IRS e-file Signature Authorization

ERO must obtain and retain completed Form 8879.

Department of the Treasury Internal Revenue Service

▶ Go to www.irs.gov/Form8879 for the latest information.

Submission Identification Number (SID)

Taxpay	ver's name	Social securi	ty numb	ber					
SUS	HANT KUMBHAR	491-83	491-83-3617						
Spouse	s's name	Spouse's so	cial secu	urity number					
Par	t I Tax Return Information – Tax Year Ending December 31, 202	3 (Ente	r year you a	re aut	thorizing.)				
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	37,936.				
2	Total tax			2	2,669.				
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099			3	5,110.				
4	Amount you want refunded to you			4	2,441.				
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.

Taxpaver's PIN: check one box only

×ι	authorize	GLOBAL TAXI	ES LLC	to enter or generate my PIN		<i>r</i>		·.	<u> </u>
			ERO firm name		Enter five digits, but don't enter all zeros				

End littli lidlie										
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

Spouse's PIN: check one box only

I authorize

to enter or generate my PIN

Date

21 feb 2024

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

as my

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 sig	jnature 🕨 🛛 Da	ate 🕨								
Practitioner PIN Method Returns Only—continue below										
Part III	Certification and Authentication – Practitioner PIN Method Only									
ERO's EFIN	/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN.	2	2	2		6 nter a	 	2	7 1	1

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 >				
	ee Instructions as Requested To Do So			
For Depertury Reduction Act Nation and	vour tox roturn instructions		- BEV 03/11/24 BBO	Earm 8879 (Pov. 01 2021)

1040)-	NR Department of the Treasury-Inte U.S. Nonresident AI	rnal Revenu ien Inc	e Service Ome Tax Return	2023	OMB No.	1545-0074	or staple	ly—Do not write in this space.		
For the year Jar	n. 1-	Dec. 31, 2023, or other tax year begin	ning	, 2023,	ending		, 20	See separate instructions.			
Your first name	and	middle initial	Last nar	ne			Your identifying number				
SUSHANT			KUMBH	KUMBHAR(see instructions)KUMBHAR491-83-3617							
Home address	(nur	nber and street). If you have a P.O. box	k, see instr	ructions.					Apt. no.		
		ND. PLACE BLDG							5105		
City, town, or p	ost	office. If you have a foreign address, a	so comple	ete spaces below.		State		ZIP code	Э		
LAKEWOOD						со		80228			
Foreign country	/ na	ne	Foreign	province/state/county		Foreig	n postal c	ode			
Filing Status Check only one box.	-	f you checked the QSS box, enter the	I filing separately (MFS) Qualifying surviving spouse (QSS) enter the child's name if the qualifying person is a child but not your depen						Trust		
Digital Assets	At ot	any time during 2023, did you: (a) rece nerwise dispose of a digital asset (or a	ive (as a re financial ir	eward, award, or payme nterest in a digital asset	ent for property or ? (See instructions)	services) s.)	; or (b) sell	exchange	e, or es 🛛 No		
Dependents	;					(4)	Check the be	ox if qualifie	s for (see inst.):		
(see instructions):	:	(1) First name Last name		(2) Dependent's identifying number	(3) Relationship to		Child tax cre		edit for other ependents		
				,	(•) • • • • • • • • • • • • •	<u>, , , , , , , , , , , , , , , , , , , </u>					
If more than four											
dependents, see instructions and									\square		
check here									\square		
Income	1a	Total amount from Form(s) W-2, bo	x 1 (see in:	structions)			. 1a	a	43,496.		
Effectively	b		•	,							
Connected	c							;			
With U.S.	c	Medicaid waiver payments not repo	orted on Fo	orm(s) W-2 (see instruct	ions)		. 10	ł			
Trade or	e	Taxable dependent care benefits fro	om Form 2	2441, line 26			. 10	•			
Business	f	Employer-provided adoption benefi	ts from Fo	orm 8839, line 29 .			. 11	F			
Attach	ç	Wages from Form 8919, line 6					. 10	3			
Form(s) W-2,	h						. 11	ו			
1042-S,	i	Reserved for future use			1 i			_			
SSA-1042-S, RRB-1042-S.	j	Reserved for future use			1 1		. 1	i			
and 8288-A	k	Total income exempt by a treaty fro									
here. Also		line 1(e)							12 100		
attach Form(s)	z	Ŭ I	1						43,496.		
1099-R if	2a	· ·			able interest			-			
tax was withheld.	3a 4a		a a		inary dividends . able amount .			-			
If you did not	4a 5a		a		able amount			-			
get a Form	6	Reserved for future use									
W-2, see	7	Capital gain or (loss). Attach Sched						_			
instructions.	8	Additional income from Schedule 1	•	, ,	•				-5,560.		
	9	Add lines 1z, 2b, 3b, 4b, 5b, 7, and						-	37,936.		
	10	Adjustments to income from Sched	-								
		-	•	· · · · · · · · ·	•	-		b			
	11	Subtract line 10 from line 9. This is						1	37,936.		
	12	Itemized deductions (from Sched									
		deduction (see instructions)						2	13,850.		
	13a	Qualified business income deduction	n from Fo	rm 8995 or Form 8995-	A. 13a						
	b										
	c	Add lines 13a and 13b					. 13				
	14								13,850.		
	15	Subtract line 14 from line 11. If zero					. 1		24,086.		

