Tear off here

1040-ES (NR)

2021

Estimated Tax Payment Voucher

4

File only if you are making a payment of estimated tax by check or money order. Return this voucher with your check or money order payable to "United States Treasury." Write your identifying number and "2021 Form 1040-ES (NR)" on your check or money order. Do not send

OMB No. 1545-0074

Calendar year—Due Jan. 18, 2022

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

OBLICATION OF THE NO. 1545-0074

Dollars Cents

423.

| | ntifying number and "2021 Form 1040-ES h. Enclose, but do not staple or attach, yo | ` ' | , | check or money order. | Dollars 423. | Cents | | | | |
|-------------|---|---|-------------------------------|--------------------------|-------------------|-------|--|--|--|--|
| | Your identifying number (SSN or ITIN) (emplo 711-41-9185 | ur identifying number (SSN or ITIN) (employer identification number for an estate or trust) | | | | | | | | |
| type | Your first name and middle initial SRIVATSA MANJUNATH | Your last name HEGDE | | | | | | | | |
| Print or ty | Address (number, street, and apt. no.) 15602 SE 10TH ST | | | | | | | | | |
| ш. | City, town, or post office. If you have a foreig BELLEVUE | ty, town, or post office. If you have a foreign address, also complete spaces below. SELLEVUE S | | | | | | | | |
| | Foreign country name | | Foreign province/state/county | | Foreign postal co | ode | | | | |

| Eila | only if you are making a neument of set | imated tax by | shook or manay ander Datum this | $\overline{}$ | Calendar vear | -Due Sept. 15, 2 | 2021 |
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| | only if you are making a payment of esti cher with your check or money order pa | • | | > | | ated tax you are | -041 |
| | cher with your check or money order pa htifying number and "2021 Form 1040-E | | | and | paying by | Dollars | Cont |
| | h. Enclose, but do not staple or attach, y | | | enu | check or | Dollars 423. | Cents |
| Cas | · · · · · · · · · · · · · · · · · · · | | | | money order. | 443. | |
| | Your identifying number (SSN or ITIN) (employed) 711-41-9185 | oyer identificati | on number for an estate or trust) | | | | |
| | | Volumboot no | mo. | | | | |
| | Your first name and middle initial | Your last nar | IIE | | | | |
| /be | SRIVATSA MANJUNATH | HEGDE | | | | | |
| or t | Address (number, street, and apt. no.) | 11110011 | | | | | |
| Print or type | 15602 SE 10TH ST | | | | | | |
| _ □ | City, town, or post office. If you have a foreign | gn address, als | o complete spaces below. | State |) | ZIP code | |
| | BELLEVUE | , | | WA | | 98005 | |
| | Foreign country name | | Foreign province/state/county | | | Foreign postal c | ode |
| | | | | | | | |
| For | Privacy Act and Paperwork Reduction Act | Notice, see in | structions. BAA | | REV 04/30 |)/21 PRO | |
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| _ | 1010 EQ (ND) | | | | | | |
| | 1040-ES (NR) Department of the Treasury Internal Revenue Service 2021 Estim Paym | nated Tax nent Vouche | 2 | | | | |
| | | | | | | OMB No. 15 | |
| | only if you are making a payment of est | | | 3 | | Due June 15, 2 | 2021 |
| | cher with your check or money order pa | | | and | paying by | nated tax you are | ١ |
| | ntifying number and "2021 Form 1040-E h. Enclose, but do not staple or attach, y | | | ena | check or | Dollars 423. | Cents |
| | | | | | money order. | 443. | |
| | Your identifying number (SSN or ITIN) (employed) 711-41-9185 | oyer idenillicali | of flumber for an estate of trust) | | | | |
| | Your first name and middle initial | Your last nar | ne | | | | |
| | | | | | | | |
| ype | SRIVATSA MANJUNATH | HEGDE | | | | | |
| ort | Address (number, street, and apt. no.) | • | | | | | |
| Print or type | 15602 SE 10TH ST | | | | | | |
| " | City, town, or post office. If you have a foreign | gn address, als | o complete spaces below. | State | • | ZIP code | |
| | BELLEVUE | | | WA | | 98005 | |
| | Foreign country name | | Foreign province/state/county | | | Foreign postal c | ode |
| | | | | | | | |
| For | Privacy Act and Paperwork Reduction Act | Notice, see in | structions. BAA | | REV 04/30 |)/21 PRO | |
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| L O | 1040-ES (NR) Department of the Treasury | nated Tax nent Vouche | 1 | | | OMD N 45 | 45 007 |
| _ | | | | _ | Calandar year | OMB No. 15 | |
| | only if you are making a payment of esti cher with your check or money order pa | | | 5 | | ated tax you are | 2021 |
| | tifying number and "2021 Form 1040-E | | | end | paying by | Dollars | Cents |
| | h. Enclose, but do not staple or attach, y | . , | - | Cria | check or money order. | 423. | Cents |
| | Your identifying number (SSN or ITIN) (empl | | | | | 143. | 1 |
| | 711-41-9185 | oyor idonimodii | on hamber for all estate of trusty | | | | |
| | Your first name and middle initial | Your last nar | me | | | | |
| | | | | | | | |
| ype | SRIVATSA MANJUNATH | HEGDE | | | | | |
| ort | Address (number, street, and apt. no.) | | | | | | |
| Print or type | 15602 SE 10TH ST | | | | | | |
| - | City, town, or post office. If you have a foreign | gn address, als | o complete spaces below. | State | , | ZIP code | |
| | PET.T.EVITE | | | TAT 7\ | | 98005 | |

