## 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

	-						
Submi	ssion Identification Number (SID)						
Taxpaye	er's name	Social securi	ty numl	per			
SHI	VA SIRUPA	645-53-3811					
Spouse'	s name	Spouse's social security number					
Part	Tax Return Information — Tax Year Ending December 31, 2023 (Ente	 er year you a	re au	thorizina.	)		
	whole dollars only on lines 1 through 5.	y ca y ca. c	0 0.0.				
	Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.						
1	Adjusted gross income		1	65	,646.		
2	Total tax		2	6	,698.		
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3	11	,617.		
4	Amount you want refunded to you		4	4	,919.		
5	Amount you owe		5				
Part	II Taxpayer Declaration and Signature Authorization (Be sure you get and	keep a cop	y of y	our retu	rn)		
my known return ( to send for any Agent t  payment authorize  payment  business  taxes t  persons	penalties of perjury, I declare that I have examined a copy of the income tax return (original or amende by by by and belief, it is true, correct, and complete. I further declare that the amounts in Part I about original or amended) I am now authorizing. I consent to allow my intermediate service provider, transifully 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 io initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account in the formal of the financial 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 terminant, I must 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 oreceive confidential information necessary to answer inquiries and resolve issues related to the alignment of the payment (PIN) below is my signature for the income tax return (original or amended) I are funds Withdrawal Concept.	ove are the ammitter, or electro- ejection of the to the tour of the tour of the tour of the tour of the terms of the term	ounts for the counts of the co	rom the incturn original ssion, (b) the designated paration soft to this according to the content of the conten	come tax tor (ERO) ne reason Financial ftware for bunt. This cancel) a er than 2 syment of that the		
	nic Funds Withdrawal Consent.  yer's PIN: check one box only						
X		a my PINI	3 8	3 1 1	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	asiny		
	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 <b>and</b> your return is filed using the Practitioner PIN met below.						
Your s	ignature ▶ Date ▶						
Spous	se's PIN: check one box only						
	I authorize to enter or generate	my PIN			as my		
	ERO firm name	_	ter five	digits, but	ao my		
	signature on the income tax return (original or amended) I am now authorizing.	do	n't ente	r 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 <b>and</b> your return is filed using the Practitioner PIN met below.						
Spous	e's signature ▶ Date ▶						
	Practitioner PIN Method Returns Only—continue belov	N					
Part	Certification and Authentication — Practitioner PIN Method Only						
ERO's	<b>EFIN/PIN.</b> Enter your six-digit EFIN followed by your five-digit self-selected PIN.	2 2 4 9 Don't ent	6 0 er all 76	8 2 7	1		
	that the above numeric entry is my PIN, which is my signature for the electronic individual income	tax return (orig	inal or	amended)			
	zed to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am sub ments of the Practitioner PIN method and <b>Pub. 1345</b> , Handbook for Authorized IRS e-file Providers of				with the		
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–D	ec. 31, 2023, or other tax year beginni	ng		2023,	ending	,	20		instructions.		
Your first name and middle initial				Last name Yo						our identifying number see instructions)		
SHIVA				PA	645	645-53-3811						
Home address (	numk	per and street). If you have a P.O. box,	see ins	tructions.						Apt. no.		
1016 HILL	s o	AK LN										
City, town, or po	ost of	fice. If you have a foreign address, also	o comp	lete spaces belov	/.		State		ZIP	code		
CHARLOTTE		,		•			NC		282	269		
Foreign country		9	Foreigr	n province/state/c	ounty		Foreign	oostal c				
Filing Status Check only		Single				ng surviving spouse (son is a child but not			state	☐ Trust		
one box.									-			
Digital Assets		ny time during 2023, did you: (a) receiv rwise dispose of a digital asset (or a fil								ange, or  Yes X No		
<b>Dependents</b> (see instructions):		(1) First name Last name		(2) Dependentidentifying num		(3) Relationship to yo	Chil	d tax cre	ĺ	alifies for (see inst.): Credit for other dependents		
If more than four								Щ		<u> </u>		
dependents, see								Ц_				
instructions and								Щ				
check here								Ц_				
Income	1a	Total amount from Form(s) W-2, box	1 (see i	nstructions) .				. 1	3	81,534.		
Effectively	b	Household employee wages not repo	rted on	Form(s) W-2 .				. 11	)			
Connected	С	Tip income not reported on line 1a (s	ee instr	uctions)				. 10	;			
With U.S.	d	Medicaid waiver payments not report		. ,		,		. 10	t			
Trade or	е	Taxable dependent care benefits from	n Form	2441, line 26 .				. 10	•			
Business	Susiness f Employer-provided adoption benefits from Form 8839, line 29							. 1	f			
Attach	g	Wages from Form 8919, line 6						. 19	)			
Form(s) W-2,	h	Reserved for future use										
1042-S,	i											
SSA-1042-S, RRB-1042-S.	j	Reserved for future use										
and 8288-A here. Also	k	Total income exempt by a treaty from line 1(e)		·	)-NR), i 	tem L, <b>1k</b>						
attach	Z	Add lines 1a through 1h	· ·					. 12	z	81,534.		
Form(s) 1099-R if	2a	Tax-exempt interest 2a			<b>b</b> Tax	able interest		. 21	)			
tax was	3a	Qualified dividends 3a			<b>b</b> Ord	linary dividends		. 31	<b>)</b>			
withheld.	4a	IRA distributions 4a			<b>b</b> Tax	able amount		. 41	<b>—</b>			
If you did not	5a	Pensions and annuities <u>5a</u>				able amount						
get a Form W-2, see	6	Reserved for future use							_			
instructions.	7	Capital gain or (loss). Attach Schedul	•	, .		•	_	_				
	8	Additional income from Schedule 1 (F								-15,888.		
	9	Add lines 1z, 2b, 3b, 4b, 5b, 7, and 8	. This is	your <b>total effect</b>	ively c	onnected income		. 9		65,646.		
	10	Adjustments to income from Schedu income	,	, ,					)			
	11	Subtract line 10 from line 9. This is yo	our <b>adju</b>	ısted gross inco	me			. 1		65,646.		
	12	<b>Itemized deductions</b> (from Schedul deduction (see instructions)							2	13,850.		
	13a	Qualified business income deduction				1 1						
	b	Exemptions for estates and trusts on										
	С	Add lines 13a and 13b	• .	•				. 13	С			
	14							_		13,850.		
	15	Subtract line 14 from line 11. If zero of							5	51,796.		

