Form **8879**

(Rev. January 2021)

Department of the Treasury Internal Revenue Service

IRS e-file Signature Authorization

▶ ERO must obtain and retain completed Form 8879.

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

OMB No. 1545-0074

	. 10101140 0011100										
Subm	ission Identification Number (S	ID)									
Taxpay	er's name			Social secur	ity numb	er					
SAD	DAM MOHAMMAD			695-66-5859							
	's name			Spouse's social security number							
Par	Tay Paturn Informat	ion — Tax Year Ending D	200mbor 21 202	3 (Enter year you a	aro out	horizina	1				
	whole dollars only on lines 1 th		ecember 31, 202	3 (Enter year you a	are au	monzing	.)				
	Form 1040-SS filers use line 4	=	5 blank								
1					11	80	,640.				
2	Total tax				2		,998.				
3		rom Form(s) W-2 and Form(s)			3		,002.				
4	Amount you want refunded to	()			4		,004.				
5	Amount you owe				5						
Part	II Taxpayer Declaratio	n and Signature Authoriz	ation (Be sure you g	et and keep a cop	y of y	our retu	ırn)				
my kn return to sen- for any Agent payme author payme busine taxes persor	penalties of perjury, I declare that owledge and belief, it is true, corrections or amended) I am now aud my return to the IRS and to receive delay in processing the return or to initiate an ACH electronic funds nt of my federal taxes owed on this zation is to remain in full force and it, I must contact the U.S. Treases days prior to the payment (sett to receive confidential informational identification number (PIN) belocetics.	rect, and complete. I further decilithorizing. I consent to allow my invive from the IRS (a) an acknowled refund, and (c) the date of any rest withdrawal (direct debit) entry to its return and/or a payment of estimated effect until I notify the U.S. To sury Financial Agent at 1-88-34 lement) date. I also authorize the innecessary to answer inquiries	lare that the amounts in F ntermediate service provid dgement of receipt or reas fund. If applicable, I autho the financial institution ac mated tax, and the financi reasury Financial Agent to 53-4537. Payment cancel financial institutions invol and resolve issues relate	Part I above are the arrer, transmitter, or electron for rejection of the forize the U.S. Treasury account indicated in the fall institution to debit the forest transmitter the authorisal lation requests must be ved in the processing of to the payment. I fur	ounts fonic reteransmission its context of the electron of the	rom the in urn origina ssion, (b) the designated paration so to this according or revoke of ved no late ectronic parknowledge	come tax ator (ERO) he reason Financial ftware for ount. This (cancel) a er than 2 ayment of e that the				
	nic Funds Withdrawal Consent.	L.									
-	ayer's PIN: check one box on I authorize GLOBAL TAX	•	to outon on	6	5 8	3 5 9					
<u>></u>		ERO firm name (return (original or amended)				digits, but r all zeros	as my				
	I will enter my PIN as my si	gnature on the income tax ret n PIN and your return is filed	urn (original or amende								
Your	signature ►	Soll		Date ▶							
Spour	se's PIN: check one box only										
Г	I authorize	J	to enter or o	generate my PIN			as my				
_		ERO firm name		Er		digits, but	ao my				
	signature on the income tax	return (original or amended)	I am now authorizing.	do	n't ente	r all zeros					
		gnature on the income tax ret n PIN and your return is filed									
Spous	se's signature ►			Date ►							
		Practitioner PIN Method R		e below							
Part	Certification and Au	thentication — Practition	er PIN Method Only								
ERO's	s EFIN/PIN. Enter your six-digi	t EFIN followed by your five-d	ligit self-selected PIN.	2 2 2 4 9 Don't en	6 6 ter all ze	1 9 8	9				
author	y that the above numeric entry is zed to file for tax year indicated ments of the Practitioner PIN met	above for the taxpayer(s) indicate	ed above. I confirm that I	am submitting this ret	urn in a	ccordance					
ERO's	s signature ►			Date ►							
		ERO Must Retain This	Form - See Instruc	tions							
	Don't	Submit This Form to the									

Department of the Treasury-Internal Revenue Service U.S. Nonresident Alien Income Tax Return 2023 OMB No. 1545-0074

IRS Use Only—Do not write or staple in this space.

