Form	8879	
Form	XX/U	

IRS e-file Signature Authorization

OMB No. 1545-0074

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.

are

are

Submission Identification Number (SID)	
Taxpayer's name	Social security number
SAI SINDHU GANDU	843-19-2965
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	65,356.
2	Total tax (Form 1040, line 15; Form 1040NR, line 61)	2	7,682.
3	Federal income tax withheld from Forms W-2 and 1099 (Form 1040, line 16; Form 1040NR, line 62a) .	3	9,831.
4	Refund (Form 1040, line 20a; Form 1040-SS, Part I, line 13a; Form 1040NR, line 73a)	4	2,149.
5	Amount you owe (Form 1040, line 22; Form 1040NR, line 75)	5	
Part	Taxpayer Declaration and Signature Authorization (Be sure you get and keep a copy	of y	our 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 auctourt. This authorization is to remain in full force and effect until I notify 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
------------	------	-------	-----	-----	------

X	I authorize	GLOBAL TAXE	S LLC		to enter or generate my PIN	9	2 9	9 6	5	
			ERO firm nan	ne		Ente	r five o	ligits,	but	
	as my signat	ture on my tax ye	ar 2018 electro	onically filed income ta	x return.	don'i	enter	all ze	ros	
					cally filed income tax return. Cl er PIN method. The ERO must o					
Your sig	gnature 🕨				Date 🕨					
Spouse	's PIN: check	k one box only							T]	
	l authorize				to enter or generate my PIN					
			ERO firm nan	ne	-	Ente	r five o	ligits,	but	
	as my signat	ture on my tax ye	ar 2018 electro	nically filed income ta	x return.	don'i	enter	all ze	ros	
				av voor 2019 alastropi	cally filed income tax return. Cl		ما ما ما		nhv it	fvou

Spouse's signature ►

Date	
------	--

Practitioner PIN Method Returns Only—continue below											
Part III	Certification and Authentication – Practitioner PIN Method Only										
ERO's EFI	N/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN.	5	8	7			8 nter a	 	3	4	5

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

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

Form 1040NR U.S. Nonresident Alien Income Tax Return Go to www.irs.gov/Form1040NR for instructions and the latest inform						rn Iformatic	'n	Ļ	OMB N	o. 1545-0	074			
Department of the			Fo	or the year Janu	ary 1-December	31, 2018, 0	or other	tax year				20	018	3
Internal Revenue S			beginning name and initial	, 2	018, and ending Last name				, 20		ifving p	umber (se		tions)
												-2965		.10115)
			INDHU ome address (number and stre	et or rural rout	GANDU	0 box s	oo instru	Ictions	Apt. no.	84.			Individua	
Please print			S KING DR		e). Il you have a F	.0. 00, 5	ee mstru	ictions.	1718		Check	if: 🗙	Estate or	
or type			or post office, state, and ZIP	code lf vou ba	ve a foreign addre		omplete	spaces be		netructi	one		Estate of	Trust
