IF you live in	THEN use this address to send in your payment
Florida, Louisiana, Mississippi, Texas	Internal Revenue Service P.O. Box 1214 Charlotte, NC 28201-1214
Alaska, Arizona, California, Colorado, Hawaii, Idaho, Nevada, New Mexico, Oregon, Utah, Washington, Wyoming	Internal Revenue Service P.O. Box 7704 San Francisco, CA 94120-7704
Arkansas, Illinois, Indiana, Iowa, Kansas, Michigan, Minnesota, Montana, Nebraska, North Dakota, Ohio, Oklahoma, South Dakota, Wisconsin	Internal Revenue Service P.O. Box 802501 Cincinnati, OH 45280-2501
Alabama, Georgia, Kentucky, New Jersey, North Carolina, South Carolina, Tennessee, Virginia	Internal Revenue Service P.O. Box 931000 Louisville, KY 40293-1000
Delaware, Maine, Massachusetts, Missouri, New Hampshire, New York, Vermont	Internal Revenue Service P.O. Box 37008 Hartford, CT 06176-7008
Connecticut, District of Columbia, Maryland, Pennsylvania, Rhode Island, West Virginia	Internal Revenue Service P.O. Box 37910 Hartford, CT 06176-7910
A foreign country, American Samoa, or Puerto Rico (or are excluding income under Internal Revenue Code 933), or use an APO or FPO address, or file Form 2555, 2555-EZ, or 4563, or are a dual-status alien or nonpermanent resident of Guam or the U.S. Virgin Islands.	Internal Revenue Service P.O. Box 1303 Charlotte, NC 28201-1303

MAIL FORM 1040-V TO THE INTERNAL REVENUE SERVICE CENTER AT THE ADDRESS LISTED BELOW.

Form 1040-V 2018

 $\pmb{\nabla}$ Detach Here and Mail With Your Payment and Return $\pmb{\nabla}$

1040-V

Department of the Treasury

Internal Revenue Service (99)

2018

Payment Voucher

► Do not staple or attach this voucher to your payment or return.

3 Amount you are pay money order. Make y money order payable States Treasury"	our check or	Dollars	Cents
REV 12/22/18 PRO	1555		