Foreign country name

Foreign postal code

Foreign province/state/county

Form **8879**

(Rev. January 2021)

Department of the Treasury Internal Revenue Service

IRS e-file Signature Authorization

▶ ERO must obtain and retain completed Form 8879.

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

OMB No. 1545-0074

| Submis | sion Identification Number (SID) | | - | | |
|--|---|--|--|--|---|
| Taxpayer' | s name | Social sec | urity num | ber | |
| SRIV | ATSA MANJUNATH HEGDE | 711-4 | 1-918 | 5 | |
| Spouse's | name | Spouse's s | ocial sec | urity numb | er |
| Part I | Tax Return Information — Tax Year Ending December 31, 2020 (Enter | year you | are au | thorizing | g.) |
| Enter w | hole dollars only on lines 1 through 5. | | | | |
| Note: F | orm 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank. | | | | |
| 1 / | Adjusted gross income | | 1 | | 8,692. |
| | Total tax | | 2 | | 8,171. |
| 3 I | Federal income tax withheld from Form(s) W-2 and Form(s) 1099 | | 3 | | 6,479. |
| | Amount you want refunded to you | | 4 | | |
| _ | Amount you owe | | | | 1,692. |
| Part I | Taxpayer Declaration and Signature Authorization (Be sure you get and kenalties of perjury, I declare that I have examined a copy of the income tax return (original or amended) | | | | |
| to send of for any of Agent to payment authorized payment business taxes to personal | riginal or amended) I am now authorizing. I consent to allow my intermediate service provider, transminy return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejectles in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U. initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indiction in the financial institution account indication is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation required a days prior to the payment (settlement) date. I also authorize the financial institutions involved in the receive confidential information necessary to answer inquiries and resolve issues related to the procedure of the process. | ction of the S. Treasury cated in the n to debit the author ests must processing ayment. I f | e transmin y and its e tax prephe entry rization. be receind of the elurther ac | ssion, (b) designate paration s to this acc To revoke ved no la lectronic p cknowledge | the reason d Financial oftware for count. This e (cancel) a ater than 2 payment of ge that the |
| | c Funds Withdrawal Consent. | Г | | | ٦ |
| | er's PIN: check one box only I authorize GLOBAL TAXES LLC to enter or generate r | DINI | 1 9 1 | 1 8 5 | |
| X | I authorize GLOBAL TAXES LLC to enter or generate r | - | | digits, but | |
| | signature on the income tax return (original or amended) I am now authorizing. | | don t ente | er all zeros | |
| | I will enter my PIN as my signature on the income tax return (original or amended) I am no if you are entering your own PIN and your return is filed using the Practitioner PIN methodelow. | | | | |
| Your sig | gnature ▶ Date ▶ | | | | |
| Snouse | e's PIN: check one box only | _ | | | _ |
| П | I authorize to enter or generate r | ny PIN | | | as my |
| | ERO firm name | _ | Enter five | digits, but | _ , |
| | signature on the income tax return (original or amended) I am now authorizing. | | don't ente | er all zeros | |
| | I will enter my PIN as my signature on the income tax return (original or amended) I am not if you are entering your own PIN and your return is filed using the Practitioner PIN methodelow. | | | | |
| Spouse | 's signature ▶ Date ▶ | | | | |
| | Practitioner PIN Method Returns Only—continue below | | | | |
| Part II | 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 6 | - | 8 9 |
| | | 251116 | an Z | | |
| authorize | that the above numeric entry is my PIN, which is my signature for the electronic individual income ta ed to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am subm tents of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers of In | tting this r | eturn in a | accordanc | |
| ERO's s | signature ▶ Date ▶ | | | | |
| | ERO Must Retain This Form — See Instructions | | | | |
| | Don't Submit This Form to the IRS Unless Requested To D | o So | | | |

