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

	18.18.18.2								
Submi	ssion Identification Number (SID)								
Taxpaye	r's name	Social securi	ty numl	per					
PRAN	JAVA HARI SHRIVASTAVA	343-65-6378							
Spouse's		_	Spouse's social security number						
Dort	Tax Return Information — Tax Year Ending December 31, 2023 (Enti-	 er year you a	ro ou	thorizina	1				
Part	whole dollars only on lines 1 through 5.	er year you a	re au	unonzing	·)				
	Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.								
1	Adjusted gross income		1	59	,076.				
2	Total tax		2		,257.				
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3		,847.				
4	Amount you want refunded to you		4		,590.				
5	Amount you owe		5		7550.				
Part		keep a cop	y of y	our retu	rn)				
my knoreturn (control to send for any Agent to paymer authorize paymer business taxes to personal	penalties of perjury, I declare that I have examined a copy of the income tax return (original or amended wledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I aboriginal or amended) I am now authorizing. I consent to allow my intermediate service provider, trans my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for redelay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the originate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account in the office of the date of any refund. If applicable, I authorize the originate and the financial institution account in the office of the decrease of the payment of the payment of estimated tax, and the financial institution in the contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation resist days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processor of the payment (settlement) date. I also authorize the financial institutions involved in the payment (settlement) date. I also authorize the financial institutions involved in the processor of the payment (settlement) date. I also authorize the financial institutions involved in the processor of the payment (settlement) as the processor of the processor of the payment (settlement) as the processor of the processor of the payment (settlement) date. I also authorize the financial institutions involved in the processor of the payment (settlement) as the processor of the payment (settlement) are the processor of the payment (settlement) and the processor of the payment o	ove are the amount of the transport of transport of the transport of the transport of transport of the transport of transport o	ounts from the country of the countr	from the in turn original ssion, (b) the designated paration so to this accor To revoke of ved no late ectronic paraking when	come tax tor (ERO) ne reason Financial ftware for bunt. This (cancel) a er than 2 ayment of that the				
	yer's PIN: check one box only								
X		5 my PIN	6 3	3 7 8	as my				
	ERO firm name signature on the income tax return (original or amended) I am now authorizing.	ř En		digits, but er all zeros	as my				
	I will enter my PIN as my signature on the income tax return (original or amended) I am if you are entering your own PIN and your return is filed using the Practitioner PIN met below.								
Your s	ignature ▶ Date ▶								
Snous	e's PIN: check one box only								
Ороцо	I authorize to enter or generate	a my PIN			as my				
	ERO firm name	-	ter five	digits, but	asiny				
	signature on the income tax return (original or amended) I am now authorizing.	do	n't ente	er all zeros					
	I will enter my PIN as my signature on the income tax return (original or amended) I am if you are entering your own PIN and your return is filed using the Practitioner PIN med below.								
Spous	e's signature ▶ Date ▶								
	Practitioner PIN Method Returns Only—continue below	W							
Part I	Certification and Authentication — Practitioner PIN Method Only								
ERO's	EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN. 2	2 2 4 9 Don't ent	6 0 er all ze	8 2 7	1				
authoriz	that the above numeric entry is my PIN, which is my signature for the electronic individual income zed to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am subments of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS <i>e-file</i> Providers of	tax return (origi	nal or urn in a	amended) accordance					
ERO's	signature ▶ Date ▶								
	ERO 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 OMB No. 1545-0074

