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.

Submission Identification Number (SID)

T.....

Taxpayer's name	Social security number
SAI CHARAN DEVALAPALLY	884-15-7953
Spouse's name	Spouse's social security number
Part I Tax Return Information – Tax Year Ending December 31, 2023 (En	ter year you are authorizing.)
Enter whole dollars only on lines 1 through 5.	
Note: Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.	
1 Adjusted gross income	1 58,325.
2 Total tax	2 5,117.
3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099	. 3 8,406.
4 Amount you want refunded to you	4 3,289.
5 Amount you owe	5

Part II Taxpayer Declaration and Signature Authorization (Be sure you get and keep a copy of your return)

Under penalties of periury. I declare that I have examined a copy of the income tax return (original or amended) I am now authorizing, and to the best of my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above are the amounts from the income tax return (original or amended) I am now authorizing. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution to debit the entry to this account. This authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate the authorization. To revoke (cancel) a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation requests must be received no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I further acknowledge that the personal identification number (PIN) below is my signature for the income tax return (original or amended) I am now authorizing and, if applicable, my Electronic Funds Withdrawal Consent.

Taxpayer's PIN: check one box only

X	I autnorize	GLOBAL	TAXES	ERO firm name	to enter or generate my PIN	E
$\mathbf{\nabla}$	l authorize	CTODAT	TAVEC	TTO	to optox or concrete my DIN	15

5	7	9	5	3	
Ent don	as my				

signature on the income tax return (original or amended) I am now authorizing.

I will enter my PIN as my signature on the income tax return (original or amended) I am now authorizing. Check this box only if you are entering your own PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Your signature

Date

Spouse's PIN: check one box only

I authorize

to enter or generate my PIN

as mv Enter five digits, but don't enter all zeros

ERO firm name signature on the income tax return (original or amended) I am now authorizing.

I will enter my PIN as my signature on the income tax return (original or amended) I am now authorizing. Check this box only if you are entering your own PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Spouse's signature ►	Date 🕨	
	eturns Only—continue below	
Part III Certification and Authentication – Practition	er PIN Method Only	
ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-	ligit self-selected PIN. 2 2 2 4 9 6 0 8 2 7 1 Don't enter all zeros	

I certify that the above numeric entry is my PIN, which is my signature for the electronic individual income tax return (original or amended) I am now authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am submitting this return in accordance with the requirements of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers of Individual Income Tax Returns.

ERO's signature >		Date 🕨		
ERO Must Retain This Form — See Instructions Don't Submit This Form to the IRS Unless Requested To Do So				
For Paperwork Reduction Act Notice, see your tax return instructions.	BAA	REV 02/05/24 PRO	Form 8879 (Rev. 01-2021)	