Form 1040-NR (	2023)									Page <b>2</b>
Tax and	16	Tax (see instructions). Check if ar	y from Foi	rm(s): <b>1</b>	314 <b>2</b>	72 <b>3</b>			16	6,698.
Credits	17	Amount from Schedule 2 (Form	1040), line	3					17	0.
	18	Add lines 16 and 17	18	6,698.						
	19	Child tax credit or credit for other	r depende	ents from Sched	ule 8812 (Form 1	040) .			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 z	ero or less	s, enter -0					22	6,698.
	23a	Tax on income not effectively co Schedule NEC (Form 1040-NR),				23a				
	b	Other taxes, including self-empl line 21	-			23b				
	С	Transportation tax (see instruction	ons)			23c				
	d	Add lines 23a through 23c							23d	
	24	Add lines 22 and 23d. This is yo	ur <b>total ta</b>	x					24	6,698.
<b>Payments</b>	25	Federal income tax withheld from	n:							
-	а	Form(s) W-2				25a	1	1,617.		
	b	Form(s) 1099				25b				
	С	Other forms (see instructions) .				25c				
	d	Add lines 25a through 25c							25d	11,617.
	е	Form(s) 8805							25e	
	f	Form(s) 8288-A							25f	
	g	Form(s) 1042-S							25g	
	26	2023 estimated tax payments ar	nd amount	applied from 20	022 return				26	
	27	Reserved for future use				27				
	28	Additional child tax credit from S	Schedule 8	3812 (Form 1040	)	28				
	29	Credit for amount paid with Forr	n 1040-C			29				
	30	Reserved for future use				30				
	31	Amount from Schedule 3 (Form	,.			31				
	32	Add lines 28, 29, and 31. These							32	
	33	Add lines 25d, 25e, 25f, 25g, 26							33	11,617.
Refund	34	If line 33 is more than line 24, su				-	-		34	4,919.
	35a	Amount of line 34 you want refu							35a	4,919.
Direct deposit? See instructions.	b	Routing number 1 2 2 1	-			Checki	ng L	Savings		
See instructions.	d	Account number 4 5 7 0 4 3 6 4 0 9 8 6								
	е	If you want your refund check menter it here.								
	36	Amount of line 34 you want app				36				
Amount	37	Subtract line 33 from line 24. Th		-						
You Owe		For details on how to pay, go to	www.irs.g	gov/Payments or	see instructions				37	
	38	Estimated tax penalty (see instru				38				(C.1)
Third	Do yo	ou want to allow another person to	discuss t	his return with th	ne IRS? See instr	uctions.	∐ Ye	es. Comp	lete bel	ow. 🗵 No
Party	Desig			Phone				nal identif	ication	
Designee		name nonumber (PIN)  Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the								
		they are true, correct, and complete. I								
Sign	·	signature		Date	Your occupatio					ent you an Identity
Here	Tour	signature		Date	Tour occupatio	11		I		PIN, enter it here
11616					SOFTWARE	ENGIN	EER		inst.)	,
	Phone	e no.		Email address	-			'		
Paid	Prepa	ırer's name	Preparer	's signature		Date		PTIN		Check if:
	SYAM	PRIYA RAM SAGAR GUPTA TALLAM	SYAM PR	RIYA RAM SAGAI	R GUPTA TALLAN	02/10	)/2024	P0208	2703	Self-employed
Preparer	Firm's	name GLOBAL TAXES	LLC					Phone n	o. (6	78)965-9522
Use Only	Firm's	address 245 ROONEY (		RUNSWICK N	J 08816			Firm's E		4-3171965
0-1	/F-:	made 10.40ND for inchmentions and the l								1040 ND (2000)