For Disclosure, Privacy Act, and Paperwork Reduction Act Notice, see separate instructions.

Form 1040-NR (2	2023)					Page 2
Fax and	16	Tax (see instructions). Check if any from Form(s	s): 1 🗌 8814 2 🗌	4972 3	1	6 2,669.
Credits	17	Amount from Schedule 2 (Form 1040), line 3 .			1	0.
	18	Add lines 16 and 17			1	8 2,669.
	19	Child tax credit or credit for other dependents	s from Schedule 8812 (Fori	m 1040)	1	9
	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 zero or less, en				2,669.
	23a	Tax on income not effectively connected with				,
		Schedule NEC (Form 1040-NR), line 15				
	b	Other taxes, including self-employment tax, fi				
	~	line 21				
	с	Transportation tax (see instructions)				
	d	Add lines 23a through 23c			2	3d
	24	Add lines 22 and 23d. This is your total tax .				2,669.
ayments	25	Federal income tax withheld from:			2	2,005.
ayments	25 a	Form(s) W-2		. 25a	5 1 1 0	
	a b	Form(s) 1099			5,110.	
		Other forms (see instructions)				
	C L	()				5 110
	d	Add lines 25a through 25c				5d 5,110.
	e	Form(s) 8805				5e
	f	Form(s) 8288-A				5f
	g	Form(s) 1042-S				5g
	26	2023 estimated tax payments and amount ap			2	26
	27	Reserved for future use				
	28	Additional child tax credit from Schedule 8812	, ,			
	29	Credit for amount paid with Form 1040-C .				
	30	Reserved for future use				
	31	Amount from Schedule 3 (Form 1040), line 15				
	32	Add lines 28, 29, and 31. These are your total				32
	33	Add lines 25d, 25e, 25f, 25g, 26, and 32. Thes				3 5,110.
efund	34	If line 33 is more than line 24, subtract line 24		-		2,441.
	35a	Amount of line 34 you want refunded to you .				5a 2,441.
ect deposit?	b	Routing number 1 0 2 0 0 0 0			Savings	
e instructions.	d	Account number 6 5 8 3 8 5 3				
	е	If you want your refund check mailed to an ac	ddress outside the United	States not shown or	page 1,	
		enter it here.				
	36	Amount of line 34 you want applied to your 2	2024 estimated tax .	. 36		
mount	37	Subtract line 33 from line 24. This is the amount	•			
ou Owe		For details on how to pay, go to www.irs.gov/	Payments or see instruction	ons	3	37
	38	Estimated tax penalty (see instructions)		. 38		
hird	Do yo	a want to allow another person to discuss this	return with the IRS? See in	nstructions.	es. Complete	below. 🛛 No
arty	Desig	lee's	Phone	Perso	nal identificat	ion
esignee	name				er (PIN)	
		penalties of perjury, I declare that I have examined th				
ian	belief,	hey are true, correct, and complete. Declaration of pl				, ,
ign	Your signature Date Your occupation					S sent you an Identity
ere			ion PIN, enter it here			
-			CHEF		(see ins	τ.)
	Phone		mail address	Data	PTIN	Ohanda "
	riepa	er's name Preparer's s	0	Date		Check if:
aid		PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA	A RAM SAGAR GUPTA TAL	LAM 02/21/2024	P0208270) 3 Self-employed
aid reparer se Only	Firm's	1			Phone no. Firm's EIN	(678)965-9522 84-3171965

SCHEDULE	1
(Form 1040)	

Department of the Treasury

Internal Revenue Service

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** Name(s) shown on Form 1040, 1040-SR, or 1040-NR Your social security number 491-83-3617

SUSF	IANT KUMBHAR		491-83	3-361	7
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. Att			5	-5,560.
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			
ĥ	Jury duty pay	8h			
i	Prizes and awards	8i			
i	Activity not engaged in for profit income	8j			
k		8k			
1	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	r here and o	on Form		
	1040, 1040-SR, or 1040-NR, line 8			10	-5,560.
For Pa	perwork Reduction Act Notice, see your tax return instructions.		S	chedule 1	l (Form 1040) 2023

