(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

Submission Identification Number (SID)						
Taxpayer's name	Social securi	ty number				
VAMSI KUMAR BAGGI	759-56	-6932				
Spouse's name		Spouse's social security number				
Part I Tax Return Information — Tax Year Ending December 31, 20	 23 (Enter year you a	re autho	orizina)			
Enter whole dollars only on lines 1 through 5.	23 (Enter year you a	iie autiic	Jiiziiig.)			
Note: Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.						
1 Adjusted gross income		11	39,860.			
2 Total tax		2	2,903.			
3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3	8,653.			
4 Amount you want refunded to you		4	5,750.			
5 Amount you owe		5				
Part II Taxpayer Declaration and Signature Authorization (Be sure you	get and keep a cop	y of you	ır return)			
Under penalties of perjury, I declare that I have examined a copy of the income tax return (original or my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in return (original or amended) I am now authorizing. I consent to allow my intermediate service provito send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reafor any delay in processing the return or refund, and (c) the date of any refund. If applicable, I auth Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution a payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancerbusiness days prior to the payment (settlement) date. I also authorize the financial institutions involved taxes to receive confidential information necessary to answer inquiries and resolve issues relatives personal identification number (PIN) below is my signature for the income tax return (original or an Electronic Funds Withdrawal Consent.	Part I above are the am der, transmitter, or electroson for rejection of the toprize the U.S. Treasury account indicated in the total institution to debit the tot terminate the authorizellation requests must be olived in the processing of ed to the payment. I fur	ounts from onic return ransmission its des ax prepara entry to tation. To represented in the electron action action to the electron acknown acknown in the electron acknown in	In the income tan originator (ERCon, (b) the reascignated Financiation software fethis account. Therevoke (cancel) of no later than cronic payment cowledge that the			
Taxpayer's PIN: check one box only						
	generate my PIN 6	6 9	3 2 as m			
ERO firm name signature on the income tax return (original or amended) I am now authorizing.	En En	ter five digi n't enter al	its, but			
I will enter my PIN as my signature on the income tax return (original or amend if you are entering your own PIN and your return is filed using the Practitioner below.						
Your signature ▶	Date ▶					
Spouse's PIN: check one box only						
· _	generate my PIN		as m			
ERO firm name	• •	ter five digi				
signature on the income tax return (original or amended) I am now authorizing.	do	n't enter al	I zeros			
I will enter my PIN as my signature on the income tax return (original or amend if you are entering your own PIN and your return is filed using the Practitioner below.						
Spouse's signature ▶	Date ►					
Practitioner PIN Method Returns Only—contin	ue below					
Part III 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 er all zeros	1 - 1 - 1 - 1			
I certify that the above numeric entry is my PIN, which is my signature for the electronic individua authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that requirements of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS <i>e-file</i> Properties.	I am submitting this reti	urn in acco	ordance with th			
ERO's signature ▶	Date ►					
ERO Must Retain This Form — See Instru						
Don't Submit This Form to the IRS Unless Reque	sted To Do So					

Department of the Treasury-Internal Revenue Service U.S. Nonresident Alien Income Tax Return 2023 OMB No. 1545-0074

IRS Use Only—Do not write or staple in this space.

