# TAX GEEKS 6565 N MACARTHUR BLVD SUITE 225 IRVING, TX 75039 (877) 482-9433 tax@taxgeeks.com

April 5, 2019

Krishna M. Kilaru and Umasree Vennam 1787 Macallan Dr Brentwood, TN 37027

Dear Krishna and Umasree,

Please find enclosed copies of your tax return(s) for the tax year ended December 31, 2018. Instructions for filing your return(s) are attached for your convenience. Retain the copies for your records.

The federal income tax return will be electronically filed, do not mail the enclosed copy, but retain it for your records.

Form 1040 Federal Individual Income Tax Return

We prepared your returns based on the information you provided us. Please review the returns carefully to ensure that there are no omissions or misstatements of material facts.

If you have any questions about your tax returns, please contact us. We appreciate this opportunity to serve you.

Sincerely,

SRINIVAS THOUTA

## Tax Summary and Instructions for Filing 2018 Federal Individual Income Tax Return

Summary of Federal Information:

Federal adjusted gross income	\$ 197,114.00
Federal taxable income	\$ 171,158.00
Payment due IRS	\$ 4,992.00

You and each member of your household had either health coverage or an exemption for each month during 2018. Consequently, you do not owe an individual shared responsibility payment under the Affordable Care Act.

Your return will be electronically filed.

Your balance due of \$4,992.00 will be automatically withdrawn from your checking account on April 15, 2019.

Department of the Treasury Internal Revenue Service

# **IRS** e-file Signature Authorization

OMB No. 1545-0074

2018

Return completed Form 8879 to your ERO. (Don't send to the IRS.) ▶ Go to www.irs.gov/Form8879 for the latest information.

Submission Identification Number (SID)

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Тахрау	er's name	Social security number				
Kri	shna M Kilaru	412-99-3079				
Spouse	o's name	Spouse's social security	numbe	er		
Uma	sree Vennam	603-51-8507				
Par	t I Tax Return Information – Tax Year Ending December 31, 2018 (Wi	nole dollars only)				
1	Adjusted gross income (Form 1040, line 7; Form 1040NR, line 35)		1	197,114.		
<b>2</b> Total tax (Form 1040, line 15; Form 1040NR, line 61)		2	25,657.			
3 Federal income tax withheld from Forms W-2 and 1099 (Form 1040, line 16; Form 1040NR, line 62a).		3	20,665.			
4	Refund (Form 1040, line 20a; Form 1040-SS, Part I, line 13a; Form 1040NR, line 73a	a)	4			
5	Amount you owe (Form 1040, line 22; Form 1040NR, line 75)		5	4,992.		
Part	Part II Taxpayer Declaration and Signature Authorization (Be sure you get and keep a copy of your return)					

Under penalties of perjury, I declare that I have examined a copy of my electronic individual income tax return and accompanying schedules and statements for the tax year ending December 31, 2018, and to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amounts in Part I above are the amounts from my electronic income tax return. 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 my electronic income tax return and, if applicable, my Electronic Funds Withdrawal Consent.

