Form <b>8879</b>
(Rev. January 2021)
Department of the Treesury

### 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)

Taxpay	er's name	Social security nu	Imber
VIN	AY KUMAR KARUTURI	668-15-00	061
Spouse	s's name	Spouse's social s	ecurity number
Par	t I Tax Return Information – Tax Year Ending December 31, 2023 (Enter	year you are a	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	86,747.
2	Total tax	2	11,340.
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099	3	14,189.
4	Amount you want refunded to you	4	2,849.
5	Amount you owe	5	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 authorize	GLOBAL	TAXES	LLC	to enter or generate my PIN	Ľ
				ERO firm name		5

5	0	0	6	1	
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 🕨
Practitioner PIN Me	thod Returns Only—continue below
Part III Certification and Authentication – Pra	ctitioner PIN Method Only
ERO's EFIN/PIN. Enter your six-digit EFIN followed by yo	ur five-digit 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 >			
ERO Must Re Don't Submit This For	tain This Form — See rm to the IRS Unless		
For Paperwork Reduction Act Notice, see your tax return in	nstructions. PAA	REV 03/07/24 PRO	Form <b>8879</b> (Rev. 01-2021)

For Paperwork Reduction Act Notice, see your tax return instructions. BAA

<b>1040</b>	)-	NR Department of the Treasury-Inte U.S. Nonresident AI		x Return	2023	OMB No.	. 1545-0074	or sta	Only—Do not write ple in this space.	
For the year Jar	ı. 1-	Dec. 31, 2023, or other tax year begini	ning	ng, 2023, ending, 20 _		, 20		ee separate		
Your first name							Your identifying number			
							(see in	(see instructions)		
VINAY KUM	IAR		KARUTURI				668	-15-0	061	
Home address (	(nun	ber and street). If you have a P.O. box	k, see instructions.						Apt. no.	
6722 DESE									234	
	ost	office. If you have a foreign address, al	so complete spaces b	pelow.		State		ZIP co		
IRVING				- 1 - / 1		TX		750	39	
Foreign country	nar	16	Foreign province/sta	ate/county		Foreig	gn postal c	bae		
	1									
Filing Status		Single 🛛 Married filing sep	arately (MFS)	Qualifying	g surviving spous	e (QSS)	🗌 E	state	🗌 Trust	
Check only	ľ	you checked the QSS box, enter the	child's name if the qua	alifying perso	on is a child but n	ot your d	ependent:			
one box.	-							-		
<b>Digital Assets</b>	At	any time during 2023, did you: (a) rece	ive (as a reward, awar	rd, or payme	nt for property or	services)	; or (b) sell	, excha	nge, or	
<b>9</b>		erwise dispose of a digital asset (or a								
Dependents						(4)	Check the b		ifies for (see inst.):	
(see instructions):		(1) First name Last name	(2) Deperidentifying		(3) Relationship to	vou	Child tax cre	dit 0	Credit for other dependents	
					., .	<u>,</u>				
If more than four dependents, see										
instructions and										
check here										
Income	1a	Total amount from Form(s) W-2, bo	x 1 (see instructions)				16	a 📃	95,611.	
Effectively	b	Household employee wages not rep								
Connected	c	Tip income not reported on line 1a (					10			
With U.S.	d	Medicaid waiver payments not repo					10			
Trade or	e f	Taxable dependent care benefits fro Employer-provided adoption benefi					· · <u>1</u> (			
Business	g	Wages from Form 8919, line 6				• •	· · <b>·</b>			
Attach	9 h	Other earned income (see instructio								
Form(s) W-2, 1042-S,	i	Reserved for future use								
SSA-1042-S,	j	Reserved for future use					1	i		
RRB-1042-S, and 8288-A	k	Total income exempt by a treaty fro	m Schedule OI (Form	1040-NR), ite	em L,					
here. Also		line 1(e)			. 1k					
attach Form(s)	z	Add lines 1a through 1h					12	<u> </u>	95,611.	
1099-R if	2a	Tax-exempt interest 2			able interest					
tax was withheld.	3a	Qualified dividends 3 IRA distributions 4		_	nary dividends .					
If you did not	4a 5a	IRA distributions4Pensions and annuities5			able amount					
get a Form	6	Reserved for future use								
W-2, see instructions.	7	Capital gain or (loss). Attach Sched								
instructions.	8	Additional income from Schedule 1		•	•				-8,864.	
	9	Add lines 1z, 2b, 3b, 4b, 5b, 7, and	8. This is your total e	ffectively co	onnected income		9		86,747.	
	10	Adjustments to income from Scheol	lule 1 (Form 1040), lin		•	-		<b>b</b>		
	11	Subtract line 10 from line 9. This is	your <b>adjusted gross</b> i	income .			<b>1</b> '		86,747.	
	12	Itemized deductions (from Scheductions)						2	13,850.	
	13a	Qualified business income deduction								
	b	Exemptions for estates and trusts o	nly (see instructions)		. 13b					
	С	Add lines 13a and 13b					13	c		
	14								13,850.	
	15	Subtract line 14 from line 11. If zero			able income		1	_	72,897.	