## 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

SHIVA SIRUPA

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 645-53-3811

	t I Additional Income			
	Taxable refunds, credits, or offsets of state and local income taxes		1	
а	Alimony received		2a	
b	Date of original divorce or separation agreement (see instructions):			
	Business income or (loss). Attach Schedule C		3	
	Other gains or (losses). Attach Form 4797		4	
	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Atta		5	-15,888
	Farm income or (loss). Attach Schedule F		6	
	Unemployment compensation		7	
,	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		
a 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	

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				
16	Self-employed SEP, SIMPLE, and qualified plans				
17	Self-employed health insurance deduction				
18	Penalty on early withdrawal of savings				
19a	Alimony paid				
b	Recipient's SSN				
С	Date of original divorce or separation agreement (see instructions):				Į.
20	IRA deduction				
21	Student loan interest deduction				
22	Reserved for future use				
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	the state of the s	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				
	<del>-</del>	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			Į.
25	Total other adjustments. Add lines 24a through 24z				
26	Add lines 11 through 23 and 25. These are your <b>adjustments to income</b> . Form 1040, 1040-SR, or 1040-NR, line 10	. Enter	r here and	on <b>26</b>	
	1 OITH 1070, 1070-011, 01 1070-1111, IIIIC 10	• •		.   20	

#### **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.

Sequence No. 7B

OMB No. 1545-0074

Name shown on Form 1040-NR Your identifying number SHIVA SIRUPA 645-53-3811 Enter **amount of income** under the appropriate rate of tax. See instructions.