Taxpayer's P	VIN: check	one box	only
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Taxpayer's Pin: check one box only		
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as my signature on my tax year 2018 electronically filed income t	ax return.	don't enter all zeros
I will enter my PIN as my signature on my tax year 2018 electron entering your own PIN <b>and</b> your return is filed using the Practition		
Your signature	Date ►	
Spouse's PIN: check one box only		
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Spouse's signature	Date ►	
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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. 7 2 5 4	5 9 7 0 8 2 0
		't enter all zeros
I certify that the above numeric entry is my PIN, which is my signature for the taxpayer(s) indicated above. I confirm that I am submitting this return method and <b>Pub. 1345,</b> Handbook for Authorized IRS <i>e-file</i> Providers of I	n in accordance with the requiren	
ERO's signature	Date ►	
ERO Must Retain This Form		
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Firm's address > 6565 N MACARTHUR BLVD SUITE 225 IRVING TX 75039         For Disclosure, Privacy Act, and Paperwork Reduction Act Notice, see separate instructions.       Page 2         Form 1040 (2018)       Page 2         Form 1040 (2018)       Page 2         Attach Form()       Page 2         1       Wages, salaries, tips, etc. Attach Form(s) W-2       1       1866,092.         2a       Tax-exempt interest.       2a       a       b       Taxable interest       2b       1,243.         3a       Qualified dividends       3a       b       Taxable interest       b       7       1       1866,092.         5a       Social socurity benefits       5a       5a       5a       5a       5a       5a       5a       5a       5b       197,114.       6       197,114.         8       Standard       Qualified business income deduction form Schedule A)       5a       6       197,114.       8       24,000.       9       1,956.       10       171,158.       129,657.       10       171,158.       12,9,657.       12,4,000.       9       1,9,56.       11       29,657.       14,000.       14,000.       14,000.       14,000.       14,000.       14,000.       14,000.       14,000.       14,000.       14,	•	Fi	rm's name ► TAX GEEKS							Phone no	. (877)	482	-9433	🗌 s	elf-en	ployed	
Form 1040 (2018)       Page 2         Attach Form(s)       Wages, salaries, tips, etc. Attach Form(s) W-2       1       1.866,092.         Attach Form(s)       Tax-exempt Interest.       2a       1       1.866,092.         2a       Tax-exempt Interest.       2a       3a       b       1.286,092.         4a       Qualified dividends       3a       b       Total income. Add lines 1 through 5. Add any amount from Schedule 1, line 22       9, 779.       6       1.97, 114.         5       Standard       Standard deduction or temized deductions (from Schedule A)       8       2.4, 000.       9       1.97, 114.         7       Adjusted gross income. If you have no adjustments to income, enter the amount from line 6; otherwise, struction form-schedule 1, line 22       9, 779.       6       1.97, 114.         8       Standard deduction or temized deductions (see instructions).       9       1.956.       1       1.71, 158.         10       Taxable income. Subtract lines 8, and 9 form line 7.1 lize or or less, enter -0.       10       1.71, 1, 158.       1       2.9657.       1       2.9657.       1       2.9657.       1       2.9657.       1       2.9657.       1       2.9657.       1       2.9657.       1       2.9657.       1       2.9657.       1	Use Only	Fi	rm's address ► 6565 N MACARTH	IUR BI	'VD S	SUITE	225	IR	VING	TX 7	5039						
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Attach Form(s)       2a       Tax-exempt interest.       2b       1, 243.         Minded       4a       IIRAs, pensions, and annuities.       4a       b       Taxable amount.       4b         Total income. Add lines 1 through 5. Add any amount from Schedule 1, line 22       9.779.       6       197.114.         Adjusted gross income. If you have no adjustments to income, enter the amount from line 6; otherwise, subtract Schedule 1, line 36, from line 6       9       197.114.         Standard deduction or itered amount from Schedule A)       8       24.000.       9       1.97.114.         Standard deduction form and filling opparately.       9       0ualified business income deduction (see instructions).       1       29.657.       1.97.114.         Standard deduction or tems shared in a stable income tax withheld from form SW-2 and 1099       0       1       29.657.       1.1       29.657.         1       a Ckid tax credifyred in the 11. If zero or less, enter -0.       1       29.657.       14       0.01.11.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1	Farma 1040 (0010)	`														-	0
Attach Form(a)       2a       Tax-exempt interest       2a       a       b       Taxable interest       2b       1,243.         We2, Also statuch       3a       a       b       Taxable amount       3b       3b         Form(s) We2 and 1069-R if tax was       IRAs, pensions, and annuites       4a       b       Taxable amount       4b         5a       Social security benefits       5a       5a       b       Taxable amount       4b         6       Total income. Add lines 1 through 5. Add any amount from Schedule 1, line 22       9,7779.       6       197,114.         8       Standard deduction or temized deductions (from Schedule A)       3a       7       197,114.         8       Standard deduction or temized deductions (from Schedule A)       8       24,000.         9       Qualified business income deduction (see instructions).       9       1,956.         10       Taxable income. Subtract lines 8 and 9 from line 7. If zero or less, enter -0       10       171,158.         9       Taxable income. Subtract lines 8 and 9 from line 7. If zero or less, enter -0.       11       29,657.         14       Other taxes. Attach Schedule 2 and check here       11       29,657.       14       00.         15       Total tax. Add lines 13 and 14       5	Form 1040 (2018)											_					
Attach Form[9]       3a       3a       b Ordinary dividends       3b         Y=2. Ass attach Form[9] W=26 and the set of the s			- · · · · · · · · · · · · · · · · · · ·	W-2 .	• •		· ·	• •	• •	• •				_			
Formis W-26 and 1098-B if tax was withheld       4a       IRAs, pensions, and annuities .       4a       b       Taxable amount .       b       Taxable amount .       5b         Social security benefits .       5a       Social security benefits .       5a       b       Taxable amount .       5b         Total income. Add lines 1 through 5. Add any amount from Schedule 1, line 22       9,779       6       197,114.         Standard Deduction for -       Standard deduction or temized deductions (from Schedule A) .       8       24,000         Standard Teducore Subtract lines 8 and 9 from line 7. If zero or less, enter -0       10       171,158.         10       Taxable income. Subtract lines 8 and 9 from line 7. If zero or less, enter -0       10       171,158.         11       a Tax (see inst.) 29,657       (check if any from: 1 □ Form(s) 8814 2 □ Form 4972 3 □															1	, 243	
1009-Rit tax was       44       44       44         42       44       44         43       44       44         44       44       44         55       55       56         56       56       56         6       Total income. Add lines 1 through 5. Add any amount from Schedule 1, line 22       9, 779.       6       197, 114.         7       Adjusted gross income. If you have no adjustments to income, enter the amount from line 6; otherwise, subtract Schedule 1, line 36, from line 6       8       24,000.         * Single or maried, filing separate       9       Qualified business income deduction (see instructions).       9       1,956.         10       Taxable income. Subtract lines 8 and 9 from line 7. If zero or less, enter -0-       10       171, 158.         11       a Tax (see inst). 29, 657.       (check fary from: 1 = form(s) 8814       2 = form 4972       3 =         12       a Chilt ax cell/credit for other dependents       4, 000.       b Add any amount from Schedule 2 and check here       11       29, 657.         13       Subtract line 12 from line 11. If zero or less, enter -0-       13       25, 657.       14       0.00.       14       0.00.         14       Other taxes. Attach Schedule 4       -       -       -																	
Standard   Deduction for -   6   Total score, Add lines 1 through 5. Add any amount from Schedule 1, line 22   9   7   Adjusted gross income. If you have no adjustments to income, enter the amount from line 6; otherwise, subtract Schedule 1, line 36, from line 6   7   10   9   9   10   11   12   10   11   12    13   24.000   14   15    15   16   16    17    18    20, 657.   19   11   11   12    24,000   13   14    15    16   16    17   18    20,657.   19   19    10   11   12    24,000   12   14    15    16    17    18   20,657.   19    19   19   10   11   12    13    25,657.   14   20   20    20   20   20    20    20    20    20   <	1099-R if tax was												-				
7       Adjusted gross income. If you have no adjustments to income, enter the amount from line 6; otherwise, subtract Schedule 1, line 36, from line 6       7       197, 114.         9       Standard deduction or itemized deductions (from Schedule A)       8       24,000.         9       Qualified business income deduction (see instructions).       9       1,956.         10       Taxable income. Subtract lines 8 and 9 from line 7. If zero or less, enter -0-       10       171,158.         11       a Tax (see inst.) 29,657. (check if any from: 1    Form(s) 8814 2    Form 4972 3    -       11       29,657.         12       a Child tax credifered there dependents       4,000.       b Add any amount from Schedule 2 and check here       11       29,657.         13       Subtract line 12 from line 11. If zero or less, enter -0-       13       25,657.       14       0.         14       Other taxes. Attach Schedule 4 .       13       25,657.       14       0.         15       Total tax. Add lines 13 and 14       15       25,657.       16       20,665.         17       Refund       19       If line 18 is more than line 15, subtract line 15 from line 18. This is the amount you overpaid       18       20,665.         18       Add inse 16 and 17. These are your total payments       18       20,665.       19       20a <tr< td=""><td>withield.</td><td></td><td>,</td><td></td><td>0 1 1</td><td></td><td></td><td>-</td><td></td><td>amount</td><td></td><td></td><td>-</td><td>-</td><td>107</td><td>11/</td><td></td></tr<>	withield.		,		0 1 1			-		amount			-	-	107	11/	