Form 1040-V 2020 Page **2**

| IF you live in | THEN use this address to send in your payment | | | | |
|---|--|--|--|--|--|
| Alabama, Florida, Georgia, Louisiana, Mississippi, North Carolina, South Carolina, Tennessee, Texas | Internal Revenue Service P.O. Box 1214 Charlotte, NC 28201-1214 | | | | |
| Arkansas, Connecticut, Delaware, District of Columbia, Illinois, Indiana, Iowa, Kentucky, Maine, Maryland, Massachusetts, Minnesota, Missouri, New Hampshire, New Jersey, New York, Oklahoma, Pennsylvania, Rhode Island, Vermont, Virginia, West Virginia, Wisconsin | Internal Revenue Service P.O. Box 931000 Louisville, KY 40293-1000 | | | | |
| Alaska, Arizona, California, Colorado, Hawaii, Idaho, Kansas, Michigan, Montana, Nebraska, Nevada, New Mexico, Ohio, Oregon, North Dakota, South Dakota, Utah, Washington, Wyoming | Internal Revenue Service P.O. Box 802501 Cincinnati, OH 45280-2501 | | | | |
| 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 or 4563, or are a dual-status alien or nonpermanent resident of Guam or the U.S. Virgin Islands | Internal Revenue Service P.O. Box 1303 Charlotte, NC 28201-1303 | | | | |

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

Form **1040-V** 2020

▼ Detach Here and Mail With Your Payment and Return ▼

Department of the Treasury Internal Revenue Service

(99) **202**

Form 1040-V Payment Voucher

▶ Use this voucher when making a payment with Form 1040.

- Do not staple this voucher or your payment to Form 1040.
- ► Make your check or money order payable to the 'United States Treasury.'

► Write your social security number (SSN) on your check or money order.

Enter the amount of your payment

1,692.

REV 04/30/21 PRO 1555

SRIVATSA MANJUNATH HEGDE

15602 SE 10TH ST BELLEVUE WA 98005 INTERNAL REVENUE SERVICE P.O. BOX 1303 CHARLOTTE, NC 28201-1303

Department of the Treasury-Internal Revenue Service IRS Use Only-Do not write **U.S. Nonresident Alien Income Tax Return** or staple in this space. **Filing** X Single ☐ Married filing separately (MFS) (formerly Married) Qualifying widow(er) (QW) **Status** If you checked the QW box, enter the child's name if the Check only qualifying person is a child but not your dependent \blacktriangleright one box. Your identifying number Your first name and middle initial Last name (see instructions) SRIVATSA MANJUNATH 711-41-9185 HEGDE Check if: X Individual Home address (number and street or rural route). If you have a P.O. box, see instructions. Apt. no. Estate or Trust 15602 SE 10TH ST City, town, or post office. If you have a foreign address, also complete spaces below. State ZIP code BELLEVUE 98005 Foreign country name Foreign province/state/county Foreign postal code At any time during 2020, did you receive, sell, send, exchange, or otherwise acquire any financial interest in any virtual currency? Yes X No

