Form **8879**

IRS e-file Signature Authorization

OMB No. 1545-0074

2018

Department of the Treasury Internal Revenue Service

Submission Identification Number (SID)

► Return completed Form 8879 to your ERO. (Don't send to the IRS.)

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

· · · · · · · · · · · · · · · · · · ·					
Taxpayer's name	Social security numb	per			
SRIHARI SWARNA	<u> </u>				
Spouse's name	urity number	ty number			
Part I Tax Return Information — Tax Year Ending December 31, 201	18 (Whole dollars only	/)			
1 Adjusted gross income (Form 1040, line 7; Form 1040NR, line 35)			103,500.		
2 Total tax (Form 1040, line 15; Form 1040NR, line 61)			16,256.		
3 Federal income tax withheld from Forms W-2 and 1099 (Form 1040, line 16; F			20,353.		
4 Refund (Form 1040, line 20a; Form 1040-SS, Part I, line 13a; Form 1040NR, line			4,097.		
5 Amount you owe (Form 1040, line 22; Form 1040NR, line 75)			27057.1		
Part II Taxpayer Declaration and Signature Authorization (Be sure ye			ur return)		
Under penalties of perjury, I declare that I have examined a copy of my electronic individual incomfor the tax year ending December 31, 2018, and to the best of my knowledge and belief, they are trunder Part I above are the amounts from my electronic income tax return. I consent to allow my interpriginator (ERO) to send my return to the IRS and to receive from the IRS (a) an acknowledgement of eason for any delay in processing the return or refund, and (c) the date of any refund. If applicable Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution act of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate the authorize Treasury Financial Agent at 1-888-353-4537. Payment cancellation requests must be received no ladate. I also authorize the financial institutions involved in the processing of the electronic payment answer inquiries and resolve issues related to the payment. I further acknowledge that the personal electronic income tax return and, if applicable, my Electronic Funds Withdrawal Consent.	e, correct, and complete. I armediate service provider, of receipt or reason for reject, I authorize the U.S. Treas count indicated in the tax point to debit the entry to this ation. To revoke (cancel) a pater than 2 business days put of taxes to receive confidence.	further declar transmitter, a ction of the transmitter, ury and its description so account. This payment, I must prior to the particular inform	re that the amounts or electronic return ransmission, (b) the esignated Financia offware for payments authorization is to ust contact the U.S. ayment (settlement pation necessary to		
Taxpayer's PIN: check one box only					
▼ I authorize GLOBAL TAXES LLC to enter To enter The state of t	or generate my PIN	9 4 0	2 4		
ERO firm name as my signature on my tax year 2018 electronically filed income tax return.		Enter five dig don't enter a			
I will enter my PIN as my signature on my tax year 2018 electronically filed entering your own PIN and your return is filed using the Practitioner PIN me					
Your signature ▶	Date ►				
Snouge's PINI shock and havenly					
Spouse's PIN: check one box only					
to enter to enter	or generate my PIN				
as my signature on my tax year 2018 electronically filed income tax return.		Enter five dig don't enter a			
	in a sure a taxy matrix . Oh a	ما جاجات ا			
I will enter my PIN as my signature on my tax year 2018 electronically filed entering your own PIN and your return is filed using the Practitioner PIN me					
Spouse's signature ▶	Date ►				
Practitioner PIN Method Returns Only—cor	ntinue helow				
Part III Certification and Authentication — Practitioner PIN Method C					
ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected P		7 8 1 2 enter all zero	2 3 4 5		
l certify that the above numeric entry is my PIN, which is my signature for the tax y the taxpayer(s) indicated above. I confirm that I am submitting this return in accordate the method and Pub. 1345 , Handbook for Authorized IRS e-file Providers of Individual In	ance with the requireme	filed incor ents of the	ne tax return for Practitioner PIN		
ERO's signature ▶	Date ►				
ERO Must Retain This Form — See Ins Don't Submit This Form to the IRS Unless Req					

Form **1040NR**Department of the Treasury

U.S. Nonresident Alien Income Tax Return

► Go to www.irs.gov/Form1040NR for instructions and the latest information.