Par	Adjustments to Income				
11	Educator expenses			. 11	
12	Certain business expenses of reservists, performing artists, and fee-officials. Attach Form 2106	basis	governmei	nt	
13	Health savings account deduction. Attach Form 8889			13	
14	Moving expenses for members of the Armed Forces. Attach Form 3903				
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				
c	Date of original divorce or separation agreement (see instructions):				
20	IRA deduction				1
21	Student loan interest deduction				
22	Reserved for future use				
23	Archer MSA deduction			. 23	
24	Other adjustments:				
a		24a			
b	Deductible expenses related to income reported on line 8I from the				
		24b			
с	Nontaxable amount of the value of Olympic and Paralympic medals				
		24c			
d	Reforestation amortization and expenses	24d			
е	Repayment of supplemental unemployment benefits under the Trade				
		24e			
f		24f			
g		24g			
ĥ	Attorney fees and court costs for actions involving certain unlawful				
		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.			n	
	Form 1040, 1040-SR, or 1040-NR, line 10		<u></u>	. 26	
	BAA	REV 02	/11/24 PRO	Sched	ule 1 (Form 1040) 202

SCHEDULE NEC
(Form 1040-NR)

Department of the Treasury

Internal Revenue Service

(Form 1040).

or loss on disposing of a U.S. real property interest; report these gains and losses on Schedule D

Report property sales or exchanges that are effectively connected with a U.S. business

Form 4797, or both.

on Schedule D (Form 1040),

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

OMB No. 1545-0074

Attach to Form 1040-NR.

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

Name shown on Form 1040-NR

6 23 74 Attachment Sequence No. 7B

Your identifying number

401 02 2017

SUSHANT KIIMDUAD Er

SUS	HAN'I KUMBHAR								491-83-36) _ /
Enter a	amount of income und	ler the a	appropriate rate of tax. See instructions.							
			Nature of Income			(a) 10%	(b) 15%	(c) 30%	. ,	r (specify)
					-				%	%
1	Dividends and divide									
a			porations		1a				ļ!	
b		•	corporations		1b				ļ!	
c		baymer	nts received with respect to section 871(m) trai	nsactions	1c				ļ!	
2	Interest:									
а					2a					
b			18		2b					
С					2c					
3			s, trademarks, etc.)		3					
4			ight royalties		4					
5			, recording, publishing, etc.)		5					
6			natural resources royalties		6					
7					7					
8	-				8					
9	Capital gain from line	e 18 b	elow		9					
10	Gambling-Resident If zero or less, ente	ts of C • r -0- .	anada only. Enter net income in column (c).							
а	Winnings									
b	Losses				10c					
11	Gambling-Resident	ts of co	ountries other than Canada. Losses aren't allowed		11					
12										
					12					
13			columns (a) through (d)		13					
14	Multiply line 13 by r	rate of	tax at top of each column		14					
15	Tax on income not e	ffectiv	ely connected with a U.S. trade or business.	Add colum	nns (a) t	hrough (d) of line 14	. Enter the total here	e and on Form 1040	-NR, line 23a 15	
			Capital Gains and	Losses F	rom	Sales or Excha	nges of Proper	ty		
Enter only the capital gains and losses from property sales or exchanges that are from sources within the United States and not (b) Date acq mm/dd/yy			(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.									
- NUSHIES									· · · · · · · · · · · · · · · · · · ·	

17 Add columns (f) and (g) of line 16

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

. .

17 (

SCHEDULE OI (Form 1040-NR)

Department of the Treasury

Other Information

Attach to Form 1040-NR.

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

2 Attachment

OMB No. 1545-0074

Answer	all	questions.	
Allower	an	questions.	