1040	-N	IR Department of the Treasury-Inter U.S. Nonresident Ali	nal Rever en In	nue Service Come Tax R	eturn	2023	OMB No. 1	545-0074		only—Do not write e in this space.	
For the year Jan. 1–Dec. 31, 2023, or other tax year beginning, 2023, ending, 20							, 20	0 See separate			
Your first name			Last na			<u> </u>		Your i	' instructions. 'our identifying number see instructions)		
SAI CHARA	N		DEVA	LAPALLY				884	-15-7	953	
Home address (num	per and street). If you have a P.O. box	, see ins	structions.				•		Apt. no.	
803 PATTE										С	
	ost of	ffice. If you have a foreign address, als	so comp	lete spaces below	•		State		ZIP coo		
DAYTON		-	Faraia	n province/state/c			OH	nantal a	4541	9	
Foreign country	nam	e	Foreigi	n province/state/c	Junty		Foreign	postal co	Jue		
Filing Status Check only one box.	lf :	Single Married filing sepa	hild's na	ame if the qualifyir	ig persoi		ot your dep		-	Trust	
Digital Assets		ny time during 2023, did you: (a) recei erwise dispose of a digital asset (or a f									
Dependents							(4) C	heck the b	ox if qualifi	es for (see inst.):	
(see instructions):		(1) First name Last name		(2) Dependent identifying num		(3) Relationship to	Ch	ild tax cre		redit for other dependents	
				i doninying nam			you		`		
If more than four										\square	
dependents, see instructions and											
check here											
Income	1a	Total amount from Form(s) W-2, box	1 (see i	nstructions) .				. 1a	a 📃	66,915.	
Effectively	b	Household employee wages not rep							י		
Connected	С	Tip income not reported on line 1a (s									
With U.S.	d	Medicaid waiver payments not report									
Trade or	e f	Taxable dependent care benefits fro						· 10			
Business	f g	g Wages from Form 8919, line 6							3		
Attach	9 h								<u>ן</u> ו		
Form(s) W-2, 1042-S,	i	Reserved for future use 1i Reserved for future use									
SSA-1042-S,	j										
RRB-1042-S, and 8288-A here. Also	k										
attach Form(s)	z	Add lines 1a through 1h	1							66,915.	
1099-R if	2a	Tax-exempt interest 2a				ble interest					
tax was	3a	Qualified dividends 3a	-			ary dividends .					
withheld. If you did not	4a 5a	IRA distributions 4a Pensions and annuities 5a				ble amount ble amount			-		
get a Form	5a 6	Reserved for future use	_								
W-2, see instructions.	7	Capital gain or (loss). Attach Schedu									
instructions.	8	Additional income from Schedule 1 (•				-8,590.	
	9	Add lines 1z, 2b, 3b, 4b, 5b, 7, and 8	3. This is	s your total effect i	vely cor	nnected income		. 9		58,325.	
	10	Adjustments to income from Schede)		
	11	Subtract line 10 from line 9. This is y	our adjı	usted gross incor	ne.			. 1	1	58,325.	
	12	Itemized deductions (from Schedu deduction (see instructions)							2	13,850.	
	13a	Qualified business income deduction									
	b	Exemptions for estates and trusts or									
	с	Add lines 13a and 13b						. 13	c		
	14								4	13,850.	
	15	Subtract line 14 from line 11. If zero						. 1		44,475.	
For Disclosure,	Priva	cy Act, and Paperwork Reduction Act	Notice,	see separate instr	uctions.				Form 10	040-NR (2023)	

orm 1040-NR (2	2023)								Page 2
Tax and	16	Tax (see instructions). Check if an	y from Fo	rm(s): 1 🗌 88	314 2 497	2 3		16	5,117.
Credits	17	Amount from Schedule 2 (Form 1						. 17	0.
	18	Add lines 16 and 17							5,117.
	19	Child tax credit or credit for othe	depende	ents from Sched	ule 8812 (Form 10	40)		. 19	
	20	Amount from Schedule 3 (Form 1	040), line	8				. 20	
	21	Add lines 19 and 20						. 21	
	22	Subtract line 21 from line 18. If z	ero or les	s, enter -0				. 22	5,117.
	23a	Tax on income not effectively cor	nected w	vith a U.S. trade o	or business from				
		Schedule NEC (Form 1040-NR), I				23a			
	b	Other taxes, including self-emplo							
		line 21	-		. ,	23b			
	с	Transportation tax (see instruction				23c			
	d	Add lines 23a through 23c	,					. 23d	
	24	Add lines 22 and 23d. This is you							5,117.
ayments	25	Federal income tax withheld from							
aymento	a	Form(s) W-2				25a	8,40	06.	
	b	Form(s) 1099				25b	0 / 10	<u>,,,,</u>	
	c	Other forms (see instructions)				25c			
	d	Add lines 25a through 25c						. 25d	8,406.
	e	Form(s) 8805							0,100.
	f	Form(s) 8288-A							
		Form(s) 1042-S							
	g								·
	26	2023 estimated tax payments an		• •				. 26	
	27	Reserved for future use				27			
	28	Additional child tax credit from S				28			
	29	Credit for amount paid with Form				29			
	30	Reserved for future use				30			
	31	Amount from Schedule 3 (Form 1				31			
	32	Add lines 28, 29, and 31. These a							0 100
	33	Add lines 25d, 25e, 25f, 25g, 26,							8,406.
efund	34	If line 33 is more than line 24, sul							3,289.
	35a	Amount of line 34 you want refu							3,289.
ect deposit? e instructions.	b	Routing number 0 4 4 0			с Туре: 🗵	Checking	Savir	ngs	
	d	Account number 7 6 7 9							
	е	If you want your refund check m							
		enter it here.							
	36	Amount of line 34 you want appl				36			
mount	37	Subtract line 33 from line 24. This							
ou Owe		For details on how to pay, go to	•	2		• • • • • •	• •	. 37	
	38	Estimated tax penalty (see instru	,			38			
hird	Do yo	u want to allow another person to	discuss t	his return with th	e IRS? See instru	ctions.	es. Co	omplete bel	ow. 🛛 No
arty	Desig	nee's		Phone				entification	
esignee		name no number (PIN)							
		penalties of perjury, I declare that I hav they are true, correct, and complete. D							
ign									, ,
-	Yours	signature		Date	Your occupation				ent you an Identity PIN, enter it here
ere					SOFTWARE			(see inst.)	-in, enter it here
-	Phone	2 00		Email address	201 1 111111				
		rer's name	Preparer	's signature		Date	PTI	N I	Check if:
aid	•		•	e	ידור האדד אוא			082703	Self-employed
reparer		PRIYA RAM SAGAR GUPTA TALLAM		LIA KAM SAGAP	R GUPTA TALLAM	02/13/2024			
	CULLIS	name GLOBAL TAXES I	ЪПС					ne no. (6'	<u>78)965-9522</u>
se Only		address 245 ROONEY C		TINIOUT CT	T 00016		F :	n's EIN 8	4-3171965