Standard       subtract Schedule 1, line 36, from line 6       7       197, 114.         Deduction for -       8       Standard deduction or itemized deductions (from Schedule A)       8       24,000.         Single or married filing jointy or Cualifying widow(ef), S24,000       9       1,956.       10       17,1158.         Married filing jointy or Cualifying widow(ef), S24,000       1a Tax (see inst.) 29, 657. (check if any from: 1 □ Form(s) 8814 2 □ Form 4972 3 □) b Add any amount from Schedule 2 and check here .       10       171, 158.         Head of household, S18,000       12       a Child tax credit/credit for other dependents 4, 000. b Add any amount from Schedule 3 and check here .       11       29, 657.         14       Other taxes. Attach Schedule 4.       13       Subtract line 12 from line 11. If zero or less, enter -0-       13       25, 657.         15       Total tax. Add lines 13 and 14       14       0.       15       25, 657.         16       Federal income tax withheld from Forms W-2 and 1099       16       20, 665.       17         18       Add any amount from Schedule 5       17       18       20, 665.       17         19       If line 18 is more than line 15, subtract line 15 from line 18. This is the amount you overpaid       19       20a         Direct deposit?       b Routing number       X X X X X X X X X X X X X X X X										m line 6:	otherwise	0		-		, 7	•
<ul> <li>Single or married, Silling separately, Silling separately</li></ul>	Standard	`										7		1	L97	,114	ł.
filling separately, \$12,000       9       Qualified business income deduction (see instructions).       9       1,956.         Married filling jointly or Qualifying widow(ef), \$24,000       10       Taxable income. Subtract lines 8 and 9 from line 7. If zero or less, enter -0-       10       171,158.         • Head of household, \$11       a Tax (see inst) 29, 657. (check if any from: 1 ] of other keened lines 2 and check here       11       29, 657.         • Head of household, \$18,000       • Add any amount from Schedule 2 and check here       • I       24,000.         • Head of thousehold, \$18,000       13       Subtract line 12 from line 11. If zero or less, enter -0-       11       29, 657.         • Hyou checked any box under Standard       16       Federal income tax withheld from Forms W-2 and 1099       14       0.         • If you checked stand under standard       16       Federal income tax withheld from Forms W-2 and 1099       16       20, 665.         • Refundable credits: a EIC (see inst)       b Sch. 8812       c Form 8863       17       18       20, 665.         • Refund       19       If line 18 is more than line 15, subtract line 15 from line 18. This is the amount you overpaid       19       19       20a         Direct deposit?       • B       Routing number       X X X X X X X X X X X X X X X X X X X		8	Standard deduction or itemized deduction	ns (from S	Schedule	eA)						8			24	,000	).
• Married filing jointly or Qualifying widow(e), \$24,000       10       177,1,200         • harried filing jointly or Qualifying widow(e), \$24,000       11       a Tax (see inst.) <u>29,657.</u> (check if any from: 1 □ Form(s) 8814 <u>2</u> □ Form 4972 <u>3</u> □) b Add any amount from Schedule 2 and check here       11       29,657.         • head of household, \$18,000       12       a Child tax credit/credit for other dependents <u>4,000.</u> b Add any amount from Schedule 3 and check here □       12       4,000.         18       Subtract line 12 from line 11. If zero or less, enter -0-         14       0.         19       Other taxes. Attach Schedule 4         14       0.         19       Other taxes. Attach Schedule 4         15       25,657.         14       Other taxes. Attach Schedule 4         14       0.         10       Federal income tax withheld from Forms W-2 and 1099        16       20,665.         17       Refundable credits: a EIC (see inst.)       b Sch. 8812       c Form 8863	filing separately,	9	Qualified business income deduction (se	e instructi	ons) .							9			1	,956	5.
iointry or Qualifying widow(er), \$24,000       11       a Tax (see inst.) 29,657. (check if any from: 1 □ Form(s) 8814 2 □ Form 4972 3 □)       11       29,657.         • Head of household, \$18,000       12       a Child tax credit/credit for other dependents 4,000. b Add any amount from Schedule 3 and check here □       12       4,000.         • 11       29,657.       12       a Child tax credit/credit for other dependents 4,000. b Add any amount from Schedule 3 and check here □       12       4,000.         • 13       Subtract line 12 from line 11. If zero or less, enter -0-       13       25,657.         • 14       Other taxes. Attach Schedule 4.       14       0.         • 15       Total tax. Add lines 13 and 14       15       25,657.         • 16       Federal income tax withheld from Forms W-2 and 1099       16       20,665.         • 17       Federal income tax withheld from Forms W-2 and 1099       16       20,665.         • 18       Add any amount from Schedule 5       17       18       20,665.         • 19       If line 18 is more than line 15, subtract line 15 from line 18. This is the amount you overpaid       19         • 20a       Amount of line 19 you want refunded to you. If Form 8888 is attached, check here       • □         • 20a       Account number       X X X X X X X X X X X X X X X X X X X		10			_					<u> </u>		10	)	1	L71	,158	3.
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household, \$18,000       13       Subtract line 12 from line 11. If zero or less, enter -0-       13       25,657.         14       Other taxes. Attach Schedule 4       14       0.         15       Total tax. Add lines 13 and 14       15       25,657.         16       Federal income tax withheld from Forms W-2 and 1099       16       20,665.         17       Refundable credits: a EIC (see inst.)       b Sch. 8812       c Form 8863         Add any amount from Schedule 5       17       18       20,665.         19       If line 18 is more than line 15, subtract line 15 from line 18. This is the amount you overpaid       19         20a       Amount of line 19 you want refunded to you. If Form 8888 is attached, check here       19         20a       Account number       X X X X X X X X X X X X X X X X X X X			-									11	I				
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any box under Standard deduction, see instructions.       15       Total tax. Add lines 13 and 14       15       25,657.         16       Federal income tax withheld from Forms W-2 and 1099       6       16       20,665.         17       Refundable credits: a EIC (see inst.)       b Sch. 8812       c Form 8863       16         18       Add any amount from Schedule 5       17       18       20,665.         19       If line 18 is more than line 15, subtract line 15 from line 18. This is the amount you overpaid       19         20a       Amount of line 19 you want refunded to you. If Form 8888 is attached, check here       20a         Direct deposit?       b Routing number       X X X X X X X X X X X X X X X X X X X		13	Subtract line 12 from line 11. If zero or le	ss, enter -	0		•		· ·	· ·		13	3		25		
deduction, see instructions.       16       Federal income tax withheld from Forms W-2 and 1099       16       20,665.         17       Refundable credits: a EIC (see inst.)      b Sch. 8812      c Form 8863      17         18       Add any amount from Schedule 5      b Sch. 8812      c Form 8863      17         18       Add lines 16 and 17. These are your total payments       18       20,665.         19       If line 18 is more than line 15, subtract line 15 from line 18. This is the amount you overpaid      19         20a       Amount of line 19 you want refunded to you. If Form 8888 is attached, check here      19         Direct deposit?       b Routing number       X X X X X X X X X X X X X X X X X X X		14	Other taxes. Attach Schedule 4		· ·		• •		• •			14	1				
See instructions.         16       20,005.         17       Refundable credits: a EIC (see inst.)       b Sch. 8812       c Form 8863         Add any amount from Schedule 5       17         18       Add lines 16 and 17. These are your total payments       18       20,665.         19       If line 18 is more than line 15, subtract line 15 from line 18. This is the amount you overpaid       19         20a       Amount of line 19 you want refunded to you. If Form 8888 is attached, check here       19         20a       Account number       X       <		15					•		• •			15	5				
Add any amount from Schedule 5       17         18       Add lines 16 and 17. These are your total payments       18       20,665.         19       If line 18 is more than line 15, subtract line 15 from line 18. This is the amount you overpaid       19         20a       Amount of line 19 you want refunded to you. If Form 8888 is attached, check here       19         Direct deposit?       b       Routing number       X       X       X       X       X       X       20a         Direct deposit?       b       Routing number       X							•	• •	• •	• •		16	3		20	,665	· •
18       Add lines 16 and 17. These are your total payments       18       20,665.         19       If line 18 is more than line 15, subtract line 15 from line 18. This is the amount you overpaid       19         20a       Amount of line 19 you want refunded to you. If Form 8888 is attached, check here       19         Direct deposit?       b       Routing number       X       X       X       X       X       > c         b       Routing number       X		/17			-												
19       If line 18 is more than line 15, subtract line 15 from line 18. This is the amount you overpaid       19         20a       Amount of line 19 you want refunded to you. If Form 8888 is attached, check here       19         Direct deposit?       b       Routing number       X <td></td> <td></td> <td></td> <td></td> <td>-</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>20</td> <td>665</td> <td></td>					-										20	665	
20a       Amount of line 19 you want refunded to you. If Form 8888 is attached, check here       ▶       20a         Direct deposit?       >       Bouting number       X <t< td=""><td></td><td></td><td>· · · · · · · · · · · · · · · · · · ·</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td>-</td><td></td><td></td><td>20</td><td>,665</td><td>· .</td></t<>			· · · · · · · · · · · · · · · · · · ·									-			20	,665	· .
Direct deposit? See instructions.       ▶ b       Routing number       X	Refund							-									
See instructions.       • d       Account number       X	Direct deposit?			Г. н.		1 1						20	a				
21       Amount of line 19 you want applied to your 2019 estimated tax																	
Amount You Owe 22 Amount you owe. Subtract line 18 from line 15. For details on how to pay, see instructions			······································				<u> </u>	. 1		A A							
	Amount You Owe								I	ons	•	0	<b>,</b>		4	. 992	,
	, anount Tou Owe		-					I			-				-	,	·