or type			GO IL 60616	code. Il you lla	ve a loreign addre	533, also c	ompiete	spaces be	10w. dee 1	1311 11011	0113.			
	-	-	ountry name			Foreign	nrovince	/state/cou	ntv			Forei	gn postal	
	1010	ign oc	and y hance			roroigin	province	, State, 600	iity				gri posta	COUC
	1		Reserved				4	Reser	/ed					
Filing	2		Single nonresident alien				5		d nonres	ident	alien			
Status	2	_	Reserved				6	_	/ing wido			struction	ne)	
Check only	3						0		name ►	È		31100101	13)	
one box.								Offild S						
Dependents	7	Dep	pendents: (see instructior	is)	(2) Depende identifying nu			pendent's		(4) 🖌	if qualifi	es for (see	e instr.):	
If more		(1)	First name Last	name	identifying hu	mber	relations	ship to you	Chil	d tax c	redit	Credit for	other dep	endents
than four dependents,												_		
see instructions														
and check														
here.														
Income			ges, salaries, tips, etc. A	• • •							8		68,4	428.
Effectively			able interest				1				9a			
Connected			-exempt interest. Do no				-			-				
With U.S.			inary dividends				1	· · ·		•	10a			
Trade/			lified dividends (see inst	,						-				
Business			able refunds, credits, or				`		,		11			
	12		olarship and fellowship gra		()	•				'	12			
	13		iness income or (loss). A			•	,			_	13		3,9	920.
	14		ital gain or (loss). Attach S		,	•		•			14			
Attach Form(s)	15		er gains or (losses). Atta		7		• •			•	15			
W-2, 1042-S, SSA-1042S,	16		erved	1 1		1				•	16			
RRB-1042S,			s, pensions, and annuitie					able amo	`	,	17b			
and 8288-A	18		tal real estate, royalties,					`	,		18		-4,9	900.
here. Also attach Form(s)			m income or (loss). Attac		,						19			
1099-R if tax			mployment compensati				• •			•	20			
was withheld.			er income. List type and					r			21			
			l income exempt by a treaty			. , . ,	22	1 Thia		atal				
	23		nbine the amounts in the amounts in the sectively connected inco								00		67 /	110
	04									•	23		07,-	448.
Adjusted	24 25		cator expenses (see ins Ith savings account ded	,			24 25							
Gross			ing expenses for mem											
Income	_0						26							
	27		luctible part of self-emp											
			m 1040)	•			27							
	28		-employed SEP, SIMPLI				28							
	29		-employed health insura	•	•		29							
	30		alty on early withdrawal				30							
	31		olarship and fellowship	-			31							
	32		deduction (see instruction	-			32							
	33		dent loan interest deduc						2,0	92.				
	34		l lines 24 through 33 .								34			
	35		usted Gross Income. S								35		65,3	356.
Tevrard	36		ount from line 35 (adjust								36		65,3	
Tax and	37		nized deductions from	-				US/Ind			37			000.
Credits	38		lified business income o								38			
	39		mptions for estates and								39			
For Disclosure, P	rivacy	Act,	and Paperwork Reduction	Act Notice, see	instructions.	BAA		RE	V 05/02/19 F	RO		Form 1	040NF	(2018)