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

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	16	11,340.
Credits	17	Amount from Schedule 2 (Form 1040), line 3	17	0.
	18	Add lines 16 and 17	18	11,340.
	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	22	11,340.
	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),		
	с	Transportation tax (see instructions)	-	
	d	Add lines 23a through 23c	23d	
	24	Add lines 22 and 23d. This is your <b>total tax</b>	24	11,340.
Payments	25	Federal income tax withheld from:		11,540.
Payments	25 a	Form(s) W-2		
	a b	Form(s) 1099	-	
			-	
	C d	Other forms (see instructions)   . <th< th=""><th>054</th><th>14,189.</th></th<>	054	14,189.
	d		25d	14,109.
	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	4	
	28	Additional child tax credit from Schedule 8812 (Form 1040) 28	_	
	29	Credit for amount paid with Form 1040-C	_	
	30	Reserved for future use   .	4	
	31	Amount from Schedule 3 (Form 1040), line 15	_	
	32	Add lines 28, 29, and 31. These are your total other payments and refundable credits	32	
	33	Add lines 25d, 25e, 25f, 25g, 26, and 32. These are your total payments	33	14,189.
Refund	34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid	34	2,849.
	35a	Amount of line 34 you want <b>refunded to you</b> . If Form 8888 is attached, check here	35a	2,849.
Direct deposit?	b	Routing number   0   2   1   0   0   0   2   1   c Type:   Checking   X Savings		
See instructions.	d	Account number 3 8 8 8 3 5 7 3 1 7		
	е	If you want your refund check mailed to an address outside the United States not shown on page 1,		
		enter it hereAmount of line 34 you want applied to your 2024 estimated tax 36		
	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	ou want to allow another person to discuss this return with the IRS? See instructions.	lete below	. 🛛 🗙 No
Party	Desig	nee's Phone Personal identif	ication	
Designee	name	no number (PIN)		
		penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the		
Cian	belief,	they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which	• •	, 0
Sign	Your			you an Identity
Here			tection PIN e inst.)	l, enter it here
-	Dhan		1151.)	
	Phone	e no. Email address arer's name Preparer's signature Date PTIN		pock if:
Paid	•			heck if: $\Box$ Solf employed
Preparer		1 PRIYA RAM SAGAR GUPTA   SYAM PRIYA RAM SAGAR GUPTA   04/06/2024   P0208		Self-employed
Use Only		s name GLOBAL TAXES LLC Phone r	(	)965-9522
		s address 245 ROONEY CT E BRUNSWICK NJ 08816 Firm's E		3171965
Go to www.irs.g	gov/Fo	rm1040NR for instructions and the latest information. BAA REV 03/07/24 PRO	Form	1040-NR (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 20