YASHWANTH R AVIRINENI

945 S MESA HILLS DR 340 5400 XT 02A9

INTERNAL REVENUE SERVICE P.O. BOX 1214 CHARLOTTE, NC 28201-1214

		artment of the Treasury—Internal Revenue S. Individual Income			⁹⁹⁾ 20	18	MB No. 1545-0074	IRS Use O	nly—Do	not write or staple in this space.	
Filing status:		Single Married filing jointly				Head of hous	sehold Qualif	ying widow(e	_		
Your first name				ast name				<u>, , , , , , , , , , , , , , , , , , , </u>	<u> </u>	Ir social security number	
YASHWANT	'H I	R	I	VIRI	NENI				19	5-53-6079	
Your standard d	leducti	on: 🗌 Someone can claim you	as a de	pendent	You were	born before	anuary 2, 1954	You	are blin	d	
lf joint return, sp	ouse's	first name and initial	L	.ast name	;				Spo	ouse's social security number	
Spouse standard		ion: Someone can claim your s			·		orn before January	2, 1954		Full-year health care coverage or exempt (see inst.)	
Home address (945 S ME		er and street). If you have a P.O. box HILLS DR	x, see in:	structions	3.			Apt. no. 3403		sidential Election Campaign inst.) You Spouse	
City, town or po EL PASO		e, state, and ZIP code. If you have	a foreigr	n address	s, attach Schedu	le 6.	ł			nore than four dependents, e inst. and ✓ here ►	
Dependents ((2) Soc	ial security number	(3) Rel	lationship to you	(4	l)√ifau	ualifies for (see inst.):	
(1) First name		, Last name		(_,		(0)		Child tax			
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		enalties of perjury, I declare that I have e							nowledg	ge and belief, they are true,	
Here		and complete. Declaration of preparer (o	other than	taxpayer) i	I	1		nowledge.	ا بدین به		
Joint return?	Y	our signature			Date	Your occup			PIN, er	RS sent you an Identity Protection	
See instructions.							CATION DEVI	ELOPER	here (se		
Keep a copy for your records.	s	pouse's signature. If a joint return, k	both mu	st sign.	Date	Spouse's o	occupation		PIN, er	RS sent you an Identity Protection	
		, ,	_				DTIN		here (se		
Paid		Preparer's signature PTIN					irm's E				
Preparer	APF	APPANA RUPA VENKATA SATYA SAI MANIKUMAR P02090332							3rd Party Designee		
Use Only		rm's name 🕨 GLOBAL TAX					Phone no).		Self-employed	
	Fi	rm's address ► 2530 Pebbl	e Cr	eek I	n Cummin	g GA 30	0041				
For Disclosure, F	Privac	y Act, and Paperwork Reduction	Act Noti	ice, see s	separate instru	ctions.				Form 1040 (2018)	
Form 1040 (2018))										
										Page 2	
	1	Wades salaries tins etc. Attach	Form(s)	\M_2					4		
	1	Wages, salaries, tips, etc. Attach		W-2 .		 h]			1 2h	Page 2 43,252.	
Attach Form(s)	2a	Tax-exempt interest	2a	W-2 .			Taxable interest		2b		
W-2. Also attach Form(s) W-2G and	2a 3a	Tax-exempt interest Qualified dividends	2a 3a	W-2 .	· · · · ·	b(Ordinary dividends		2b 3b		
W-2. Also attach	2a 3a 4a	Tax-exempt interest Qualified dividends	2a 3a 4a	W-2 .	· · · · ·	b (b]	Ordinary dividends Taxable amount		2b 3b 4b		
W-2. Also attach Form(s) W-2G and 1099-R if tax was	2a 3a 4a 5a	Tax-exempt interest . Qualified dividends . IRAs, pensions, and annuities . Social security benefits .	2a 3a 4a 5a			b (b] b]	Ordinary dividends Taxable amount Taxable amount		2b 3b 4b 5b	43,252.	
W-2. Also attach Form(s) W-2G and 1099-R if tax was	2a 3a 4a 5a 6	Tax-exempt interest	2a 3a 4a 5a dd any an	nount from		b (b] b] 22,	Ordinary dividends Taxable amount Taxable amount 500.	· · ·	2b 3b 4b		
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W-2. Also attach Form(s) W-2G and 1099-R if tax was withheld.	2a 3a 4a 5a 6 7	Tax-exempt interest	2a3a4a5add any anave no ann line 6leduction	nount from adjustme ns (from S	nts to income,	b (b) 2 -2, enter the arr	Ordinary dividends Taxable amount Taxable amount 500. nount from line 6;	otherwise,	2b 3b 4b 5b 6 7	43,252. 40,752. 40,752.	
