Form 8879	
------------------	--

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)
---------------------------	--------------

Taxpayer's name	Social security number
MAHESH SHABAD	795-60-3098
Spouse's name	Spouse's social security number

Part	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	73,099.			
2	Total tax (Form 1040, line 15; Form 1040NR, line 61)	2	6,736.			
3	Federal income tax withheld from Forms W-2 and 1099 (Form 1040, line 16; Form 1040NR, line 62a).	3	8,826.			
4	Refund (Form 1040, line 20a; Form 1040-SS, Part I, line 13a; Form 1040NR, line 73a)	4	2,090.			
5	Amount you owe (Form 1040, line 22; Form 1040NR, line 75)	5				
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	PIN:	check	one	box	only
------------	------	-------	-----	-----	------

\mathbf{X}	I authorize	GLOBAL TAXES	LLC	to enter or generate my PIN	0 3 0 9 8
			ERO firm name		Enter five digits, but
	as my signat	x return.	don't enter all zeros		
			ure on my tax year 2018 electron return is filed using the Practition		
Your sig	nature 🕨			Date 🕨	
Spouse	's PIN: checl	c one box only			
	I authorize			to enter or generate my PIN	
			ERO firm name		Enter five digits, but
	as my signa	ture on my tax year 2	2018 electronically filed income ta	x return.	don't enter all zeros
			ure on my tax year 2018 electron return is filed using the Practition		

Spouse's signature

Date	
Dato	•

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 er	nter a	all zer	ros			
Leartify that the above numeric entry is my PIN, which is my signature for the tax year 20	18 0	loci	tron	ical	lv fi	bol	inco	mo	tax	rotur	n foi