For the year Jan. 1-Dec. 31, 2023, or other tax year beginni			ning, 2023, ending, 20 _					See separate instructions.		
Your first name and middle initial			Last name Yo					our identifying number		
					(see instructions)					
SADDAM			МОНА	MMAD	695-6	6-5859				
Home address	(numl	per and street). If you have a P.O. box	, see ins	tructions.		•		Apt. no.		
5606 BEEC	HTR	EE IN								
City, town, or p	ost of	fice. If you have a foreign address, al	so comp	lete spaces below.		State	ZI	P code		
MAINEVILI	Έ					OH	4	5039		
Foreign country	nam	e	Foreigr	n province/state/county		Foreign p	ostal code			
-										
Filing	X	Single Married filing sepa	arately (N	MFS) Qualifyii	ng surviving spouse (QSS)	☐ Estat	e 🗌 Trust		
Status	lf	you checked the QSS box, enter the o	child's na	ame if the qualifying pers	son is a child but not	our depe	ndent:			
Check only one box.										
Digital Assets	Δta	ny time during 2023, did you: (a) rece	ive (as a	reward award or navm	ent for property or se	rvices): or	(h) sell ev	change or		
Digital Assets		rwise dispose of a digital asset (or a f								
Dependents						(4) Che	ck the box if	qualifies for (see inst.):		
(see instructions):		(4) First game		(2) Dependent's identifying number	(0) Deletienskin te	Child	tax credit	Credit for other		
		(1) First name Last name		identifying number	(3) Relationship to yo	u		dependents		
If more than four							\vdash			
dependents, see							\vdash			
instructions and check here										
Income	1a	Total amount from Form(s) W-2, box	(1 (see i	nstructions)			1a	92,624.		
Effectively	b	Household employee wages not rep	•	•			1b	32,0210		
Connected	c	Tip income not reported on line 1a (` '			1c			
With U.S.	d	Medicaid waiver payments not repo		·			1d			
Trade or	е	Taxable dependent care benefits fro		• • • • • • • • • • • • • • • • • • • •	,		1e			
Business	f	Employer-provided adoption benefit	s from F	orm 8839, line 29			1f			
	g	Wages from Form 8919, line 6	1g							
Attach Form(s) W-2,	h	Other earned income (see instructio	1h							
1042-S,	i	Reserved for future use			1i					
SSA-1042-S,	j	Reserved for future use					1j			
RRB-1042-S, and 8288-A here. Also	k	Total income exempt by a treaty from line 1(e)		, ,	tem L,					
attach	z	Add lines 1a through 1h					1z	92,624.		
Form(s) 1099-R if	2a	Tax-exempt interest 2a	a	b Tax	able interest		2b			
tax was	3a	Qualified dividends 3a	a	b Ord	linary dividends		3b			
withheld.	4a	IRA distributions 4a	a	b Tax	able amount		4b			
If you did not	5a	Pensions and annuities 5a	a	b Tax	able amount		5b			
get a Form W-2, see	6	Reserved for future use					6			
instructions.	7	Capital gain or (loss). Attach Schedu			•					
	8	Additional income from Schedule 1		-11,984.						
	9	Add lines 1z, 2b, 3b, 4b, 5b, 7, and		80,640.						
	10	Adjustments to income from Sched income	0 10							
	11	Subtract line 10 from line 9. This is y	our adj u	sted gross income			11	80,640.		
	12	Itemized deductions (from Schedudeduction (see instructions)						13,850.		
	13a	Qualified business income deductio			1 1					
	b	Exemptions for estates and trusts of	nly (see i	nstructions)	13b					
	С	Add lines 13a and 13b					13c			
	14							13,850.		
	15	Subtract line 14 from line 11. If zero	or less,	enter -0 This is your ta	xable income		15	66 , 790.		

