see instructions)			Std Dedn US/Ir	ndia Ţreạ	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	instructions)	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	26 , 269.	

Form 1040-NR (2023)									Page 2
Tax and	16	Tax (see instructions). Check if any from Form(s):	: 1 🗌 881	4 2	4972	3			16	2,933.
Credits	17	Amount from Schedule 2 (Form 1040), line 3 .							17	0.
	18	Add lines 16 and 17							18	2,933.
	19	Child tax credit or credit for other dependents for	from Schedul	le 8812 (Fo	orm 104	0) .			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, ent	ter -0						22	2,933.
	23a	Tax on income not effectively connected with a Schedule NEC (Form 1040-NR), line 15				23a				
	b	Other taxes, including self-employment tax, fro	om Schedule	2 (Form 10	040),					
		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	2 , 933.
Payments	25	Federal income tax withheld from:								
	а	Form(s) W-2			_	25a		3 , 777.		
	b	Form(s) 1099			.	25b				
	С	Other forms (see instructions)				25c				
	d	Add lines 25a through 25c							25d	3,777.
	е	Form(s) 8805							25e	
	f	Form(s) 8288-A							25f	
	g	Form(s) 1042-S							25g	
	26	2023 estimated tax payments and amount appl			1				26	
	27	Reserved for future use				27				
	28	Additional child tax credit from Schedule 8812 (` ,			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 of							32	
	33	Add lines 25d, 25e, 25f, 25g, 26, and 32. These							33	3,777.
Refund	34	If line 33 is more than line 24, subtract line 24 fr				•	-		34	844.
	35a	Amount of line 34 you want refunded to you . If							35a	844.
Direct deposit? See instructions.	b	Routing number 0 4 4 0 0 0 0 0		c Type:		Checkir	ıg L	Savings		
occ manactions.	d	Account number 7 9 2 1 5 9 6						_		
	е	If you want your refund check mailed to an add								
		enter it here.							-	
	36	Amount of line 34 you want applied to your 202		а тах .		36				
Amount	37	Subtract line 33 from line 24. This is the amoun For details on how to pay, go to <i>www.irs.gov/Pa</i>		aa inetruct	tione				27	
You Owe	38	Estimated tax penalty (see instructions)	-			38			37	
Third		u want to allow another person to discuss this re			inetruc		Пу	es. Compl	ete bel	ow. 🗵 No
Party	•	·		1110: 000	IIISIIUC	uons.		nal identifi		ow.
Designee	Designame	iee s	Phone no.					narideniii er (PIN)	Cation	
	Under	penalties of perjury, I declare that I have examined this they are true, correct, and complete. Declaration of prej	return and acc				tatement	s, and to th		
Sign	Your	signature Date	te l	Your occup	pation			If the	RS s	ent you an Identity
Here								Prot	ection	PIN, enter it here
				EMPLOY	EED			(see	inst.)	
	Phone		ail address					T ==		
Paid	Prepa	rer's name Preparer's sig	gnature			Date		PTIN		Check if:
Preparer	SYAM	PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA	RAM SAGAR	GUPTA TA	ALLAM	02/15	/2024	P02082	2703	Self-employed
Use Only	Firm's	name GLOBAL TAXES LLC						Phone n		78)965-9522
	Firm's address 245 ROONEY CT E BRUNSWICK NJ 08816 Firm's						Firm's E	N 8	4-3171965	

BAA

SCHEDULE 1 (Form 1040)

Additional Income and Adjustments to Income

OMB No. 1545-0074

Department of the Treasury

Attach to Form 1040, 1040-SR, or 1040-NR.

Internal Revenue Service	Sequence No. 01				
Name(s) shown on Fo	Your social security number				
SAI MANISH PO	022-37-1630				
Part I Addition	onal Income				
1 Taxable refu	nds, credits, or offsets of state and local income taxes		1		

1	Taxable refunds, credits, or offsets of state and local income taxes		1	
2a	Alimony received		2a	
b	Date of original divorce or separation agreement (see instructions):			
3	Business income or (loss). Attach Schedule C		3	
4	Other gains or (losses). Attach Form 4797		4	
5	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Atta		5	-5,340.
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		
I	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	r here and on Form		_
	1040 1040-SR or 1040-NR line 8		10	-5.340

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

Attachment

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service

Form 4797, or both.

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

SAI MANISH PODDUTURI 022-37-1630 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 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 14 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 15 Capital Gains and Losses From Sales or Exchanges of Property Enter only the capital gains and 16 (a) Kind of property and description (f) LOSS (g) GAIN (b) Date acquired (c) Date sold (d) Sales price (e) Cost or losses from property sales or (if necessary, attach statement of If (e) is more than (d), If (d) is more than (e), mm/dd/yyyy mm/dd/yyyy other basis exchanges that are from sources descriptive details not shown below) subtract (d) from (e). subtract (e) from (d). 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. real 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 17 Add columns (f) and (g) of line 16 on Schedule D (Form 1040).

