Internal Revenue Service

## **IRS e-file Signature Authorization**

OMB No. 1545-0074

Social coourity number

ERO must obtain and retain completed Form 8879. ▶ Go to www.irs.gov/Form8879 for the latest information.

Submission Identification Number (SID)

Taypayar'a nama

талрау		Social Secul	inty mumi			
BAD	RI NARAYANAN NARASIMHAN	347-37-2339				
Spouse	's name	Spouse's social security number				
Part	Tax Return Information – Tax Year Ending December 31, 2023 (Ente	r year you	are au	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	53 <b>,</b> 653.		
2	Total tax		2	4,559.		
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3	8,630.		
4	Amount you want refunded to you		4	4,071.		
5	Amount you owe		5			

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

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

				FBO firm name		E	r
<u>~</u>	rauthorize	GLODAL	IAVEO		to enter or generate my PIN	_	
$\mathbf{v}$	l authorize	CTODAT		TTC	to optok ok gonokoto pov DIN	1	/

	7	2	3	3	9	as				
Enter five digits, but don't enter all zeros										

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					 			
Practitioner PIN Method Returns Only—continu	e bel	ow							
Part III Certification and Authentication – Practitioner PIN Method Only									
<b>ERO's EFIN/PIN.</b> Enter your six-digit EFIN followed by your five-digit self-selected PIN.	2	2	2		6 nter a		2	7 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 ► Date ►								
ERO Must F Don't Submit This F								
For Paperwork Reduction Act Notice, see your tax retur	n instructions. RAA	REV 03/04/24 PRO	Form <b>8879</b> (Rev. 01-2021)					

<b>1040</b>	-	IR Department of the Treasury-Intern U.S. Nonresident Ali	nal Reven <b>en In</b>	nue Service Come Tax R	eturn	2023	OMB No. 1	545-0074		Only—Do not wr le in this space.	
For the year Jan	. 1–C	Dec. 31, 2023, or other tax year beginn	ing		2023, ei	nding		20		e separate	
Your first name			Last name Yo					Your i	instructions.   Your identifying number   (see instructions)		
BADRI NAR	AYA	NAN	NARA	SIMHAN				347	-37-2	339	
Home address (	numl	per and street). If you have a P.O. box	, see ins	tructions.						Apt. no.	_
805 13TH	ST									703	
City, town, or po	ost o	ffice. If you have a foreign address, als	so comp	lete spaces below	v.		State		ZIP co	de	_
SAN DIEGO							CA		9210	1	
Foreign country	nam	e	Foreigr	n province/state/c	ounty		Foreign	postal co	ode		
Filing Status Check only one box.		Single Darried filing separation of the Separation Separation of the Separation of the Separation Separation of the Separation Separation of the Separation Sepa				surviving spouse		Esendent:	state	Trust	
Digital Assets	At a othe	ny time during 2023, did you: (a) recei erwise dispose of a digital asset (or a f									0
Dependents							<b>(4)</b> Cł	eck the bo		es for (see inst	
(see instructions):		(1) First name Last name		(2) Dependen identifying num		(3) Relationship to	you Ch	ild tax cree		redit for other dependents	
							-				_
If more than four dependents, see											_
instructions and											
check here											
Income	1a	Total amount from Form(s) W-2, box	•	,						60,559	•
Effectively	b	Household employee wages not rep							-		
Connected With U.S.	c d	Tip income not reported on line 1a (s Medicaid waiver payments not report									—
Trade or	e	Taxable dependent care benefits fro						. 16			—
Business	f	Employer-provided adoption benefit									_
	g	Wages from Form 8919, line 6							J		_
Attach Form(s) W-2,	h	Other earned income (see instruction	ıs) .			<u>.</u>		. 11	۱ 📃		_
1042-S,	i	Reserved for future use				. <b>1</b> i					
SSA-1042-S, RRB-1042-S,	j	Reserved for future use				1 1		. <b>1</b> j			
and 8288-A	k										
here. Also attach	-	line 1(e)						- 1-		60 550	
Form(s)	z 2a	Add lines 1a through 1h	1	· · · · .		ble interest				60,559	÷
1099-R if tax was	3a	Qualified dividends 3a	-			ary dividends .					—
withheld.	4a	IRA distributions 4a	-			ble amount					
lf you did not	5a	Pensions and annuities 5a				ble amount			)		_
get a Form W-2, see	6	Reserved for future use									
instructions.	7	Capital gain or (loss). Attach Schedu	•	, ,							
	8	Additional income from Schedule 1 (								-6,906	_
	9	Add lines 1z, 2b, 3b, 4b, 5b, 7, and 8		-						53,653	•
	10	Adjustments to income from Schedu	• •					. 10	)		
	11	Subtract line 10 from line 9. This is y								53,653	•
	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									13,850	
	15	Subtract line 14 from line 11. If zero						. 15		39,803	
For Disclosure,	Priva	cy Act, and Paperwork Reduction Act	Notice,	see separate inst	ructions.				Form <b>10</b>	<b>)40-NR</b> (202	23)