For the year Jar	ı. 1–D	ec. 31, 2023, or other tax year beginn	ing	, 2023,	ending	,	20	instructions.	
Your first name	and r	niddle initial	Last na				Your ide	entifying number	_
							(see inst	ructions)	
VAMSI KUN	IAR		BAGG	Ī			759-	56-6932	
Home address	(numb	per and street). If you have a P.O. box	, see ins	tructions.				Apt. no.	
12445 ALA	MED	A TRACE CIRCLE						728	
City, town, or p	ost of	fice. If you have a foreign address, als	so comp	lete spaces below.		State	7	ZIP code	
AUSTIN						TX		78727	
Foreign country	nam	e	Foreigr	n province/state/county		Foreign p	ostal cod	le	
	1								
Filing	X	Single	arately (N	MFS) Qualifyir	ng surviving spouse	(QSS)	☐ Esta	ate 🗌 Trust	İ
Status	lf :	ou checked the QSS box, enter the	hild's na	ame if the qualifying pers	son is a child but not	your depe	endent:		
Check only one box.									
	Δta	ny time during 2023, did you: (a) recei	ve (as a	reward award or navm	ent for property or se	arvices): O	(h) sell e	vchange or	
Digital Assets		rwise dispose of a digital asset (or a f							lo
Dependents						(4) Che	eck the box	if qualifies for (see ins	 st.):
(see instructions):		(A) 51		(2) Dependent's	(0) 5 1 11 11 1	Chile	d tax credit	Credit for othe	r
	-	(1) First name Last name		identifying number	(3) Relationship to yo	ou		dependents	—
If more than four							 	+ $+$	—
dependents, see									—
instructions and check here									_
Income	1a	Total amount from Form(s) W-2, box	1 (see i	nstructions)			. 1a	46,511	_
Effectively	b	Household employee wages not rep	•	•			. 1b		_
Connected	c	Tip income not reported on line 1a (s		` '			. 1c		_
With U.S.	d	Medicaid waiver payments not repo	. 1d		_				
Trade or	е	Taxable dependent care benefits fro	m Form	2441, line 26			. 1e		
Business	f	Employer-provided adoption benefit	s from F	orm 8839, line 29 .			. 1f		
	g	Wages from Form 8919, line 6	. 1g						
Attach Form(s) W-2,	h	Other earned income (see instruction	าร) .		<u></u>		. 1h		_
1042-S,	i	Reserved for future use			<u>1i</u>				
SSA-1042-S, RRB-1042-S,	j	Reserved for future use					. 1j		
and 8288-A	k	Total income exempt by a treaty from		,,	´ _				
here. Also attach	_	line 1(e)			<u> 1k </u>			/A E 1 1	
Form(s)	z 2a	Add lines 1a through 1h Tax-exempt interest 2a	1		able interest		. 1z . 2b	46,511	•
1099-R if	2 <i>a</i> 3a	Qualified dividends 3a			dinary dividends .		. 2b		_
tax was withheld.	4a	IRA distributions 4a			able amount				_
If you did not	5a	Pensions and annuities 5a			able amount				_
get a Form	6	Reserved for future use							
W-2, see instructions.	7	Capital gain or (loss). Attach Schedu	ıle D (Fo	rm 1040) if required. If no	ot required, check he	ere [7		
	8	Additional income from Schedule 1	Form 10	040), line 10			. 8	-6,651	
	9	Add lines 1z, 2b, 3b, 4b, 5b, 7, and	3. This is	your total effectively c	onnected income		. 9	39,860	١.
	10	Adjustments to income from Sched income	•	,·					
	11	Subtract line 10 from line 9. This is y	our adj u	usted gross income			. 11	39,860).
	12	Itemized deductions (from Schedudeduction (see instructions)						13,850).
	13a	Qualified business income deduction							
	b	Exemptions for estates and trusts or	nly (see i	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 tax	xable income .		. 15	26,010	١.

Form 1040-NR (2023)						Page 2	
Tax and	16	Tax (see instructions). Check if any fro	om Form(s): 1	814 2 🗌 49	72 3 🗌	1	6 2,903.	
Credits	17	Amount from Schedule 2 (Form 1040	0), line 3			1	7 0.	
	18	Add lines 16 and 17				<u>1</u>	2,903.	
	19	Child tax credit or credit for other de	ependents from Sched	dule 8812 (Form 1	040)	<u> 1</u>	9	
	20	Amount from Schedule 3 (Form 1040	0), line 8			2	20	
	21	Add lines 19 and 20				2	21	
	22	Subtract line 21 from line 18. If zero	or less, enter -0		., . ,	2	2,903.	
	23a	Tax on income not effectively connect Schedule NEC (Form 1040-NR), line			23a			
	b	Other taxes, including self-employm line 21	·	,	23b			
	С	Transportation tax (see instructions)			23c			
	d	Add lines 23a through 23c				23	3d	
	24	Add lines 22 and 23d. This is your to	otal tax			2	2,903.	
Payments	25	Federal income tax withheld from:						
-	а	Form(s) W-2			25a	8,653.		
	b	Form(s) 1099			25b			
	С	Other forms (see instructions)			25c			
	d	Add lines 25a through 25c				2	5d 8,653.	
	е	Form(s) 8805				2	5e	
	f	Form(s) 8288-A				2	5f	
	g	Form(s) 1042-S					5g	
	26	2023 estimated tax payments and ar	mount applied from 2	022 return	., <u></u>	2	26	
	27	Reserved for future use			27			
	28	Additional child tax credit from Sche	edule 8812 (Form 1040	0)	28			
	29	Credit for amount paid with Form 10			29			
	30	Reserved for future use			30			
	31	Amount from Schedule 3 (Form 1040	**		31			
	32	Add lines 28, 29, and 31. These are					32	
	33	Add lines 25d, 25e, 25f, 25g, 26, and					8,653.	
Refund	34	If line 33 is more than line 24, subtra			•		5,750.	
	35a	Amount of line 34 you want refunde					5a 5,750.	
Direct deposit? See instructions.	b	Routing number 1 1 1 0 0		c Type:	Checking	Savings		
See instructions.	d	Account number 7 0 0 0 5						
	е	If you want your refund check mailed				. •		
		enter it here.						
	36	Amount of line 34 you want applied	-		36			
Amount	37	Subtract line 33 from line 24. This is For details on how to pay, go to www.	_					
You Owe	20				1 1	· · · 3	37	
Thind	38 Do vo	Estimated tax penalty (see instruction u want to allow another person to discontinuous)	· ·		38 	es. Complete	below. X No	
Third Party	•	·	Phone					
Designee	Designame	nee s	nal identificat er (PIN)	ion				
	Under	s, and to the be	est of my knowledge and parer has any knowledge.					
Sign	Your	signature	Date	Your occupation	n	If the IR	S sent you an Identity	
Here		3				Protecti	on PIN, enter it here	
				SOFTWARE :	ENGINEER	(see ins	t.)	
	Phone		Email address		Ta .	·		
Paid	Prepa	rer's name Pre	eparer's signature		Date	PTIN	Check if:	
Preparer			YAM PRIYA RAM	SAGAR GUPTA	03/22/2024	P0208270) 3 Self-employed	
Use Only		name GLOBAL TAXES LLC					(678)965-9522	
	Firm's address 245 ROONEY CT E BRUNSWICK NJ 08816 Firm's EIN							

