8879 Form

(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

illemai nevenue Service		
Submission Identification Number (SID)		
Taxpayer's name	Social securit	y number
AKSHARA THUMMALAPALLY	114-31-	-6883
Spouse's name		al security number
Part I Tax Return Information — Tax Year Ending December 31, 2023 (E	nter year you a	re authorizing)
Enter whole dollars only on lines 1 through 5.	inci year yea ai	C ddtilonzing.j
Note: Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.		
1 Adjusted gross income		1 4 4 9 , 9 5 4 .
2 Total tax		2 4,115.
3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3 5,768.
4 Amount you want refunded to you		4 1,653.
5 Amount you owe		5
Part II Taxpayer Declaration and Signature Authorization (Be sure you get a	nd keep a cop	
Under penalties of perjury, I declare that I have examined a copy of the income tax return (original or amer		
return (original or amended) I am now authorizing. I consent to allow my intermediate service provider, tra to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason fo for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to term payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation business days prior to the payment (settlement) date. I also authorize the financial institutions involved in taxes to receive confidential information necessary to answer inquiries and resolve issues related to the personal identification number (PIN) below is my signature for the income tax return (original or amended Electronic Funds Withdrawal Consent.	r rejection of the trans U.S. Treasury are tindicated in the talitution to debit the inate the authorizate requests must be the processing of the payment. I furt	ansmission, (b) the reason of its designated Financial or preparation software for entry to this account. This tion. To revoke (cancel) a received no later than 2 the electronic payment of her acknowledge that the
Taxpayer's PIN: check one box only		
	rata my DINI	6 8 8 3
ERO firm name	Ent	er five digits, but
signature on the income tax return (original or amended) I am now authorizing.	dor	n't enter all zeros
I will enter my PIN as my signature on the income tax return (original or amended) I a if you are entering your own PIN and your return is filed using the Practitioner PIN n below.		
Your signature ▶ Date		
Spouse's PIN: check one box only		
☐ I authorize to enter or gener	rato my DINI	ac my
ERO firm name		er five digits, but
signature on the income tax return (original or amended) I am now authorizing.		't enter all zeros
I will enter my PIN as my signature on the income tax return (original or amended) I a if you are entering your own PIN and your return is filed using the Practitioner PIN n below.		
Spouse's signature ▶ Date	•	
Practitioner PIN Method Returns Only—continue be		
Part III Certification and Authentication — Practitioner PIN Method Only	1011	
ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN. 2		6 0 8 2 7 1 er all zeros
I certify that the above numeric entry is my PIN, which is my signature for the electronic individual incompation authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am strequirements of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS <i>e-file</i> Providers	submitting this retu	rn in accordance with the
ERO's signature ▶ Date	•	
FRO Must Retain This Form — See Instructions		

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

Department of the Treasury—Internal Revenue Service U.S. Nonresident Alien Income Tax Return