SCHEDULE	1
(Form 1040)	

Department of the Treasury

Additional Income and Adjustments to Income

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

Go to www.irs.gov/Form1040 for instructions and the latest information.

OMB No. 1545-0074 2023

Attachment Sequence No. **01** Internal Revenue Service Name(s) shown on Form 1040, 1040-SR, or 1040-NR Your social security number SAI CHARAN DEVALAPALLY 884-15-7953

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. Attach S	chedule E .	5	-8,590.
6	Farm income or (loss). Attach Schedule F		6	
7	Unemployment compensation		7	
8	Other income:			
а	Net operating loss)	
b	Gambling			
С	Cancellation of debt			
d	Foreign earned income exclusion from Form 2555 . . 8d)	
е	Income from Form 8853			
f	Income from Form 8889			
g	Alaska Permanent Fund dividends			
h	Jury duty pay			
i	Prizes and awards			
j	Activity not engaged in for profit income			
k	Stock options			
I	Income from the rental of personal property if you engaged in the rental			
	for profit but were not in the business of renting such property 81			
m	Olympic and Paralympic medals and USOC prize money (see			
	instructions)		- 1	
n	Section 951(a) inclusion (see instructions)			
0	Section 951A(a) inclusion (see instructions) 80		- 1	
р	Section 461(I) excess business loss adjustment		- 1	
q	Taxable distributions from an ABLE account (see instructions) 8q			
r	Scholarship and fellowship grants not reported on Form W-2 8r		- 1	
S	Nontaxable amount of Medicaid waiver payments included on Form			
	1040, line 1a or 1d)	
t	Pension or annuity from a nonqualifed deferred compensation plan or			
	a nongovernmental section 457 plan		- 1	
u	Wages earned while incarcerated 8u		- 1	
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 here 1040, 1040-SR, or 1040-NR, line 8		10	-8,590.
For Pa	perwork Reduction Act Notice, see your tax return instructions.		Schedu	le 1 (Form 1040) 2023

Par	t II Adjustments to Income			
11	Educator expenses		11	
12	Certain business expenses of reservists, performing artists, and fee-basi			
	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			19a	
b	Recipient's SSN			
c	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:		20	
2 a	Jury duty pay (see instructions)			
b	Deductible expenses related to income reported on line 8I from the			
D	rental of personal property engaged in for profit			
-	Nontaxable amount of the value of Olympic and Paralympic medals		-	
С	and USOC prize money reported on line 8m			
h			-	
d			-	
е	Repayment of supplemental unemployment benefits under the Trade			
	Act of 1974		-	
f	Contributions to section 501(c)(18)(D) pension plans		-	
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)		-	
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		-	
j	Housing deduction from Form 2555			
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form			
	1041)			
z	Other adjustments. List type and amount:			
	24z			
25	Total other adjustments. Add lines 24a through 24z		25	
26	Add lines 11 through 23 and 25. These are your adjustments to income. Enter			
	Form 1040, 1040-SR, or 1040-NR, line 10		26	
	BAA REV	02/05/24 PRO	Schedule 1 (F	orm 1040) 202

SCHEDULE NEC (Form 1040-NR)

Department of the Treasury

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

OMB No. 1545-0074

23

Attach to Form 1040-NR.