For the year January 1–December 31, 2018, or other tax year

OMB No. 1545-0074

Internal Revenue Service beainnina , 2018, and ending Identifying number (see instructions) Your first name and initial Last name 865-69-4024 SRIHARI **SWARNA** Present home address (number and street or rural route). If you have a P.O. box, see instructions. Apt. no. Check if: Individual Please print 6851 SEA CORAL DR 200 Estate or Trust or type City, town or post office, state, and ZIP code. If you have a foreign address, also complete spaces below. See instructions. ORLANDO FL 32821 Foreign country name Foreign province/state/county Foreign postal code 1 Reserved 4 Reserved **Filing** 2 X Single nonresident alien 5 Married nonresident alien **Status** 3 Reserved Qualifying widow(er) (see instructions) Check only Child's name ▶ one box. Dependents Dependents: (see instructions) (2) Dependent's (3) Dependent's (4) ✓ if qualifies for (see instr.): identifying number relationship to you If more Credit for other dependents Child tax credit (1) First name Last name than four dependents, see instructions and check here. 8 Wages, salaries, tips, etc. Attach Form(s) W-2 8 106,500 Income 9a Taxable interest 9a **Effectively** b Tax-exempt interest. Do not include on line 9a 9b Connected 10a Ordinary dividends 10a With U.S. **b** Qualified dividends (see instructions) 10b Trade/ **Business** 11 Taxable refunds, credits, or offsets of state and local income taxes (see instructions) . . . 11 12 Scholarship and fellowship grants. Attach Form(s) 1042-S or required statement (see instructions) 12 13 Business income or (loss). Attach Schedule C or C-EZ (Form 1040) 13 14 Capital gain or (loss). Attach Schedule D (Form 1040) if required. If not required, check here 14 Other gains or (losses). Attach Form 4797 15 Attach Form(s) 16 Reserved . 16 W-2, 1042-S, SSA-1042S, **17b** Taxable amount (see instr.) **17a** IRAs, pensions, and annuities **17a** 17b RRB-1042S. -3,000. 18 Rental real estate, royalties, partnerships, trusts, etc. Attach Schedule E (Form 1040) . . . 18 and 8288-A here. Also Farm income or (loss). Attach Schedule F (Form 1040) 19 attach Form(s) 20 20 1099-R if tax was withheld. 21 Other income. List type and amount (see instructions) 21 22 Total income exempt by a treaty from page 5, Schedule OI, Item L (1)(e) 23 Combine the amounts in the far right column for lines 8 through 21. This is your total 103,500. 23 Educator expenses (see instructions) 24 24 **Adjusted** Health savings account deduction. Attach Form 8889 . . . Gross Moving expenses for members of the Armed Forces, Attach Income 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 (see instructions) 29 **30** Penalty on early withdrawal of savings 30 Scholarship and fellowship grants excluded 31 **32** IRA deduction (see instructions) 32 33 Student loan interest deduction (see instructions) Add lines 24 through 33 34 Adjusted Gross Income. Subtract line 34 from line 23. 103,500. 35 Amount from line 35 (adjusted gross income) 36 103,500. Tax and Itemized deductions from page 3, Schedule A, line 8 . Std. Dedn US/India Treaty 37 12,000. **Credits** Qualified business income deduction (see instructions). 38 Exemptions for estates and trusts only (see instructions) 39