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W-2. Also attach Form(s) W-2G and 1099-R if tax was withheld. Standard Deduction for — • Single or married filing separately, \$12,000 • Married filing jointly or Qualifying widow(er), \$24,000 • Head of household, \$18,000 • If you checked any box under Standard deduction, see instructions. Refund	2a 3a 4a 5a 6 7 10 11 12 13 14 15 16 17 18 19 20a	Tax-exempt interestQualified dividendsQualified dividendsIRAs, pensions, and annuitiesSocial security benefitsTotal income. Add lines 1 through 5. Addiusted gross income. If you hSubtract Schedule 1, line 36, fromStandard deduction or itemized dQualified business income deductTaxable income. Subtract lines 8a Tax (see inst.) $3, 263$. (checkb Add any amount from Schedulea Child tax credit/credit for other dependentSubtract line 12 from line 11. If zeroOther taxes. Attach Schedule 4Total tax. Add lines 13 and 14Federal income tax withheld fromRefundable credits:a EIC (see inst.)Add any amount from Schedule 5Add ines 16 and 17. These are youIf line 18 is more than line 15, subAmount of line 19 you want refundableRouting numberX X X	2a 3a 4a 5a dd any an have no a and 9 from k if any from e 2 and 0 have no a have no a and 9 from and 9 from and 9 from and 9 from b condents c condents c condents c c condents c c condents c c c condents c c c c condents c c c c c c c c c c c c c c c c c c c	nount from adjustme ns (from S e instruction om line 7. om: 1 check her W-2 and . W-2 and . W-2 and . W-2 and . 	nts to income, 	b c b 1 b 1 c -2, enter the arr -2, enter the arr -2, enter the arr -2, enter the arr -2, enter -0- -2, 2 Form 4 . . .	Ordinary dividends Taxable amount Taxable amount 500	· · · · · · · · · · · · · · · · · · ·	2b 3b 4b 5b 6 7 8 9 10 11 12 13 14 15 16 17 18 19	40,752. 40,752. 12,000. 28,752. 3,263. 3,263. 0. 3,263. 0. 3,263. 3,168.	
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W-2. Also attach Form(s) W-2G and 1099-R if tax was withheld. Standard Deduction for— • Single or married filing separately, \$12,000 • Married filing jointly or Qualifying widow(er), \$24,000 • Head of household, \$18,000 • If you checked any box under Standard deduction, see instructions. Refund Direct deposit?	$\begin{array}{c} 2a \\ 3a \\ 4a \\ 5a \\ 6 \\ 7 \\ \hline \\ 8 \\ 9 \\ 10 \\ 11 \\ 12 \\ 13 \\ 14 \\ 15 \\ 16 \\ 17 \\ 18 \\ 19 \\ 20a \\ \blacktriangleright b \\ \blacktriangleright d \\ 21 \\ \end{array}$	Tax-exempt interest.Qualified dividends.Qualified dividends.IRAs, pensions, and annuitiesSocial security benefitsTotal income. Add lines 1 through 5. Addiusted gross income. If you hsubtract Schedule 1, line 36, fromStandard deduction or itemized dQualified business income deductTaxable income. Subtract lines 8a Tax (see inst.) $3, 263.$ (checkb Add any amount from Schedulea Child tax credit/credit for other dependentSubtract line 12 from line 11. If zerOther taxes. Attach Schedule 4Total tax. Add lines 13 and 14Federal income tax withheld fromRefundable credits:a ElC (see inst.)Add any amount from Schedule 5Add lines 16 and 17. These are yourIf line 18 is more than line 15, subAmount of line 19 you want refundRouting numberXX<	2a 3a 4a 5a dd any an nave no a addata	nount from adjustme ins (from S instruction from line 7. com: 1 [check her is, enter - W-2 and i payments a 15 from γου. If Foo ζ X 2 ζ X 2 2019 esti	nts to income, 	b (b 1 b 7 22, enter the arr 22, enter the arr 5 22, enter -0 2 _ Form 4 2 _ Form 4 4 2 2 2 4 4 5 5 5 5 6 7 7 8 9 9 10	Ordinary dividends Taxable amount Taxable amount 500	· · · · · · · · · · · · · · · · · · ·	2b 3b 4b 5b 6 7 8 9 10 11 12 13 14 15 16 17 18 19	43,252. 40,752. 40,752. 12,000. 28,752. 3,263. 3,263. 0. 3,263. 3,263. 3,168.	