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

SCHEDULE 1 (Form 1040)		Additional Income and Adjustme		OMB No. 1545-0074		
Department of the Tre Internal Revenue Serv	asury rice	► Attach to Form 1040. ► Go to www.irs.gov/Form1040 for instructions and	l the la	atest information.		20 <b>18</b> Attachment Sequence No. <b>01</b>
Name(s) shown on F					Your	social security number
Krishna M	Krishna M Kilaru & Umasree Vennam				41	2-99-3079
Additional	1–9b	Reserved			1–9b	
Income	10	Taxable refunds, credits, or offsets of state and local inco	me ta	axes	10	
moonio	11	Alimony received			11	
	12	Business income or (loss). Attach Schedule C or C-EZ			12	
	13	Capital gain or (loss). Attach Schedule D if required. If not required, check here ▶ □ Other gains or (losses). Attach Form 4797.................				
	14					
	15a	Reserved			15b	
	<b>16a</b> Reserved				16b	
	17	Rental real estate, royalties, partnerships, S corporations, trust	s, etc	. Attach Schedule E	17	9,779.
	18	Farm income or (loss). Attach Schedule F			18	
	19	Unemployment compensation				
	20a					
	21					
	22	Combine the amounts in the far right column. If you don't	have	any adjustments to		
		income, enter here and include on Form 1040, line 6. Other	erwise	e, go to line 23	22	9,779.
Adjustments	23	Educator expenses	23			
to Income	24	Certain business expenses of reservists, performing artists,				
		and fee-basis government officials. Attach Form 2106	24			
	25	Health savings account deduction. Attach Form 8889 .	25			
	26	Moving expenses for members of the Armed Forces.				
		Attach Form 3903	26			
	27	Deductible part of self-employment tax. Attach Schedule SE	27			
	28	Self-employed SEP, SIMPLE, and qualified plans	28			
	29	Self-employed health insurance deduction	29			
	30	Penalty on early withdrawal of savings	30			
	31a	Alimony paid b Recipient's SSN ►	31a			
	32	IRA deduction	32			
	33	Student loan interest deduction	33			
	34	Reserved	34			
	35	Reserved	35			
	36	Add lines 23 through 35			36	

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

Schedule 1 (Form 1040) 2018

REV 12/21/18 PRO

Form **2210** 

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

### **Underpayment of Estimated Tax by** Individuals, Estates, and Trusts

► Go to www.irs.gov/Form2210 for instructions and the latest information. ► Attach to Form 1040, 1040NR, 1040NR-EZ, or 1041.

OMB No. 1545-0074 2018 Attachment Sequence No. 06 Identifying number

Krishna M Kilaru & Umasree Vennam

412-99-3079

		Do You Have To	File l	Form 2	210?		
C	om	plete lines 1 through 7 below. Is line 7 less than \$1,000?	Yes	Don't file	Form 2210. You	don't d	owe a penalty.
		↓ No	1				
	com ne 9	plete lines 8 and 9 below. Is line 6 equal to or more than	Yes				le Form 2210 must file page 1 of
		No	1		,		
Y	οu ι	way owe a penalty. Does any box in Part II below apply?	Yes	You <b>must</b> apply?	file Form 2210. Do	oes bo	ox <b>B, C,</b> or <b>D</b> in Part II
		No		No	Yes		1. C
					YO	u mus	t figure your penalty.
y y it	our ou a , yo nter	t file Form 2210. You aren't required to figure penalty because the IRS will figure it and send a bill for any unpaid amount. If you want to figure u may use Part III or Part IV as a worksheet and your penalty amount on your tax return, but t file Form 2210.	will fig want t works	ure it and s o figure it, y heet and er	ou may use Part	any ur III or F .moun	paid amount. If you
Pa	rt I	Required Annual Payment					
1	En	ter your 2018 tax after credits from Form 1040, line 13 (see	e instructi	ons if not fi	ling Form 1040)	1	25,657.
2		her taxes, including self-employment tax and, if applicable					
_		vestment Income Tax (see instructions)				2	
3		fundable credits, including the premium tax credit (see ins	-			3	( )
4		rrrent year tax. Combine lines 1, 2, and 3. If less than \$1,00 <b>n't</b> file Form 2210			we a penalty.	4	
5		Itiply line 4 by 90% (0.90)		5	23,091.		25,657.
6		thholding taxes. <b>Don't</b> include estimated tax payments (se				6	20,665.
7		btract line 6 from line 4. If less than \$1,000, <b>stop;</b> you don't		-		7	4,992.
8	Ma	aximum required annual payment based on prior year's tax	(see inst	ructions)		8	
9	Re	quired annual payment. Enter the smaller of line 5 or lin	e8			9	23,091.
	Ne	ext: Is line 9 more than line 6?					
		No. You don't owe a penalty. Don't file Form 2210 unless					
	X	Yes. You may owe a penalty, but don't file Form 2210 un			kes in Part II below	v appli	es.
		<ul> <li>If box B, C, or D applies, you must figure your penalty a</li> <li>If box A or E applies (but not B, C, or D) file only page</li> </ul>			u aron't required t	to figu	re your penalty; the IPS
		will figure it and send you a bill for any unpaid amount.					
		worksheet and enter your penalty on your tax return, but					,
Ра	rt II						
Α	X	You request a <b>waiver</b> (see instructions) of your entire per and file page 1 of Form 2210, but you aren't required to fi			orm or other reaso 80% Waiver	ons. Y	ou must check this box
В		You request a <b>waiver</b> (see instructions) of part of your pe 2210.	nalty. You	ı must figur	e your penalty and	d waiv	er amount and file Form
С		Your income varied during the year and your penalty is <b>installment method.</b> You must figure the penalty using S				using t	the annualized income
D		Your penalty is lower when figured by treating the federal			•		
_	_	actually withheld, instead of in equal amounts on the payr					-
E		You filed or are filing a joint return for either 2017 or 20 above. You must file page 1 of Form 2210, but you <b>aren't</b>			· ·		
For	Pape	erwork Reduction Act Notice, see separate instructions.	BAA	RE	V 02/05/19 PRO		Form <b>2210</b> (2018)

SCHEDULI	ΕE	
(Form 1040	))	

Part I

#### 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, 1040NR, or Form 1
Internal Revenue Service (99)	Go to www.irs.gov/ScheduleE for instructions and the
Name(s) shown on return	

Krishna M Kilaru & Umasree Vennam

0)	(From rental real estate, royalties, partnerships, S corporations, estates, trusts, REMICs, etc.)					
e Treasury ► Attach to Form 1040, 1040NR, or Form 1041.			20 <b>18</b>			
Service (99)	► Go to www.irs.gov/ScheduleE for instructions and the latest information.		Sequence No. 13			
on return		Your soci	al security number			
M Kilaru & Umasree Vennam 412-99						
Income or Loss From Rental Real Estate and Royalties Note: If you are in the business of renting personal property, use						
Schedule C or C-EZ (see instructions). If you are an individual, report farm rental income or loss from Form 4835 on page 2, line 40.						
maka any	navments in 2018 that would require you to file Form(s) 10002 (see instructions)					