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

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

Form 1040	U.S. Nonresident Alien Income Tax Return Go to www.irs.gov/Form1040NR for instructions and the latest information.						'n		OMB No	o. 154	5-0074		
Department of the	Treas	ury	For the year Jan	uary 1-December	31, 2018,	or other	tax year				20)1	8
Internal Revenue S			beginning , name and initial	2018, and ending Last name				, 20		if in a mun			vetiene)
										ifying nun		einstri	JCHONS)
		HES	H ome address (number and street or rural rou	SHABAD	D hoy s	oo instru	uctions	Apt. no.	/9	5-60-3		المطابينا م	
Please print			,	ite). Il you nave a r	O. DOX, 5		JOLIONS.	<i>Α</i> ρι. по.		Check if:		Indivic	
or type			FONTAINEBLEAU BLVD or post office, state, and ZIP code. If you h	ave a foreign addr		omplete	spaces b	alow See i	netruct	ions		Estate	or Trust
ortypo				ave a loreign addi	ess, aisu c	ompiete	spaces b	elow. See li	ISLIUCI	10115.			
			FL 33172		Foreign	province	e/state/cou	ntv			Foreir		stal code
	TOTE	ign cc	builty hame		roreign	province	state/cou	my			I UIEI	gii pos	lai coue
	-		Reserved			4	Reser	uad					
Filing	1					4			idant	alian			
Status	2	\equiv	Single nonresident alien			5 2	-	d nonres			ruction	2	
Check only	3		Reserved			6		ying wido s name ►	È	(see insi	ruction	5)	
one box.							Grind						
Dependents	7	De	pendents: (see instructions)	(2) Depende			pendent's		(4) 🗸	if qualifies	for (see	instr.):	:
If more		(1)	First name Last name	identifying nu	Imber	relation	iship to you	L Chil	d tax c	redit	Credit for	other c	dependents
than four dependents,													
see instructions													
and check													
here.													
lacare	8	Wa	ges, salaries, tips, etc. Attach Form(s) W-2						8		79	,484.
Income Effectively	9a	Тах	able interest							9a			
Connected	b	Тах	-exempt interest. Do not include or	n line 9a		9b							
With U.S.	10a	Ord	inary dividends							10a			
Trade/	b	Qua	alified dividends (see instructions)			10b							
Business	11	Тах	able refunds, credits, or offsets of s	tate and local ir	ncome ta	ixes (se	ee instruc	ctions)		11			
	12	Sch	olarship and fellowship grants. Attach I	⁻ orm(s) 1042-S c	or required	d stater	ment (see	instructio	ns)	12			
	13	Bus	iness income or (loss). Attach Sche	dule C or C-EZ	(Form 10	040).				13			
	14	Сар	ital gain or (loss). Attach Schedule D (Form 1040) if re	quired. If	not rec	quired, ch	eck here		14			
Attach Form(s)	15	Oth	er gains or (losses). Attach Form 47	97						15			
W-2, 1042-S,	16	Res	erved							16			
SSA-1042S, RRB-1042S,	17a	IRA	s, pensions, and annuities 17a		17	b Tax	able amo	unt (see ir	nstr.)	17b			
and 8288-A	18	Ren	ital real estate, royalties, partnership	s, trusts, etc. A	ttach Sc	hedule	e E (Form	1040)		18		-6	,385.
here. Also	19	Farr	m income or (loss). Attach Schedule	F (Form 1040)					•	19			
attach Form(s) 1099-R if tax	20	Une	employment compensation						•	20			
was withheld.	21	Oth	er income. List type and amount (se	e instructions)						21			
			I income exempt by a treaty from page 5,			22			0.				
	23		nbine the amounts in the far right										
			ectively connected income							23		73	,099.
Adjusted	24		icator expenses (see instructions)			24			-				
Gross	25		alth savings account deduction. Atta			25							
Income	26		ving expenses for members of the										
moonie	~-		m 3903			26				-			
	27		ductible part of self-employment ta										
			rm 1040)			27				-			
	28		employed SEP, SIMPLE, and quali			28							
	29		-employed health insurance deduct			29							
	30		alty on early withdrawal of savings			30							
	31		olarship and fellowship grants exclu			31				-			
	32		deduction (see instructions)			32				-			
	33		dent loan interest deduction (see ins							0.4			
	34 25		0	 24 from lino 22						34		ч २	
	35		usted Gross Income. Subtract line							35			<u>,099.</u>
Tax and			ount from line 35 (adjusted gross inc							36			,099.
Credits	37		nized deductions from page 3, Sch							37		24	,000.
	38		alified business income deduction (s	,						38			
	<u>.</u>		mptions for estates and trusts only							39	Eorm 1	0400	IR (2018)
For Disclosure, P	rivacy	ACt,	and Paperwork Reduction Act Notice, se	e instructions.	BAA		RE	V 05/02/19 F	RO			5-101	■■ ■ (∠UIO)

