

▼ Detach Here and Mail With Your Payment ▼

Department of the Treasury
Internal Revenue Service

Calendar Year —
Due **04/15/2019**

2019 Form 1040-ES Payment Voucher 1

File only if you are making a payment of estimated tax by check or money order. Mail this voucher with your check or money order payable to the **'United States Treasury.'** Write your social security number and '2019 Form 1040-ES' on your check or money order. Do not send cash. Enclose, but do not staple or attach, your payment with this voucher.

Amount of estimated tax
you are paying by check
or money order ▶

457.

REV 10/17/18 PRO 1555

014-47-3823
JAYANTH BABU MALEPATI

200 MANVILLE HILL RD APT 8A
CUMBERLAND RI 02864

INTERNAL REVENUE SERVICE
PO BOX 37007
HARTFORD CT 06176-7007

014473823 KK MALE 30 0 201912 430

▼ Detach Here and Mail With Your Payment ▼

Department of the Treasury
Internal Revenue Service

Calendar Year—
Due **06/17/2019**

2019 Form 1040-ES Payment Voucher 2

File only if you are making a payment of estimated tax by check or money order. Mail this voucher with your check or money order payable to the **'United States Treasury.'** Write your social security number and '2019 Form 1040-ES' on your check or money order. Do not send cash. Enclose, but do not staple or attach, your payment with this voucher.

Amount of estimated tax you are paying by check or money order ▶	457.
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REV 10/17/18 PRO 1555

014-47-3823
JAYANTH BABU MALEPATI

200 MANVILLE HILL RD APT 8A
CUMBERLAND RI 02864

INTERNAL REVENUE SERVICE
PO BOX 37007
HARTFORD CT 06176-7007

014473823 KK MALE 30 0 201912 430

▼ Detach Here and Mail With Your Payment ▼

Department of the Treasury
Internal Revenue Service

Calendar Year—
Due **09/16/2019**

2019 Form 1040-ES Payment Voucher 3

File only if you are making a payment of estimated tax by check or money order. Mail this voucher with your check or money order payable to the **'United States Treasury.'** Write your social security number and '2019 Form 1040-ES' on your check or money order. Do not send cash. Enclose, but do not staple or attach, your payment with this voucher.

Amount of estimated tax
you are paying by check
or money order ▶

457.

REV 10/17/18 PRO 1555

014-47-3823
JAYANTH BABU MALEPATI
200 MANVILLE HILL RD APT 8A
CUMBERLAND RI 02864

INTERNAL REVENUE SERVICE
PO BOX 37007
HARTFORD CT 06176-7007

014473823 KK MALE 30 0 201912 430

▼ Detach Here and Mail With Your Payment ▼

Department of the Treasury
Internal Revenue Service

Calendar Year—
Due **01/15/2020**

2019 Form 1040-ES Payment Voucher 4

File only if you are making a payment of estimated tax by check or money order. Mail this voucher with your check or money order payable to the **'United States Treasury.'** Write your social security number and '2019 Form 1040-ES' on your check or money order. Do not send cash. Enclose, but do not staple or attach, your payment with this voucher.

Amount of estimated tax
you are paying by check
or money order ▶

457.

REV 10/17/18 PRO 1555

014-47-3823
JAYANTH BABU MALEPATI

200 MANVILLE HILL RD APT 8A
CUMBERLAND RI 02864

INTERNAL REVENUE SERVICE
PO BOX 37007
HARTFORD CT 06176-7007

014473823 KK MALE 30 0 201912 430

IRS e-file Signature Authorization

2018

Department of the Treasury
Internal Revenue Service

▶ **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) ▶ 5872782019083010a5r6

Taxpayer's name JAYANTH BABU MALEPATI	Social security number 014-47-3823
Spouse's name	Spouse's social security number

Part I Tax Return Information – Tax Year Ending December 31, 2018 (Whole dollars only)

1 Adjusted gross income (Form 1040, line 7; Form 1040NR, line 35)	1	75,928.
2 Total tax (Form 1040, line 15; Form 1040NR, line 61)	2	10,003.
3 Federal income tax withheld from Forms W-2 and 1099 (Form 1040, line 16; Form 1040NR, line 62a)	3	8,175.
4 Refund (Form 1040, line 20a; Form 1040-SS, Part I, line 13a; Form 1040NR, line 73a)	4	
5 Amount you owe (Form 1040, line 22; Form 1040NR, line 75)	5	1,828.

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 PIN: check one box only

I authorize GLOBAL TAXES LLC to enter or generate my PIN as my signature on my tax year 2018 electronically filed income tax return.