Form 1040NR (201	8)								Page 2
Taward	40	Add lines 37 through 39						40	12,000.
Tax and	41	Taxable income. Subtract line 40 from I						41	53,356.
Credits	42	Tax (see instr.). Check if any is from For	m(s): a 🗌 8814	b 🗌 4	972	с]	42	7,682.
(continued)	43	Alternative minimum tax (see instruction	ons). Attach For	m 6251				43	
	44	Excess advance premium tax credit repa						44	
	45	Add lines 42, 43, and 44					🕨	45	7,682.
	46	Foreign tax credit. Attach Form 1116 if re	equired		46				
	47	Credit for child and dependent care expen			47				
	48	Retirement savings contributions credit.			48				
	49	Child tax credit and credit for oth	•	•					
		instructions)			49				
	50	Residential energy credit. Attach Form 5	695		50				
	51	Other credits from Form: $\mathbf{a} \square 3800 \mathbf{b}$	8801 c		51				
	52	Add lines 46 through 51. These are your						52	
	53	Subtract line 52 from line 45. If zero or le						53	7,682.
	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 Medicare	e tax from Form	n: a 🗌 4	137	I	o 🗌 8919	56	
	57	Additional tax on IRAs, other qualified re	tirement plans,	etc. Atta	ch Forr	n 532	9 if required	57	
	58	Transportation tax (see instructions) .						58	
	59 a	Household employment taxes from Sche	edule H (Form 1	1040).				59a	
		Repayment of first-time homebuyer crec						59b	
	60	Taxes from: a Form 8959 b Instru	uctions; enter c	ode(s)				60	
	61	Total tax. Add lines 53 through 60					🕨	61	7,682.
Deserves	62	Federal income tax withheld from:							
Payments	a	Form(s) W-2 and 1099			62a		9,831.		
	k	Form(s) 8805			62b				
	c	; Form(s) 8288-A			62c				
	c	I Form(s) 1042-S			62d				
	63	2018 estimated tax payments and amount a	applied from 201	7 return	63				
	64	Additional child tax credit. Attach Sched	ule 8812 .		64				
	65	Net premium tax credit. Attach Form 896	62		65				
	66	Amount paid with request for extension t	o file (see instru	uctions)	66				
	67	Excess social security and tier 1 RRTA tax w	ithheld (see instru	uctions)	67				
	68	Credit for federal tax on fuels. Attach For	rm 4136 .		68				
	69	Credits from Form: a 2439 b Reserved	c 🗌 8885 d 🗌		69				
	70	Credit for amount paid with Form 1040-0	С		70				
	71	Add lines 62a through 70. These are you	ir total paymer	nts.			🕨	71	9,831.
		If line 71 is more than line 61, subtract lin			the ar	nount	you overpaid	72	2,149.
Refund	73a	Amount of line 72 you want refunded to	you. If Form 8	888 is atta	ached,	chec	k here . 🕨 🗌	73a	2,149.
Direct deposit?	k	Routing number 0 7 4 0 0 0 0) 1 0 🕨	c Type:	🗙 Ch	eckin	g 🗌 Savings		
See instructions.	c	Account number 0 0 0 0 0 0 7	/ 9 1 2 1	L 9 6	3 2				
	e	If you want your refund check mailed to an addres	s outside the Unite	d States no	t shown	on pag	ge 1, enter it here.		
	74	Amount of line 72 you want applied to your	2019 estimated	d tax 🕨	74				
Amount	75	Amount you owe. Subtract line 71 from lin	ne 61. For detail	s on how	to pay,	see ir	nstructions	75	
You Owe	76	Estimated tax penalty (see instructions)			76				
Third Party	Doy	ou want to allow another person to discu	iss this return w	ith the IR	S? See	e instr	ructions 🗌 🏾	/es. Co	mplete below. 🛛 🗙 No
Designee			Phone				Personal		tion
		gnee's name ► er penalties of perjury, I declare that I have examin	no. ► ed this return and	accompany	ina sch	edules	number (F	,	best of my knowledge and
Sign Here		f, they are true, correct, and complete. Declaration							
Keep a copy of	Your	signature	Date	Your occu	pation ir	n the U	nited States		S sent you an Identity
this return for		-	Buto					Protection (see inst	on PIN, enter it here r.)
your records.				SOFTW	ARE I	DEVE	LOPER	,	
Deid	Prin	/Type preparer's name Preparer	r's signature				Date	Charl	
Paid	APP	NA RUPA VENKATA SATYA SAI MANIKUMAR						Check self-emp	
Preparer Use Only		's name ► GLOBAL TAXES LLC					Firm's EIN ►		<u> </u>
USE Only		's address ► 2530 Pebble Creek I	Ln Cummina	GA 30	041		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		payments received with respect to section									
	transactions		· · · 1	1c							
2	Interest:										
а				2a							
b	Paid by foreign corp	orations		2b							
С				2c							
3		patents, trademarks, etc.)		3							
4		V. copyright royalties		4							
5	• • • •	rights, recording, publishing, etc.)		5							
6		e and natural resources royalties		6							
7		ies		7							
8	•	fits	-	8							
9		e 18 below		9	,						
10	If zero or less, ente	ts of Canada only. Enter net income in column (c)).								
	Winnings	er -0									
a h			1	0c							
11			· · · ["								
			1	11							
12											
			- 1	12							
13		12 in columns (a) through (d)		13							
14	-	rate of tax at top of each column	-	14	· · · ·						
15		t effectively connected with a U.S. trade or			d columns (a) t	hrough (d) of line 1	4. Enter the total	here and on			
		54									
		Capital Gains and						I			
	nly the capital gains and from property sales or	16 (a) Kind of property and description	(b) Date		(c) Date			(f) LOSS	(g) GAIN		
exchan	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	nd losses on Schedule D										
(Form 1 Benort	property sales or										
exchan	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 4797, 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 D Were you ever:
- **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,