Form 1040-NR (2	2023)		Page <b>2</b>
Tax and	16	Tax (see instructions). Check if any from Form(s): 1 🗌 8814 2 🗌 4972 3 🗌	<b>16</b> 4,559.
Credits	17	Amount from Schedule 2 (Form 1040), line 3	17 0.
	18	Add lines 16 and 17	<b>18</b> 4,559.
	19	Child tax credit or credit for other dependents from Schedule 8812 (Form 1040)	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 zero or less, enter -0	<b>22</b> 4,559.
	23a	Tax on income not effectively connected with a U.S. trade or business from     Schedule NEC (Form 1040-NR), line 15	
	b	Other taxes, including self-employment tax, from Schedule 2 (Form 1040),	
	-	line 21   . </th <th></th>	
	C d		004
	d	Add lines 23a through 23c	23d
<b>—</b>	24	Add lines 22 and 23d. This is your <b>total tax</b>	<b>24</b> 4,559.
Payments	25	Federal income tax withheld from:	
	a	Form(s) W-2	-
	b	Form(s) 1099     25b       Other forms (contraction)     25.	-
	C	Other forms (see instructions)     .     .     .     .     25c	0.00
	d	Add lines 25a through 25c	<b>25d</b> 8,630.
	e	Form(s) 8805	25e
	f	Form(s) 8288-A	25f
	g	Form(s) 1042-S	25g
	26	2023 estimated tax payments and amount applied from 2022 return	26
	27	Reserved for future use        27	
	28	Additional child tax credit from Schedule 8812 (Form 1040)	
	29	Credit for amount paid with Form 1040-C	
	30	Reserved for future use     30       30     31	
	31	Amount from Schedule 3 (Form 1040), line 15	
	32	Add lines 28, 29, and 31. These are your <b>total other payments and refundable credits</b>	32
<u> </u>	33	Add lines 25d, 25e, 25f, 25g, 26, and 32. These are your <b>total payments</b>	<b>33</b> 8,630.
Refund	34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you <b>overpaid</b>	<b>34</b> 4,071.
D' I I '10	35a	Amount of line 34 you want <b>refunded to you</b> . If Form 8888 is attached, check here	<b>35a</b> 4,071.
Direct deposit? See instructions.	b		
	d	Account number 8 6 0 9 8 2 6 5 8	
	е	If you want your refund check mailed to an address outside the United States not shown on page 1, enter it here.	
	36	Amount of line 34 you want applied to your 2024 estimated tax 36	
Amount	37	Subtract line 33 from line 24. This is the <b>amount you owe</b> .	
You Owe		For details on how to pay, go to www.irs.gov/Payments or see instructions	37
	38	Estimated tax penalty (see instructions)	
Third	Do yo	bu want to allow another person to discuss this return with the IRS? See instructions.	ete below. 🛛 No
Party Designee	Desig name		cation
		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. Declaration of preparer (other than taxpayer) is based on all information of which I	
Sign	Your	signature Date Your occupation If the	e IRS sent you an Identity
Here			ection PIN, enter it here
		POSTDOCTORAL FELLOW (see	inst.)
	Phon		
Paid	Prepa	arer's name Preparer's signature Date PTIN	Check if:
Preparer	SYAN	4 PRIYA RAM SAGAR GUPTA   SYAM PRIYA RAM SAGAR GUPTA   03/18/2024   P02082	
Use Only		s name GLOBAL TAXES LLC Phone no	
	Firm's	s address 245 ROONEY CT E BRUNSWICK NJ 08816 Firm's El	
Go to www.irs.g	gov/Foi	rm1040NR for instructions and the latest information. BAA REV 03/04/24 PRO	Form <b>1040-NR</b> (2023)