A Did	you make any payments in 2018 that would require you to file Form(s) 1099? (see instructions) 🗌 Yes 🔀 No	)
<b>B</b> If ""	Yes," did you or will you file required Forms 1099?	)
1a	Physical address of each property (street, city, state, ZIP code)	

Α 1997 Allerton Way Spring H Spring Hill TN 37174

В 3840 PARK ROYAL LANE ANTIO Antioch TN 37013

С						
1b	Type of Property (from list below)	2 For each rental real estate property listed above, report the number of fair rental and personal use days. Check the QJV box		Fair Rental Days	Personal Use Days	QJV
Α	1	only if you meet the requirements to file as	Α	120	0	
В	1	a qualified joint venture. See instructions.	В	170	0	
С			С			
С			<u> </u>	170	0	

Type of Property:

ncon	ulti-Family Residence 4 Commercial me: Propertie		yalties 8 A	0.10	r (describe) B		С
3	Rents received	3	13,7	98.	15,37	1.	•
4	Royalties received			-		-	
xpe	enses:						
5	Advertising	5					
6	Auto and travel (see instructions)	6	3	02.	30	1.	1
7	Cleaning and maintenance	7	2	11.	20	2.	
8	Commissions	8					
9	Insurance	9	4	84.	59	0.	
10	Legal and other professional fees	10					
11	Management fees	11					
12	Mortgage interest paid to banks, etc. (see instructions	s) <b>12</b>	2,5	92.			
13	Other interest	13					
14	Repairs	14					1
15	Supplies	15	2	56.	34	2.	1
16	Taxes	16	2	87.	23	4.	
17	Utilities	17					
18	Depreciation expense or depletion	18	5,5	23.	6,40	1.	
19	Other (list)  See Line 19 Other Expenses	19	-	49.	81		
20	Total expenses. Add lines 5 through 19	20	10,5	04.	8,88	6.	
21	Subtract line 20 from line 3 (rents) and/or 4 (royalties)						
	result is a (loss), see instructions to find out if you mu						
	file Form 6198		3,2	94.	6,48	5.	
22	Deductible rental real estate loss after limitation, if ar						
	on Form 8582 (see instructions)		(	)	(	)(	
23a		•		23a	29,16	9.	
b	1 , , , , , , , , , , , , , , , , , , ,	•		23b		_	
С				23c	2,59		
d				23d	11,92		
е	1 1 1			23e	19,39		0 550
24	Income. Add positive amounts shown on line 21. Do		•			24	9,779
25	Losses. Add royalty losses from line 21 and rental real es				-	25 (	
26	Total rental real estate and royalty income or (los						
	here. If Parts II, III, IV, and line 40 on page 2 do r						
	Schedule 1 (Form 1040), line 17, or Form 1040NR, li						^ <b></b>
	total on line 41 on page 2					26	9,77

88 Form

Department of the Treasury

Internal Revenue Service

# **Health Savings Accounts (HSAs)**

OMB No. 1545-0074 2

Sequence No. 52

(0)

Attachment

8

► Attach to Form 1040 or Form 1040NR.

▶ Go to www.irs.gov/Form8889 for instructions and the latest information.

Name(s) shown on Form 1040 or Form 1040NR	Social security number of HSA beneficiary. If both spouses have	
Umasree Vennam		503-51-8507

Before you begin: Complete Form 8853, Archer MSAs and Long-Term Care Insurance Contracts, if required.

Part	HSA Contributions and Deduction. See the instructions before completing this p and both you and your spouse each have separate HSAs, complete a separate Part			
1	Check the box to indicate your coverage under a high-deductible health plan (HDHP) during			
	2018 (see instructions)	Se Se	elf-only	× Family
2	HSA contributions you made for 2018 (or those made on your behalf), including those made from January 1, 2019, through April 15, 2019, that were for 2018. <b>Do not</b> include employer	0		0
	contributions, contributions through a cafeteria plan, or rollovers (see instructions)	2		0.
3	If you were under age 55 at the end of 2018, and on the first day of <b>every</b> month during 2018, you were, or were considered, an eligible individual with the <b>same</b> coverage, enter \$3,450 (\$6,900 for family coverage). <b>All others,</b> see the instructions for the amount to enter	3		6,900.
4	Enter the amount you and your employer contributed to your Archer MSAs for 2018 from Form 8853, lines 1 and 2. If you or your spouse had family coverage under an HDHP at any time during 2018, also include any amount contributed to your spouse's Archer MSAs	4		0.
5	Subtract line 4 from line 3. If zero or less, enter -0	5		6,900.
6	Enter the amount from line 5. But if you and your spouse each have separate HSAs and had family coverage under an HDHP at any time during 2018, see the instructions for the amount to			
	enter	6		6,900.
7	If you were age 55 or older at the end of 2018, married, and you or your spouse had family coverage under an HDHP at any time during 2018, enter your additional contribution amount (see instructions)	7		
8	Add lines 6 and 7	8		6,900.
9	Employer contributions made to your HSAs for 2018 9 5,154.			0,500.
10	Qualified HSA funding distributions	-		
11	Add lines 9 and 10	11		5,154.
12	Subtract line 11 from line 8. If zero or less, enter -0	12		1,746.
13	<b>HSA deduction.</b> Enter the <b>smaller</b> of line 2 or line 12 here and on Schedule 1 (Form 1040), line 25, or Form 1040NR, line 25	13		0.
	Caution: If line 2 is more than line 13, you may have to pay an additional tax (see instructions).			
Part	<b>II HSA Distributions.</b> If you are filing jointly and both you and your spouse each have a separate Part II for each spouse.	sepa	arate HS	As, complete
14a	Total distributions you received in 2018 from all HSAs (see instructions)	14a		310.
b	Distributions included on line 14a that you rolled over to another HSA. Also include any excess			
	contributions (and the earnings on those excess contributions) included on line 14a that were			
	withdrawn by the due date of your return (see instructions)	14b		
С	Subtract line 14b from line 14a	14c		310.
15	Qualified medical expenses paid using HSA distributions (see instructions)	15		310.
16	<b>Taxable HSA distributions.</b> Subtract line 15 from line 14c. If zero or less, enter -0 Also, include this amount in the total on Schedule 1 (Form 1040), line 21, or Form 1040NR, line 21. On the dotted line next to line 21, enter "HSA" and the amount	16		0.
17a	If any of the distributions included on line 16 meet any of the <b>Exceptions to the Additional 20% Tax</b> (see instructions), check here			
b	<b>Additional 20% tax</b> (see instructions). Enter 20% (0.20) of the distributions included on line 16 that are subject to the additional 20% tax. Also include this amount in the total on Schedule 4 (Form 1040), line 62, or Form 1040NR, line 60. Check box c on Schedule 4 (Form 1040), line 62, or box b on Form 1040NR, line 60. Enter "HSA" and the amount on the line next to the box .	17b		

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

BAA REV 12/21/18 PRO Form 8889 (2018)

Part III Income and Additional Tax for Failure To Maintain HDHP Coverage. See the instructions before completing this part. If you are filing jointly and both you and your spouse each have separate HSAs, complete a separate Part III for each spouse.