| Donondonto | | | | | | | | | | (A) V | if qualifie | es for (see instr.): |
|---------------------------------------|-----|---------------------------|--------------|----------------------|-------------------------|--------------|-------------|----------------------|----------|--------------|-------------|-----------------------------|
| Dependents (see instructions): | l . | (1) First name | Last na | me | (2) Dependidentifying r | | ` ' | epender onship to | | Child tax | • | Credit for other dependents |
| | | | | | | | | | | | | |
| If more than four dependents, see | | | | | | | | | | | | |
| instructions and | | | | | | | | | | | | |
| check here ► | | | | | | | | | | | | |
| Income | 1a | Wages, salaries, tips, e | etc. Attach | Form(s) W | <i>I</i> -2 | | | | | | 1a | 73,842. |
| Effectively | b | Scholarship and fellow | ship grant | s. Attach F | orm(s) 1042-S | or required | d stateme | ent. See | instruct | ions . | 1b | |
| Connected | С | Total income exempt | by a treaty | from Sch | edule OI (Form | 1040-NR) | , Item | | | | | |
| With U.S. | | L, line 1(e) | | | | | [| 1c | | | | |
| Trade or | 2a | Tax-exempt interest . | [| 2a | | b Tax | able inte | rest . | | | 2b | |
| Business | За | Qualified dividends . | [| 3a | | b Ord | linary divi | idends | | | 3b | |
| | 4a | IRA distributions | [| 4a | | b Tax | able amo | ount . | | | 4b | |
| | 5a | Pensions and annuities | s[| 5a | | b Tax | able amo | ount . | | | 5b | |
| | 6 | Reserved for future us | e | | | | | | | | 6 | |
| | 7 | Capital gain or (loss). A | Attach Sch | edule D (Fo | orm 1040) if req | uired. If no | ot require | d, chec | k here . | ▶ □ | 7 | |
| | 8 | Other income from Scl | nedule 1 (F | orm 1040) | , line 9 | | | | | | 8 | -5,150. |
| | 9 | Add lines 1a, 1b, 2b, 3 | b, 4b, 5b, | 7, and 8. T | his is your tota | l effective | ly conne | cted in | come . | . ▶ | 9 | 68,692. |
| | 10 | Adjustments to income | e: | | | | | | | | | |
| | а | From Schedule 1 (Forn | n 1040), lir | ne 22 | | | [| 10a | | | | |
| | b | Charitable contribution | s for certa | in resident | s of India. See | instruction | s. | 10b | | | | |
| | С | Scholarship and fellow | ship grant | s excluded | 1 | | [| 10c | | | | |
| | d | Add lines 10a through | 10c. These | e are your t | total adjustme | nts to inc | ome . | | | . ▶ | 10d | |
| | 11 | Subtract line 10d from | line 9. Thi | s is your a c | djusted gross i | income | | | | . ▶ | 11 | 68,692. |
| | 12 | Itemized deductions | (from Sch | edule A (Fo | orm 1040-NR)) | or, for cer | tain resic | lents of | India, s | standard | | |
| | | deduction. See instruc | tions | | | \$to | d Dedn | US/I | ndia . | Treaty | 12 | 12,400. |
| | 13a | Qualified business inco | ome deduc | tion. Attac | h Form 8995 o | r Form 899 | 95-A | 13a | | | | |
| | b | Exemptions for estates | and trust | s only. See | instructions | | [| 13b | | | | |
| | С | Add lines 13a and 13b | | | | | | | | | 13c | |
| | 14 | Add lines 12 and 13c | | | | | | | | | 14 | 12,400. |

Taxable income. Subtract line 14 from line 11. If zero or less, enter -0-

BAA

56,292.