18 Capital gain. Combine columns (f) and (g) of line 17. Enter the net gain here and on line 9 above. If a loss, enter -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

vame	snown on Form 1040-NR			Your identifying					
SAI	MANISH PODDUTURI			022-37-16					
Α	Of what country or countries were you a citizen or nation	nal during the tax year?	? INDIA						
В	In what country did you claim residence for tax purpos	es during the tax year?	United States						
С	Have you ever applied to be a green card holder (lawful	permanent resident) of	the United States? .		☐ Yes	⊠ No			
D	Were you ever:								
1	A U.S. citizen?				Yes	⊠ No			
-	A green card holder (lawful permanent resident) of the L				Yes	⊠ No			
	If you answer "Yes" to (1) or (2), see Pub. 519, chapter 4				00				
E	If you had a visa on the last day of the tax year, enter			er vour IIS					
_	immigration status on the last day of the tax year, enter immigration status on the last day of the tax year. $F1$			-					
F	Have you ever changed your visa type (nonimmigrant st	atus) or IIS immigratio			☐ Yes	⊠ No			
	If you answered "Ves" indicate the date and nature of the	alus) or 0.5. Illinigralic	Jii Status:		□ 163				
G	If you answered "Yes," indicate the date and nature of the change: List all dates you entered and left the United States during 2023. See instructions.								
G	Note: If you're a resident of Canada or Mexico AND commute to work in the United States at frequent intervals,								
	check the box for Canada or Mexico and skip to item	Mexico							
									
	Date entered United States Date departed United States mm/dd/yy mm/dd/yy	ites Da	ate entered United States mm/dd/yy		rted Unite im/dd/yy	d States			
	ППП/аа/уу		ППП/ССЛУУ		пп/аа/уу				
Н	Give number of days (including vacation, nonworkdays, ar								
	2021, 2022	, and 20	23 365	·		_			
I	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:	104	40NR						
J	Are you filing a return for a trust?				Yes	⊠ No			
	If "Yes," did the trust have a U.S. or foreign owner und								
	U.S. person, or receive a contribution from a U.S. perso				☐ Yes	☐ No			
K	Did you receive total compensation of \$250,000 or more				☐ Yes	⊠ No			
	If "Yes," did you use an alternative method to determine		•		☐ Yes	☐ No			
L	Income Exempt From Tax-If you are claiming exempt			ax treaty with	a foreign	country,			
	complete (1) through (3) below. See Pub. 901 for more in	nformation on tax treati	ies.						
1	Enter the name of the country, the applicable tax treaty a			claimed the tre	aty benefi	t, and the			
	amount of exempt income in the columns below. Attach F	Form 8833 if required. S	See instructions.						
	(a) Country	(b) Tax treaty article	(c) Number of month		mount of exempt				
			claimed in prior tax yea	ars income ir	current to	ax year			
	(e) Total. Enter this amount on Form 1040-NR, line 1k.	Do not enter it anywher	re else on line 1						
2	, ,				☐ Yes	☐ No			
3	Are you claiming treaty benefits pursuant to a Competer	nt Authority determinati	ion?		☐ Yes	⊠ No			
	If "Yes," attach a copy of the Competent Authority deter	mination letter to your	return.						
М	Check the applicable box if:								
1	This is the first year you are making an election to treat	income from real prope	erty located in the Unite	d States as eff	ectively c	onnected			
	with a U.S. trade or business under section 871(d). See	instructions				🗆			
2	You have made an election in a previous year that ha								
	States as effectively connected with a U.S. trade or bus	iness under section 87	1(d). See instructions .	<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.

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

SAI	MANISH PODDUTURI						022-3	7-1630		
Par	Income or Loss From Rental Real Estate ar Note: If you are in the business of renting personal prope rental income or loss from Form 4835 on page 2, line 40.	rtv. use		c . See	instru	ctions. If you	are an indiv	vidual, rep	ort farm	
	Did you make any payments in 2023 that would require you to file Form(s) 1099? See instructions .								s 🛚 No	
В								. 🗌 Ye	es 🗌 No	
1a	Physical address of each property (street, city, state, ZI	P code	e)							
A	5-9-135/4/1 YAPRAL YAPRAL TELANGANA II	N 500	1087							_
B		11 300	7007							_
										_
1b	Type of Property (from list below) 2 For each rental real estate properties above, report the number of fair					ir Rental Days	Person Da	QJV		
A	personal use days. Check the Q	JV box	only	Α		365		0		_
В	if you meet the requirements to			В						_
С	qualified joint venture. See instruction			С						
Туре	of Property:						•			
	Single Family Residence 3 Vacation/Short-Term Rer Multi-Family Residence 4 Commercial	ntal	5 Land 6 Roya			Self-Rental Other (desc	cribe)			
						Propert				_
Incon	ne:			Α		В			С	_
3	Rents received	3		4	50.					_
4	Royalties received	4								_
Expe										
5	Advertising	5								
6	Auto and travel (see instructions)	6								
7	Cleaning and maintenance	7		5	50.					
8	Commissions	8								
9	Insurance	9								
10	Legal and other professional fees	10								
11	Management fees	11		7	50.					
12	Mortgage interest paid to banks, etc. (see instructions)	12								
13	Other interest	13								
14	Repairs	14		9	60.					
15	Supplies	15		1,5	50.					
16	Taxes	16								
17	Utilities	17		1,9	80.					
18	Depreciation expense or depletion	18								
19	Other (list)	19								
20	Total expenses. Add lines 5 through 19	20		5,7	90.					
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			E 3	4.0					
22	file Form 6198	21	(-5,3 -5,34		()	(
23a	Total of all amounts reported on line 3 for all rental prope		-		23a	\	450.	\		,
b	Total of all amounts reported on line 4 for all revital properties.				23b					
C	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					
e	Total of all amounts reported on line 20 for all properties				23e	-	5 , 790.			
24	Income. Add positive amounts shown on line 21. Do no						. 24			
25	Losses. Add royalty losses from line 21 and rental real estat		•		nter to	tal losses he	-	(5,340.	
26	Total rental real estate and royalty income or (loss).								-, - 10 .	
_5	here. If Parts II, III, and IV, and line 40 on page 2 do no									
	Schedule 1 (Form 1040), line 5. Otherwise, include this a						. 26		-5,340	