18	Last-month rule	18	
19	Qualified HSA funding distribution	19	
20	<b>Total income.</b> Add lines 18 and 19. Include this amount on Schedule 1 (Form 1040), line 21, or Form 1040NR, line 21. On the dotted line next to Schedule 1 (Form 1040), line 21, or Form 1040NR, line 21, enter "HSA" and the amount	20	
21	<b>Additional tax.</b> Multiply line 20 by 10% (0.10). Include this amount in the total on Schedule 4 (Form 1040), line 62, or Form 1040NR, line 60. Check box c on Schedule 4 (Form 1040), line 62, or box b on Form 1040NR, line 60. Enter "HDHP" and the amount on the line next to the box .	21	

REV 12/21/18 PRO Form **8889** (2018)

8867 Form

Department of the Treasury Internal Revenue Service

Paid Preparer's Due Diligence Checklist Earned Income Credit (EIC), American Opportunity Tax Credit (AOTC), Child Tax Credit (CTC) (including the Additional Child Tax Credit (ACTC) and Credit for Other Dependents (ODC)), and Head of Household (HOH) Filing Status > To be completed by preparer and filed with Form 1040, 1040NR, 1040SS, or 1040PR. > Go to www.irs.gov/Form8867 for instructions and the latest information.

OMB No. 1545-0074 20 8

	Nent of the Treasury Revenue Service To be completed by preparer and filed with Form 1040, 1040N Go to www.irs.gov/Form8867 for instructions and the lateral service			Attachme Sequenc	ent e No. <b>70</b>
Тахрау	er name(s) shown on return		Taxpayer iden		
Kri	shna M Kilaru & Umasree Vennam		412-99-	3079	
	reparer's name and PTIN				
	NIVAS THOUTA		P008494	23	
Par	t I Due Diligence Requirements				
	e check the appropriate box for the credit(s) and/or HOH filing status claimed on	EIC	CTC/	AOTC	HOH
this	s return and complete the related Parts I–V for the benefit(s), and/or HOH filing status claimed (check all that apply).		ACTC/ODC		
	Status claimeu (check an that appiy).				
1	Did you complete the return based on information for tax year 2018 provided by the taxpayer or reasonably obtained by you?	×	Yes	]No	
2	If credits are claimed on the return, did you complete the applicable EIC and/ or CTC/ACTC/ODC worksheets found in the Form 1040, 1040SS, 1040PR, or 1040NR instructions, and/or the AOTC worksheet found in the Form 8863 instructions, or your own worksheet(s) that provides the same information, and all related forms and schedules for each credit claimed?	X	Yes 🗌	] <b>No</b>	□ N/A
3	<ul><li>Did you satisfy the knowledge requirement? To meet the knowledge requirement, you must do both of the following.</li><li>Interview the taxpayer, ask questions, and document the taxpayer's responses to determine that the taxpayer is eligible to claim the credit(s)</li></ul>				
	<ul> <li>Review information to determine that the taxpayer is eligible to claim the credit(s)</li> <li>Review information to determine that the taxpayer is eligible to claim the credit(s) and/or HOH filing status and the amount of any credit(s) claimed.</li> </ul>		Yes	No	
4	Did any information provided by the taxpayer or a third party for use in				
	preparing the return, or information reasonably known to you, appear to be incorrect, incomplete, or inconsistent? (If "Yes," answer questions 4a and 4b. If "No," go to question 5.)		Yes 🛛 🗙	] <b>No</b>	
а	Did you make reasonable inquiries to determine the correct, complete, and				
	consistent information?		Yes	No	
b	Did you document your inquiries? (Documentation should include the questions you asked, whom you asked, when you asked, the information that was provided, and the impact the information had on your preparation of the return.)		Yes 🗌	] <b>No</b>	
5	Did you satisfy the record retention requirement? To meet the record retention requirement, you must keep a copy of your documentation referenced in 4b, a copy of this Form 8867, a copy of any applicable worksheet(s), a record of how, when, and from whom the information used to prepare Form 8867 and any applicable worksheet(s) was obtained, and a copy of any document(s) provided by the taxpayer that you relied on to determine eligibility for the credit(s) and/or HOH filing status or to compute the amount of the credit(s)	X	Yes	No	
	List those documents, if any, that you relied on.				
6	Did you ask the taxpayer whether he/she could provide documentation to substantiate eligibility for the credit(s) and/or HOH filing status and the amount of any credit(s) claimed on the return if his/her return is selected for audit?	X	Yes 🗌	No	
7	Did you ask the taxpayer if any of these credits were disallowed or reduced in a previous year?			_	
	(If credits were disallowed or reduced, go to question 7a; if not, go to question 8.)		Yes	No	□ N/A
<u>a</u> 8	Did you complete the required recertification Form 8862?		Yes	No	N/A
0	prepare a complete and correct Form 1040, Schedule C?		Yes	No	□ N/A

For Paperwork Reduction Act Notice, see separate instructions.

Part	I Due Diligence Questions for Returns Claiming EIC (If the return does n	ot claim EIC, g	o to Part III.)		
		EIC	CTC/ ACTC/ODC	AOTC	НОН
9a	Have you determined that this taxpayer is, in fact, eligible to claim the EIC for the number of children for whom the EIC is claimed, or to claim the EIC if the taxpayer has no qualifying child? (Skip 9b and 9c if the taxpayer is claiming the EIC and does not have a qualifying child.)	□ Yes □ No			
b	Did you ask the taxpayer if the child lived with the taxpayer for over half of the year, even if the taxpayer has supported the child the entire year?	□ Yes □ No			
с	Did you explain to the taxpayer the rules about claiming the EIC when a child is the qualifying child of more than one person (tiebreaker rules)?	Yes No			

Part III	Due Diligence Questions for Returns Claiming CTC/ACTC/ODC (If the return does not claim CTC, ACTC, or ODC, go
	to Part IV.)

		EIC	CTC/ ACTC/OE	AOTO	с нон	1
10	Have you determined that each qualifying person for the CTC/ACTC/ODC is the taxpayer's dependent who is a citizen, national, or resident of the United States?		X Yes 🗌	No		
11	Did you explain to the taxpayer that he/she may not claim the CTC/ACTC if the taxpayer has not lived with the child for over half of the year, even if the taxpayer has supported the child, unless the child's custodial parent has released a claim to exemption for the child?		□ Yes □   □ N/A	No		
12	Did you explain to the taxpayer the rules about claiming the CTC/ACTC/ODC for a child of divorced or separated parents (or parents who live apart), including any requirement to attach a Form 8332 or similar statement to the return?		X Yes I	No		
Part	IV Due Diligence Questions for Returns Claiming AOTC (If the return does	s not claim	AOTC, go to	Part V.)		
		EIC	CTC/ ACTC/ODC	AOTC	НОН	4
13	Did the taxpayer provide the required substantiation for the credit, including a Form 1098-T and/or receipts for the qualified tuition and related expenses for the claimed AOTC?			□ Yes □ I	No	
Part	Part V Due Diligence Questions for Claiming HOH (If the return does not claim HOH filing status, go to Part VI.)					
		EIC	CTC/ ACTC/ODC	AOTC	НОН	
14	Have you determined that the taxpayer was unmarried or considered unmarried on the last day of the tax year and provided more than half of the					

Part VI	Eligibility Certification
► Yo	u will have complied with all due diligence requirements for claiming the applicable credit(s) and/or HOH filing
sta	atus on the return of the taxpayer identified above if you:

- A. Interview the taxpayer, ask adequate questions, document the taxpayer's responses on the return or in your notes, review adequate information to determine if the taxpayer is eligible to claim the credit(s) and/or HOH filing status and to determine the amount of the credit(s) claimed;
- B. Complete this Form 8867 truthfully and accurately and complete the actions described in this checklist for any applicable credit(s) claimed and HOH filing status, if claimed;
- C. Submit Form 8867 in the manner required; and

cost of keeping up a home for the year for a qualifying person?