| Form 1040-NR (| 2020) | | | | | | | Page 2 |
|--------------------------------------|---------------|---|--------------------|----------------|--------------|---------------------------|----------------------|--------------------------|
| | 16 | Tax (see instructions). Check if any from Form | (s): 1 8814 | 2 4972 | 2 3 🗌 | | 16 | 8,171. |
| | 17 | Amount from Schedule 2 (Form 1040), line 3 | | | | | 17 | 0. |
| | 18 | Add lines 16 and 17 | | | | | 18 | 8,171. |
| | 19 | Child tax credit or credit for other dependent | s | | | | 19 | |
| | 20 | Amount from Schedule 3 (Form 1040), line 7 | | | | | 20 | |
| | 21 | Add lines 19 and 20 | | | | | 21 | |
| | 22 | Subtract line 21 from line 18. If zero or less, e | enter -0 | | | | 22 | 8,171. |
| | 23a | Tax on income not effectively connected v from Schedule NEC (Form 1040-NR), line 15 | | | 23a | | | |
| | b | Other taxes, including self-employment tax, line 10 | | , . | 23b | | | |
| | С | Transportation tax (see instructions) | | | 23c | | | |
| | d | Add lines 23a through 23c | | | | | 23d | |
| | 24 | Add lines 22 and 23d. This is your total tax | | | | . ▶ | 24 | 8,171. |
| | 25 | Federal income tax withheld from: | | | | | | |
| | а | Form(s) W-2 | | | 25a 6 | ,479. | | |
| | b | Form(s) 1099 | | | 25b | | | |
| | С | Other forms (see instructions) | | | 25c | | | |
| | d | Add lines 25a through 25c | | | | | 25d | 6,479. |
| | е | Form(s) 8805 | | | | | 25e | |
| | f | Form(s) 8288-A | | | | | 25f | |
| | g | Form(s) 1042-S | | | | | 25g | |
| | 26 | 2020 estimated tax payments and amount ap | | | | | 26 | |
| | 27 | Reserved for future use | | | 27 | | | |
| | 28 | Additional child tax credit. Attach Schedule 8 | 3812 (Form 1040) | | 28 | | | |
| | 29 | Credit for amount paid with Form 1040-C | | | 29 | | | |
| | 30 | Reserved for future use | | | 30 | | | |
| | 31 | Amount from Schedule 3 (Form 1040), line 13 | | | 31 | | | |
| | 32 | Add lines 28 through 31. These are your total | | | | | 32 | |
| | 33 | Add lines 25d, 25e, 25f, 25g, 26, and 32. The | | | | | 33 | 6,479. |
| Refund | 34 | If line 33 is more than line 24, subtract line 24 | | | • | | 34 | |
| | 35a | Amount of line 34 you want refunded to you | 1 1 1 | | | | 35a | |
| Direct deposit? See instructions. | ▶ b | Routing number X X X X X X X | Savings | | | | | |
| See instructions. | ▶ d | Account number X X X X X X X X | | | | | | |
| | ▶ e | If you want your refund check mailed to an a | | | | | | |
| | | enter it here. | | | | | | |
| | 36 | Amount of line 34 you want applied to your | 2021 estimated t | ax . ► | 36 | | | |
| Amount | 37 | Amount you owe. Subtract line 33 from line | 24. For details on | how to pay, so | 1 | . ▶ | 37 | 1,692. |
| You Owe | 38 | | | ▶ | 38 | | | |
| Third Party Designee | , | ou want to allow another person (other than with the IRS? See instructions | your paid prepar | er) to discuss | | Complete I | oelow. | ⊠ No |
| (Other than paid preparer) | Desig name | nee's ▶ | Phone no. ► | | | nal identific er (PIN) | cation ► [| |
| Sign Here | | penalties of perjury, I declare that I have examined they are true, correct, and complete. Declaration of p | | | | | | |
| 11616 | Your | signature | Date Yo | ur occupation | | | | nt you an Identity |
| | | | | ים ממעות המחבר | ממת סחיים | | ection P nst.) ▶[| PIN, enter it here |
| | Dha. | | | OFTWARE D | FAFTOREK | (See I | 1151.) | |
| | Phone | e no. urer's name Preparer's sig | Email address | | Date | PTIN | | Check if: |
| Paid | | ' | | אוגדדאיי החת | | | | Self-employed |
| Preparer | | | RAM SAGAR GU | ria laddaM | 05/11/2021 | Phono n | | |
| Use Only | | s name▶ GLOBAL TAXES LLC s address▶ 2530 Pebble Creek L | G | 77 20041 | | | | 78)965-9522 0 1017196 |
| | THILLS | saddress▶ 2530 Pebble Creek L | n cumming (| A 30041 | | TIIIII S EI | IN - 31 | 0-1017196 |