Nature of Income		(a) 10%	<b>(b)</b> 15%	(c) 30%	(d) Other (specify)					
				(b) 1370	(C) 30 70	%	%			
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(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	Motion picture or TV copyright royalties	4								
5	Other royalties (copyrights, recording, publishing, etc.)	5								
6	Real property income and natural resources royalties	6								
7	Pensions and annuities	7								
8	Social security benefits	8								
9	Capital gain from line 18 below	9								
10	Gambling—Residents of Canada only. Enter net income in column (c).  If zero or less, enter -0									
а	Winnings									
b	Losses	10c								
11	Gambling—Residents of countries other than Canada.  Note: Enter winnings only. Losses aren't allowed	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 business. Add column					NR, line 23a <b>15</b>				
Capital Gains and Losses From Sales or Exchanges of Property										
losses f	nly the capital gains and from property sales or ges that are from sources he United States and not (a) Kind of property and description (if necessary, attach statement of descriptive details not shown below) (b) Date acquired 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).			
	ely connected with a U.S. ss. Do not include a gain									
or loss	on disposing of a U.S. real y interest; report these									
	nd losses on Schedule D									
	property sales or									
connec	ges that are effectively ted with a U.S. business 17 Add columns (f) and (g) of line 16				17	(				
	redule D (Form 1040), 797, or both. 18 Capital gain. Combine columns (f) and (g) of line 17	 '. Ente	· · · · · · · · er the net gain here	and on line 9 abo		r -0 <b>18</b>				

## SCHEDULE OI (Form 1040-NR)

### **Other Information**

Attach to Form 1040-NR.

Department of the Treasury Internal Revenue Service Go to www.irs.gov/Form1040NR for instructions and the latest information.

Answer all questions.

OMB No. 1545-0074

2023
Attachment
Sequence No. 7C

Nam	e shown on Form 1040-NR		'	Your identifying ı	number				
SH	IVA SIRUPA			645-53-38	11				
Α	Of what country or countries were you a citizen or national	al during the tax year?	INDIA						
В	In what country did you claim residence for tax purposes	s during the tax year?	United States						
С	Have you ever applied to be a green card holder (lawful p	permanent resident) of	the United States? .		☐ Yes	⊠ No			
D	Were you ever:	,							
	<b>1.</b> A U.S. citizen?				Yes	⊠ No			
:	2. A green card holder (lawful permanent resident) of the Un			Yes	⊠ No				
	If you answer "Yes" to (1) or (2), see Pub. 519, chapter 4,								
Ε	If you had a visa on the last day of the tax year, enter y			er your U.S.					
F	immigration status on the last day of the tax year. F1  Have you ever changed your visa type (nonimmigrant sta		n status?		☐ Yes	⊠ No			
	If you answered "Yes," indicate the date and nature of the	e change:							
G	List all dates you entered and left the United States durin Note: If you're a resident of Canada or Mexico AND corcheck the box for Canada or Mexico and skip to item H	g 2023. See instruction mmute to work in the l	ns. United States at freque						
	Date entered United States  mm/dd/yy  Date departed United State  mm/dd/yy	es Da	te entered United States mm/dd/yy		ted United m/dd/yy	d States			
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,								
н	Give number of days (including vacation, nonworkdays, and	 d partial davs) vou were	present in the United S	tates during:					
	2021, 2022								
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:  Are you filing a return for a trust?	104	UNK		Yes	⊠ No			
J	If "Yes," did the trust have a U.S. or foreign owner unde U.S. person, or receive a contribution from a U.S. person	er the grantor trust rule	es, make a distribution	or loan to a	☐ 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 exempti			_					
-	complete (1) through (3) below. See Pub. 901 for more in	formation on tax treation	es.						
	<ol> <li>Enter the name of the country, the applicable tax treaty art amount of exempt income in the columns below. Attach Formula.</li> </ol>			claimed the trea	aty benefit	t, and the			
	(a) Country	(b) Tax treaty article	(c) Number of months claimed in prior tax year	, , ,					
	(e) Total. Enter this amount on Form 1040-NR, line 1k. D	 )o not enter it anywher	e else on line 1						
:	2. Were you subject to tax in a foreign country on any of the	e income shown in 1(d)	above?		☐ Yes	☐ No			
;	3. Are you claiming treaty benefits pursuant to a Competent	Are you claiming treaty benefits pursuant to a Competent Authority determination?							
	If "Yes," attach a copy of the Competent Authority determ	nination letter to your r	return.						
М	Check the applicable box if:								
	<ol> <li>This is the first year you are making an election to treat in with a U.S. trade or business under section 871(d). See in</li> </ol>					onnected			
:	<ol><li>You have made an election in a previous year that has States as effectively connected with a U.S. trade or busin</li></ol>	not been revoked, to	treat income from rea	l property loca	ated in th				