Date 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 <u>365</u>, 2017 <u>365</u>, and 2018 <u>365</u>. Did vou file a U.S. income tax return for any prior year? I

	If "Yes," give the latest year and form number you filed ► 1040NR			
J	Are you filing a return for a trust?	<u>ا</u>	íes 🛛	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?	<u> </u>	ſes 🗌	No
κ	Did you receive total compensation of \$250,000 or more during the tax year?	<u>ר</u> ו	íes 🛛	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				
	(e) Total. Enter this amount on Form 1040NR, line 22.	Do not enter it on line 8	8 or line 12 🕨				
2.	Were you subject to tax in a foreign country on any of the	e income shown in 1(d)	above?	🗌 Yes 🛛 No			
3.	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		5				

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 States as effectively connected with a U.S. trade or business under section 871(d). See instructions

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

SCHEDULE C (Form 1040)

Profit or Loss From Business (Sole Proprietorship)

OMB No. 1545-0074 20 8

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

	lent of the freasury		-		ructions and the latest information nerships generally must file Forr)65.		chment uence No	09			
	f proprietor			., part				curity num			_		
	SINDHU GANDU						843-19-2965						
A	Principal business or profess	ion, including	product or service (se	e instri	uctions)			code from i		15			
	SOFTWARE CONSULTI			0 1101				▶ 5 1		1	0		
с	Business name. If no separat		ame, leave blank.			1		yer ID numb			_		
	SOFTWARE CONSULTING												
E	Business address (including	suite or room	no.) ► 2951 S K	ING	DR				_ i i				
	City, town or post office, sta	te, and ZIP co	de CHICAGO,	IL									
F	Accounting method: (1)	🗙 Cash	(2) Accrual (3)) 🗌 (Other (specify) ►								
G	Did you "materially participa	te" in the oper	ation of this business	during	2018? If "No," see instructions for	lim	it on los	ses .	X Yes		lo		
н													
I .					n(s) 1099? (see instructions)				Yes	XN			
J		ile required Fo	orms 1099?						Yes		10		
Part	Income												
1					this income was reported to you o				2	0.00			
					d		1		3	,920	•		
2						·	2		<u> </u>	0.00			
3						·	3		3	,920	•		
4							4 5			,920			
5 6					refund (see instructions)		6		3	,920	·		
7			•				7			,920			
	Expenses. Enter exp	penses for h	usiness use of you	r hom	ne only on line 30		1			,) 2 0	·		
8	Advertising	8		18	Office expense (see instructions))	18						
9	Car and truck expenses (see	-		19	Pension and profit-sharing plans		19						
Ũ	instructions).	9		20	Rent or lease (see instructions):								
10	Commissions and fees .	10		а	Vehicles, machinery, and equipme	nt	20a						
11	Contract labor (see instructions)	11		b	Other business property		20b						
12	Depletion	12		21	Repairs and maintenance		21						
13	Depreciation and section 179			22	Supplies (not included in Part III)		22						
	expense deduction (not included in Part III) (see			23	Taxes and licenses		23						
	instructions).	13		24	Travel and meals:								
14	Employee benefit programs			а	Travel		24a						
	(other than on line 19)	14		b	Deductible meals (see								
15	Insurance (other than health)	15			instructions)		24b						
16	Interest (see instructions):			25	Utilities		25						
а	Mortgage (paid to banks, etc.)	16a		26	Wages (less employment credits		26						
b	Other	16b		27a	Other expenses (from line 48) .		27a				_		
17	Legal and professional services	17		b	Reserved for future use		27b				_		
28	•				8 through 27a		28 29			,920			
29 30	,				nses elsewhere. Attach Form 882		29			, , 20	÷		
	unless using the simplified m	,		expe	inses elsewhere. Attach i offit 002	20							
	Simplified method filers on		,	(a) yo	ur home:								
	and (b) the part of your home	e used for bus	iness:		. Use the Simplified	_							
	Method Worksheet in the ins	structions to fig	gure the amount to en	ter on	line 30		30						
31	Net profit or (loss). Subtrac	ct line 30 from	line 29.										
	• If a profit, enter on both Sche	edule 1 (Form 1	1040), line 12 (or Form 1	040NR	, line 13) and on Schedule SE,								
	line 2. (If you checked the box of	on line 1, see in:	structions). Estates and the	rusts, e	enter on Form 1041, line 3.		31		3	,920	•		
	• If a loss, you must go to l	ine 32.			J								
32	If you have a loss, check the	box that desc	cribes your investment	in this	activity (see instructions).								
	• If you checked 32a, enter	the loss on b	oth Schedule 1 (Form	1040), line 12 (or Form 1040NR,		~ ~	7					
	line 13) and on Schedule S			line 1,	, see the line 31 instructions).		32a ∟		stment is				
	Estates and trusts, enter on						32b	at risk.	ivesuiie	11.1511	JL		
	 If you checked 32b, you n 	ust attach Fc	orm 6198. Your loss ma	ay be l	limited.								