2023

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

For the year Jan. 1-Dec. 31, 2023, or other tax year beginn			ning	, 2023,	20	See separa					
Your first name	and i	middle initial	Last na	ame		,		our identifying number			
							(see instructions)				
AKSHARA				MALAPALLY			114-3	114-31-6883			
		ber and street). If you have a P.O. bo	x, see ins	structions.				Apt. r			
5050 FM 4								061	<u>14</u>		
-	ost o	ffice. If you have a foreign address, a	ilso comp	olete spaces below.		State		ZIP code			
FRISCO			1			TX		75036			
Foreign country	nam	е	Foreig	n province/state/county		Foreign	postal cod	е			
Filing Status	1	Single	☐ Esta	ate 🗌 -	Trust						
Check only one box.		you checked the QSS box, enter the	enaent: 								
Digital Assets	At a	ny time during 2023, did you: (a) rece erwise dispose of a digital asset (or a	eive (as a financial	reward, award, or paymeinterest in a digital asset	ent for property or se)? (See instructions.)			xchange, or	⊠ No		
Dependents						(4) Ch	eck the box	if qualifies for (s	see inst.):		
(see instructions)		(1) First name Last name	2	(2) Dependent's identifying number	(3) Relationship to yo	Chi	ld tax credit	Credit for depend			
		(1) The Last Hame		identifying number	(b) Helationship to ye	ou		depend	CIIIS		
If more than four							\dashv	$+$ \pm			
dependents, see instructions and							\Box				
check here							Ä				
Income	1a	Total amount from Form(s) W-2, bo	x 1 (see i	instructions)			. 1a	57,	249.		
Effectively	b	Household employee wages not re	•	•				,			
Connected	С	Tip income not reported on line 1a									
With U.S.	d	Medicaid waiver payments not repo					. 1d				
Trade or	е	Taxable dependent care benefits fr	om Form	2441, line 26			. 1e				
Business	f	Employer-provided adoption benef	its from F	Form 8839, line 29 .			. 1f				
	g	g Wages from Form 8919, line 6									
Attach Form(s) W-2,	h	Other earned income (see instruction	. 1h								
1042-S,	i	Reserved for future use									
SSA-1042-S,	j	Reserved for future use	. 1j								
RRB-1042-S, and 8288-A here. Also	k	Total income exempt by a treaty from line 1(e)									
attach	z	z Add lines 1a through 1h							249.		
Form(s) 1099-R if	2 a	Tax-exempt interest 2	2a	b Tax	able interest		. 2b				
tax was	3a	· · · · · · · · · · · · · · · · · · ·	Ва	b Ord	linary dividends .		. 3b				
withheld.	4a		la		able amount						
If you did not get a Form	5a		ia		able amount						
W-2, see	6	Reserved for future use									
instructions.	7	Capital gain or (loss). Attach Scheo	,	, ,	•			_			
	8	Additional income from Schedule 1	,	•					295.		
	9	Add lines 1z, 2b, 3b, 4b, 5b, 7, and						49,	954.		
	10						. 10		0.5.4		
	11	Subtract line 10 from line 9. This is						49,	954.		
	12	Itemized deductions (from Sched deduction (see instructions)						13,	850.		
	13a	Qualified business income deduction	on from F	orm 8995 or Form 8995-	A . 13a						
	b	Exemptions for estates and trusts of	only (see	instructions)	13b						
	С	Add lines 13a and 13b									
	14								850.		
	15	Subtract line 1/1 from line 11. If zero	or lace	antar _N_ This is your tar	vahla incomo		15	1 76	1 \(\alpha \)		

Form 1040-NR (2023) Page 2

								•
Tax and	16	Tax (see instructions). Check if any from	Form(s): 1 88	314 2 🗌 497	'2 3 🗌		16	4,115.
Credits	17	Amount from Schedule 2 (Form 1040), I	ine 3				17	0.
	18	Add lines 16 and 17					18	4,115.
	19	Child tax credit or credit for other deper	ndents from Sched	ule 8812 (Form 10)40)		19	
	20	Amount from Schedule 3 (Form 1040), I	ine 8				20	
	21	Add lines 19 and 20					21	
	22	Subtract line 21 from line 18. If zero or I	ess, enter -0		, . ,		22	4,115.
	23a	Tax on income not effectively connected Schedule NEC (Form 1040-NR), line 15	d with a U.S. trade		23a			
	b	Other taxes, including self-employment line 21		,	23b			
	С	Transportation tax (see instructions) .			23c			
	d	Add lines 23a through 23c					23d	
	24	Add lines 22 and 23d. This is your total	tax				24	4,115.
Payments	25	Federal income tax withheld from:						
•	а	Form(s) W-2			25a	5,768.		
	b	Form(s) 1099			25b			
	С	Other forms (see instructions)			25c			
	d	Add lines 25a through 25c					25d	5 , 768.
	е	Form(s) 8805					25e	
	f	Form(s) 8288-A				[25f	
	g	Form(s) 1042-S					25g	
	26	2023 estimated tax payments and amount	unt applied from 20)22 return	,		26	
	27	Reserved for future use			27			
	28	Additional child tax credit from Schedul	e 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), I	ine 15		31			
	32	Add lines 28, 29, and 31. These are you	32					
	33	Add lines 25d, 25e, 25f, 25g, 26, and 32	2. These are your to	otal payments .			33	5,768.
Refund	34	If line 33 is more than line 24, subtract I	ine 24 from line 33.	This is the amour	nt you overpaid		34	1,653.
	35a	Amount of line 34 you want refunded to	you . If Form 8888	3 is attached, chec	ck here	. 🗆	35a	1,653.
Direct deposit?	b	Routing number 1 1 1 0 0	Savings					
See instructions.	d	Account number 4 8 8 1 1	9 5 1 4 1	6 4				
	е	If you want your refund check mailed to enter it here.	an address outsic		es not shown on	page 1,		
	36	Amount of line 34 you want applied to			36			
Amount	37	Subtract line 33 from line 24. This is the	•					
You Owe		For details on how to pay, go to www.ir	s.gov/Payments or	see instructions .			37	
	38	Estimated tax penalty (see instructions)			38			
Third	Do yo	ou want to allow another person to discus	s this return with th	ne IRS? See instru	ctions.	es. Comple	te belo	w. 🗵 No
Party Designee	Desig name		Phone no.		numb	nal identific er (PIN)	ation	
		penalties of perjury, I declare that I have exam they are true, correct, and complete. Declaration						
Sign Here	Your	signature	Date	Your occupation SALESFORCE BU	USINESS ANALY	Prote	ction P	nt you an Identity IN, enter it here
	Phone	e no.	Email address	-		,	•	
Doid		·	rer's signature		Date	PTIN		Check if:
Paid	SYAM	PRIYA RAM SAGAR GUPTA TALLAM SYAM	PRIYA RAM SAGAH	R GUPTA TALLAM	03/14/2024	P02082	703	Self-employed
Preparer		sname GLOBAL TAXES LLC	· · ·			Phone no		8) 965-9522
Use Only		s address 245 ROONEY CT E	BRUNSWICK N	 J 08816		Firm's Ell		-3171965