7	3	8	2	3
---	---	---	---	---

Enter five digits, but don't enter all zeros

I will enter my PIN as my signature on my tax year 2018 electronically filed income tax return. Check this box **only** if you are entering your own PIN **and** your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Your signature ▶ _____ Date ▶ _____

Spouse's PIN: check one box only

I authorize _____ to enter or generate my PIN as my signature on my tax year 2018 electronically filed income tax return.

--	--	--	--	--

Enter five digits, but don't enter all zeros

I will enter my PIN as my signature on my tax year 2018 electronically filed income tax return. Check this box **only** if you are entering your own PIN **and** your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Spouse's signature ▶ _____ Date ▶ _____

Practitioner PIN Method Returns Only—continue below

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.

5	8	7	2	7	8	1	2	3	4	5
---	---	---	---	---	---	---	---	---	---	---

Don't enter all zeros

I certify that the above numeric entry is my PIN, which is my signature for the tax year 2018 electronically filed income tax return for the taxpayer(s) indicated above. I confirm that I am submitting this return in accordance with the requirements of the Practitioner PIN method and **Pub. 1345**, Handbook for Authorized IRS e-file Providers of Individual Income Tax Returns.

ERO's signature ▶ _____ Date ▶ _____

ERO Must Retain This Form – See Instructions
Don't Submit This Form to the IRS Unless Requested To Do So

Acknowledgement and General Information for Taxpayers Who File Returns Electronically

Thank you for participating in IRS *e-file*.

014-47-3823

Taxpayer name JAYANTH BABU MALEPATI

Taxpayer address (optional)

200 MANVILLE HILL RD APT 8A

CUMBERLAND RI 02864

1. Your federal income tax return for 2018 was filed electronically with the Andover Submission Processing Center. The electronic filing services were provided by GLOBAL TAXES LLC.
2. Your return was accepted on 03/24/2019 using a Personal Identification Number (PIN) as your electronic signature. You entered a PIN or authorized the Electronic Return Originator (ERO) to enter or generate a PIN for you. The Submission ID assigned to your return is 5872782019083010a5r6.
3. Your return was accepted on _____ Allow 4 to 6 weeks for the processing of your return. The Earned Income Credit or a dependent's exemption on your return may be reduced or disallowed due to a child's name and social security number mismatch.
4. Your electronic funds withdrawal payment request was accepted for processing.
5. Your electronic funds withdrawal payment request was not accepted for processing. Refer to the "If You Owe Tax" section.
6. Your Form 4868, Application for Automatic Extension of Time to File U.S. Individual Income Tax Return, was accepted on _____. The Submission ID assigned to your extension is _____.

**DO NOT SEND A PAPER COPY OF YOUR RETURN TO THE IRS.
IF YOU DO, IT WILL DELAY THE PROCESSING OF THE RETURN.**

If You Need to Make a Change to Your Return

If you need to make a change or correct the return you filed electronically, you should send a Form 1040X, Amended U.S. Individual Income Tax Return, to the IRS Submission Processing Center that processes paper returns for your area. The address is available at www.irs.gov, or you can call the IRS toll-free at 1-800-829-1040.

If You Need to Ask About Your Refund

The IRS notifies your Electronic Return Originator (ERO) when your return is accepted, usually within 48 hours. If your return was not accepted, the IRS notifies your ERO of the reasons for rejection. If it has been more than three weeks since the IRS accepted your return and you have not received your refund, go to www.irs.gov and click on "Where's My Refund?" to view your refund status. Exception: If box 3 above is checked, allow 4 to 6 weeks for processing of your return. A notice will be sent to you advising of changes to your return.

Also, you can call the TeleTax line at 1-800-829-4477, for automated refund information. You should have available the first social security number shown on your return, your filing status, and the exact amount of the refund you expect. TeleTax gives you the date for mailing or depositing your refund. You should receive your refund check within 30 days of the date given by TeleTax, or within one week of that date, if you chose direct deposit. If you do not receive it by then, or if TeleTax does not give your refund information, call the Refund Hotline at 1-800-829-1954.

The IRS uses refunds to cover overdue taxes and notifies you when this occurs. The Fiscal Service offsets refunds through the Treasury Offset Program to cover past due child support, federal agency non-tax debts such as student loans and state income tax obligations. Fiscal Service sends you an offset notice if it applies your refund or part of your refund to non-tax debts. If you have questions about the offset, contact the agency identified in the notice. You may also call the Treasury Offset Program Call Center at 1-800-304-3107, if you have additional questions.