orm 1040-NR (2	2023)							Page 2
Гах and	16	Tax (see instructions). Check if any from Form(s	s): 1 88	14 2 4972	9 3 □		16	9,998.
Credits	17	Amount from Schedule 2 (Form 1040), line 3 .					17	0.
	18	Add lines 16 and 17					18	9,998.
	19	Child tax credit or credit for other dependents	from Schedu	le 8812 (Form 104	0)		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, er	nter -0				22	9,998.
	23a	Tax on income not effectively connected with a	a U.S. trade or	r business from	23a			·
	b	Schedule NEC (Form 1040-NR), line 15 Other taxes, including self-employment tax, fr		F	234			
	D	line 21		` "	23b			
	С	Transportation tax (see instructions)		Γ	23c			
	d	Add lines 23a through 23c		_			23d	
	24	Add lines 22 and 23d. This is your total tax .					24	9,998.
Payments	25	Federal income tax withheld from:						
ayments	a	Form(s) W-2			25a 14	,002.		
	b	Form(s) 1099			25b	,,002.		
	c	Other forms (see instructions)		F	25c			
	d	Add lines 25a through 25c		L			25d	14,002.
	e	Form(s) 8805					25e	11,002.
	f	Form(s) 8288-A					25f	
	-	Form(s) 1042-S					25g	
	g 26	2023 estimated tax payments and amount app					26	
	27	Reserved for future use	•	1	27		20	
	28	Additional child tax credit from Schedule 8812		T	28			
	29	Credit for amount paid with Form 1040-C	,	F	29			
	30	Reserved for future use		H	30			
	31	Amount from Schedule 3 (Form 1040), line 15		T	31			
	32	Add lines 28, 29, and 31. These are your total					32	
	33	Add lines 25d, 25e, 25f, 25g, 26, and 32. Thes					33	14,002.
Dof d	34	If line 33 is more than line 24, subtract line 24					34	
Refund	35a	Amount of line 34 you want refunded to you .			•		35a	4,004.
Direct deposit?	b	Routing number 1 0 1 2 0 0 4			Checking ::		JJa	4,004.
See instructions.	d	Account number 1 5 2 3 2 2 1	 			Savings		
	e	If you want your refund check mailed to an ac						
	00	enter it here.						
•	36	Amount of line 34 you want applied to your 2		a tax	36			
Amount	37	Subtract line 33 from line 24. This is the amou For details on how to pay, go to <i>www.irs.gov/l</i>	-	oo instructions			07	
You Owe	38			1	38		37	
Γhird		u want to allow another person to discuss this				s. Comple	ete belo	ow. 🛛 No
Party	Design	·	Phone			al identific		, <u>_</u>
Designee	name				numbe		Jalion	
		penalties of perjury, I declare that I have examined this						
Sian	bellet,	hey are true, correct, and complete. Declaration of pr			d on all information			, ,
Sign	Your	ignature Da	ate	Your occupation				ent you an Identity
Here				SOFTWARE EN	IGTNEER	(see		PIN, enter it here
	Phone	no.	mail address			(000)		
Daid		rer's name Preparer's si			Date	PTIN		Check if:
Paid	•	· .	•	MAR DUDIPALLI		P02470	833	☐ Self-employed
Preparer		name GLOBAL TAXES LLC						78)965-9522
Ina Ontri		TAKED THE					(0 /	0,000-0042

Firm's EIN 88-2145487

SCHEDULE 1 (Form 1040)

Additional Income and Adjustments to Income

OMB No. 1545-0074

2023
Attachment
Sequence No. 01

Department of the Treasury Internal Revenue Service

SADDAM MOHAMMAD

Name(s) shown on Form 1040, 1040-SR, or 1040-NR

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

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

Sequence No. 01

Your social security number
695-66-5859

Par	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	ach Schedule E .	5	-11,984.
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	8i		
j	Activity not engaged in for profit income	8j		
k	Stock options	8k		
ı	Income from the rental of personal property if you engaged in the rental			
	for profit but were not in the business of renting such property	81		
m	Olympic and Paralympic medals and USOC prize money (see			
	instructions)	8m		
n	Section 951(a) inclusion (see instructions)	8n		
0	Section 951A(a) inclusion (see instructions)	80		
р	Section 461(I) excess business loss adjustment	8p		
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 (<u>)</u>	
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:			
_	T. I.	8z		
9	Total other income. Add lines 8a through 8z		9	
10	Combine lines 1 through 7 and 9. This is your additional income . Ente			11 004
	1040, 1040-SR, or 1040-NR, line 8		10	-11,984.