Form 1040NR (201	8)							Page 2
Taward	40	Add lines 37 through 39					40	24,000.
Tax and	41	Taxable income. Subtract line 40 from					41	49,099.
Credits	42	Tax (see instr.). Check if any is from For	rm(s): a 🗌 8814 🛛 k	b 🗌 497	72 c]	42	6,736.
(continued)	43	Alternative minimum tax (see instruction	ons). Attach Form 62	251 .			43	
	44	Excess advance premium tax credit rep	•				44	
	45	Add lines 42, 43, and 44		· .		🕨	45	6,736.
	46	Foreign tax credit. Attach Form 1116 if	required	. 4	46			
	47	Credit for child and dependent care exper		41 4	47			
	48	Retirement savings contributions credit.			48			
	49	Child tax credit and credit for ot						
		instructions)		. 4	49			
	50	Residential energy credit. Attach Form 5	5695		50			
	51	Other credits from Form: a 3800 b	□ 8801 c □		51			
	52	Add lines 46 through 51. These are your					52	
	53	Subtract line 52 from line 45. If zero or l					53	6,736.
	54	Tax on income not effectively connect						
Other		Schedule NEC, line 15					54	
Taxes	55	Self-employment tax. Attach Schedule S	SE (Form 1040) .				55	
	56	Unreported social security and Medicar	e tax from Form: a	a 🗌 413	37	b 🗌 8919	56	
	57	Additional tax on IRAs, other qualified re	etirement plans, etc.	. Attach	Form 53	29 if required	57	
	58	Transportation tax (see instructions)					58	
	59 a	Household employment taxes from Sch	edule H (Form 1040))			59a	
		Repayment of first-time homebuyer cree					59b	
	60	Taxes from: a Form 8959 b Instr	uctions; enter code((s)			60	
	61	Total tax. Add lines 53 through 60 .				🕨	61	6,736.
Deserves	62	Federal income tax withheld from:						
Payments	a	Form(s) W-2 and 1099......		. 6	62a	8,826.		
	k	• Form(s) 8805..........		. 6	2b			
	c	: Form(s) 8288-A		. 6	62c			
	c	I Form(s) 1042-S		. 6	2d			
	63	2018 estimated tax payments and amount	applied from 2017 retu	urn 🧃	63			
	64	Additional child tax credit. Attach Sched	dule 8812	. (64			
	65	Net premium tax credit. Attach Form 89	62	. 6	65			
	66	Amount paid with request for extension	to file (see instruction	ons) 🚺	66			
	67	Excess social security and tier 1 RRTA tax w	vithheld (see instruction	ns) 🚺	67			
	68	Credit for federal tax on fuels. Attach Fo	orm 4136	. 6	68			
	69	Credits from Form: a 2439 b Reserved	c 🗌 8885 d 🗌		69			
	70	Credit for amount paid with Form 1040-	·C	. 7	70			
	71	Add lines 62a through 70. These are you	ur total payments				71	8,826.
		If line 71 is more than line 61, subtract li		This is th	ne amour	t you overpaid	72	2,090.
Refund	73a	Amount of line 72 you want refunded to	you. If Form 8888 i	is attac	hed, che	ck here . 🕨 🗌	73a	2,090.
Direct deposit?	k	Routing number 1 2 1 0 0 0 3	3 5 8 🕨 c Ty	ype: 🗙	Checki	ng 🗌 Savings		
See instructions.	c	Account number 3 2 5 0 6 6 9	9 7 5 9 2 2	2				
	e	If you want your refund check mailed to an address	ss outside the United Stat	ates not sl	hown on pa	ge 1, enter it here.		
						-		
	74	Amount of line 72 you want applied to you	r 2019 estimated tax		74			
Amount	75	Amount you owe. Subtract line 71 from li	ine 61. For details on	how to	pay, see	nstructions	75	
You Owe	76	Estimated tax penalty (see instructions)		. 7	76			
Third Party	Doy	ou want to allow another person to discu	uss this return with tl	he IRS?	? See inst	ructions 🗌 Y	′es. Co	mplete below. 🛛 🗙 No
Designee			Phone			Personal i		tion
		gnee's name ► er penalties of perjury, I declare that I have examir	no. ►	mnanving	n scheduler	number (P	,	best of my knowledge and
Sign Here		f, they are true, correct, and complete. Declaration						
Keep a copy of	Your	signature	Date	ir occupa	tion in the	Jnited States		S sent you an Identity
this return for		-					Protection (see inst	on PIN, enter it here r.)
your records.			SO	FTWAF	RE ENG	INEER	,	
Doid	Prin	t/Type preparer's name Prepare	er's signature			Date	Check	
Paid Proparer	APPA	ANA RUPA VENKATA SATYA SAI MANIKUMAR					self-emp	
Preparer Use Only		's name ► GLOBAL TAXES LLC				Firm's EIN ►		
USE Only		's address ► 2530 Pebble Creek	Ln Cummina GA	A 300	41	Phone no.	· · ·	

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

Total
Itemized
Deductions8Add the amounts in the far right column for lines 1b through 7. Also, enter this amount on
Form 1040NR, line 37

REV 05/02/19 PRO

8

Form **1040NR** (2018)