40 12,000. Tax and 91,500. **41 Taxable income.** Subtract line 40 from line 36. If zero or less, enter -0- . . . 41 Credits **42** Tax (see instr.). Check if any is from Form(s): a \square 8814 b \square 4972 c \square 42 16,256. (continued) Alternative minimum tax (see instructions). Attach Form 6251 43 Excess advance premium tax credit repayment. Attach Form 8962 . 44 Add lines 42, 43, and 44 45 16,256. **46** Foreign tax credit. Attach Form 1116 if required 46 Credit for child and dependent care expenses. Attach Form 2441 48 Retirement savings contributions credit. Attach Form 8880 . 48 49 Child tax credit and credit for other dependents (see 49 **50** Residential energy credit. Attach Form 5695 51 Other credits from Form: a ☐ 3800 b ☐ 8801 c ☐ **52** Add lines 46 through 51. These are your **total credits** . . . 52 Subtract line 52 from line 45. If zero or less, enter -0-16,256. Tax on income not effectively connected with a U.S. trade or business from page 4. **Other** 54 Taxes 55 Self-employment tax. Attach Schedule SE (Form 1040) 55 **56** Unreported social security and Medicare tax from Form: **a** 4137 **b** 8919 56 57 Additional tax on IRAs, other qualified retirement plans, etc. Attach Form 5329 if required 57 58 **59a** Household employment taxes from Schedule H (Form 1040) . . . 59a **b** Repayment of first-time homebuyer credit from Form 5405. Attach Form 5405 if required . 59b **60** Taxes from: **a** ☐ Form 8959 **b** ☐ Instructions; enter code(s) 61 Total tax. Add lines 53 through 60 16,256. **62** Federal income tax withheld from: **Payments** a Form(s) W-2 and 1099 20,353. 62a 62b **c** Form(s) 8288-A 62c **d** Form(s) 1042-S 63 2018 estimated tax payments and amount applied from 2017 return 64 Additional child tax credit. Attach Schedule 8812 65 Net premium tax credit. Attach Form 8962 65 **66** Amount paid with request for extension to file (see instructions) **67** Excess social security and tier 1 RRTA tax withheld (see instructions) **68** Credit for federal tax on fuels. Attach Form 4136 68 **69** Credits from Form: **a** 2439 **b** Reserved **c** 8885 **d** 69 **70** Credit for amount paid with Form 1040-C 71 Add lines 62a through 70. These are your total payments 71 20,353. 72 If line 71 is more than line 61, subtract line 61 from line 71. This is the amount you overpaid 72 4,097. Refund 73a Amount of line 72 you want refunded to you. If Form 8888 is attached, check here . ▶ □ 4,097. Direct deposit? **b** Routing number | 1 | 2 | 1 | 0 | 0 | 0 | 3 | 5 | 8 | c Type: X Checking ☐ Savings See **d** Account number | 3 | 2 | 5 | 0 | 5 | 9 | 1 | 9 | 7 | 3 | 9 | 3 instructions. e If you want your refund check mailed to an address outside the United States not shown on page 1, enter it here. 74 Amount of line 72 you want applied to your 2019 estimated tax ▶ Amount **75 Amount you owe.** Subtract line 71 from line 61. For details on how to pay, see instructions 75 You Owe Do you want to allow another person to discuss this return with the IRS? See instructions X No ☐ Yes. Complete below. **Third Party** Phone Personal identification Designee Designee's name ▶ number (PIN) no. **>** 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 Sign Here belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge. If the IRS sent you an Identity Your occupation in the United States Your signature Keep a copy of Date Protection PIN, enter it here this return for (see instr.) vour records. SOFTWARE ENGINEER Print/Type preparer's name Preparer's signature Date PTIN Check ☐ if Paid P02090332 APPANA RUPA VENKATA SATYA SAI MANIKUMAR self-employed Preparer Firm's name ► GLOBAL TAXES LLC Firm's EIN ▶ **Use Only** Firm's address ► 2530 Pebble Creek Ln Cumming GA 30041 Phone no.

Form 1040NR (2018)

Page 2

Form 1040NR (2018) Page **3**

Schedule A—Itemized Deductions (see instructions) 07 **Taxes You Paid** 1 State and local income taxes State and local income taxes 1a **b** Enter the smaller of line 1a and \$10,000 (\$5,000 if married) 1b 2 Gifts by cash or check. If you made any gift of \$250 or more, **Gifts** see instructions 2 to U.S. **Charities** Other than by cash or check. If you made any gift of \$250 or 3 more, see instructions. You must attach Form 8283 if the If you made a amount of your deduction is over \$500 3 gift and received a 4 benefit in Carryover from prior year 4 return, see instructions. 5 5 Add lines 2 through 4 Casualty Casualty and theft loss(es) from a federally declared disaster (other than net qualified and Theft disaster losses). Attach Form 4684 and enter the amount from line 18 of that form. See Losses 6 Other—from list in instructions. List type and amount ▶ **Other Itemized Deductions** 7 Total

Add the amounts in the far right column for lines 1b through 7. Also, enter this amount on