Page **2** Schedule 1 (Form 1040) 2023

Par	II Adjustments to Income				
11	Educator expenses			11	
12	Certain business expenses of reservists, performing artists, and fee				
	officials. Attach Form 2106			12	
13	Health savings account deduction. Attach Form 8889			13	
14	Moving expenses for members of the Armed Forces. Attach Form 3903			14	
15	Deductible part of self-employment tax. Attach Schedule SE			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:				
а	Jury duty pay (see instructions)	24a			
b	Deductible expenses related to income reported on line 8l from the				
	rental of personal property engaged in for profit	24b		_	
С	Nontaxable amount of the value of Olympic and Paralympic medals				
_	and USOC prize money reported on line 8m	24c		_	
d	Reforestation amortization and expenses	24d			
е	Repayment of supplemental unemployment benefits under the Trade				
_	Act of 1974	24e		_	
f	Contributions to section 501(c)(18)(D) pension plans	24f		_	
g	Contributions by certain chaplains to section 403(b) plans	24g		_	
h	Attorney fees and court costs for actions involving certain unlawful	041			
	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	04:			
		24i 24j		-	
J Iz	Housing deduction from Form 2555	24j		_	
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form	24k			
z	1041)	24K			
Z		24z			
25	Total other adjustments. Add lines 24a through 24z			25	
25 26	Add lines 11 through 23 and 25. These are your adjustments to income			20	
_0	Form 1040, 1040-SR, or 1040-NR, line 10	, LIILEI		26	
	BAA		05/24 PRO		le 1 (Form 1040) 2023
	BAA	n=v 02/	UJ/24 FNU	Joneau	(1 51.11 1070) 2020

SCHEDULE NEC (Form 1040-NR)

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

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service

Attach to Form 1040-NR. Go to www.irs.gov/Form1040NR for instructions and the latest information.

Sequence No. 7B

Name shown on Form 1040-NR Your identifying number SADDAM MOHAMMAD 695-66-5859 Enter **amount of income** under the appropriate rate of tax. See instructions.

Nature of Income		(-) 100/	# \ 450/	4.3.000/	(d) Other (specify)				
					(a) 10%	(b) 15%	(c) 30%	%	%
1	Dividends and divide	nd equivalents:							
а	Dividends paid by U.	S. corporations	[1a					
b	Dividends paid by for	eign corporations	[1b					
С	Dividend equivalent pa	ayments received with respect to section 871(m) transac	tions	1c					
2	Interest:								
а	Mortgage			2a					
b	Paid by foreign corpo	orations		2b					
С				2c					
3	, ,			3					
4	· ·	copyright royalties		4					
5	Other royalties (copy	rights, recording, publishing, etc.)		5					
6		and natural resources royalties		6					
7	Pensions and annuitie	9S		7					
8	Social security benefit	ts		8					
9		18 below		9					
10	Gambling—Residents of Canada only. Enter net income in column (c). If zero or less, enter -0								
а	Winnings								
b	Losses			10c					
11	Note: Enter winnings	s of countries other than Canada. only. Losses aren't allowed		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 business. Add						-NR, line 23a 15	
		Capital Gains and Los	ses F	rom	Sales or Excha	nges of Proper	ty	1	
Enter only the capital gains and losses from property sales or exchanges that are from sources within the United States and not			(b) Date acquired 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).
	ely connected with a U.S. s. Do not include a gain								
	on disposing of a U.S. real vinterest; report these								
	nd losses on Schedule D								
	property sales or								
connect	ges that are effectively ted with a U.S. business	17 Add columns (f) and (g) of line 16					17	()	
	edule D (Form 1040), 797, or both.	18 Capital gain. Combine columns (f) and (g) of I						r -0 18	

SCHEDULE OI (Form 1040-NR)

Other Information

Attach to Form 1040-NR.

Department of the Treasury Internal Revenue Service

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

OMB No. 1545-0074

Attachment Sequence No. 7C Name shown on Form 1040-NR Your identifying number 695-66-5859 SADDAM MOHAMMAD Α Of what country or countries were you a citizen or national during the tax year? INDIA In what country did you claim residence for tax purposes during the tax year? United States В С Have you ever applied to be a green card holder (lawful permanent resident) of the United States? X No Were you ever: ☐ Yes X No 1. A U.S. citizen? X No If you answer "Yes" to (1) or (2), see Pub. 519, chapter 4, for expatriation rules that apply to you. Ε 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. F1 X No F Have you ever changed your visa type (nonimmigrant status) or U.S. immigration status? Yes If you answered "Yes," indicate the date and nature of the change: G List all dates you entered and left the United States during 2023. See instructions. Note: If you're a resident of Canada or Mexico AND commute to work in the United States at frequent intervals, Date entered United States Date departed United States **Date entered United States Date departed United States** mm/dd/yy mm/dd/yy mm/dd/yy mm/dd/yy Give number of days (including vacation, nonworkdays, and partial days) you were present in the United States during: н 2021 ______, 2022 ______, and 2023 ______365 ___. Did you file a U.S. income tax return for any prior year? X Yes ☐ No ı If "Yes," give the latest year and form number you filed: 1040NR X No Yes J If "Yes," did the trust have a U.S. or foreign owner under the grantor trust rules, make a distribution or loan to a □ No Yes ⊠ No Κ Yes No If "Yes," did you use an alternative method to determine the source of this compensation? Income Exempt From Tax-If you are claiming exemption from income tax under a U.S. income tax treaty with a foreign country, L complete (1) through (3) below. See Pub. 901 for more information on tax treaties. 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 (d) Amount of exempt claimed in prior tax years income in current tax vear (e) Total. Enter this amount on Form 1040-NR, line 1k. Do not enter it anywhere else on line 1 No 2. Were you subject to tax in a foreign country on any of the income shown in 1(d) above? Yes X No If "Yes," attach a copy of the Competent Authority determination letter to your return. 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 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