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

SCHEDULE 1		OMB No. 1545-0074						
(Form 1040)	s to Income		2018					
Department of the Tre	atest information.							
Internal Revenue Serv		Sequence No. 01						
Name(s) shown on F YASHWANTH			social security number 5-53-6079					
		VIRINENI				5-53-6079		
Additional	1–9b		1–9b 10					
Income	10Taxable refunds, credits, or offsets of state and local income taxes11Alimony received							
	12	Business income or (loss). Attach Schedule C or C-EZ			11 12			
	12				13			
	13	Capital gain or (loss). Attach Schedule D if required. If not re Other gains or (losses). Attach Form 4797			14			
	15a	Reserved			14 15b			
	16a	Reserved			16b			
	17	Rental real estate, royalties, partnerships, S corporations, trust			17	-2,500.		
	18	Farm income or (loss). Attach Schedule F			18			
	19	Unemployment compensation			19			
	20a	Reserved			20b			
	21							
	22	Other income. List type and amount 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. Oth	erwise	e, go to line 23 .	22	-2,500.		
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 35	Reserved	34 35		-			
					26			
	36	Add lines 23 through 35		36				

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

SCHEDULE 1

Schedule 1 (Form 1040) 2018

OMB No. 1545-0074

REV 12/21/18 PRO

SCHEDULE	Ε
(Form 1040)	

Supplemental Income and Loss

OMB No. 1545-0074

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

► Attach to Form 1040, 1040NR, or Form 1041. for instructions and the latest information.

Department of the Treasury	Attach to Form
Internal Revenue Service (99)	

20 8 Attachment Sequence No. 13

. ,	shown on return										ity numb	er	
	WANTH R AVIRIN							-	95-53		-		
Part		From Rental Real Estate and Ro	-		-								
		EZ (see instructions). If you are an indiv		·							· · · · · · · · · · · · · · · · · · ·		
		nts in 2018 that would require you to		. ,		•	,					< No	
B If "		ou file required Forms 1099?									Yes	No	
_1a	-	each property (street, city, state, ZI		e)									
Α	HYDERABAD HYDE	RABAD TELANGANA IN 5000	72										
В													
С								_					
1b	Type of Property	2 For each rental real estate property listed above, report the number of fair rental and					Rental	Personal Use			Q	JV	
	(from list below)	personal use davs. Check the	QJV b	ОХ г			ays		Days			_	
	4	only if you meet the requireme a qualified joint venture. See ir	ents to i	file as	<u>A</u>		365	0					
			1311 4011	0113.	B							<u> </u>	
					С								
	of Property:		5 1	1		7 0 - 16	Dentel						
-	gle Family Residence	3 Vacation/Short-Term Rental				7 Self-							
Incom	ti-Family Residence	4 Commercial Properties:	6 KO	yalties	•	8 Othe	er (describe	/			С		
	-		3		Α	F 00		В	\rightarrow		C		
<u>3</u> 4			4			500.							
Expen		<u> </u>	4						+				
5			5										
6	-	nstructions)	6										
7	(7										
8			8										
9			9										
10		ssional fees	10										
11			11										
12	-	d to banks, etc. (see instructions)	12										
13			13		3	,000.							
14			14			,							
15	•		15										
16			16										
17			17										
18		or depletion	18										
19	Other (liet)		19										
20	Total expenses. Add	lines 5 through 19	20		3	,000.							
21	Subtract line 20 from	line 3 (rents) and/or 4 (royalties). If											
		instructions to find out if you must											
	file Form 6198		21		-2	,500.							
22		estate loss after limitation, if any,]						ſ				
	,	structions)	22	(-2,	500.)	()()	
23a		eported on line 3 for all rental prope				23a		5	00.				
b		eported on line 4 for all royalty prop				23b							
С		eported on line 12 for all properties				23c							
d		eported on line 18 for all properties		• •		23d							
е		eported on line 20 for all properties				23e		3,0					
24		e amounts shown on line 21. Do no						· ·	24				
25	Losses. Add royalty lo	sses from line 21 and rental real estate	e losses	s from lii	ne 22. I	Enter tota	al losses he	ere .	25 (2,	500.)	
26		ate and royalty income or (loss).											
		IV, and line 40 on page 2 do not											
		40), line 17, or Form 1040NR, line							26		2	500	
	total on line 41 on pag	ge2							26		-2	,500.	