If You Owe Tax

If your return has a balance due, you must pay the amount you owe by the prescribed due date. If you paid by electronic funds withdrawal (direct debit) or by credit card, no voucher is needed. The credit card service providers will charge a convenience fee based on the amount of taxes you are paying. The fees and the type of credit or debit cards accepted may vary between providers. You will be told the amount of the fee during the transaction and you will be given the option to either continue or end the transaction. For information on paying your taxes electronically, including by credit or debit card, go to www.irs.gov/e-pay.

If you are not paying electronically you may use Form 1040-V, Payment Voucher, which you can obtain from your Electronic Return Originator. If the IRS does not receive your payment by the prescribed due date, you will receive a notice that requests full payment of the tax due, plus penalties and interest. If you can not pay the amount in full, complete Form 9465, Installment Agreement Request, which you may file electronically. To apply for an installment agreement online, go to www.irs.gov. You may also order Form 9465 by calling 1-800-TAX-FORM (1-800-829-3676). If approved, the IRS charges a user fee to set up an installment agreement.

If You Need to Inquire About Your Electronic Funds Withdrawal Payment

You may call 1-888-353-4537 to inquire about the status of your electronic funds withdrawal payment. If there is a change to the bank account information included on your return, you should call this number to cancel a scheduled payment. You should have available the social security number of the first person listed on the tax return, the payment amount, and the bank account number. Cancellation requests must be received no later than 11:59 p.m. E.T. two business days prior to the scheduled payment date.

Tax Refund Related Financial Products

Financial institutions offer a variety of financial products to taxpayers based on their refunds. Contracts for financial products are between you and the financial institution. The IRS is not associated with the contract. **If you have questions about tax refund related products, contact your Electronic Return Originator or the lender.**

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.

▼ Detach Here and Mail With Your Payment and Return ▼

Form **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 paying by check or money order. Make your check or money order payable to "United States Treasury"	Dollars Cents <div style="text-align: right; font-size: 1.2em;">1,828.</div>
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REV 12/22/18 PRO 1555

JAYANTH BABU MALEPATI
200 MANVILLE HILL RD & A
CUMBERLAND RI 02864

INTERNAL REVENUE SERVICE
P.O. BOX 37910
HARTFORD, CT 06176-7910

014473823 KK MALE 30 0 201812 610

Filing status: Single Married filing jointly Married filing separately Head of household Qualifying widow(er)

Your first name and initial: **JAYANTH BABU** Last name: **MALEPATI** Your social security number: **014-47-3823**

Your standard deduction: Someone can claim you as a dependent You were born before January 2, 1954 You are blind

If joint return, spouse's first name and initial: _____ Last name: _____ Spouse's social security number: _____

Spouse standard deduction: Someone can claim your spouse as a dependent Spouse was born before January 2, 1954 Full-year health care coverage or exempt (see inst.)

Spouse is blind Spouse itemizes on a separate return or you were dual-status alien

Home address (number and street). If you have a P.O. box, see instructions. **200 MANVILLE HILL RD** Apt. no. **8A** Presidential Election Campaign (see inst.) You Spouse

City, town or post office, state, and ZIP code. If you have a foreign address, attach Schedule 6. **CUMBERLAND RI 02864** If more than four dependents, see inst. and ✓ here

Dependents (see instructions):		(2) Social security number	(3) Relationship to you	(4) ✓ if qualifies for (see inst.):	
(1) First name	Last name			Child tax credit	Credit for other dependents
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

Sign Here Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Joint return? See instructions. Keep a copy for your records.

Your signature: _____ Date: _____ Your occupation: **SOFTWARE ENGINEER**

Spouse's signature. If a joint return, both must sign. _____ Date: _____ Spouse's occupation: _____

If the IRS sent you an Identity Protection PIN, enter it here (see inst.)

If the IRS sent you an Identity Protection PIN, enter it here (see inst.)

Paid Preparer Use Only

Preparer's name: **APPANA RUPA VENKATA SATYA SAI MANIKUMAR** Preparer's signature: _____ PTIN: **P02090332** Firm's EIN: _____ Check if: 3rd Party Designee Self-employed

Firm's name: **GLOBAL TAXES LLC** Phone no.: _____

Firm's address: **2530 Pebble Creek Ln Cumming GA 30041**

For Disclosure, Privacy Act, and Paperwork Reduction Act Notice, see separate instructions. Form **1040** (2018)