Internal	Revenue Service		Ans	wer all questions.			Sequence N	o. 7C
Name s	hown on Form 104	0-NR				Your identifyin	g number	
SUSF	HANT KUMBHA	AR				491-83-3	3617	
Α	Of what count	ry or countries w	vere you a citizen or nation	al during the tax year?	INDIA			
в	In what countr	y did you claim	residence for tax purpose	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	:						
1.	A U.S. citizen?						Yes	🔀 No
2.	A green card h	older (lawful pei	rmanent resident) of the Ur	nited States?			Yes	🗙 No
	-), see Pub. 519, chapter 4,	-				
E			day of the tax year, enter day of the tax year. <u>J1</u>		didn't have a visa, ent	-		
F			isa type (nonimmigrant sta e the date and nature of th	a abanasa	n status?			🗙 No
G	List all dates y	ou entered and	left the United States durin					
			anada or Mexico AND cor			ent intervals,		
	check the box	k for Canada or	Mexico and skip to item I	<u>+.</u> <u>.</u>	🗌 Canada	Mexico		
		United States	Date departed United Stat	es Da	te entered United States	Date dep	parted Unite	d States
	mm/	/dd/yy	mm/dd/yy		mm/dd/yy		mm/dd/yy	
		<u>, , , , , , , , , , , , , , , , , , , </u>						
н	2021		vacation, nonworkdays, and	, and 202	23 365	· · ·		🛛 No
I	Did you file a U.S. income tax return for any prior year? If "Yes," give the latest year and form number you filed: If "Yes," give the latest year and form number you filed: If "Yes," give the latest year and form number you filed:							
J	Are you filing a return for a trust?							
κ	Did you receiv	e total compens	ation of \$250,000 or more	during the tax year? .			Yes	🛛 No
	If "Yes," did yo	ou use an alterna	ative method to determine	the source of this com	pensation?		🗌 Yes	🗌 No
L	Income Exempt From Tax—If you are claiming exemption from income tax under a U.S. income tax treaty with a complete (1) through (3) below. See Pub. 901 for more information on tax treaties.							
1.			the applicable tax treaty an e columns below. Attach Fo			claimed the t	reaty benefi	t, and the
	(a) Country			(b) Tax treaty article	income in current tax year			
						_		
						_		
	(a) Total Eat	vr this amount of	Earm 10/0_NP line 11) o not optor it opwyber	l oleo on line 1			
2.	(e) Total. Enter this amount on Form 1040-NR, line 1k. Do not enter it anywhere else on line 1							
	Are you claiming treaty benefits pursuant to a Competent Authority determination?							No ⊠ No
	If "Yes," attach a copy of the Competent Authority determination letter to your return. Check the applicable box if:							<u> </u>
М 1.	This is the first	year you are m	aking an election to treat ir Inder section 871(d). See ir		-	d States as e	effectively c	onnected
2.	You have mad	le an election ir	n a previous year that has d with a U.S. trade or busir	not been revoked, to				∟ ıe United □

BAA

For Paperwork Reduction Act Notice, see the Instructions for Form 1040-NR.

SCHEDULE	Е
(Form 1040)	

Supplemental Income and Loss

OMB No. 1545-0074

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

Department of the Treasury

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

2023
Attachment

nternal F	Revenue Service	Go to www	.irs.gov/ScheduleE fo	or instru	ctions a	nd the la	test inf	ormation.		Sequen	ce No. 13
Name(s)	shown on return								Your soci	ial security	number
SUSH	ANT KUMBHAR								491-8	3-3617	
Part	I Income o	^r Loss From Ren	tal Real Estate ar	nd Roy	alties				•		
	Note: If you	are in the business of	renting personal prope 335 on page 2, line 40.	rty, use	Schedul	e C. See	instruc	tions. If you	are an indi	vidual, rep	ort farm
A D			at would require you		Form(o)	10002 6	oo ino	ructions			
			d Form(s) 1099? .				• •			16	
1a			street, city, state, ZI		,						
Α	PLOT NO 32/	1. VAISHALI A	PARTEMENT, SH	IRDHA	R NAG	AR, CI	HINCH	WAD, PU	NE IN	411033	
В											
С											
1b	Type of Property		ntal real estate prope				Fai	r Rental	Persor	nal Use	QJV
	(from list below)		rt the number of fair					Days	Da	ays	QUV
Α	3		e days. Check the Q the requirements to			Α		365		0	
В			nt venture. See instru			В					
С		quainou jon				С					
ype o	of Property:										
1 5	Single Family Res	dence 3 Vaca	tion/Short-Term Rer	ntal	5 Lan	d		Self-Rental			
2 N	Multi-Family Resid	lence 4 Com	mercial		6 Roy	alties	8	Other (desc	ribe)		
								Propert			
ncom	e'					Α		B			С
				3			30.				•
		d		4							
xpen											
-				5							
	•	see instructions)		6							
	•	intenance		7		6	50.				
				8		0	50.				
				9							
		professional fees		10							
	-	S		11		a	50.				
12	•	t paid to banks, etc		12			50.				
				13							
				14		1.2	50.				
	-			15		1,4					
				16			/ 0 .				
				17		1,6	70				
18		ense or depletion		18		1,0	10.				
	Other (list)			19							
	· · ·	Add lines 5 through	19	20		5,9	90				
	•	•	nd/or 4 (royalties). If	20		5,5	50.				
			find out if you must								
				21		-5,5	60.				
			er limitation, if any,								
22		e instructions) .		22	(-5,56)	(
23a	-	-	3 for all rental prope		\		23a		430.	\ 	
		-	4 for all royalty prop			•	23b		100.		
			12 for all properties				23c				
			18 for all properties				23d				
			20 for all properties				23u	I	5,990.		
			vn on line 21. Do no				200		. 24		
			1 and rental real estat		-		 nter tot	 al losses he		(5,560.
-0	-	-	v income or (loss).							\	5,500.

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 .

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-5,560.