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

Internal Revenue Service Name shown on Form 1040-NR Your identifying number

2

Attachment

SAI CHARAN DEVALAPALLY

884-15-7953

Enter **amount of income** under the appropriate rate of tax. See instructions.

Nature of Income			(a) 10%	(b) 15%	(a) 2004	(d) Other (specify)			
				(a) 10%	(b) 13%	(c) 30%	%	%	
1	Dividends and divide	nd equivalents:							
а	Dividends paid by U.	S. corporations		1a					
b	Dividends paid by for	reign corporations		1b					
с	Dividend equivalent p	ayments received with respect to section 871(m) tr	ransactions	1c					
2	Interest:								
а	Mortgage			2a					
b	Paid by foreign corpo	prations	[2b					
С	Other		[2c					
3	Industrial royalties (p	atents, trademarks, etc.)	[3					
4	Motion picture or TV	copyright 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	es	[7					
8	Social security benef	its	[8					
9		e 18 below		9					
10	Gambling-Resident	s of Canada only. Enter net income in column (c) r -0).						
а	Winnings								
b	Losses		[10c					
11	Note: Enter winnings	s of countries other than Canada.		11					
12	Other (specify):								
				12					
13	•	12 in columns (a) through (d)		13					
14		ate of tax at top of each column		14					
15	Tax on income not ef	fectively connected with a U.S. trade or busines	s. Add columns	s (a) t	hrough (d) of line 14	 Enter the total here 	and on Form 1040	-NR, line 23a 15	
		Capital Gains and	Losses Fr	om	Sales or Excha	nges of Propert	у	1	
Enter only the capital gains and losses from property sales or exchanges that are from sources 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		16 (a) Kind of property and description (if necessary, attach statement of descriptive details not shown below)	(b) Date acquire 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).
(Form 1	•								
exchan	property sales or nges that are effectively								
	cted with a U.S. business edule D (Form 1040),								
	4797, or both.	18 Capital gain. Combine columns (f) and (g) of line 17.	Ente	r the net gain here	e and on line 9 abo	ove. If a loss, ente	er-0 18	

SCHE	DULE	ΟΙ
(Form	1040-N	IR)

Other Information

Attach to Form 1040-NR.

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

OMB No. 1545-0074 20 Attachment Sequence No. 7C

Department of the Treasury Internal Revenue Service		Go t	Go to www.irs.gov/Form1040NR for instructions and the latest information. Answer all questions.									
Name s	ne shown on Form 1040-NR Your identify						ying number					
SAI	I CHARAN DEVALAPALLY 884-15-							-7953				
Α	Of what country	y or countries v	vere you a citizen or national d	uring the tax	year? INDIA							
в	In what country	intry 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 pern	nanent resider	nt) of the United States? .		. 🗌 Yes	🛛 No				
D	Were you ever:											
1.	A U.S. citizen?						. 🗌 Yes	🗙 No				
2.	A green card he	older (lawful pe	rmanent resident) of the United	d States? .			. 🗌 Yes	🗙 No				
	If you answer "	Yes" to (1) or (2), see Pub. 519, chapter 4, for	expatriation r	ules that apply to you.							
Е	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. $\underline{F1}$											
F	Have you ever changed your visa type (nonimmigrant status) or U.S. immigration status?											
G	List all dates yo	ou entered and	left the United States during 2	023. See instr	uctions.							
Note: If you're a resident of Canada or Mexico AND commute to work in the United States at frequent interval							S,					
	check the box	for Canada or	Mexico and skip to item H .		🗌 Canada	🗌 Canada 🗌 Mexico						
	Date entered United States mm/dd/yy Date departed United States mm/dd/yy Date entered United States mm/dd/yy					es Date d	eparted Unite mm/dd/yy					
]								
]								
н	Give number of	davs (including	vacation, nonworkdays, and pa	rtial davs) vou	were present in the United	States during	n:					

	2021	, 2022	, and 2023	365		
I	Did you file a U.S. income	tax return for any prior year	?		🗙 Yes	🗌 No
	If "Yes," give the latest ye	ar and form number you filed	d:1040NR			
J					 Yes	🗙 No
			nder the grantor trust rules, make a son?		☐ Yes	□ No
к	-		pre during the tax year?			