1	Wages, salaries, tips, etc. Attach Form(s) W-2	1	84,028.
2a	Tax-exempt interest	2b	
3a	Qualified dividends	3b	
4a	IRAs, pensions, and annuities	4b	
5a	Social security benefits	5b	
6	Total income. Add lines 1 through 5. Add any amount from Schedule 1, line 22 -8,100.	6	75,928.
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	75,928.
8	Standard deduction or itemized deductions (from Schedule A)	8	12,000.
9	Qualified business income deduction (see instructions)	9	
10	Taxable income. Subtract lines 8 and 9 from line 7. If zero or less, enter -0-	10	63,928.
11	a Tax (see inst.) 10,003. (check if any from: 1 <input type="checkbox"/> Form(s) 8814 2 <input type="checkbox"/> Form 4972 3 <input type="checkbox"/>)	11	10,003.
12	b Add any amount from Schedule 2 and check here <input type="checkbox"/>	12	10,003.
13	a Child tax credit/credit for other dependents b Add any amount from Schedule 3 and check here <input type="checkbox"/>	13	10,003.
14	Subtract line 12 from line 11. If zero or less, enter -0-	14	0.
15	Other taxes. Attach Schedule 4	15	10,003.
16	Total tax. Add lines 13 and 14	16	8,175.
17	Federal income tax withheld from Forms W-2 and 1099	17	
18	Refundable credits: a EIC (see inst.) No b Sch. 8812 c Form 8863	18	8,175.
19	Add any amount from Schedule 5	19	
20a	Add lines 16 and 17. These are your total payments	20a	
21	If line 18 is more than line 15, subtract line 15 from line 18. This is the amount you overpaid	21	
22	Amount of line 19 you want refunded to you . If Form 8888 is attached, check here <input type="checkbox"/>	22	1,828.
23	Routing number X X X X X X X X X X c Type: <input type="checkbox"/> Checking <input type="checkbox"/> Savings	23	0.
24	Account number X X X X X X X X X X X X X X X X X X		
25	Amount of line 19 you want applied to your 2019 estimated tax	25	
26	Amount you owe . Subtract line 18 from line 15. For details on how to pay, see instructions	26	1,828.
27	Estimated tax penalty (see instructions)	27	0.

SCHEDULE 1
(Form 1040)

Additional Income and Adjustments to Income

OMB No. 1545-0074

2018
Attachment
Sequence No. **01**

Department of the Treasury
Internal Revenue Service

▶ **Attach to Form 1040.**

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

Name(s) shown on Form 1040

JAYANTH BABU MALEPATI

Your social security number

014-47-3823

Additional Income	1-9b	Reserved		1-9b	
	10	Taxable refunds, credits, or offsets of state and local income taxes		10	
	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 ▶ <input type="checkbox"/>		13	
	14	Other gains or (losses). Attach Form 4797		14	
	15a	Reserved		15b	
	16a	Reserved		16b	
	17	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E		17	-8,100.
	18	Farm income or (loss). Attach Schedule F		18	
	19	Unemployment compensation		19	
	20a	Reserved		20b	
	21	Other income. List type and amount ▶ _____		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. Otherwise, go to line 23		22	-8,100.
Adjustments to Income	23	Educator expenses	23		
	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