Form	1040NR	(2018)
------	--------	--------

Page	4
------	---

		Schedule NEC-Tax on Income Not Ef	ffectively	Con	nected With	a U.S. Trade or	Business (see ir	structions)	
				E	Enter amount of i	ncome under the app	propriate rate of tax	(see instructions)	
		Nature of income			(a) 10%	(b) 15%	(c) 30%	(d) Other	(specify)
					(a) 10%	(b) 1376	(C) 50 %	%	%
1	Dividends and divide	end equivalents:							
а	Dividends paid by U	S. corporations	1	1a					
b	Dividends paid by fo	preign corporations	1	1b					
С		t payments received with respect to section							
	transactions		· · · 1	1c					
2	Interest:								
а				2a					
b	Paid by foreign corp	porations		2b					
С				2c					
3		patents, trademarks, etc.)		3					
4		V. copyright royalties		4					
5	• • • •	vrights, recording, publishing, etc.)		5					
6		e and natural resources royalties		6					
7		ties		7					
8	•	fits		8					
9				9	,				
10		ts of Canada only. Enter net income in column (c)).						
_	If zero or less, ente Winnings	er -0							
a h			1	0c					
11			· · · ["						
				11					
12									
12			1	12					
13		12 in columns (a) through (d)		13					
14	-	rate of tax at top of each column		14					
15		of effectively connected with a U.S. trade of			d columns (a) t	hrough (d) of line 1	4. Enter the total	here and on	
		54							
		Capital Gains and							
	nly the capital gains and	16 (a) Kind of property and description	(b) Date		(c) Date			(f) LOSS	(g) GAIN
exchan	from property sales or ges that are from	(if necessary, attach statement of	acquired		sold	(d) Sales price	(e) Cost or other basis	If (e) is more than (d), subtract (d)	If (d) is more than (e), subtract (e)
States	s within the United and not effectively	descriptive details not shown below) (i	(mo., day, yr.)		(mo., day, yr.)			from (e)	from (d)
	ted with a U.S. business. include a gain or loss on								_
disposi	ng of a U.S. real								
gains a	y interest; report these nd losses on Schedule D								
(Form 1 Report									
exchan	property sales or ges that are effectively								
on Scl	ted with a U.S. business hedule D (Form 1040),	17 Add columns (f) and (g) of line 16					17		
Form 4	797, or both.	18 Capital gain. Combine columns (f) and ((g) of line 1	7. En	ter the net gain	here and on line 9	above (if a loss, e	nter -0-) 🕨 18	

Μ

Schedule OI-Other Information (see instructions) Answer all questions

- Of what country or countries were you a citizen or national during the tax year? INDIA Α
- In what country did you claim residence for tax purposes during the tax year? India В Have you ever applied to be a green card holder (lawful permanent resident) of the United States? 🗌 Yes 🛛 No С Were you ever: D **1.** A U.S. citizen?
- If you answer "Yes" to (1) or (2), see Pub. 519, chapter 4, for expatriation rules that apply to you. Е If you had a visa on the last day of the tax year, enter your visa type. If you did not have a visa, enter your U.S. immigration status on the last day of the tax year. F1 _____
- F If you answered "Yes," indicate the date and nature of the change.
- G List all dates you entered and left the United States during 2018. See instructions. Note: If you are a resident of Canada or Mexico AND commute to work in the United States at frequent intervals,

D	ate entered United States mm/dd/yy	Date departed United States mm/dd/yy	Date entered United States mm/dd/yy	Date departed United States mm/dd/yy

н Give number of days (including vacation, nonworkdays, and partial days) you were present in the United States during: 2016 365 , 2017 365 , and 2018 365 . Did vou file a U.S. income tax return for any prior year? L

•		· •	103	_	10
	If "Yes," give the latest year and form number you filed 1040NR				
J	Are you filing a return for a trust?		Yes [XI	No
	If "Yes," did the trust have a U.S. or foreign owner under the grantor trust rules, make a distribution or loan to a				
	U.S. person, or receive a contribution from a U.S. person?		Yes [No
κ	Did you receive total compensation of \$250,000 or more during the tax year?		Yes [XI	No
	If "Yes," did you use an alternative method to determine the source of this compensation?		Yes [_ I	No

- 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.
 - 1. Enter the name of the country, the applicable tax treaty article, the number of months in prior years you claimed the treaty benefit, and the amount of exempt income in the columns below. Attach Form 8833 if required. See instructions.