Itemized

Deductions

8

		Schedule NEC-Tax on Income Not	Effectively	Co	nnected With	a U.S. Trade or	Business (see in	nstructions)	. 490
					Enter amount of i	ncome under the ap	propriate rate of tax	· · · · · · · · · · · · · · · · · · ·	
	Nature of income			(a) 10% (b) 15%		(c) 30%	(d) Other	(specify)	
					(4) 1070	(5) 1070	(0) 0070	%	%
1	Dividends and divide	•							
а	Dividends paid by U			1a					
b		reign corporations	_	1b					
С		payments received with respect to section							
				1c					
2	Interest:								
a			_	2a					
b		orations	_	2b					
С			_	2c					
3		patents, trademarks, etc.)		3					
4		/. copyright royalties	-	4					
5		rights, recording, publishing, etc.)	_	5					
6		e and natural resources royalties		6					
7		ies	· · · ⊢	7	<u> </u>				
8		fits	· · · ⊢	8					
9		e 18 below	· · · -	9	,		,		
10	•	ts of Canada only. Enter net income in column	i (C).						
	If zero or less, ente	r -0							
a	Winnings								
b	Losses	·	1	l0c					
11		-Residents of countries other than Canada.							
40	OH(:6-)	owed		11					
12	Other (specify) ►			10					
40		10 in a clump (a) the court (d)		12					
13		12 in columns (a) through (d)		13 14					
14 15		ate of tax at top of each column			dd aalumna (a) th	rough (d) of line	14 Enter the total	hara and an	
15		54							
	10111110401411, 11110	Capital Gains a						15	
Enter o	nly the capital gains and			110				(f) LOSS	(g) GAIN
losses	from property sales or ges that are from	(a) Kind of property and description (if necessary, attach statement of	(b) Date acquired		(c) Date sold	(d) Sales price	(e) Cost or other	If (e) is more	If (d) is more
sources	within the United	descriptive details not shown below)	(mo., day, yr.))	(mo., day, yr.)	(6) 55.05 p.115	basis	than (d), subtract (d) from (e)	than (e), subtract (e) from (d)
connec	and not effectively ted with a U.S. business.			+				.,	(4)
	include a gain or loss on ng of a U.S. real			+					
propert	y interest; report these nd losses on Schedule D			+					
(Form 1				+					
	property sales or			_					
connec	ges that are effectively ted with a U.S. business	17 Add columns (f) and (g) of line 16 .					17	(
	hedule D (Form 1040), 797, or both.	18 Capital gain. Combine columns (f) and	 nd (a) of line 1	 17. F	nter the net gain	here and on line 9		enter -0-) 18	
		1	(9) 01 1110 1		uno mot gam	3 4114 511 1110 0	a. 2 7 2 (ii a 1300), c		

Form 1040NR (2018) Page **5**

	Schedule OI – Othe Ans	r Information (See swer all questions	instructions)						
Α	Of what country or countries were you a citizen or national during the tax year? INDIA								
В		In what country did you claim residence for tax purposes during the tax year? India							
С	Have you ever applied to be a green card holder (lawful p			Yes 🔀 No					
D	Were you ever:	, ,							
-	. A U.S. citizen?			□ Yes ☒ No					
2	. A green card holder (lawful permanent resident) of the Un	nited States?		Tyes X No					
	If you answer "Yes" to (1) or (2), see Pub. 519, chapter 4,								
Е	If you had a visa on the last day of the tax year, enter you	•		r your U.S.					
	immigration status on the last day of the tax year. F1			-					
F	Have you ever changed your visa type (nonimmigrant star	tus) or U.S. immigratio	n status?	Yes 🔀 No					
	If you answered "Yes," indicate the date and nature of the	l N							
G	List all dates you entered and left the United States durin								
	Note: If you are a resident of Canada or Mexico AND con			intervals,					
	check the box for Canada or Mexico and skip to item h	1	· · 🗌 Canada [Mexico					
	Date entered United States	Date	e entered United States	Date departed United States					
	mm/dd/yy mm/dd/yy		mm/dd/yy	mm/dd/yy					
Н	Give number of days (including vacation, nonworkdays, a 2016 , 2017								
ī	Did you file a U.S. income tax return for any prior year? .	,							
	If "Yes," give the latest year and form number you filed .	•	1040NR						
J	Are you filing a return for a trust?			Tyes X No					
	If "Yes," did the trust have a U.S. or foreign owner unde	r the grantor trust rule	es, make a distribution of	or loan to a					
	U.S. person, or receive a contribution from a U.S. person								
Κ	Did you receive total compensation of \$250,000 or more	during the tax year?.		Yes X No					
	If "Yes," did you use an alternative method to determine								
L	Income Exempt from Tax—If you are claiming exemption from income tax under a U.S. income tax treaty with a foreign country, complete (1) through (3) below. See Pub. 901 for more information on tax treaties.								
-	Enter the name of the country, the applicable tax treaty article, the number of months in prior years you claimed the treaty benefit, and								
	the amount of exempt income in the columns below. Atta			•					
	(a) Country	(b) Tax treaty	(c) Number of months	(d) Amount of exempt					
	(a) Country	article	claimed in prior tax year	income in current tax year					
	(e) Total. Enter this amount on Form 1040NR, line 22.								
2	, , ,								
3		Are you claiming treaty benefits pursuant to a Competent Authority determination?							
	If "Yes," attach a copy of the Competent Authority determ	nination letter to your r	eturn.						
M	Check the applicable box if:								
1	1. This is the first year you are making an election to treat income from real property located in the United States as effectively connected								
	with a U.S. trade or business under section 871(d). See in								
2	. You have made an election in a previous year that has	not been revoked, to	treat income from real	property located in the United					