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

For the year Jan. 1–Dec. 31, 2023, or other tax year beginning, 2023, ending, 20							20		See separate instructions.	
Your first name	and	middle initial						our identifying number		
									ions)	
PRANAVA HARI				VASTAVA	343	343-65-6378				
Home address (number and street). If you have a P.O. box, see instructions.									Apt. no.	
2599 EVAN	_	· · · · · · · · · · · · · · · · · · ·							323	
City, town, or po	ost o	ffice. If you have a foreign address, als	so comp	lete spaces below.		State		ZIP code		
MORRISVIL						NC			560	
Foreign country	nam	е	Foreigr	n province/state/count	У	Foreign	postal co	de		
Filing	X	Single Married filing sepa	arately (N	∕/IFS) ☐ Qualit	ying surviving spouse	(QSS)		tate	☐ Trust	
Status	If	you checked the QSS box, enter the o	hild's na	ame if the qualifying p	erson is a child but no	t your dep	endent:			
Check only one box.										
Digital Assets	Δta	ny time during 2023, did you: (a) recei	ve las a	reward award or nav	ment for property or s	envices): c	r (b) sell	ovch	ange or	
Digital Assets		erwise dispose of a digital asset (or a f							Yes 🔀 No	
Dependents		·				(4) Ch	eck the bo	x if qu	alifies for (see inst.):	
(see instructions):				(2) Dependent's		Child			Credit for other	
	-	(1) First name Last name		identifying number	(3) Relationship to y	ou			dependents	
If more than four										
dependents, see							<u> </u>			
instructions and check here							$\overline{\Box}$		<u> </u>	
	1a	Total amount from Form(s) W-2, box	1 (coo i	netructions)			. 1a	\top	69,683.	
Income Effectively	b	Household employee wages not rep	`	,				_	02,003.	
Connected	C	Tip income not reported on line 1a (s		, ,				_		
With U.S.	d	Medicaid waiver payments not report		·				_		
Trade or	e	Taxable dependent care benefits fro		, , ,	*			_		
Business	f	Employer-provided adoption benefit		•				_		
Dusiness	g	Wages from Form 8919, line 6		_						
Attach	h	Other earned income (see instruction								
Form(s) W-2, 1042-S,	i	Reserved for future use								
SSA-1042-S,	j	Reserved for future use					. 1j			
RRB-1042-S, and 8288-A	k	Total income exempt by a treaty from	n Sched	ule OI (Form 1040-NR), item L,					
here. Also		line 1(e)			1k					
attach	Z	Add lines 1a through 1h					. 1z		69,683.	
Form(s) 1099-R if	2a	Tax-exempt interest 2a			axable interest			_		
tax was	3a	Qualified dividends 3a	1	b (Ordinary dividends .		. 3b			
withheld.	4a	IRA distributions 4a			axable amount					
If you did not get a Form	5a	Pensions and annuities 5a	_		axable amount					
W-2, see	6	Reserved for future use								
instructions.	7	Capital gain or (loss). Attach Schedu	•	, ,	•			+	10.605	
	8	Additional income from Schedule 1 (+	-10,607. 59,076.	
	9	Add lines 1z, 2b, 3b, 4b, 5b, 7, and 8						+	59,076.	
	10	Adjustments to income from Schedincome		•	•					
	11	Subtract line 10 from line 9. This is y						_	59,076.	
	12	Itemized deductions (from Schedu						+	,	
		deduction (see instructions)							13,850.	
	13a	Qualified business income deduction			1 1	-				
	b	Exemptions for estates and trusts or								
	С	Add lines 13a and 13b					. 13	;		
	14	Add lines 12 and 13c					. 14		13,850.	
	15	Subtract line 14 from line 11. If zero	or less,	enter -0 This is your	taxable income .		. 15		45,226.	