	(a) Country	(b) Tax treaty article	(c) Number of months claimed in prior tax years	(d) Amount of exempt income in current tax year
	India	ARTICLE 2192)	0	0.
	(e) Total. Enter this amount on Form 1040NR, line 22.	Do not enter it on line 8	8 or line 12 ►	0.
2.	Were you subject to tax in a foreign country on any of the	e income shown in 1(d)	above?	🗌 Yes 🛛 No
з.	Are you claiming treaty benefits pursuant to a Competen	t Authority determination	on?	🗌 Yes 🛛 No
	If "Yes," attach a copy of the Competent Authority deterr	mination letter to your r	eturn.	
	Check the applicable box if:			
1.	This is the first year you are making an election to treat in		-	-
	with a U.S. trade or business under section 871(d). See in	nstructions		
2.	You have made an election in a previous year that has		•	
	States as effectively connected with a U.S. trade or busin	ness under section 871	(d). See instructions	

REV 05/02/19 PRO	Form 1040NR (2018)
------------------	---------------------------

SCHED	ULE E
(Form 1	040)

Supplemental Income and Loss

OMB No. 1545-0074

8

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

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

Department of the Treasury	\blacktriangleright Attach to Form 1040, 1040NR, or Form 1041.
Internal Revenue Service (99)	
Namo(s) shown on roturn	

Attachment Sequence No. 13 Your social security number

20

Nume(3)	Shown on retain									ui 300iu	Jecui		
-	SH SHABAD									95-60		-	
Part			eal Estate and Ro	-		-							
	Schedule C or C-	-EZ (see instruction	ns). If you are an indivi	dual, r	eport fa	rm renta	al income	or loss fror	n Forn	n 4835 (on pag	je 2, line	40.
A Did	l you make any payme	ents in 2018 that v	vould require you to	o file F	orm(s)	1099? (see inst	ructions)				Yes 🛛	No
B If "	Yes," did you or will y	ou file required F	orms 1099?									Yes 🗌	No
1a	Physical address of												
Α	HYDERABAD HYDE	ERABAD TELAN	GANA IN 50007	72									
В													
С													
1b	Type of Property	2 For each re	ental real estate prop	oertv li	isted		Fair	Rental	Per	sonal I	Use	•	N/
	(from list below)	above, rep	ort the number of fa	ir rent	al and		D	ays		Days		Q,	JV
Α	7	 personal us only if you 	se days. Check the meet the requirement	QJV b	OX file as	Α		365			0	Γ	7
В		a qualified	joint venture. See in	struct	ions.	В					-	C	
		-				C						C	 7
	of Property:					•							
	le Family Residence	3 Vacation/9	Short-Term Rental	5 1 2	nd		7 Self-	Rental					
-	i-Family Residence	4 Commerci			yalties			r (describe	2)				
Incom			Properties:			Α	o Othe		=) B			С	
3	Rents received			3			500.		<u> </u>			•	
4				4			500.						
Expen	Royalties received .												
5				5									
	Advertising Auto and travel (see i			6									
6		,		7									
7	Cleaning and mainter			8									
8	Commissions			8 9									
9	Insurance			-									
10	Legal and other profe			10									
11	Management fees .			11									
12	Mortgage interest pa			12									
13	Other interest			13		3	,500.						
14	Repairs			14									
15	Supplies			15									
16	Taxes			16									
17	Utilities			17									
18	Depreciation expense	e or depletion		18		3 ,	,385.						
19	Other (list)			19									
20	Total expenses. Add	lines 5 through 1	9	20		6	,885.						
21	Subtract line 20 from	. ,											
	result is a (loss), see			_		-	265						
	file Form 6198			21		-6,	,385.						
22	Deductible rental rea												
	on Form 8582 (see in			22	(-б,	385.)	()()
23a	Total of all amounts r	•			• •	· ·	23 a		5	00.			
b	Total of all amounts r	•		erties	• •		23b						
С	Total of all amounts r						23c						
d	Total of all amounts r	•					23d		3,3				
е	Total of all amounts r						23e		б,8				
24	Income. Add positiv				-					24			
25	Losses. Add royalty lo	sses from line 21	and rental real estate	losse	s from l	ine 22. I	Enter tota	al losses he	ere .	25 (6,3	385.)
26	Total rental real est	ate and rovaltv	income or (loss).	Comb	ine line	es 24 ai	nd 25. E	Enter the re	esult				
	here. If Parts II, III,												
	Schedule 1 (Form 10												
	total on line 41 on pa									26		-б,	385.