- D. Keep all five of the following records for 3 years from the latest of the dates specified in the Form 8867 instructions under Document Retention.
  - 1. A copy of Form 8867;
  - 2. The applicable worksheet(s) or your own worksheet(s) for any credit(s) claimed;
  - Copies of any documents provided by the taxpayer on which you relied to determine eligibility for the credit(s) and/or HOH filing status;
  - 4. A record of how, when, and from whom the information used to prepare this form and the applicable worksheet(s) was obtained; and
  - 5. A record of any additional questions you may have asked to determine eligibility to claim the credit(s), and/or HOH filing status and the amount(s) of any credit(s) claimed and the taxpayer's answers.
- If you have not complied with all due diligence requirements, you may have to pay a \$520 penalty for each failure to comply related to a claim of an applicable credit or HOH filing status.

15	Do you certify that all of the answers on this Form 8867 are, to the best of	
	your knowledge, true, correct, and complete?	🗙 Yes 🗌 No

🗌 Yes 🗌 No

Form <b>8582</b>	
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Department of the Treasury

Internal Revenue Service (99)

# Passive Activity Loss Limitations ► See separate instructions.

► Attach to Form 1040 or Form 1041.

▶ Go to www.irs.gov/Form8582 for instructions and the latest information.

2018 Attachment Sequence No. 88

OMB No. 1545-1008

Name(s	) shown on return			Identifyin	g number
Kris	shna M Kilaru & Umasree Vennam			412-9	9-3079
Par	2018 Passive Activity Loss				
	Caution: Complete Worksheets 1, 2, and 3 before completing P	Part I.			
Renta	I Real Estate Activities With Active Participation (For the definition	of ac	ctive participation, se	e	
Speci	al Allowance for Rental Real Estate Activities in the instructions.)				
1a	Activities with net income (enter the amount from Worksheet 1,				
	column (a))	1a			
b	Activities with net loss (enter the amount from Worksheet 1, column				
	(b))	1b	(	)	
С	Prior years' unallowed losses (enter the amount from Worksheet 1,				
	column (c)) ......................	1c	(	)	
d	Combine lines 1a, 1b, and 1c			1d	
Comr	nercial Revitalization Deductions From Rental Real Estate Activitie	s			
2a	Commercial revitalization deductions from Worksheet 2, column (a) .	2a	(	)	
b	Prior year unallowed commercial revitalization deductions from				
	Worksheet 2, column (b)	<b>2</b> b	(	)	
С	Add lines 2a and 2b			2c	( )
All Ot	her Passive Activities		1		
3a	Activities with net income (enter the amount from Worksheet 3,				
	column (a))	3a	9,779		
b	Activities with net loss (enter the amount from Worksheet 3, column				
	(b))	3b	( 0	. )	
С	Prior years' unallowed losses (enter the amount from Worksheet 3,				
	column (c))	3c	(	)	
d					9,779.
4	Combine lines 1d, 2c, and 3d. If this line is zero or more, stop here				
	your return; all losses are allowed, including any prior year unallowed				0 770
	2b, or 3c. Report the losses on the forms and schedules normally use	ea .		4	9,779.
	If line 4 is a loss and: • Line 1d is a loss, go to Part II.		in David II and up to D		
	Line 2c is a loss (and line 1d is zero or mor				ad wa ta lina 10
Couti	<ul> <li>Line 3d is a loss (and lines 1d and 2c are z on: If your filing status is married filing separately and you lived with y</li> </ul>				
	or Part III. Instead, go to line 15.	our s	pouse at any time u	uning the	year, do not complete
Part		th Ac	tive Participation		
T GIT C	<b>Note:</b> Enter all numbers in Part II as positive amounts. See instru				
5	Enter the <b>smaller</b> of the loss on line 1d or the loss on line 4			5	
6	Enter \$150,000. If married filing separately, see instructions	6			
7	Enter modified adjusted gross income, but not less than zero (see instructions)	7			
	<b>Note:</b> If line 7 is greater than or equal to line 6, skip lines 8 and 9,				
	enter -0- on line 10. Otherwise, go to line 8.				
8	Subtract line 7 from line 6	8			
9	Multiply line 8 by 50% (0.50). Do not enter more than \$25,000. If married filir	ng sep	arately, see instruction	s <b>9</b>	
10	Enter the <b>smaller</b> of line 5 or line 9			10	0.
	If line 2c is a loss, go to Part III. Otherwise, go to line 15.				
Part	III Special Allowance for Commercial Revitalization Dedu	uctio	ns From Rental R	eal Esta	ate Activities
	Note: Enter all numbers in Part III as positive amounts. See the	exam	ple for Part II in the ir	structio	ns.
11	Enter \$25,000 reduced by the amount, if any, on line 10. If married filing				
12	Enter the loss from line 4				
13	Reduce line 12 by the amount on line 10				
14	Enter the smallest of line 2c (treated as a positive amount), line 11, or	r line	13	14	
Part					
15	Add the income, if any, on lines 1a and 3a and enter the total				
16	Total losses allowed from all passive activities for 2018. Add				
	instructions to find out how to report the losses on your tax return			16	

Caution: The worksheets must be filed with your tax return. Keep a copy for your records. Worksheet 1-For Form 8582, Lines 1a, 1b, and 1c (See instructions.)

	Currer	nt year	Prior years	Overall gain or loss		
Name of activity	(a) Net income (line 1a)	(b) Net loss (line 1b)	(c) Unallowed loss (line 1c)	(d) Gain	(e) Loss	
Total. Enter on Form 8582, lines 1a, 1b, and 1c $\cdots$						

Worksheet 2-For Form 8582, Lines 2a and 2b (See instructions.)

Name of activity	(a) Current year deductions (line 2a)	(b) Prior year unallowed deductions (line 2b)	(c) Overall loss
Total. Enter on Form 8582, lines 2a and			
2b			

Worksheet 3-For Form 8582, Lines 3a, 3b, and 3c (See instructions.)

	Current year		Prior years	Overall gain or loss		
Name of activity	(a) Net income (line 3a) (b) Net loss (line 3b)		(c) Unallowed loss (line 3c)	(d) Gain	(e) Loss	
1997 Allerton Way Spring H	3,294.	0.		3,294.		
3840 PARK ROYAL LANE ANTIO	6,485.	0.		6,485.		
Total. Enter on Form 8582, lines 3a, 3b,						
and 3c	9,779.	0.				

Worksheet 4-Use this worksheet if an amount is shown on Form 8582, line 10 or 14 (See instructions.)

Name of activity	Form or schedule and line number to be reported on (see instructions)	(a) Loss	(b) Ratio	(c) Special allowance	(d) Subtract column (c) from column (a)
Total			1.00		

Total 

Worksheet 5-Allocation of Unallowed Losses (See instructions.)