SCHEDULE NEC (Form 1040-NR)

Tax on Income Not Effectively Connected With a U.S. Trade or Business

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service (99) Name shown on Form 1040-NR ▶ Go to www.irs.gov/Form1040NR for instructions and the latest information. ► Attach to Form 1040-NR.

| 2020 | |
|--------------------------------------|--|
| Attachment Sequence No. 7B | |

Your identifying number

SRIVATSA MANJUNATH HEGDE 711-41-9185 Enter amount of income under the appropriate rate of tax. See instructions. (d) Other (specify) (a) 10% **Nature of Income** (c) 30% **(b)** 15% % % Dividends and dividend equivalents: Dividends paid by U.S. corporations 1a 1b Dividend equivalent payments received with respect to section 871(m) transactions 1c 2 Interest: 2a 2b 2c 3 3 4 Motion picture or TV copyright royalties 5 Real property income and natural resources royalties 6 7 8 9 10 Gambling-Residents of Canada only. Enter net income in column (c). If zero or less, enter -0-. Winnings _____ 10c Gambling winnings—Residents of countries other than Canada. 11 12 Other (specify) ▶ 12 13 Add lines 1a through 12 in columns (a) through (d) 13 14 14 15 Tax on income not effectively connected with a U.S. trade or business. Add columns (a) through (d) of line 14. Enter the total here and on Form 1040-NR, line 23a ▶ 15 Capital Gains and Losses From Sales or Exchanges of Property Enter only the capital gains and 16 (a) Kind of property and description (f) LOSS (g) GAIN (b) Date acquired (c) Date sold (d) Sales price (e) Cost or losses from property sales or (if necessary, attach statement of If (e) is more than (d), If (d) is more than (e), mm/dd/yyyy mm/dd/yyyy other basis exchanges that are from sources descriptive details not shown below) subtract (d) from (e). subtract (e) from (d). within the United States and not effectively connected with a U.S. business. Do not include a gain or loss on disposing of a U.S. real property interest; report these gains and losses on Schedule D (Form 1040). Report property sales or exchanges that are effectively connected with a U.S. business on Schedule D (Form 1040). 18 Capital gain. Combine columns (f) and (g) of line 17. Enter the net gain here and on line 9 above. If a loss, enter -0-Form 4797, or both. . • 18

SCHEDULE OI (Form 1040-NR)

Other Information

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

m1040NR for instructions and the latest information.
 ▶ Attach to Form 1040-NR.
 ▶ Answer all questions.
 Attachment Sequence No. 7C

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service (99)

Name shown on Form 1040-NR Your identifying number SRIVATSA MANJUNATH HEGDE 711-41-9185 Α Of what country or countries were you a citizen or national during the tax year? INDIA In what country did you claim residence for tax purposes during the tax year? United States В C Have you ever applied to be a green card holder (lawful permanent resident) of the United States? X No Were you ever: X No Yes 1. A U.S. citizen? X No Yes If you answer "Yes" to (1) or (2), see Pub. 519, chapter 4, for expatriation rules that apply to you. 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. Ε immigration status on the last day of the tax year. F1 X No F Have you ever changed your visa type (nonimmigrant status) or U.S. immigration status? Yes If you answered "Yes," indicate the date and nature of the change ▶ G List all dates you entered and left the United States during 2020. 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 Date entered United States Date departed United States Date departed United States mm/dd/yy mm/dd/yy mm/dd/yy mm/dd/yy Give number of days (including vacation, nonworkdays, and partial days) you were present in the United States during: н 2018 ______, 2019 ______, and 2020 ______365 ____. Yes X No Т If "Yes," give the latest year and form number you filed ▶ X No Yes J If "Yes," did the trust have a U.S. or foreign owner under the grantor trust rules, make a distribution or loan to a Yes No Κ Yes X No No If "Yes," did you use an alternative method to determine the source of this compensation? 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 (d) Amount of exempt claimed in prior tax years income in current tax vear (e) Total. Enter this amount on Form 1040-NR, line 1c. Do not enter it on line 1a or line 1b No 2. Were you subject to tax in a foreign country on any of the income shown in 1(d) above? Yes X No If "Yes," attach a copy of the Competent Authority determination letter to your return. M Check the applicable box if: 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 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