#### **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

SHIV	/A SIRUPA							645-5	3-3811	
Par		Loss From Rental Real Estate an								
	Note: If you a	re in the business of renting personal proper or loss from <b>Form 4835</b> on page 2, line 40.	ty, use	Schedule	<b>c</b> . See	instru	ctions. If you a	re an ind	ividual, rep	ort farm
Α		ayments in 2023 that would require you	to file	Form(s)	10992.5	See ins	structions			s X No
		s of each property (street, city, state, ZII								
				<u> </u>	F0F0	O 1				
A B	3-6-243/A,AI	DARSHA NAGAR KARIMNAGAR TEI	JANGA	ANA IN	5050	01				
C										
1b	Type of Property	2 For each rental real estate prope	vrtv. liet	od		Ea	ir Rental	Dorso	nal Use	
110	(from list below)	above, report the number of fair				Га	Days		ays	QJV
Α	2	personal use days. Check the Q	JV box	c only	Α		365		0	
В		if you meet the requirements to f			В		303			
С		qualified joint venture. See instru	ictions	S.	С					
Туре	of Property:					1	<u>'</u>			<u> </u>
1	Single Family Resid	dence 3 Vacation/Short-Term Ren	tal	5 Land	t	7	Self-Rental			
2	Multi-Family Resid	ence 4 Commercial		6 Roya	alties	8	Other (descr	ibe)		
							Properti			
Incon	ne.				Α		В	C3.		С
3			3			90.				
4		d	4			,				
Expe			<u> </u>							
5			5							
6		ee instructions)	6							
7		ntenance	7		1,6	80.				
8			8							
9			9							
10	Legal and other p	rofessional fees	10							
11	Management fees	8	11		1,3	71.				
12	Mortgage interest	paid to banks, etc. (see instructions)	12							
13	Other interest .		13							
14	•		14			71.				
15			15		4,4	50.				
16			16		4 6	0.5				
17			17		4,6	06.				
18		ense or depletion	18							
19 20		add lines 5 through 19	19		16 /	70				
	·	•	20		16,4	70.				
21		rom line 3 (rents) and/or 4 (royalties). If see instructions to find out if you must								
	, , ,		21		-15,8	88.				
22		real estate loss after limitation, if any,								
		ee instructions)	22	( -	15,88	38.)	(		)(	)
23a	•	its reported on line 3 for all rental prope	rties			23a		590.		,
b		its reported on line 4 for all royalty prop				23b				
С		its reported on line 12 for all properties				23c				
d	Total of all amoun	its reported on line 18 for all properties				23d				
е	Total of all amoun	its reported on line 20 for all properties				23e	16	,478.		
24	•	itive amounts shown on line 21. <b>Do not</b>		-				. 24		
25	Losses. Add royal	ty losses from line 21 and rental real estat	e losse	es from lin	ne 22. E	nter to	tal losses here	e <b>25</b>	(	15,888.)
26		estate and royalty income or (loss).								
		I, and IV, and line 40 on page 2 do no						n		_15 000