SCHEDULE E (Form 1040)

Supplemental Income and Loss

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

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

Attachment

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service (99) Name(s) shown on return

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

Sequence No. 13

Your social security number

SRIHARI SWARNA 865-69-4024 Income or Loss From Rental Real Estate and Royalties Note: If you are in the business of renting personal property, use Part I 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) **B** If "Yes," did you or will you file required Forms 1099? Physical address of each property (street, city, state, ZIP code) Α Janathapet North, Kavali Nellore Andhra Pradesh IN 524201 В C 1b Fair Rental Personal Use Type of Property For each rental real estate property listed QJV above, report the number of fair rental and (from list below) **Days Days** personal use days. Check the QJV box only if you meet the requirements to file as a qualified joint venture. See instructions. 365 Α Α 0 В В С C Type of Property: 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:** Α 3 Rents received . 500. 3 4 Royalties received 4 Expenses: Advertising 5 5 6 Auto and travel (see instructions) . . . 6 7 Cleaning and maintenance . . . 7 8 Commissions. 8 9 9 Insurance 10 Legal and other professional fees . . . 10 11 11 12 Mortgage interest paid to banks, etc. (see instructions) 12 13 13 3,500. Other interest. 14 Repairs. 14 15 15 Supplies . . Taxes 16 16 17 17 18 Depreciation expense or depletion . . 18 19 19 Total expenses. Add lines 5 through 19 20 20 3,500. 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 -3,000.Deductible rental real estate loss after limitation, if any, 22 on Form 8582 (see instructions) -3,000.500 23a Total of all amounts reported on line 3 for all rental properties 23a **b** Total of all amounts reported on line 4 for all royalty properties 23b 23c **c** Total of all amounts reported on line 12 for all properties d Total of all amounts reported on line 18 for all properties 23d 23e Total of all amounts reported on line 20 for all properties 3,500. Income. Add positive amounts shown on line 21. Do not include any losses 24 24 25 Losses. Add royalty losses from line 21 and rental real estate losses from line 22. Enter total losses here. 25 3,000. 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. -3,000.

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.

OMB No. 1545-1008 Attachment Sequence No. 88

Name(s) shown on return SRIHARI SWARNA

Department of the Treasury

Internal Revenue Service (99)