SCHEDULE 1 (Form 1040)

Additional Income and Adjustments to Income

OMB No. 1545-0074

2020

Attachment
Sequence No. 01

Department of the Treasury Internal Revenue Service

Name(s) shown on Form 1040, 1040-SR, or 1040-NR

SRIVATSA MANJUNATH HEGDE

► Attach to Form 1040, 1040-SR, or 1040-NR.
 Go to www.irs.gov/Form1040 for instructions and the latest information.

Attachment Sequence No. 01 Your social security number

711-41-9185

| Par | t I Additional Income | | |
|-----|--|-----|---------|
| 1 | Taxable refunds, credits, or offsets of state and local income taxes | 1 | |
| 2a | Alimony received | 2a | |
| b | Date of original divorce or separation agreement (see instructions) ▶ | | |
| 3 | Business income or (loss). Attach Schedule C | 3 | |
| 4 | Other gains or (losses). Attach Form 4797 | 4 | |
| 5 | Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E | 5 | -5,150. |
| 6 | Farm income or (loss). Attach Schedule F | 6 | |
| 7 | Unemployment compensation | 7 | |
| 8 | Other income. List type and amount ▶ | | |
| | | 8 | |
| 9 | Combine lines 1 through 8. Enter here and on Form 1040, 1040-SR, or 1040-NR, | | |
| Par | tili Adjustments to Income | 9 | -5,150. |
| | • | | |
| 10 | Educator expenses | 10 | |
| 11 | Certain business expenses of reservists, performing artists, and fee-basis government officials. Attach Form 2106 | 11 | |
| 12 | Health savings account deduction. Attach Form 8889 | 12 | |
| 13 | Moving expenses for members of the Armed Forces. Attach Form 3903 | 13 | |
| 14 | Deductible part of self-employment tax. Attach Schedule SE | 14 | |
| 15 | Self-employed SEP, SIMPLE, and qualified plans | 15 | |
| 16 | Self-employed health insurance deduction | 16 | |
| 17 | Penalty on early withdrawal of savings | 17 | |
| 18a | Alimony paid | 18a | |
| b | Recipient's SSN | | |
| С | | | |
| 19 | IRA deduction | 19 | |
| 20 | Student loan interest deduction | 20 | |
| 21 | Tuition and fees deduction. Attach Form 8917 | 21 | |
| 22 | Add lines 10 through 21. These are your adjustments to income. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 10a | 22 | |

SCHEDULE E

Department of the Treasury

Internal Revenue Service (99)

(Form 1040)

Supplemental Income and Loss

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

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

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

OMB No. 1545-0074

Attachment Sequence No. **13**

Name(s) shown on return SRIVATSA MANJUNATH HEGDE Your social security number 711-41-9185