Attachment

Internal Revenue Service Go to www.irs.gov/Form1040 for instructions and the latest information.				
Name(s) shown on Fo	rm 1040, 1040-SR, or 1040-NR	Your soc	ial security number	
VINAY KUMAR KA	RUTURI	668-15	-0061	

Par	t 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. Atta	ch Schedule E .	5	-9,564.
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		8d ( )		
е		8e		
f	Income from Form 8889	8f		
g		8g		
h		8h		
i	Prizes and awards	8i		
j	Activity not engaged in for profit income	8j		
k	· · · · · · · · · · · · · · · · · · ·	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			
	,	8m	-	
n		8n	-	
0		80		
р		8p		
-		8q	-	
r	Scholarship and fellowship grants not reported on Form W-2	<u>8r</u>		
S	Nontaxable amount of Medicaid waiver payments included on Form			
		<u>8s (</u> )		
t	Pension or annuity from a nonqualifed deferred compensation plan or	01		
	a nongovernmental section 457 plan	8t		
		8u		
z	Other income. List type and amount:	<b>8z</b> 700.		
0	Other Income from box 3 of 1099-Misc 700.   Total other income. Add lines 8a through 8z. .		9	700.
9 10	Combine lines 1 through 7 and 9. This is your <b>additional income</b> . Enter		3	700.
10	1040, 1040-SR, or 1040-NR, line 8		10	-8,864.
or Do			_	-0,004.

For Paperwork Reduction Act Notice, see your tax return instructions.

Schedule 1 (Form 1040) 2023

Par	t II Adjustments to Income			
11	Educator expenses		11	
12	Certain business expenses of reservists, performing artists, and fee-basis	government		
	officials. Attach Form 2106		12	
13	Health savings account deduction. Attach Form 8889		13	
14	Moving expenses for members of the Armed Forces. Attach Form 3903		14	
15	Deductible part of self-employment tax. Attach Schedule SE		15	
16	Self-employed SEP, SIMPLE, and qualified plans		16	
17	Self-employed health insurance deduction		17	
18	Penalty on early withdrawal of savings		18	
19a	Alimony paid		19a	
b	Recipient's SSN			
С	Date of original divorce or separation agreement (see instructions):			
20	IRA deduction		20	
21	Student loan interest deduction		21	
22	Reserved for future use		22	
23	Archer MSA deduction		23	
24	Other adjustments:			
 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			
с	Nontaxable amount of the value of Olympic and Paralympic medals			
Ŭ	and USOC prize money reported on line 8m			
d				
e	Repayment of supplemental unemployment benefits under the Trade		-	
e	Act of 1974			
f	Contributions to section 501(c)(18)(D) pension plans		-	
-	Contributions by certain chaplains to section 403(b) plans		-	
g			-	
n	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 0	3/07/24 PRO	Schedule 1 (F	orm 1040) 202