Name of activity	Form or schedule and line number to be reported on (see instructions)	(a) Loss	(b) Ratio	(c) Unallowed loss
Total			1.00	

REV 01/12/19 PRO

	4562		Depreciatio	on and A	mortizatio	on		DMB No. 1545-0172
Form	4302		(Including Info	mation on L	isted Propert	y)		2018
Deparl	ment of the Treasury			ch to your tax				Attachment
	l Revenue Service (99)	► Go to	www.irs.gov/Form456					Sequence No. <b>179</b>
	shna M Kilar.	u & IImagree	Business or activity to which this form relatesVennamSch E 1997 Allerton Way Spring H				tifying number 2−99−3079	
			rtain Property Und			y opring n	112	
i a		-	ed property, comple			nplete Part I.		
1		•	s)		-		1	1,000,000.
2		(	placed in service (se				2	
3	Threshold cost of	section 179 pro	perty before reduction	n in limitation	(see instructio	ns)	3	2,500,000.
4								
5	<b>5</b> Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0 If married filin separately, see instructions							
							5	
6	(a)	Description of prope	ty	(b) Cost (busi	ness use only)	(c) Elected cost		-
								-
- 7	Listad property E	ntor the emount	from line 29		7			-
8			property. Add amount			7	8	
9			aller of line 5 or line 8				9	
10			from line 13 of your				10	
11			smaller of business inc				11	
12			dd lines 9 and 10, bu		,		12	
			n to 2019. Add lines 9			13	. <b>L</b>	
Note	e: Don't use Part I	or Part III below	for listed property. Ir	nstead, use P	art V.			
Pa	rt II Special De	preciation Allo	wance and Other D	Depreciatior	<b>i (Don't</b> includ	e listed property. See	instr	uctions.)
14						ty) placed in service		
			ns				14	
			1) election				15	
	Other depreciatio		(S) Ion't include listed			· · · · · · · ·	16	
Fa	MACHS D			Section A		5. <b>j</b>		
17	MACBS deductio	ns for assets pla	ced in service in tax y		na before 2018		17	
						one or more general		
	asset accounts, c			-	-			
	Section	B-Assets Place	ed in Service During	g 2018 Tax Y	ear Using the	General Depreciation	Syst	em
(a)	Classification of propert	y (b) Month and year placed in service	(c) Basis for depreciation (business/investment use only-see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) D	epreciation deduction
<b>19</b> a	a 3-year property							
k								
							<u> </u>	
	10-year property						-	
	15-year property							
	f 20-year property 25-year property			25 yrs.		S/L		
	Residential rental	08/18	405,000.	27.5 yrs.	MM	S/L S/L		5,523.
	property	00/10	405,000.	27.5 yrs.	MM	S/L		5,525.
	i Nonresidential re	al		39 yrs.	MM	S/L	+	
	property			0	MM	S/L	<u> </u>	
	Section C	Assets Place	d in Service During	2018 Tax Ye	ar Using the A	Iternative Depreciation	on Sy	stem
20a	Class life					S/L		
k	12-year			12 yrs.		S/L		
	30-year			30 yrs.	MM	S/L		
	40-year	(0		40 yrs.	MM	S/L		
_	rt IV Summary		,					
	Listed property. E					(a) and line of Enter	21	
22			of your return. Partne			(g), and line 21. Enter see instructions	22	5,523.
23			ed in service during t	-				5,525.
•			section 263A costs .			23		

	4562		Depreciation	on and A	mortizatio	on	(	DMB No. 1545-0172
Form	4JUZ		(Including Info	rmation on l	Listed Proper	ty)		2018
Departr	nent of the Treasury	<ul> <li>Attach to your tax return.</li> <li>(99) Go to www.irs.gov/Form4562 for instructions and the latest information.</li> </ul>						Attachment
	Revenue Service (99) s) shown on return	► Go to						Sequence No. 179
	.,	n Business or activity to which this form relates laru & Umasree Vennam Sch E 3840 PARK ROYAL LANE ANTIO				2-99-3079		
Par			ertain Property Und				1 1 1 2	
i ui		-	ed property, compl			nplete Part I.		
1			is)		-	•	1	1,000,000.
2	Total cost of sect	ion 179 property	placed in service (se	e instructions	s)		2	
3	Threshold cost of	section 179 pro	perty before reductio	n in limitation	(see instructio	ns)	3	2,500,000.
4								
5	<b>5</b> Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0 If married filing separately, see instructions							
							5	
6	(a)	Description of prope	rty	(b) Cost (busi	iness use only)	(c) Elected cost		-
								-
7	Listed property	nter the amount	from line 29		7			-
			property. Add amoun			7	8	
			aller of line 5 or line 8				9	
			from line 13 of your				10	
			smaller of business in				11	
12	Section 179 expe	nse deduction. A	Add lines 9 and 10, bu	ut don't enter	more than line	11	12	
13	Carryover of disal	lowed deductior	n to 2019. Add lines 9	and 10, less	line 12 🕨	13		
Note			/ for listed property. In					
Par	-	-				le listed property. See	instr	uctions.)
14						ty) placed in service		
			ns				14	
			1) election				15	
	Other depreciatio		<b>)on't</b> include listed			· · · · · · · ·	16	
ı aı		cpreciation (E		Section A		5.j		
17	MACRS deductio	ns for assets pla	ced in service in tax y		ng before 2018	}	17	
						one or more general		
	asset accounts, c	heck here				🕨 🗌		
	Section	B-Assets Place	ced in Service During	g 2018 Tax Y	ear Using the	<b>General Depreciation</b>	ı Syst	em
(a) (	Classification of propert	y (b) Month and year placed in service	(c) Basis for depreciation (business/investment use only—see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) D	epreciation deduction
19a	. , , , ,						<u> </u>	
b							<u> </u>	
	. , , , ,						<u> </u>	
	10-year property 15-year property						+	
	20-year property							
	25-year property			25 yrs.		S/L	+	
	Residential renta	06/18	324,990.	27.5 yrs.	MM	S/L	-	6,401.
	property		021/000	27.5 yrs.	MM	S/L		0,1011
i	Nonresidential re	al		39 yrs.	MM	S/L		
	property				MM	S/L		
		-Assets Place	ed in Service During	2018 Tax Ye	ar Using the A	Iternative Depreciation	on Sy	stem
	Class life					S/L	<u> </u>	
	12-year			12 yrs.		S/L	<u> </u>	
	30-year			30 yrs.	MM	S/L	<u> </u>	
	40-year t IV Summary	(See instruction		40 yrs.	MM	S/L	<u> </u>	
	Listed property. E		,				21	
				lines 19 and	20 in column	(g), and line 21. Enter	21	
مئلا مده			of your return. Partne				22	6,401.
23			ed in service during t	-	-			
			section 263A costs .			23		

# Additional information from your 2018 Federal Tax Return

# Form 2210: Underpayment of Estimated Tax

Line 17	Explanation Statement
Waiver Explanation Statement	
80% Waiver	

# Schedule E: Supplemental Income and Loss

Line 19 Other Expenses: Property (1) Co	ontinuation Statement
Expense Description	Amount
НОА	537.
Lawn maintenance	312.
Tota	al 849.

### Schedule E: Supplemental Income and Loss

## Line 19 Other Expenses: Property (2)

Expense Description	Amount
НОА	504.
Lawn maintenance	312.
Total	816.

# **Continuation Statement**