L	Income Exempt From Tax-If you are claiming exemption from income tax under a U.S. income tax treaty with a foreign country,
	complete (1) through (3) below. See Pub. 901 for more information on tax treaties.

1.	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 claimed in prior tax years	(d) Amount of exempt income in current tax year				
	(e) Total. Enter this amount on Form 1040-NR, line 1k. E	e else on line 1						
2.	Were you subject to tax in a foreign country on any of the	🗌 Yes 🗌 No						
3.	3. Are you claiming treaty benefits pursuant to a Competent Authority determination?							
	If "Yes," attach a copy of the Competent Authority deterr	mination letter to your r	return.					
м	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 with a U.S. trade or business under section 871(d). See instructions							
2.	You have made an election in a previous year that has States as effectively connected with a U.S. trade or busin		•					
For Pa	perwork Reduction Act Notice, see the Instructions for Fo	orm 1040-NR. B	AA REV 02/05/24 PRO	Schedule OI (Form 1040-NR) 2023				

(Form 1040)		(From	rental real estat	te, royalties, partners	hips, S	6 corporati	ions, es	states,	trusts, REMI	Cs, etc.)	90	173
	nent of the Treasury Revenue Service	Attach to Form 1040, 1040-SR, 1040-NR, or 1041. Go to <i>www.irs.gov/ScheduleE</i> for instructions and the latest information.						Attachment Sequence No. 13				
Name(s) shown on return										cial security number		
SAI CHARAN DEVALAPALLY											15-7953	
Part				al Real Estate an	d Ro	valties						
	Note: If yo rental inco	ou are in ome or lo	the business of r oss from Form 48	enting personal proper 1 35 on page 2, line 40.	rty, use	Schedule						
	Did you make any payments in 2023 that would require you to file Form(s) 1099? See instructions . If "Yes," did you or will you file required Form(s) 1099? .											
1a	Physical addr	ress of	each property (street, city, state, ZI	P code	e)						
Α	H.NO.2-2-	25 SA	NDUBAVIBAZ.	AR SURYAPET TE	ELAN	GANA IN	508	213				
В												
С								1				
1b	Type of Prope (from list belov		above, repoi	ital real estate prope rt the number of fair				Fair Rental Days		Personal Use Days		QJV
Α	3			days. Check the Q			Α	365		0		
В				he requirements to f t venture. See instru			В					
С			qualified join			5.	С					
1	of Property: Single Family R Multi-Family Re			tion/Short-Term Ren nercial	tal	5 Land 6 Roya			Self-Rental Other (desc	ribe)		
									Propert	ies:		
Incom	ne:						Α		В			С
3	Rents received	1. L			3		4	50.				
4	Royalties rece	ived.			4							
Exper	ises:											
5	•				5							
6			-		6							
7	•				7		8	20.				
8					8							
9					9							
10	-	-			10							
11					11		1,5	80.				
12		•		. (see instructions)	12							
13					13							
14					14			50.				
15					15		2,2	40.				
16	Taxes				16		0.1	- 0				
17					17		2,4	50.				
18	-	expense	e or depletion .		18							
19	Other (list)			10	19			10				
20	•		•	19	20		9,0	40.				
21		s), see	instructions to f	id/or 4 (royalties). If ind out if you must	21		-8,5	90.				
22				er limitation, if any,	22	(-8,59	90.)	()	()
23a	Total of all am	ounts r	eported on line	3 for all rental prope	rties			23a		450.		
b				4 for all royalty prop				23b				
с				12 for all properties				23c				
d				18 for all properties				23d				
е	Total of all am	ounts r	eported on line	20 for all properties				23e	9	0,040.		
24	Income. Add	positive	e amounts show	n on line 21. Do not	t inclu	de any los	sses			. 24		
25	Losses. Add ro	yalty lo	sses from line 2 ⁻	1 and rental real estate	e losse	es from lin	e 22. E	nter to	tal losses her	re 25	(8,590.)

Supplemental Income and Loss

26 Total rental real estate and royalty income or (loss). Combine lines 24 and 25. Enter the result here. If Parts II, III, and IV, and line 40 on page 2 do not apply to you, also enter this amount on Schedule 1 (Form 1040), line 5. Otherwise, include this amount in the total on line 41 on page 2 .

Schedule E (Form 1040) 2023

-8,590.

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OMB No. 1545-0074

SCHEDULE E

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