### 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

Attachment Sequence No. 7B Your identifying number

2

668-15-0061

VINAY KUMAR KARUTURI

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

		Nature of Income	<b>(a)</b> 10%	<b>(b)</b> 15%	<b>(c)</b> 30%	(d) Other (specify)				
					(a) 10%	<b>(b)</b> 13%	(c) 30%	%	%	
1	Dividends and dividend equ	uivalents:								
а	Dividends paid by U.S. corp	porations		1a						
b	Dividends paid by foreign c	corporations	[	1b						
С	Dividend equivalent paymen	ts received with respect to section 871(m) tra	ansactions	1c						
2	Interest:									
а	Mortgage			2a						
b	Paid by foreign corporation	IS	[	2b						
с	Other			2c						
3	Industrial royalties (patents,	, trademarks, etc.)	[	3						
4	Motion picture or TV copyri	ight royalties	[	4						
5	Other royalties (copyrights,	recording, publishing, etc.)	[	5						
6	Real property income and r	natural resources royalties	[	6						
7	Pensions and annuities .		[	7						
8	Social security benefits .		[	8						
9	Capital gain from line 18 be	elow	[	9						
10	Gambling—Residents of Ca	anada only. Enter net income in column (c).								
а	Winnings									
b			[	10c						
11	Gambling—Residents of co <b>Note:</b> Enter winnings only.	ountries other than Canada. Losses aren't allowed	[	11						
12	Other (specify):									
				12						
13	Add lines 1a through 12 in o	columns (a) through (d)		13						
14		tax at top of each column		14						
15	Tax on income not effective	ely connected with a U.S. trade or business.						NR, line 23a <b>15</b>		
		Capital Gains and	Losses Fr	rom	Sales or Excha	nges of Proper	ty			
losses f exchan within t	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>(b)</b> Date acquired mm/dd/yyyy		<b>(c)</b> Date sold mm/dd/yyyy			(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.									
or loss	on disposing of a U.S. real									
gains a	nd losses on Schedule D									
(Form 1										
exchan	property sales or ges that are effectively									
								()		
	797, or both. 18 (	Capital gain. Combine columns (f) and (g	g) of line 17.	Ente	r the net gain here	e and on line 9 abo	ove. If a loss, ente	r-0 <b>18</b>		

### SCHEDULE OI (Form 1040-NR)

## **Other Information**

Attach to Form 1040-NR.

/-4+ 6 lataat inf OMB No. 1545-0074 2023

	ent of the Treasury Go 1 Revenue Service	to www.irs.gov/Form1040N Ans	R for instructions and wer all questions.	•	Attachment Sequence No. 7C						
Name sh	nown on Form 1040-NR				Your identify						
VINA	Y KUMAR KARUTURI			668-15-	-15-0061						
Α	Of what country or countries v										
в	In what country did you claim										
С	Have you ever applied to be a	. 🗌 Yes	🛛 No								
D	Were you ever:										
1.	A U.S. citizen?	. 🗌 Yes	🗙 No								
2.	A green card holder (lawful pe	. 🗌 Yes	🛛 No								
	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	· · · · · · · · · · · · · · · · · · ·					_				
F	Have you ever changed your visa type (nonimmigrant status) or U.S. immigration status?										
G	List all dates you entered and	left the United States durin									
	Note: If you're a resident of C				ent interval	3,					
	check the box for Canada or	r Mexico and skip to item I			Mexic	0					
	Date entered United States mm/dd/yy	Date departed United Stat mm/dd/yy	es Da	te entered United State mm/dd/yy	s Date de	eparted United mm/dd/yy	d States				
н	Give number of days (including	· · · · · · · · · · · · · · · · · · ·				j:					
	2021	, 2022	, and 20	23 335	·	<del>1</del>	_				
I	Did you file a U.S. income tax						∐ No				
	If "Yes," give the latest year an	nd form number you filed:	104	ONR							
J	Are you filing a return for a true						🗙 No				
	If "Yes," did the trust have a U.S. person, or receive a cont						No				
к	Did you receive total compens					=					
ĸ	If "Yes," did you use an altern										
L	Income Exempt From Tax—It										
-	complete (1) through (3) below				tax treaty w	nin a loroign	r country,				
1.	Enter the name of the country,	the applicable tax treaty art	icle. the number of mo	nths in prior vears you	claimed the	treatv benefi	t. and the				
	amount of exempt income in th					, ,	,				
	(a) Cou	Intry	(b) Tax treaty article	(c) Number of mont	ns (d)	(d) Amount of exempt					
				claimed in prior tax ye	ars incom	ne in current ta	ax year				
	(e) Total. Enter this amount o					<u> </u>					
	Were you subject to tax in a for	• • •					∐ No				
3.	Are you claiming treaty benefit		-			. Yes	🗙 No				
	If "Yes," attach a copy of the Check the employed here if	Jompetent Authority deterr	nination letter to your	return.							
M	Check the applicable box if:	aking on alaction to treat in	nome from real process	rty located in the Linit	od Statoo og	offootivolus	opported				
1.	This is the first year you are m with a U.S. trade or business u										