SCHEDULE 1 (Form 1040)

Additional Income and Adjustments to Income

OMB No. 1545-0074 Attachment Sequence No. **01**

Department of the Treasury Internal Revenue Service

AKSHARA THUMMALAPALLY

Attach to Form 1040, 1040-SR, or 1040-NR. Go to www.irs.gov/Form1040 for instructions and the latest information.

Name(s) shown on Form 1040, 1040-SR, or 1040-NR Your social security number 114-31-6883

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	-7 , 295.
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			
	1040, 1040-SR, or 1040-NR, line 8		10	-7 , 295.

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

Par	Adjustments to Income			
11	Educator expenses		11	_
12	Certain business expenses of reservists, performing artists, and fee-l	basis government		
	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				
		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		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		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		26	

SCHEDULE NEC (Form 1040-NR)

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

Department of the Treasury Internal Revenue Service

Attach to Form 1040-NR. Go to www.irs.gov/Form1040NR for instructions and the latest information.

Attachment Sequence No. **7B**

OMB No. 1545-0074

Name shown on Form 1040-NR Your identifying number 114-31-6883 AKSHARA THUMMALAPALLY Enter amount of income under the appropriate rate of tax. See instructions.

	N			() () ()			(d) Other (specify)			
	Nature of Income			(a) 10%	(b) 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	I(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	4 Motion picture or TV copyright royalties									
5	Other royalties (copyrights, recording, publishing, etc.)									
6	Real property income and natural resources royalties									
7	Pensions and annuities									
8	Social security benefits									
9	Capital gain from line 18 below		9							
10	Gambling—Residents of Canada only. Enter net income in colur If zero or less, enter -0	mn (c).								
а	Winnings									
b	Losses		10c							
11	Gambling—Residents of countries other than Canada. Note: Enter winnings only. Losses aren't allowed		100							
			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 bu						NR, line 23a 15			
	•	s and Losses F	rom	Sales or Excha	inges of Proper	ty	<u> </u>			
losses f exchan- within t	Inly the capital gains and from property sales or ges that are from sources the United States and not (a) Kind of property and description (if necessary, attach statement of descriptive details not shown below)	(b) Date acqu 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).		
busines	vely connected with a U.S. ss. Do not include a gain									
	on disposing of a U.S. real ty interest; report these									
	and losses on Schedule D									
•	property sales or									
exchan	ges that are effectively									
on Sche	adula D (Form 1040) 17 Add Coldiniis (i) and (g) of line to									
Form 4	18 Capital gain. Combine columns (f)	and (g) of line 17	. Ente	er trie net gain ner	e and on line 9 abo	ove. II a loss, ente	r -0 18			

SCHEDULE OI (Form 1040-NR)

Other Information

Attach to Form 1040-NR.