**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.

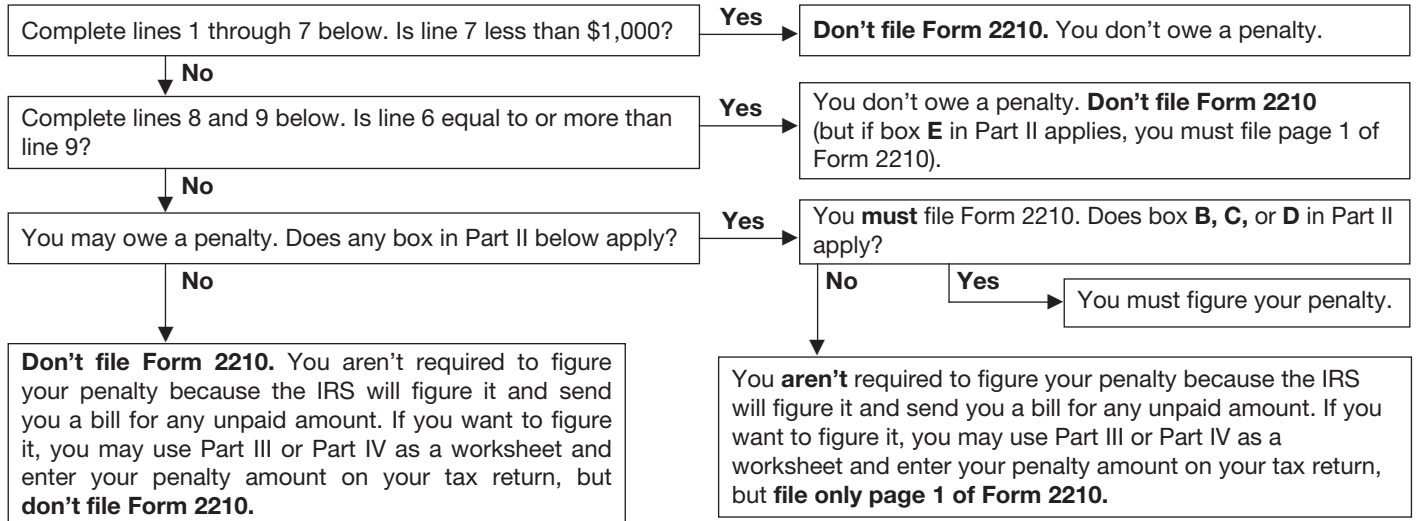
Name(s) shown on tax return

JAYANTH BABU MALEPATI

Identifying number

014-47-3823

Do You Have To File Form 2210?



Part I Required Annual Payment

1	Enter your 2018 tax after credits from Form 1040, line 13 (see instructions if not filing Form 1040)	1	10,003.
2	Other taxes, including self-employment tax and, if applicable, Additional Medicare Tax and/or Net Investment Income Tax (see instructions)	2	
3	Refundable credits, including the premium tax credit (see instructions)	3	()
4	Current year tax. Combine lines 1, 2, and 3. If less than \$1,000, stop ; you don't owe a penalty. Don't file Form 2210	4	10,003.
5	Multiply line 4 by 90% (0.90)	5	9,003.
6	Withholding taxes. Don't include estimated tax payments (see instructions)	6	8,175.
7	Subtract line 6 from line 4. If less than \$1,000, stop ; you don't owe a penalty. Don't file Form 2210	7	1,828.
8	Maximum required annual payment based on prior year's tax (see instructions)	8	
9	Required annual payment. Enter the smaller of line 5 or line 8	9	9,003.

Next: Is line 9 more than line 6?

- No.** You **don't** owe a penalty. **Don't** file Form 2210 unless box **E** below applies.
- Yes.** You may owe a penalty, but **don't** file Form 2210 unless one or more boxes in Part II below applies.
 - If box **B, C, or D** applies, you must figure your penalty and file Form 2210.
 - If box **A or E** applies (but not **B, C, or D**) file only page 1 of Form 2210. You **aren't** required to figure your penalty; the IRS will figure it and send you a bill for any unpaid amount. If you want to figure your penalty, you may use Part III or IV as a worksheet and enter your penalty on your tax return, but **file only page 1 of Form 2210**.

Part II Reasons for Filing. Check applicable boxes. If none apply, **don't** file Form 2210.

- A** You request a **waiver** (see instructions) of your entire penalty due to tax reform or other reasons. You must check this box and file page 1 of Form 2210, but you aren't required to figure your penalty. 80% Waiver
- B** You request a **waiver** (see instructions) of part of your penalty. You must figure your penalty and waiver amount and file Form 2210.
- C** Your income varied during the year and your penalty is reduced or eliminated when figured using the **annualized income installment method**. You must figure the penalty using Schedule AI and file Form 2210.
- D** Your penalty is lower when figured by treating the federal income tax withheld from your income as paid on the dates it was actually withheld, instead of in equal amounts on the payment due dates. You must figure your penalty and file Form 2210.
- E** You filed or are filing a joint return for either 2017 or 2018, but not for both years, and line 8 above is smaller than line 5 above. You must file page 1 of Form 2210, but you **aren't** required to figure your penalty (unless box **B, C, or D** applies).

**SCHEDULE E
(Form 1040)**

Supplemental Income and Loss

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

OMB No. 1545-0074

2018
Attachment
Sequence No. **13**

Department of the Treasury
Internal Revenue Service (99)

▶ Attach to Form 1040, 1040NR, or Form 1041.

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

Name(s) shown on return

JAYANTH BABU MALEPATI

Your social security number

014-47-3823

Part I 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.

A Did you make any payments in 2018 that would require you to file Form(s) 1099? (see instructions) Yes No

B If "Yes," did you or will you file required Forms 1099? Yes No

1a	Physical address of each property (street, city, state, ZIP code)				
A	TIRUCHANOOR ROAD TIRUPATI ANDHRAPRADESH IN 517501				
B					
C					
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 only if you meet the requirements to file as a qualified joint venture. See instructions.	Fair Rental Days	Personal Use Days	QJV
A	3		A 365	0	<input type="checkbox"/>
B			B		<input type="checkbox"/>
C			C		<input type="checkbox"/>

Type of Property:

- 1 Single Family Residence 3 Vacation/Short-Term Rental 5 Land 7 Self-Rental
- 2 Multi-Family Residence 4 Commercial 6 Royalties 8 Other (describe)