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 BADRI NARAYANAN NARASIMHAN 347-37-2339

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	chedule E .	5	-6,906.	
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	<b>8</b> i			
j	Activity not engaged in for profit income	8j			
k	Stock options	8k			
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)	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	0-	(		
	1040, line 1a or 1d	8s	(	4	
τ	Pension or annuity from a nonqualifed deferred compensation plan or	01			
	a nongovernmental section 457 plan	8t		_	
u _	Wages earned while incarcerated	<u>8</u> u		_	
z	Other income. List type and amount:	8z			
9	Total other income. Add lines 8a through 8z			9	
9 10	Combine lines 1 through 7 and 9. This is your <b>additional income</b> . Ente	r hora	and on Form	3	
	1040, 1040-SR, or 1040-NR, line 8			10	-6,906.
For Pa	perwork Reduction Act Notice, see your tax return instructions.			Schedu	le 1 (Form 1040) 2023

1	Educator expenses		 	11	
2	Certain business expenses of reservists, performing artists, and fee		nment		
-	officials. Attach Form 2106		 	12	
3	Health savings account deduction. Attach Form 8889		 	13	
4	Moving expenses for members of the Armed Forces. Attach Form 3903			14	
5	Deductible part of self-employment tax. Attach Schedule SE			15	
6	Self-employed SEP, SIMPLE, and qualified plans			16	
17	Self-employed health insurance deduction			17	
8	Penalty on early withdrawal of savings			18	
19a	Alimony paid			19a	
b	Recipient's SSN			Tou	
c	Date of original divorce or separation agreement (see instructions):	•			
20				20	
21	Student loan interest deduction			20	
22	Reserved for future use			22	
23	Archer MSA deduction			23	
24	Other adjustments:	· · ·	 • •	23	
<u>а</u>		24a			
a b	Deductible expenses related to income reported on line 81 from the	24a		-	
D		24b			
•	Nontaxable amount of the value of Olympic and Paralympic medals	240		-	
С	and USOC prize money reported on line 8m	24c			
А	Reforestation amortization and expenses	240 24d		-	
d	Repayment of supplemental unemployment benefits under the Trade	24u		-	
е		24e			
	Act of 1974	24e 24f		-	
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)	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				
	1041)	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	<u> </u>	 	26	