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service

Name shown on Form 1040-NR

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

Attachment Sequence No. **7C**

Your identifying number

AKSF	HARA THUMMALAPALLY		114-31-6883								
Α	Of what country or countries w										
В	In what country did you claim	residence for tax purposes	during the tax ye	ar? United States							
С	Have you ever applied to be a	green card holder (lawful p	ermanent resident) of the United States? .	Yes	⊠ No					
D	Were you ever:										
1.	A U.S. citizen?				🗌 Yes	⊠ No					
2.	A green card holder (lawful per	manent resident) of the Un	ited States?		Yes	⊠ No					
	If you answer "Yes" to (1) or (2)	•									
Е	If you had a visa on the last of	•			ter your U.S.						
		immigration status on the last day of the tax year. $F1$									
F	Have you ever changed your visa type (nonimmigrant status) or U.S. immigration status?										
	If you answered "Yes," indicate					_					
G	List all dates you entered and I			ctions.							
	Note: If you're a resident of C		-		ent intervals,						
	check the box for Canada or				Mexico						
	Date entered United States	Date departed United State	es	Date entered United States	s Date departed Unite	d States					
	mm/dd/yy	mm/dd/yy		mm/dd/yy	mm/dd/yy						
			- -								
			-								
Н	Give number of days (including	vacation, nonworkdays, and	I partial days) you v	vere present in the United S	States during:						
	, ,	, 2022		•	· ·						
ı	Did you file a U.S. income tax	return for any prior year?			X Yes	☐ No					
	If "Yes," give the latest year an										
J	Are you filing a return for a trus					⊠ No					
	If "Yes," did the trust have a U										
	U.S. person, or receive a contr	ibution from a U.S. person	?		· · · · 🗌 Yes	☐ No					
K	Did you receive total compens	ation of \$250,000 or more	during the tax year	?	Yes	⊠ No					
	If "Yes," did you use an alterna					☐ No					
L	Income Exempt From Tax-If			•		country,					
	complete (1) through (3) below				,	•					
1.	Enter the name of the country,	the applicable tax treaty art	icle, the number of	months in prior years you	claimed the treaty benef	it, and the					
	amount of exempt income in th	e columns below. Attach Fo	orm 8833 if required	d. See instructions.							
	(a) Cou	ntry	(b) Tax treaty artic			empt					
				claimed in prior tax yes	ars income in current t	ax year					
	(e) Total. Enter this amount or		•								
2.	Were you subject to tax in a fo				<u> </u> Yes	∐ No					
3.	Are you claiming treaty benefit		•		🗌 Yes	⊠ No					
	If "Yes," attach a copy of the C	Competent Authority detern	nination letter to yo	our return.							
M	Check the applicable box if:										
1.	This is the first year you are ma					onnected					
	with a U.S. trade or business u										
2.	You have made an election in States as effectively connected										
	States as effectively confidented	a with a U.S. trade or busin	ess under section	or r(u). See instructions.		<u> Ц</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. Go to www.irs.gov/ScheduleE for instructions and the latest information.

OMB No. 1545-0074

2023
Attachment Sequence No. 13

Department of the Treasury Internal Revenue Service Name(s) shown on return

Your social security number

AKSF	HARA THUMMALAPALLY						114-3	1-6883		
Part	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		C . See	instru	ctions. If you	are an indi	vidual, rep	ort farm	
Α	Did you make any payments in 2023 that would require you		Form(s) 1	099? 5	See ins	tructions .		. \(\sum \cdot \c	es 🛛 N	0
В	If "Yes," did you or will you file required Form(s) 1099? .							. 🗌 Ye	es 🗌 N	0
1a	Physical address of each property (street, city, state, ZII									
A		LANGA	<u> </u>	500	070					
B	ROHINOOK TOWERO SOOMER HIDERADIS IEI	LI2114 C22	.11/21	300	0 7 0					
1b	Type of Property (from list below) 2 For each rental real estate proper above, report the number of fair	rental a	and						QJV	
Α	g personal use days. Check the Q			Α		365		0		
В	if you meet the requirements to find a qualified joint venture. See instru			В						
C	qualified joint voltare. See inche	20110110	•	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 (desc				
		-				Propert	ies:			
Incon				A	4.5	В			С	
3	Rents received	3		3	45.					
4	Royalties received	4								
Expe		_								
5	Advertising	5								
6	Auto and travel (see instructions)	6		1 2	10					
7	Cleaning and maintenance	7		1,2	48.					
8	Commissions	8								
9	Insurance	9								
10	Legal and other professional fees	10			00					
11	Management fees	11		8	00.					
12	Mortgage interest paid to banks, etc. (see instructions)	12								
13	Other interest	13		1 0	ΕΛ					
14	Repairs	14 15		1,9	50.					
15 16	Supplies	16		1,9	94.					
16 17	Taxes	17		1 6	10					
	Depreciation expense or depletion	18		1,6	40.					
18 19		19								
20	Other (list) Total expenses. Add lines 5 through 19	20		7,6	10					
		20		7,0	40.					
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		-7,2	95					
22	Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions)	22	(-7 , 29		((
23a	Total of all amounts reported on line 3 for all rental prope			. ,	23a	1	345.	\		
b	Total of all amounts reported on line 4 for all royalty prop				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		7,640.			
24	Income. Add positive amounts shown on line 21. Do not						. 24			
25	Losses. Add royalty losses from line 21 and rental real estat		-		nter to	tal losses he		(7,295	
26	Total rental real estate and royalty income or (loss).							`	, == 0	
_•	here. If Parts II, III, and IV, and line 40 on page 2 do no						I			

-7**,**295.

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