Income:		Properties:		A	B	C
3	Rents received	3		500.		
4	Royalties received	4				
Expenses:						
5	Advertising	5		200.		
6	Auto and travel (see instructions)	6		400.		
7	Cleaning and maintenance	7				
8	Commissions.	8				
9	Insurance	9				
10	Legal and other professional fees	10				
11	Management fees	11				
12	Mortgage interest paid to banks, etc. (see instructions)	12				
13	Other interest.	13		8,000.		
14	Repairs.	14				
15	Supplies	15				
16	Taxes	16				
17	Utilities.	17				
18	Depreciation expense or depletion	18				
19	Other (list) ▶	19				
20	Total expenses. Add lines 5 through 19	20		8,600.		
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	21		-8,100.		
22	Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions)	22		(-8,100.)	()	()
23a	Total of all amounts reported on line 3 for all rental properties	23a		500.		
b	Total of all amounts reported on line 4 for all royalty properties	23b				
c	Total of all amounts reported on line 12 for all properties	23c				
d	Total of all amounts reported on line 18 for all properties	23d				
e	Total of all amounts reported on line 20 for all properties	23e		8,600.		
24	Income. Add positive amounts shown on line 21. Do not include any losses	24				
25	Losses. Add royalty losses from line 21 and rental real estate losses from line 22. Enter total losses here	25		(8,100.)		
26	Total rental real estate and royalty income or (loss). Combine lines 24 and 25. Enter the result here. If Parts II, III, IV, and line 40 on page 2 do not apply to you, also enter this amount on Schedule 1 (Form 1040), line 17, or Form 1040NR, line 18. Otherwise, include this amount in the total on line 41 on page 2.	26				-8,100.

Additional information from your 2018 Federal Tax Return

Form 2210: Underpayment of Estimated Tax

Line 17

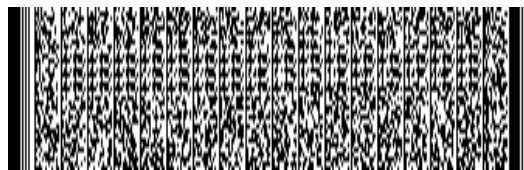
Explanation Statement

Waiver Explanation Statement
80% Waiver

State of Rhode Island and Providence Plantations
2018 Form RI-1040
 Resident Individual Income Tax Return



18100115550101



Your social security number Spouse's social security number

Your first name MI Last name Suffix

Spouse's name MI Last name Suffix

Address

City, town or post office State ZIP code

City or town of legal residence Check each box that applies. Otherwise, leave blank. Primary deceased? Spouse deceased? New address? Amended Return? *

ELECTORAL CONTRIBUTION If you want \$5.00 (\$10.00 if a joint return) to go to this fund, check here. (See instructions. This will not increase your tax or reduce your refund.) Yes If you wish the 1st \$2.00 (\$4.00 if a joint return) be paid to a specific party, check the box and fill in the name of the political party. Otherwise, it will be paid to a nonpartisan general account.

FILING STATUS Check one

Single Married filing jointly Married filing separately Head of household Qualifying widow(er)

INCOME, TAX AND CREDITS	1	2	3	4	5	6	7	8	9a	9b	9c	9d	10a	10b	11	12	13a	
1 Federal AGI from Federal Form 1040, line 7.....	1																	75928 00
2 Net modifications to Federal AGI from RI Sch M, line 3. If no modifications, enter 0 on this line.	2																	0 00
3 Modified Federal AGI. Combine lines 1 and 2 (add net increases or subtract net decreases)....	3																	75928 00
4 RI Standard Deduction from left. If line 3 is over \$199,000, see Standard Deduction Worksheet	4																	8525 00
5 Subtract line 4 from line 3. If zero or less, enter 0.....	5																	67403 00
6 Enter # of exemptions from RI Sch E, line 5 in box, multiply by \$4,000 and enter result on line 6. If line 3 is over \$199,000, see Exemption Worksheet	6								1	X \$4,000 =								4000 00
7 RI TAXABLE INCOME. Subtract line 6 from line 5. If zero or less, enter 0.....	7																	63403 00
8 RI income tax from Rhode Island Tax Table or Tax Computation Worksheet.....	8																	2387 00
9a RI percentage of allowable Federal credit from page 3, RI Sch I, line 22.....	9a																	00
b RI Credit for income taxes paid to other states from page 3, RI Sch II, line 29.....	9b																	00
c Other Rhode Island Credits from RI Schedule CR, line 8.....	9c																	00
d Total RI credits. Add lines 9a, 9b and 9c.....	9d																	00
10a Rhode Island income tax after credits. Subtract line 9d from line 8 (not less than zero).....	10a																	2387 00
b Recapture of Prior Year Other Rhode Island Credits from RI Schedule CR, line 11.....	10b																	00
11 RI checkoff contributions from page 3, RI Checkoff Schedule, line 37. Contributions reduce your refund or increase your balance due	11																	0 00
12 USE/SALES tax due from RI Schedule U, line 4 or line 8, whichever applies	12																	00
13a TOTAL RI TAX AND CHECKOFF CONTRIBUTIONS. Add lines 10a, 10b, 11 and 12.....	13a																	2387 00