### SCHEDULE NEC (Form 1040-NR)

Department of the Treasury

Internal Revenue Service

# 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.

Name shown on Form 1040-NR

Your identifying number

2

Attachment

347-37-2339

BADRI NARAYANAN NARASIMHAN

Enter	amount of income und	er the appropriate rate of tax. See instructions.						_	
		Nature of Income			<b>(a)</b> 10%	<b>(b)</b> 15%	<b>(c)</b> 30%	(d) Other	r (specify)
					(4) 1070	(6) 1070	(0) 00 / 0	%	%
1	Dividends and divide	•							
а	Dividends paid by U.			1a					
b	Dividends paid by fo	reign corporations	· ·	1b					
С	Dividend equivalent p	payments received with respect to section 871(m) transaction	ctions	1c					
2	Interest:								
а	Mortgage			2a					
b	Paid by foreign corpo	orations		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	ies		7					
8	Social security benef	fits		8					
9	Capital gain from line	e 18 below		9					
10	Gambling-Resident	ts of Canada only. Enter net income in column (c).							
а	Winnings								
b			· · [	10c					
11	Gambling-Resident	ts of countries other than Canada. s only. Losses aren't allowed		11					
12	Other (specify):		· ·  -						
12				12					
13		1 12 in columns (a) through (d)		13					
	•			14					
14		ate of tax at top of each column . ffectively connected with a U.S. trade or business. Add			wayab (d) af lina 1	4. Enter the total bars	and an Farm 104	D-NR, line 23a <b>15</b>	
15	Tax on income not e	Capital Gains and Los							
	nly the conital acine and		336311				У	(0) 000	( )
losses t exchan	nly the capital gains and from property sales or ges that are from sources the United States and not		Date acquir nm/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).
effectiv	vely connected with a U.S. ss. Do not include a gain								
or loss	on disposing of a U.S. real								
	ty interest; report these nd losses on Schedule D								
(Form 1	1040).								
Report	property sales or ges that are effectively								
connec	ted with a U.S. business	17 Add columns (f) and (g) of line 16					17	( )	
	edule D (Form 1040), I797, or both.	18 Capital gain. Combine columns (f) and (g) of	f line 17.	Enter	the net gain her	re and on line 9 abo			

SCHE	DULE	0
(Form	1040-1	NR)

### **Other Information**

Attach to Form 1040-NR.

OMB No. 1545-0074

	nent of the Treasury Revenue Service	Got	Attachment Sequence N								
Name shown on Form 1040-NR							Your identifying number				
BADF	RI NARAYANA	N NARASIM	HAN			347-37-2	2339				
Α	Of what country or countries were you a citizen or national during the tax year? INDIA										
В	In what country										
С	Have you ever a	🗌 Yes	🗙 No								
D	Were you ever:										
	A U.S. citizen?	∐ Yes ∏ Yes	⊠ No ⊠ No								
2.	- · · · · · · · · · · · · · · · · · · ·										
_	If you answer "Yes" to (1) or (2), see Pub. 519, chapter 4, for expatriation rules that apply to you.										
E	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. J1 Have you ever changed your visa type (nonimmigrant status) or U.S. immigration status?										
F	Have you ever (		🗌 Yes	🗙 No							
G	List all dates vo	u optorod and	te the date and nature of the left the United States during	a 2022 Soo instructio							
u			Canada or Mexico AND con	•		ent intervals					
			r Mexico and skip to item F			Mexico					
	Date entered mm/c	United States	Date departed United State mm/dd/yy		ate entered United State mm/dd/yy		parted Unite mm/dd/yy	d States			
		, , , , , , , , , , , , , , , , , , ,			iiiii) dd/yy		iiiii/aa/yy				
н			vacation, nonworkdays, and								
	2021		, 2022	, and 20	<b>)23</b> 365	··		_			
I			return for any prior year? . nd form number you filed:				⊠ Yes	∐ No			
J	Are you filing a	return for a tru	st?				Yes	🗙 No			
			U.S. or foreign owner unde								
	U.S. person, or	receive a cont	ribution from a U.S. person	?			Yes	🗌 No			
Κ	Did you receive total compensation of \$250,000 or more during the tax year?							🛛 No			
			ative method to determine t		•		Ves	No			
L			f you are claiming exempti v. See Pub. 901 for more inf			tax treaty wit	th a foreigr	n country,			
1.			the applicable tax treaty art			claimed the t	reaty benef	it, 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 month claimed in prior tax ye		mount of ex in current t				
	(e) Total. Enter	this amount o	on Form 1040-NR, line 1k. D	o not enter it anywhe	re else on line 1						
2.			preign country on any of the				2 Yes	No			
			ts pursuant to a Competent				Yes	🔀 No			