SCHEDULE 1 (Form 1040)

Additional Income and Adjustments to Income

OMB No. 1545-0074

2023
Attachment
Sequence No. 01

Department of the Treasury Internal Revenue Service

VAMSI KUMAR BAGGI

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 759-56-6932

Par	Additional Income			
1	Taxable refunds, credits, or offsets of state and local income taxes		1	
2a	Alimony received		2a	
b	Date of original divorce or separation agreement (see instructions):			
3	Business income or (loss). Attach Schedule C		3	
4	Other gains or (losses). Attach Form 4797		4	
5	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Att	ach Schedule E .	5	-6,651.
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 (4	
t	Pension or annuity from a nonqualifed deferred compensation plan or	0+		
	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	
9 10	Combine lines 1 through 7 and 9. This is your additional income . Ente	r here and on Form	9	
10	1040, 1040-SR, or 1040-NR, line 8		10	-6,651.
			1 10	, J, JJ 1.

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	_			
	· · · · · · · · · · · · · · · · · · ·	24c			
d		24d			
е	Repayment of supplemental unemployment benefits under the Trade Act of 1974	24e			
f	Contributions to section 501(c)(18)(D) pension plans	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				
	tax law violations	24i			
j	Housing deduction from Form 2555	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 Form 1040, 1040-SR, or 1040-NR, line 10	e. Enter	here and on	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 VAMSI KUMAR BAGGI 759-56-6932 Enter **amount of income** under the appropriate rate of tax. See instructions.

Nature of Income			(a) 10%	(b) 15%	(b) 15% (c) 30%	(d) Other (specify)				
						(a) 10%	(b) 15%	(6) 30%	%	%
1	Dividends and divide	end eq	uivalents:							
а	Dividends paid by U.	S. co	rporations		1a					
b	Dividends paid by fo	reign (corporations		1b					
С	Dividend equivalent p	aymer	nts received with respect to section 871(m)	transactions	1c					
2	Interest:	•								
а	Mortgage				2a				,	
b			ns		2b					
С	c Other									
3										
4	• "		right royalties		4					
5	Other royalties (copy	rights	, recording, publishing, etc.)		5					
6	Real property income	e and	natural resources royalties		6					
7	Pensions and annuiti	ies .			7					
8					8					
9	Capital gain from line	e 18 b	elow		9					
10		s of C	canada only. Enter net income in column (
а	Winnings								!	
b	Losses				10c				!	
11	Gambling—Resident Note: Enter winnings	s of c	ountries other than Canada. Losses aren't allowed		11					
12										
					12					
13			columns (a) through (d)		13					
14	Multiply line 13 by r	ate of	tax at top of each column		14					
15	Tax on income not e	ffectiv	ely connected with a U.S. trade or busine						-NR, line 23a 15	
			Capital Gains ar	nd Losses F	rom	Sales or Excha	inges of Proper	ty		
Enter only the capital gains and losses from property sales or exchanges that are from sources within the United States and not		16	(a) Kind of property and description (if necessary, attach statement of descriptive details not shown below)	(b) Date 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).
	ely connected with a U.S. ss. Do not include a gain									
or loss	on disposing of a U.S. real									
gains a	nd losses on Schedule D									
(Form 1	•									
exchan	property sales or ges that are effectively									
connec	ted with a U.S. business								()	
	on Schedule D (Form 1040), Form 4797, or both.		Capital gain. Combine columns (f) and	d (g) of line 17	'. Ente	er the net gain her	e and on line 9 ab	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. Department of the Treasury Internal Revenue Service Answer all questions.