Rhode Island Standard Deduction
 Single **\$8,525**
 Married filing jointly or Qualifying widow(er) **\$17,050**
 Married filing separately **\$8,525**
 Head of household **\$12,800**

Using a paper clip, please attach Forms W-2 and 1099 here.

Check to certify use tax amount on line 12 is accurate.

* If filing an amended return, attach the Explanation of Changes supplemental page



18100115550102

Name(s) shown on Form RI-1040 or RI-1040NR JAYANTH BABU MALEPATI	Your social security number 014-47-3823
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PAYMENTS AND PROPERTY TAX RELIEF CREDIT

13b TOTAL RI TAX AND CHECKOFF CONTRIBUTIONS from line 13a.....	13b	2387	00
14a RI 2018 income tax withheld from RI Schedule W, line 16. You must attach Sch W AND all W-2 and 1099 forms with RI withholding.	14a	2467	00
b 2018 estimated tax payments and amount applied from 2017 return....	14b		00
c Property tax relief credit from RI-1040H, line 13. Attach RI-1040H.....	14c		00
d RI earned income credit from page 3, RI Schedule EIC, line 40.....	14d		00
e RI Residential Lead Paint Credit from RI-6238, line 7. Attach RI-6238..	14e		00
f Other payments.....	14f		00
g TOTAL PAYMENTS AND CREDITS. Add lines 14a, 14b, 14c, 14d, 14e and 14f.....	14g	2467	00
h Previously issued overpayments (if filing an amended return).....	14h		00
i NET PAYMENTS. Subtract line 14h from line 14g.....	14i	2467	00
15a AMOUNT DUE. If line 13b is LARGER than line 14i, subtract line 14i from line 13b.....	15a		00
b Enter the amount of underestimating interest due from Form RI-2210 or RI-2210A. (attach form) This amount should be added to line 15a or subtracted from line 16, whichever applies.....	15b	0	00
c TOTAL AMOUNT DUE. Add lines 15a and 15b. Complete RI-1040V and send in with your payment ☹	15c		00
16 AMOUNT OVERPAID. If line 14i is LARGER than line 13b, subtract line 13b from line 14i. If there is an amount due for underestimating interest on line 15b, subtract line 15b from line 16..... ☺	16	80	00
17 Amount of overpayment to be refunded.....	17	80	00
18 Amount of overpayment to be applied to 2019 estimated tax.....	18	0	00

Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, it is true, accurate and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Your signature	Your driver's license number and state	Date	Telephone number
	S66736523 MA		832-226-1104
Spouse's signature	Spouse's driver's license number and state	Date	Telephone number
Paid preparer signature	Print name	Date	Telephone number
GLOBAL TAXES LLC			
Paid preparer address	City, town or post office	State	ZIP code PTIN
2530 PEBBLE CREEK LN	CUMMING	GA	30041 P02090332



18100115550103

Name(s) shown on Form RI-1040 or RI-1040NR JAYANTH BABU MALEPATI	Your social security number 014-47-3823
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RI SCHEDULE I - ALLOWABLE FEDERAL CREDIT

19	RI income tax from page 1, line 8	19		00
20	Credit for child and dependent care expenses from Federal Form 1040, Schedule 3, line 49.....	20		00
21	Tentative allowable federal credit. Multiply line 20 by 25% (0.2500).....	21		00
22	MAXIMUM CREDIT. Line 19 or 21, whichever is SMALLER. Enter here and on page 1, line 9a.....	22		00

RI SCHEDULE II - CREDIT FOR INCOME TAX PAID TO ANOTHER STATE

(ATTACH COPY OF OTHER STATE(S) RETURN)

23	RI income tax from RI-1040, page 1, line 8 less allowable federal credit from RI-1040, page 3, line 22	23		00
24	Income derived from other state. If more than one state, see instructions.....	24		00
25	Modified federal AGI from page 1, line 3.....	25		00
26	Divide line 24 by line 25	26		
27	Tentative credit. Multiply line 23 by line 26.....	27		00
28	Tax due and paid to other state (see specific instructions). Insert abbreviation for state paid _____	28		00
29	MAXIMUM TAX CREDIT. Line 23, 27 or 28, whichever is the SMALLEST. Enter here and on pg 1, line 9b	29		00