SCHEDULE E (Form 1040)

Supplemental Income and Loss

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

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

Your social security number

Department of the Treasury Internal Revenue Service Name(s) shown on return

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

Attachment Sequence No. 13

OMB No. 1545-0074

SAD	DAM MOHAMMAD						695-6	6-5859)	
Par										
	Note: If you are in the business of renting personal proper	rty, use	Schedule	C . See	instru	ctions. If you ar	e an indi	vidual, rep	ort farm	
	rental income or loss from Form 4835 on page 2, line 40.									
	Did you make any payments in 2023 that would require you to file Form(s) 1099? See instructions .									
В	If "Yes," did you or will you file required Form(s) 1099? .			. <u> </u>	es 🗌 No	ı				
1a	Physical address of each property (street, city, state, ZII	P code	e)							
A	SUBEDARI, HANAMKONDA WARANGAL TELANGAN	NA TI	v 50600) 1						_
B	BOBBERTY MINIMAGES WINDERSON TELEMONIC	.,,,,	30000	-						_
										_
	Type of Property 2 For each rental real estate prope	y 2 For each rental real estate property listed							QJV	
10	(from list below) above, report the number of fair				' '	air Rental Days		ersonal Use Days		
A	gersonal use days. Check the Q			Α		365		0	ΙП	_
B	if you meet the requirements to t			В		303			+	
	qualified joint venture. See instru	uctions	S.	С					$+$ \dashv	_
	of Property:									_
	Single Family Residence 3 Vacation/Short-Term Ren	ntal	5 Lanc	ı	7	Self-Rental				
	Multi-Family Residence 4 Commercial	itai	6 Roya			Other (descri	he)			
	Walti Farmy Hooldonoo F Commorcial		- O Hoye							
						Propertie	es:			
Incor				Α		В			С	
3	Rents received	3		4	20.					
4	Royalties received	4								
Expe	nses:									
5	Advertising	5								
6	Auto and travel (see instructions)	6								
7	Cleaning and maintenance	7		1,120.						
8	Commissions	8								
9	Insurance	9								
10	Legal and other professional fees	10								
11	Management fees	11		1,0	50.					
12	Mortgage interest paid to banks, etc. (see instructions)	12								
13	Other interest	13								
14	Repairs	14		3,2						
15	Supplies	15		3,4	69.					
16	Taxes	16								
17	Utilities	17		3,5	00.					
18	Depreciation expense or depletion	18								
19	Other (list)	19		10.4	•					
20	Total expenses. Add lines 5 through 19	20		12,4	04.					
21	Subtract line 20 from line 3 (rents) and/or 4 (royalties). If									
	result is a (loss), see instructions to find out if you must file Form 6198	04		-11,9	0 /					
00		21		-11,9	04.					_
22	Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions)	20	,	11 00	24 \	(\	,		١
00-	,	22		11,98		(420.	(
23a	Total of all amounts reported on line 3 for all rental properties of all amounts reported on line 4 for all royalty properties.			•	23a		±2U•			
b	Total of all amounts reported on line 4 for all royalty prop Total of all amounts reported on line 12 for all properties				23b					
C C	Total of all amounts reported on line 12 for all properties Total of all amounts reported on line 18 for all properties				23c 23d					
d	Total of all amounts reported on line 18 for all properties Total of all amounts reported on line 20 for all properties				23a 23e	1 2	,404.			
e 24	Income. Add positive amounts shown on line 21. Do not				236	12	24			
24 25	Losses. Add royalty losses from line 21 and rental real estat		-		· ·	tal lossos hora		/	11,984.	
								(11,904.	,)
26	Total rental real estate and royalty income or (loss). here. If Parts II, III, and IV, and line 40 on page 2 do no									
	Schedule 1 (Form 1040), line 5. Otherwise, include this a						26		-11,984	1.