OMB No. 1545-0074

Attachment Sequence No. **7C**

Name sh	nown on Form 1040-NR				Your identifying	number						
VAMS	I KUMAR BAGGI				759-56-69	932						
Α	Of what country or countries were you a citizen or national during the tax year? INDIA											
В	In what country did you claim residence for tax purposes during the tax year? United States											
С	Have you ever applied to be a	green card holder (lawful p	ermanent resider	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 Un	ited States? .			☐ Yes	⊠ No					
	If you answer "Yes" to (1) or (2), see Pub. 519, chapter 4,	for expatriation re	ules 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. immiç			☐ Yes	⊠ No					
G	List all dates you entered and	left the United States during										
	Note: If you're a resident of C				ıen <u>t</u> intervals,							
	check the box for Canada or	Mexico and skip to item H	<u>! .</u> ,	\square Canada	Mexico							
	Date entered United States	Date departed United State	es	Date entered United State			d States					
	mm/dd/yy	mm/dd/yy		mm/dd/yy	n	nm/dd/yy						
					<u> </u>							
Н	Give number of days (including 2021	, 2022	, an	d 2023365		_						
ı	Did you file a U.S. income tax					X Yes	☐ No					
_	If "Yes," give the latest year ar						.					
J	Are you filing a return for a trust If "Yes," did the trust have a U	J.S. or foreign owner unde	r the grantor trus	t rules, make a distributior	n or loan to a	∐ Yes	⊠ No					
	U.S. person, or receive a conti					∐ 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	. See Pub. 901 for more inf	ormation on tax t	reaties.								
1.	Enter the name of the country, amount of exempt income in the				claimed the tre	aty benefi	t, and the					
	(a) Cou	ntry	(b) Tax treaty and	icle (c) Number of month claimed in prior tax ye		ount of exe						
	(e) Total. Enter this amount o	n Form 1040-NR line 1k D	o not enter it anv	where else on line 1								
2.	Were you subject to tax in a fo		-			Yes	No					
	Are you claiming treaty benefit					☐ Yes	⊠ No					
-	If "Yes," attach a copy of the (-									
М	Check the applicable box if:											
	This is the first year you are ma											
2.	with a U.S. trade or business under section 871(d). See instructions											

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,

Attachment

Department of the Treasury Internal Revenue Service

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

Sequence No. 13

OMB No. 1545-0074

Name(s) shown on return Your social security number VAMSI KUMAR BAGGI 759-56-6932 Part I **Income or Loss From Rental Real Estate and Royalties** Note: If you are in the business of renting personal property, use Schedule C. See instructions. If you are an individual, report farm rental income or loss from Form 4835 on page 2, line 40. Did you make any payments in 2023 that would require you to file Form(s) 1099? See instructions . ☐ Yes ☐ No 1a Physical address of each property (street, city, state, ZIP code) 26-14-23/B, RAGHURAM NAGAR 2ND LINE, NAGARAMPALEM GUNTUR, ANDHRA PRADESH IN 522004 Α В C 1b Type of Property **Fair Rental Personal Use** For each rental real estate property listed QJV (from list below) above, report the number of fair rental and Davs **Davs** personal use days. Check the QJV box only Α Α 365 0 if you meet the requirements to file as a В В qualified joint venture. See instructions. С C Type of Property: 3 Vacation/Short-Term Rental 1 Single Family Residence 7 Self-Rental 5 Land 8 Other (describe) 2 Multi-Family Residence 4 Commercial 6 Royalties **Properties:** Α В C Income: 3 3 380. Rents received . 4 4 Royalties received . **Expenses:** 5 5 Advertising 6 Auto and travel (see instructions) 6 7 Cleaning and maintenance. 7 1,190. 8 Commissions 8 9 9 Insurance . . . 10 10 Legal and other professional fees 11 Management fees 11 950. 12 Mortgage interest paid to banks, etc. (see instructions) 12 13 13 14 1,741. 14 Repairs 1,900. 15 Supplies 15 16 16 Taxes 17 Utilities 17 1,250. 18 18 Depreciation expense or depletion 19 19 Other (list) 20 20 7,031. Total expenses. Add lines 5 through 19 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 -6,651. 22 Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions) -6,651.380. 23a Total of all amounts reported on line 3 for all rental properties 23a Total of all amounts reported on line 4 for all royalty properties 23b Total of all amounts reported on line 12 for all properties 23c 23d Total of all amounts reported on line 18 for all properties 7,031. Total of all amounts reported on line 20 for all properties 23e 24 Income. Add positive amounts shown on line 21. Do not include any losses 24 25 Losses. Add royalty losses from line 21 and rental real estate losses from line 22. Enter total losses here 25 6,651. Total rental real estate and royalty income or (loss). Combine lines 24 and 25. Enter the result 26 here. If Parts II, III, and IV, and line 40 on page 2 do not apply to you, also enter this amount on

-6,651.

26

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