2. You have made an election in a previous year that has not been revoked, to treat income from real property located in the United 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 03/07/24 PRO Schedule OI (Form 1040-NR) 2023

(Form 1040)		(From rental real estate, royalties, partnerships, S corporations, estates, trusts, REMICs, etc.)									20	2023		
Department of the Treasury Internal 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									Your so	cial security				
VINAY KUMAR KARUTURI												15-0061		
Part				m Rent	tal Real Es	state an	d Ro	valties						
T are	Note: If yo	ou are ir	n the bus	siness of r		nal proper			<b>c</b> . See	e instru	ctions. If you a	are an inc	lividual, rep	oort farm
A [	Did you make ar	ny payn	nents in	2023 th	at would rec	quire you	to file	Form(s) 1	099? 5	See ins	structions .		. 🗌 Ye	es 🛛 No
B	f "Yes," did you	or will	you file	e required	d Form(s) 10	)99? .							. 🗌 Ye	es 🗌 No
1a	Physical addr	ress of	each pi	roperty (	street, city,	state, ZII	⊃ code	e)						
A	1-103-1,	SIVAI	MAYAL	VEEDH	I VAKATI	PPA, K	KAPII	LESWAR	ANDH	RA P	RADESH IN	1 5333	305	
В														
С														1
1b	Type of Prope (from list below				ital real esta					Fair Rental Days		Personal Use Days		QJV
Α	3		pers	sonal use	e days. Cheo	ck the Q					365	0		
В					he requirem				В				-	
С			qua	lified join	it venture. S	ee instru	ictions	3.	С					
Туре	of Property:									1				
	Single Family R	esiden	се	3 Vacat	tion/Short-T	erm Ren	tal	5 Land		7	Self-Rental			
	Multi-Family Re			4 Comr	nercial			6 Roya	lties	8	Other (desci	ribe)		
	,							,						
									•		Properti	es:		•
Incom							•		A		В			С
3	Rents received						3		6	50.				
4	Royalties rece	ivea .				• •	4							
Exper							-							
5	-						5							
6	Auto and trave						6		1 0	2.2				
7	Cleaning and r						7		1,2	33.				
8	Commissions						8							
9	Insurance .						9							
10	Legal and othe						10		1 -	4.4				
11	Management f						11		1,5	44.				
12 13	Mortgage inter					,	12 13							
	Other interest						13		2,9	0 5				
14 15	Repairs						14			78.				
15 16							16		د, ۲	/0.				
16 17	Utilities						17		1 0	74.				
18	Depreciation e						18		1,0	/1.				
19	Other (list)	shene	e or dep	Jetion .		• •	19							
20	Total expenses	s Δdd	lines 5	through	10		20		10,2	14				
21	Subtract line 2			-			20		10,2	<u> </u>				
21	result is a (loss													
	file <b>Form 6198</b>						21		-9,5	64.				
22	Deductible rer								- 10					
"	on Form 8582	(see ir	nstructio	ons)		• •	22	(	-9,50		(		)(	)
23a	Total of all am									23a		650.		
b	Total of all am		-		-		erties			23b				
С	Total of all am		•			•			•	23c				
d	Total of all am		•			•				23d				
е	Total of all am		•			•				23e	10	,214.		
24	Income. Add							-		• •		. 24		
25	Losses. Add ro	oyalty Ic	osses fro	om line 21	1 and rental i	real estat	e losse	es from lin	e 22. E	nter to	tal losses her	e   <b>25</b>	(	9,564.)

Supplemental Income and Loss

25 Losses. Add royalty losses from line 21 and rental real estate losses from line 22. Enter total losses here 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

26 -9,564.

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SCHEDULE E

Schedule E (Form 1040) 2023

OMB No. 1545-0074