Form 4562
Description of the Treeserver

Depreciation and Amortization

(Including Information on Listed Property)

OMB No. 1545-0172 *୭***18**

<u> </u>						
	Attach	to	vour	tax	return.	

40	\mathbf{C}
Attachme Sequence	. 17

Depart	Department of the Treasury								
	ernal Revenue Service (99) Go to www.irs.gov/Form4562 for instructions and the latest information.			Sequence No. 179					
	Name(s) shown on return Business or activity to which this form relates			lates	Identifying number				
	IAHESH SHABAD Sch E HYDERABAD							5-60-3098	
Part I Election To Expense Certain Property Under Section 179									
Note: If you have any listed property, complete Part V before you complete Part I. 1 Maximum amount (see instructions) 1 1,000,000. 1 1,000,000.									
1			,				1	1,000,000.	
2							2	0.500.000	
3 4		nreshold cost of section 179 property before reduction in limitation (see instructions)						2,500,000.	
5		eduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0							
Ŭ		parately, see instructions							
6		escription of proper			ness use only)	(c) Elected cost	5		
			,						
								•	
7	Listed property. En	ter the amount	from line 29		7				
8	Total elected cost	of section 179 p	property. Add amount	ts in column (c), lines 6 and	d7	8		
9	Tentative deduction	n. Enter the sm a	aller of line 5 or line 8	3			9		
10	Carryover of disallo	owed deduction	from line 13 of your	2017 Form 4	562		10		
11					,	ine 5. See instructions .	11		
12						e <u>11</u>	12		
			to 2019. Add lines 9			13			
			for listed property. In						
						ide listed property. See	Instru	uctions.)	
14						erty) placed in service	14	2 205	
45	during the tax year. See instructions.							3,385.	
	I5 Property subject to section 168(f)(1) election .						15 16		
Par		preciation (D	on't include listed	nronerty Se	<u> </u>	 ne)	10		
i ai				Section A					
17	MACRS deduction	s for assets plac	ced in service in tax v		na before 20 ⁻	8	17		
						o one or more general			
				-	-	-			
	Section I	3—Assets Plac	ed in Service During	g 2018 Tax Y	ear Using th	e General Depreciation	Syst	em	
(a) (Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only—see instructions)	(d) Recovery period	(e) Conventio	n (f) Method	(g) D	epreciation deduction	
19a	3-year property								
b	5-year property								
C	,,,,,,, _						<u> </u>		
	10-year property						<u> </u>		
	15-year property						<u> </u>		
	20-year property			05					
	25-year property			25 yrs.		S/L			
h	Residential rental			27.5 yrs.	MM	S/L			
	property			27.5 yrs.	MM	S/L			
	Nonresidential rea			39 yrs.	MM	S/L			
	property	Acceto Disco	d in Comico During	0010 Tay Va		Alternative Depreciation			
200	Class life	-Assets Place	a in Service During		ar Using the	S/L	on Sys	stem	
	12-year			12 yrs.					
	30-year			30 yrs.	MM		+		
	40-year			40 yrs.	MM	S/L S/L	+		
Part IV Summary (See instructions.)									
21 Listed property. Enter amount from line 28									
				lines 19 and	20 in colum	n (g), and line 21. Enter			
here and on the appropriate lines of your return. Partnerships and S corporations - see instructions .								3,385.	
23	For assets shown a	above and place	ed in service during t	he current ye	ear, enter the				