3.	Are you claiming treaty benefits pursuant to a Competent Authority determination?	Yes
	If "Yes," attach a copy of the Competent Authority determination letter to your return.	
-		

#### M 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

BAA

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

REV 03/04/24 PRO Schedule OI (Form 1040-NR) 2023

	EDULE E Supplemental Income and Loss						OMB N	OMB No. 1545-0074				
(Form	rm 1040) (From rental real estate, royalties, partnerships, S corporations, estates, trusts, REMICs, etc.)								20	23		
	Department of the Treasury Attach to Form 1040, 1040-SR, 1040-NR, or 1041.								Attachr	nent 12		
	Internal Revenue Service Go to www.irs.gov/ScheduleE for instructions and the latest information.       Name(s) shown on return     Your social										ice No. 13	
.,	I NARAYANA	N NAT	RASTMHAN								7–2339	
Part				ntal Real Estate an		valties				547 5	1 2333	
- are	Note: If you are in the business of renting personal property, use Schedule C. See instructions. If you are an individual, report farm											
				<b>4835</b> on page 2, line 40.					:			
A D B II	Jid you make ar f "Yoo " did you	iy payn	nents in 2023 i	that would require you	to file	Form(s) 1	0997 S	ee ins	tructions .		. ∐ ¥€	
				red Form(s) 1099?							. 🗆 16	
1a	,		,	/ (street, city, state, Zll		,						
	17/5, 9/6	EASI	F DABIR ST	REE KUMBAKONAM	THAN	IJAVUR,	TAM:	ILNAI	DU IN 612	2001		
B												
<u>C</u>			Cowershaw	antal vaal aatata wuxuu		ha d		E al	w Dowtol	Davaav		
1b	Type of Prope (from list below		2 For each reach reacher	ental real estate prope ort the number of fair	rental	listed			ir Rental Days	Personal Use Days		QJV
Α	3	,	personal u	se days. Check the Q	JV bo>	only [	Α		365		0	
В				t the requirements to			B					
С			qualified jo	pint venture. See instru	lotions	S	С					
Туре	of Property:					· · · · ·						•
	Single Family R			ation/Short-Term Ren	ntal	5 Land			Self-Rental			
2	Multi-Family Re	sidenc	ce 4 Cor	nmercial		6 Roya	lties	8	Other (desc	ribe)		
									Properti	es:		
Incom	ne:						Α	В				С
3					3		6	35.				
4		ived .			4							
Expen					_							
5	-				5							
6		-			6		1 г	~ 1				
7	•				7		1,5	24.				
8 9					9							
10					10							
11	•				11		7	41.				
12	-			tc. (see instructions)	12							
13	00	•			13							
14	Repairs				14		1,9	28.				
15	Supplies				15		2,3	24.				
16	Taxes	16										
17	Utilities	17		1,0	24.							
18		xpense	e or depletion		18							
19	Other (list)				19			4.1				
20			0	h 19	20		7,5	41.				
21			( )	and/or 4 (royalties). If o find out if you must								
					21		-6,9	06.				
22	Deductible rer	ital rea	al estate loss a	after limitation, if any,								
					22	(	-6,90	6.)(		)	(	
23a				e 3 for all rental prope				23a		635.		
b												
c												
d												
е 24				ie 20 for all properties own on line 21. <b>Do no</b>		 de anv los		23e		,541. . <b>24</b>		
24 25	-			21 and rental real estat		-		 hter tot	· · · · ·		(	6,906.
26				Ity income or (loss).							\	0,000.
				e 40 on page 2 do no								

Schor

26

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-6,906.

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