Form 1040-NR (2023)										Page 2
Tax and	16	Tax (see instructions). Check if any	from For	m(s): 1 88	314 2	4972	2 3			16	5,257.
Credits	17	Amount from Schedule 2 (Form 10	040), line	3						17	0.
	18	Add lines 16 and 17								18	5,257.
	19	Child tax credit or credit for other	depende	ents from Sched	ule 8812 (F	orm 104	10) .			19	
	20	Amount from Schedule 3 (Form 10	040), line	8						20	
	21	Add lines 19 and 20								21	
	22	Subtract line 21 from line 18. If zer	ro or less	s, enter -0						22	5,257.
	23a	Tax on income not effectively cons Schedule NEC (Form 1040-NR), lir					23a				
	b	Other taxes, including self-employ line 21		•	•	, · ·	23b				
	С	Transportation tax (see instruction	ns)			. [23c				
	d	Add lines 23a through 23c								23d	
-	24	Add lines 22 and 23d. This is your	total ta	х						24	5,257.
Payments	25	Federal income tax withheld from:									
	а	Form(s) W-2					25a		7,847.		
	b	Form(s) 1099					25b				
	С	Other forms (see instructions) .				. [25c				
	d	Add lines 25a through 25c								25d	7,847.
	е	Form(s) 8805								25e	
	f	Form(s) 8288-A								25f	
	g	Form(s) 1042-S								25g	
	26	2023 estimated tax payments and				1	ı			26	
	27	Reserved for future use				ı	27				
	28	Additional child tax credit from Sc		•		t t	28				
	29	Credit for amount paid with Form				· · · · · · · · · · · · · · · · · · ·	29				
	30	Reserved for future use				ī	30			-	
	31	Amount from Schedule 3 (Form 10	, .				31	1*1 -		-	
	32	Add lines 28, 29, and 31. These at								32	7 047
Defend	33	Add lines 25d, 25e, 25f, 25g, 26, a								33	7,847.
Refund	34 35a	If line 33 is more than line 24, subtangular Amount of line 34 you want refun e					-	-		35a	2,590. 2,590.
Direct deposit?	b	Routing number 3 2 2 2			c Type		Check		Savings	SSA	2,390.
See instructions.	d	Account number 5 2 5 5			U iype ⊟ ⊟	;. <u> </u>		"''9 ∟ 	Savings		
	e	If you want your refund check ma			lo the Linite	od Stata	c not	i shown or	nago 1		
	C	·									
	36	enter it here. Amount of line 34 you want applie					36				
Amount	37	Subtract line 33 from line 24. This				-					
You Owe		For details on how to pay, go to w		-		ctions .				37	
	38	Estimated tax penalty (see instruc	tions) .				38				
Third	Do yo	u want to allow another person to	discuss tl	his return with th	ne IRS? See	e instruc	tions.	□ Y	es. Comp	lete be	ow. 🗵 No
Party Designee	Designee's Phone Personal identiname no. number (PIN)								ication		
		penalties of perjury, I declare that I have they are true, correct, and complete. De									
Sign	Your	signature		Date	Your occu	upation			If th	e IRS s	ent you an Identity
Here				· ·							PIN, enter it here
							inst.)				
			Prenarer'	Email address 's signature			Date		PTIN		Check if:
Paid	•		·	· ·	י בווחידיא ייי	א א ד.ד א א		9/2024	P0208	2702	Self-employed
Preparer				IYA RAM SAGAF	GUPIA I.	ווואחחעו	04/0	J/ 4U4 1	Phone n		
Use Only		0_0_0_		DIINICMT OV N	T 00016	:			Firm's E		78)965-9522 4-3171965
	1 01111 \$	address 245 ROONEY CT	אם יי	COINDMICK IN	7 000TC	,			1 mm 3 L	1	<u> </u>

SCHEDULE 1 (Form 1040)

Additional Income and Adjustments to Income

OMB No. 1545-0074

2023
Attachment
Seguence No. 01

Department of the Treasury Internal Revenue Service

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.

Attachment Sequence No. 01 Your social security number

PRANAVA HARI SHRIVASTAVA 343-6						378
Par	t I Additional Income					
1	Taxable refunds, credits, or offsets of state and local income taxes				1	
	Alimony received				2a	1
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			L	4	
5	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Atta	ach S	chedule E	Ξ. [5	-10,607.
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. Ente	r here	and on F	Form 🗍		
	1040, 1040-SR, or 1040-NR, line 8				10	-10,607.

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

Attachment

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service

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

PRANAVA HARI SHRIVASTAVA 343-65-6378 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 3 4 Motion picture or TV copyright royalties 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 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 (f) LOSS 16 (a) Kind of property and description (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 subtract (d) from (e). descriptive details not shown below) 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 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 Form 4797, or both.

SCHEDULE OI (Form 1040-NR)

Other Information

Attach to Form 1040-NR.