| | Income or Loss From Rent | al Pool Estate and Po | raltio: | s Note | If you | ara in th | a businasa a | | | T-210 | = |
|--------------|--|---|----------------|---|----------|-----------|---------------|------|-------|-------|----------|
| Part | Schedule C. See instructions. If | | | | - | | | | | | |
| ∆ Di/ | you make any payments in 2020 th | · · · · · · · · · · · · · · · · · · · | | | | | | | | | |
| | Yes," did you or will you file require | | | | | | | | | | res 🖂 No |
| 1a | Physical address of each propert | | | | <u> </u> | • • | | • | | | |
| A | SAHAKAR NAGAR BANGALOR | · · · · · · · · · · · · · · · · · · · | oouc | <u>') </u> | | | | | | | |
| В | STREET WISHE BENGILLOR | | | | | | | | | | |
| С | | | | | | | | | | | |
| 1b | Type of Property 2 For each | For each rental real estate property listed Fair Rental P | | | | | | | rsona | Use | 0.11/ |
| | (from list below) above. | report the number of fa | ir renta | al and | | Days | | | Days | 8 | QJV |
| Α | 3 if you r | hal use days. Check the oneet the requirements to | Α | A 365 | | | | 0 | | | |
| В | qúalifie | ed joint venture. See inst | ructio | ns. | В | | | | | | |
| С | | | | | С | | | | | | |
| Туре | of Property: | | | | | | | | | | |
| 1 Sing | gle Family Residence 3 Vacati | on/Short-Term Rental | 5 Lar | nd | - | 7 Self- | Rental | | | | |
| | ti-Family Residence 4 Comm | | 6 Ro | yalties | | 3 Othe | r (describe) | | | | |
| Incom | | Properties: | | | Α | | В | } | | | С |
| 3 | Rents received | | 3 | | | 300. | | | | | |
| 4 | Royalties received | | 4 | | | | | | | | |
| Exper | | | | | | | | | | | |
| 5 | Advertising | | 5 | | | | | | | | |
| 6 | Auto and travel (see instructions) | | 6 | | | | | | | | |
| 7 | Cleaning and maintenance | | 7 | | | 600. | | | | | |
| 8 | Commissions | | 8 | | | | | | | | |
| 9 | Insurance | | 9 | | | | | | | | |
| 10 | Legal and other professional fees | | 10 | | | | | | | | |
| 11 | Management fees | | 11 | | | 800. | | | | | |
| 12 | Mortgage interest paid to banks, e | | 12 | | | | | | | | |
| 13 | Other interest | | 13 | | | 200 | | | | | |
| 14 | Repairs | | 14 | | | 300. | | | | | |
| 15 16 | Supplies | | 15 16 | | Ι, | 450. | | | | | |
| 16 17 | Taxes | | 17 | | 1 | 200 | | | | | |
| 18 | Depreciation expense or depletion | | 18 | | Δ, | 300. | | | | | |
| 19 | Other (list) | | 19 | | | | | | | | |
| 20 | Total expenses. Add lines 5 through | ah 10 | 20 | | 5 | 450. | | | | | |
| | Subtract line 20 from line 3 (rents) | | | | | 150. | | | | | |
| 21 | result is a (loss), see instructions | | | | | | | | | | |
| | file Form 6198 | | 21 | | -5, | 150. | | | | | |
| 22 | Deductible rental real estate loss | | | | <u> </u> | | | | | | |
| | on Form 8582 (see instructions) | | 22 | (| -5,1 | 50.) | (| |) | (| |
| 23a | Total of all amounts reported on li | | rties | | | 23a | | 3 | 00. | | |
| b | Total of all amounts reported on li | ne 4 for all royalty prop | erties | | | 23b | | | | | |
| С | Total of all amounts reported on li | ne 12 for all properties | | | | 23c | | | | | |
| d | Total of all amounts reported on li | ne 18 for all properties | | | | 23d | | | | | |
| е | Total of all amounts reported on li | ne 20 for all properties | | | | 23e | | 5,4 | 50. | | |
| 24 | Income. Add positive amounts sl | hown on line 21. Do no | t inclu | ide any | losses | | | | 24 | | |
| 25 | Losses. Add royalty losses from line | e 21 and rental real estate | losses | s from li | ne 22. E | nter tota | al losses her | е. | 25 | (| 5,150. |
| 26 | Total rental real estate and roya | alty income or (loss). | Comb | ine lines | 24 an | d 25. E | inter the res | sult | | | |
| | here. If Parts II, III, IV, and line | | | | | | | on | | | |
| | Schedule 1 (Form 1040), line 5. Of | therwise, include this ar | nount | in the t | otal on | line 41 | on page 2 | | 26 | | -5,150. |