23

Form W-7							
(Rev. September 2016)							
Department of the Treasury Internal Revenue Service							

Application for IRS Individual Taxpayer Identification Number

Department of the Treasu Internal Revenue Service	► For use by individ	nts.									
	taxpayer identification number	Application Type (Check one box):									
Before you begin	:										
	is form if you have, or are eligible	•		Apply for a New ITIN							
• Getting an ITIN doesn't change your immigration status or your right to work in the United States											
Reason you're s		nstructions for the box y		u check box b, c, d, e, f, or g, you							
	ederal tax return with Form W-7	-	of the exceptions (see if	istructions).							
 a Nonresident alien required to get an ITIN to claim tax treaty benefit b Nonresident alien filing a U.S. federal tax return c U.S. resident alien (based on days present in the United States) filing a U.S. federal tax return 											
									_		-
	(HESH SHABAD	S. CILIZEN/TESICIENT Allen (See								
	alien student, professor, or researche		turn or claiming an exception	 n							
	spouse of a nonresident alien holding		tain of oldinning an oxooptic								
	istructions) ►										
	formation for a and f : Enter treaty cou	untry 🕨	and treaty article num	iber Þ							
Name	1a First name	Middle name	Last r	lame							
(see instructions)	MAHESH		SHA	IABAD							
Name at birth if different	1b First name	Middle name	Last r	name							
	2 Street address, apartment numb	per, or rural route number. I	f you have a P.O. box, see	separate instructions.							
Applicant's	9581 FONTAINEBLEAU BLVD										
mailing address	City or town, state or province, and country. Include ZIP code or postal code where appropriate. MIAMI FL USA 33172										
Foreign (non- U.S.) address	3 Street address, apartment number, or rural route number. Don't use a P.O. box number.										
(if different from above) (see instructions)	City or town, state or province, and country. Include ZIP code or postal code where appropriate.										
Birth information		Country of birth	City and state or province	e (optional) 5 Male							
Other information	6a Country(ies) of citizenship 6 INDIAN 6	b Foreign tax I.D. number (i	f any) 6c Type of U.S. vi	sa (if any), number, and expiration date							
mormation	6d Identification document(s) subm	6d Identification document(s) submitted (see instructions) 🛛 Passport 🗌 Driver's license/State I.D.									
	USCIS documentation	Other		ate of entry into the							
			U	nited States							
	Issued by: INDIA No.: J7875209 Exp. date: 09/08/2021 (MM/DD/YYYY):										
	6e Have you previously received an ITIN or an Internal Revenue Service Number (IRSN)?										
	No/Don't know. Skip line 6f.										
	Yes. Complete line 6f. If more than one, list on a sheet and attach to this form (see instructions).										
	6f Enter ITIN and/or IRSN ► ITIN IRSN and										
	name under which it was issued First name Aiddle name Last name										
	6g Name of college/university or company (see instructions)										
	City and state		Length of stay								
Sign Here	Under penalties of perjury, I (applicant/delegate/acceptance agent) declare that I have examined this application, including accompanying documentation and statements, and to the best of my knowledge and belief, it is true, correct, and complete. I authorize the IRS to share information with my acceptance agent in order to perfect this Form W-7, Application for IRS Individual Taxpayer Identification Number.										
	Signature of applicant (if delega	Phone number									
Keep a copy for your records.	Name of delegate, if applicable	(type or print)	Delegate's relationship to applicant	Parent Court-appointed guardian Power of Attorney							
Acceptance	Signature			Phone Fax							
Agent's	· · · · · · · · · · · · · · · · · · ·			· ••··							

Name and title (type or print)

Use ONLY

Name of company

EIN

Office Code

PTIN