RI CHECKOFF CONTRIBUTIONS SCHEDULE

		\$1.00	\$5.00	\$10.00	Other			
30	Drug program account RIGL §44-30-2.4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	30		00
31	Olympic Contribution RIGL §44-30-2.1 Yes <input type="checkbox"/> \$1.00 contribution (\$2.00 if a joint return)					31		00
32	RI Organ Transplant Fund RIGL §44-30-2.5	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	32		00
33	RI Council on the Arts RIGL §42-75.1-1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	33		00
34	Nongame Wildlife Fund RIGL §44-30-2.2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	34		00
35	Childhood Disease Victim's Fund RIGL §44-30-2.3 and Substance Use and Mental Health Leadership Council of RI RIGL §44-30-2.11	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	35		00
36	RI Military Family Relief Fund RIGL §44-30-2.9	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	36		00
37	TOTAL CONTRIBUTIONS. Add lines 30 through 36. Enter here and on RI-1040, page 1, line 11					37		00

RI SCHEDULE EIC - RHODE ISLAND EARNED INCOME CREDIT

38	Federal earned income credit from Federal Form 1040, line 17a	38		00
39	Rhode Island percentage	39	15%	
40	RI EARNED INCOME CREDIT. Multiply line 38 by line 39. Enter here and on RI-1040, page 2, line 14d	40		00

2018 RI Schedule W

Rhode Island W-2 and 1099 Information



18101015550101

Name(s) shown on Form RI-1040 or RI-1040NR JAYANTH BABU MALEPATI	Your social security number 014-47-3823
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Complete this Schedule listing all of your and, if applicable, your spouse's W-2s and 1099s showing Rhode Island Income Tax withheld. W-2s or 1099s showing Rhode Island Income Tax withheld must still be attached to the front of your return.

Failure to do so may delay the processing of your return. ATTACH THIS SCHEDULE W TO YOUR RETURN

Column A	Column B	Column C	Column D	Column E
Enter "S" if Spouse's W-2 or 1099	Enter 1099 letter code from chart	Employer's Name from Box C of your W-2 or Payer's Name from your Form 1099	Employer's state ID # from box 15 of your W-2 or Payer's Federal ID # from Form 1099	Rhode Island Income Tax Withheld (SEE BELOW FOR BOX REFERENCES)
1		HUMAC INC	204860650	2467 00
2				00
3				00
4				00
5				00
6				00
7				00
8				00
9				00
10				00
11				00
12				00
13				00
14				00
15				00
16	Total RI Income Tax Withheld. Add lines 1 through 15, Col. E. Enter total here and on RI-1040, line 14a or RI-1040NR, line 17a.....			2467 00
17	Total number of W-2s and 1099s showing Rhode Island Income Tax Withheld			1

Form Type	Letter Code for Column B	Withholding Box	Form Type	Letter Code for Column B	Withholding Box	Form Type	Letter Code for Column B	Withholding Box
W-2	-	17	1099-DIV	D	15	1099-MISC	M	16
W-2G	-	15	1099-G	G	11	1099-OID	O	14
1042-S	S	17a	1099-INT	I	17	1099-R	R	12
1099-B	B	16	1099-K	K	8	RI-1099PT	P	9

State of Rhode Island and Providence Plantations
2018 RI Schedule E
 Exemption Schedule for RI-1040 and RI-1040NR



18105915550101

Name(s) shown on Form RI-1040 or RI-1040NR	Your social security number
JAYANTH BABU MALEPATI	014-47-3823

EXEMPTIONS

Complete this Schedule listing all individuals you can claim as a dependent.

ATTACH THIS EXEMPTION SCHEDULE TO YOUR RETURN

Failure to do so may delay the processing of your return.

1a	Yourself	<input checked="" type="checkbox"/>
b	Spouse	<input type="checkbox"/>

	(A) Name of Dependent	(B) Social Security Number	(C) Date of Birth	(D) Relationship
2a				
b				
c				
d				
e				
f				
g				
h				
i				
j				
k				
l				
m				

Exemption Number Summary

3	Enter the number of boxes checked on lines 1a and 1b	3	1
4a	Enter the number of children from lines 2a through 2m who lived with you	4a	0
b	Enter the number of children from lines 2a through 2m who did not live with you due to divorce or separation	4b	0
c	Enter the number of other dependents from lines 2a through 2m not included on lines 4a or 4b.	4c	0
5	Add the numbers from lines 3 through 4c. Enter here and in the box on RI-1040/NR, pg 1, line 6.	5	1