Identifying number 865-69-4024

Par	2018 Passive Activity Loss	<u> </u>		
	Caution: Complete Worksheets 1, 2, and 3 before completing P	art I.		
Renta	al Real Estate Activities With Active Participation (For the definition	of active participation, see		
Spec	ial Allowance for Rental Real Estate Activities in the instructions.)			
1a	Activities with net income (enter the amount from Worksheet 1,			
	column (a))	1a 0.		
b	Activities with net loss (enter the amount from Worksheet 1, column			
	(b))	1b (3,000.)		
С	Prior years' unallowed losses (enter the amount from Worksheet 1,			
	column (c))	1c (4.1	2 000
	Combine lines 1a, 1b, and 1c		1d	-3,000.
_	mercial Revitalization Deductions From Rental Real Estate Activitie	1 1.		
2a	Commercial revitalization deductions from Worksheet 2, column (a) .	2a ()		
b	Prior year unallowed commercial revitalization deductions from Worksheet 2, column (b)	2b ()		
C	Add lines 2a and 2b		2c	(
	ther Passive Activities			/
	Activities with net income (enter the amount from Worksheet 3,			
Ja	column (a))	3a		
b	Activities with net loss (enter the amount from Worksheet 3, column		-	
	(b))	3b (
С	Prior years' unallowed losses (enter the amount from Worksheet 3,			
	column (c))	3c ()		
d			3d	
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			
	2b, or 3c. Report the losses on the forms and schedules normally use	4	-3,000.	
	If line 4 is a loss and: • Line 1d is a loss, go to Part II.			
	 Line 2c is a loss (and line 1d is zero or mor 			
	• 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	our spouse at any time durin	ig the	year, do not complete
	or Part III. Instead, go to line 15.	ula Antina Dantinin ation		
Par	<u> </u>	•		
	Note: Enter all numbers in Part II as positive amounts. See instru Enter the smaller of the loss on line 1d or the loss on line 4	actions for an example.	5	2 000
5 6	Enter \$150,000. If married filing separately, see instructions	6 150,000.	5	3,000.
7	Enter modified adjusted gross income, but not less than zero (see instructions)	7 106,500.	-	
•	Note: If line 7 is greater than or equal to line 6, skip lines 8 and 9,	1 100,500.		
	enter -0- on line 10. Otherwise, go to line 8.			
8	Subtract line 7 from line 6	8 43,500.		
9	Multiply line 8 by 50% (0.50). Do not enter more than \$25,000. If married filir		9	21,750.
10	Enter the smaller of line 5 or line 9		10	3,000.
	If line 2c is a loss, go to Part III. Otherwise, go to line 15.			,
Part	III Special Allowance for Commercial Revitalization Dedu	ictions From Rental Real	Esta	te Activities
	Note: Enter all numbers in Part III as positive amounts. See the	example for Part II in the instr	uction	ns.
11	Enter \$25,000 reduced by the amount, if any, on line 10. If married filing	separately, see instructions	11	
12	Enter the loss from line 4		12	
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 line 13				
Part				
15	Add the income, if any, on lines 1a and 3a and enter the total		15	0.
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	3,000.

Caution: The worksheets must be filed					for you	r record	S.			
Worksheet 1 – For Form 8582, Lines 1				ns.)						
Name of activity	Current year			Prior years			Overall g	ain or loss		
name et aeuvil	(a) Net income (b) Net lo		Net los ine 1b)			(d) Gain		(e) Loss		
Janathapet North, Kavali	0.	•	3,00	0.0		<u> </u>			3,000.	
Total. Enter on Form 8582, lines 1a, 1b,										
and 1c ▶ Worksheet 2—For Form 8582, Lines 2	0.	otruot	3,00	0.						
Name of activity	(a) Current deductions	t year	Ť	unall		(b) Prior year (c) Overal		Overall loss		
	doddollollo		<u> </u>	arian	01100 000	idotiono (
Total. Enter on Form 8582, lines 2a and										
2b ▶										
Worksheet 3—For Form 8582, Lines 3	a, 3b, and 3c (S∈	ee ins	truction	ns.)	I					
None of a divite	Currei	nt yeai	r		Prior	years		Overall g	ll gain or loss	
Name of activity					(c) Unallowed loss (line 3c)		(d) Gain		(e) Loss	
Total. Enter on Form 8582, lines 3a, 3b, and 3c ▶										
Worksheet 4—Use this worksheet if a	n amount is sho	wn oi	n Form	85	82, line	10 or 14	(See ir	nstruction	is.)	
	Form or schedule								(d) Subtract	
Name of activity	and line number to be reported on (see instructions)	(8	a) Loss		(b) Ratio		(c) Special allowance		column (c) from column (a)	
Janathapet North, Kavali	E Ln 22		3,00	00.	1.000	00000	3,000		0.	
Total			3,00	00.	1.	00		3,000.	0.	
Worksheet 5—Allocation of Unallowe	,		tions.)							
Name of activity	Form or sched and line numb to be reported (see instructio	umber rted on		(a) Loss		(b) Ratio		(c	(c) Unallowed loss	
		-								
		+								
Total		. ▶					1.00			