Schedu Part	le C (Form 1040) 2018 Cost of Goods Sold (see instructions)			Page 2
Fart				
33	Method(s) used to value closing inventory: a Cost b Lower of cost or market c Other (at	tach e	xplanation)	
34	Was there any change in determining quantities, costs, or valuations between opening and closing inventor of "Yes," attach explanation		. 🏾 Yes	No
35	Inventory at beginning of year. If different from last year's closing inventory, attach explanation	35		
36	Purchases less cost of items withdrawn for personal use	36		
37	Cost of labor. Do not include any amounts paid to yourself	37		
38	Materials and supplies	38		
39	Other costs	39		
40	Add lines 35 through 39	40		
41	Inventory at end of year	41		
42	Cost of goods sold. Subtract line 41 from line 40. Enter the result here and on line 4	42		
Part	Information on Your Vehicle. Complete this part only if you are claiming car or and are not required to file Form 4562 for this business. See the instructions for file Form 4562.			
43 44	When did you place your vehicle in service for business purposes? (month, day, year)			
а	Business b Commuting (see instructions) c	Other		
45	Was your vehicle available for personal use during off-duty hours?		🗌 Yes	No
46	Do you (or your spouse) have another vehicle available for personal use?		🗌 Yes	No No
47a	Do you have evidence to support your deduction?		🗌 Yes	No No
b	If "Yes," is the evidence written?		🗌 Yes	No
Part	V Other Expenses. List below business expenses not included on lines 8–26 or I	ne 3().	
48	Total other expenses. Enter here and on line 27a	48		

SCHEDULE E	Suppl
(Form 1040)	(From rental real estate, royalties
Department of the Treasury	► Attach
nternal Revenue Service (99)	► Go to <i>www.irs.gov/S</i>
Name(s) shown on return	
GAT GINDHII CAN	זות

SCHEDULE E		Supplemental Income and Loss									OMB No. 1545-0074			
(Form	n 1040)	(From rental real estate, royalties, partnerships, S corporations, estates, trusts, REMICs, etc.)									2018			
Departm	ent of the Treasury			ach to Form 10								⊐ 🕑 🔳 ' chment		
	Revenue Service (99)		► Go to www.irs.go	v/ScheduleE f	or inst	ruction	s and th	e latest	informatior		Sequ	uence No.		
()	shown on return									Your soci		-	ər	
-	SINDHU GAN									843-1				
Part			s From Rental Real E		-		-			• •				
			EZ (see instructions). If y									·		
	•		ents in 2018 that would			. ,			,				_	
			ou file required Forms								. 🗆	Yes	No	
<u>1a</u>	-		each property (street,			e)								
	HYDERABAD	HYDE	ERABAD TELANGAN	A IN 5000	/2									
<u>C</u>	Turne of Duoy		0					Eoir	Rental	Personal				
1b	Type of Prop (from list be		2 For each rental above, report th	eal estate prop e number of fa	ir rent	isted al and			ays	Days		QJV		
Α	7	1010)	personal use da	vs. Check the	OJV b	OX	•		-	Buye	0		<u></u>	
B	+-'		only if you meet	venture. See in	nts to Istruct	tile as ions.	A B		365		0		<u></u>	
	+						C						<u></u>	
	of Property:						U					L		
	gle Family Resid	lence	3 Vacation/Short-	Term Rental	5 I a	nd		7 Self-	Rental					
-	ti-Family Reside		4 Commercial	renn nentai		valties			r (describe)				
Incom		51100		Properties:			Α	0 Othe		9 3		С		
3	Rents received	4		· · · · ·	3			500.						
4			· · · · · · · · ·		4									
Expen														
5					5			200.						
6			nstructions)		6			200.						
7		-			7									
8	-				8									
9					9									
10			essional fees		10									
11	•				11									
12			id to banks, etc. (see i		12									
13				,	13		F	000.						
14					14		J,	000.						
15					14									
16		• •			16									
17	Taxes Utilities				17									
18	Depreciation e				18									
		xpense			19									
19 20	Other (list) ►		lines E through 10		20			100						
20	-		lines 5 through 19 .		20		э,	400.						
21			line 3 (rents) and/or 4											
	· ·		instructions to find ou		0.4		4	000						
					21		-4,	900.						
22			l estate loss after limi			(4		/	,	,		`	
00-	on Form 8582	-			22	l	-4,	900.)	()	()	
23a			eported on line 3 for a			• •	• •	23a		500.				
b			eported on line 4 for a				• •	23b						
c			eported on line 12 for			• •	• •	23c						
d			eported on line 18 for			• •	• •	23d		F 400				
e			eported on line 20 for					23e		5,400.				
24		-	e amounts shown on			-			· · · ·	. 24	/		<u> </u>	
25			esses from line 21 and re								l	4,9	900.)	
26	Total rental re	al est	ate and rovalty inco	ne or (loss) (Comb	ine line	s 24 ar	nd 25 E	nter the re	sult				

100 state and royalty income or (loss). Combine lines 24 and 25. I 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

26

-4,900.