Attachment

Department of the Treasury Internal Revenue Service

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

Sequence No. 7C

OMB No. 1545-0074

Name shown on Form 1040-NR Your identifying number 343-65-6378 PRANAVA HARI SHRIVASTAVA Of what country or countries were you a citizen or national during the tax year? _INDIA Α In what country did you claim residence for tax purposes during the tax year? United States В С Have you ever applied to be a green card holder (lawful permanent resident) of the United States? X No Were you ever: ☐ Yes X No 1. A U.S. citizen? X No If you answer "Yes" to (1) or (2), see Pub. 519, chapter 4, for expatriation rules that apply to you. Ε 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 year. F1 X No F Have you ever changed your visa type (nonimmigrant status) or U.S. immigration status? Yes If you answered "Yes," indicate the date and nature of the change: G List all dates you entered and left the United States during 2023. See instructions. Note: If you're a resident of Canada or Mexico AND commute to work in the United States at frequent intervals, Date entered United States Date departed United States **Date entered United States Date departed United States** mm/dd/yy mm/dd/yy mm/dd/yy mm/dd/yy Give number of days (including vacation, nonworkdays, and partial days) you were present in the United States during: н 2021 ______, 2022 ______, and 2023 ______365 ___. Did you file a U.S. income tax return for any prior year? X Yes ☐ No ı If "Yes," give the latest year and form number you filed: 1040NR X No ☐ Yes J If "Yes," did the trust have a U.S. or foreign owner under the grantor trust rules, make a distribution or loan to a □ No Yes ⊠ No Κ Yes No If "Yes," did you use an alternative method to determine the source of this compensation? Income Exempt From Tax-If you are claiming exemption from income tax under a U.S. income tax treaty with a foreign country, L complete (1) through (3) below. See Pub. 901 for more information on tax treaties. Enter the name of the country, the applicable tax treaty article, the number of months in prior years you claimed the treaty benefit, and the amount of exempt income in the columns below. Attach Form 8833 if required. See instructions. (a) Country (b) Tax treaty article (c) Number of months (d) Amount of exempt claimed in prior tax years income in current tax vear (e) Total. Enter this amount on Form 1040-NR, line 1k. Do not enter it anywhere else on line 1 No 2. Were you subject to tax in a foreign country on any of the income shown in 1(d) above? Yes X No If "Yes," attach a copy of the Competent Authority determination letter to your return. Check the applicable box if: 1. This is the first year you are making an election to treat income from real property located in the United States as effectively connected 2. You have made an election in a previous year that has not been revoked, to treat income from real property located in the United

SCHEDULE E (Form 1040)

Supplemental Income and Loss

(From rental real estate, royalties, partnerships, S corporations, estates, trusts, REMICs, etc.)

Attach to Form 1040, 1040-SR, 1040-NR, or 1041.

Your social security number

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

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

Attachment Sequence No. 13

OMB No. 1545-0074

PRAI	NAVA HARI SHRIVASTAVA						343-6	5-6378	i
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.			C . See	instru	ctions. If you a	are an indiv	/idual, rep	ort farm
Α	Did you make any payments in 2023 that would require you	to file	Form(s) 1	099? 5	See ins	structions .		. 🗌 Ye	es 🛛 No
В	If "Yes," did you or will you file required Form(s) 1099?								es 🗌 No
1a	Physical address of each property (street, city, state, ZII								
Α	20-C ANNAPURNA ANUSHAKTINAGAR, MUMBAI N	MAHAI	RASHTRA	IN	4000	94			
В									
C									
1b	Type of Property (from list below) 2 For each rental real estate properabove, report the number of fair	rental	l and Days ox only A 365				Person Da		QJV
Α	personal use days. Check the Q					365		0	
В	if you meet the requirements to f qualified joint venture. See instru			В					
С	quaimed joint venture. See institu	ictions	o. [С					
Туре	of Property:								
1	Single Family Residence 3 Vacation/Short-Term Ren	ıtal	5 Land		7	Self-Rental			
2	Multi-Family Residence 4 Commercial		6 Roya	lties	8	Other (desc	ribe)		
						Propert			
Incor	mai			Α		В	162.		С
3	Rents received	3			70.	В			
4	Royalties received	4			70.				
	nses:	7							
5	Advertising	5							
6	Auto and travel (see instructions)	6							
7	Cleaning and maintenance	7		1 5	20.				
8	Commissions	8			20.				
9	Insurance	9							
10	Legal and other professional fees	10							
11	Management fees	11		1.1	40.				
12	Mortgage interest paid to banks, etc. (see instructions)	12		-,-	10.				
13	Other interest	13							
14	Repairs	14		2,6	71.				
15	Supplies	15			35.				
16	Taxes	16							
17	Utilities	17		3,0	11.				
18	Depreciation expense or depletion	18							
19	Other (list)	19							
20	Total expenses. Add lines 5 through 19	20		11,1	77.				
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	-	-10,6	07.				
22	Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions)	22	(-:	10,60)7.)	()	(
23a	Total of all amounts reported on line 3 for all rental prope	erties			23a		570.		
b	Total of all amounts reported on line 4 for all royalty prop	erties			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	11	,177.		
24	Income. Add positive amounts shown on line 21. Do not	t inclu	de any los	sses			. 24		
25	Losses. Add royalty losses from line 21 and rental real estate	e losse	es from lin	e 22. E	nter to	tal losses he	e 25	(10,607.
26	Total rental real estate and royalty income or (loss).								
	here. If Parts II, III, and IV, and line 40 on page 2 do no Schedule 1 (Form 1040), line 5. Otherwise, include this ar						on 26		-10,607.