Department of the Treasury-Internal Revenue Service

City, town, or post office. If you have a foreign address, also complete spaces below. State

BELLEVUE

Foreign country name

1040	Pepartment of the Treasury—Inter U.S. Nonresident Ali	nal Revenue Service en Income Tax Ret	urn 20 20	OMB No. 15	IRS Use Only—Do not wri 45-0074 or staple in this space.			
Filing Status	☑ Single							
Check only one box.	If you checked the QW box, enter the child's name if the qualifying person is a child but not your dependent ▶							
Your first name	and middle initial	Last name			Your identifying number (see instructions)			
SRIVATSA	MANJUNATH	HEGDE			711-41-9185			
Home address (number and street or rural route). If you ha	ve a P.O. box, see instruction	ıs.	Apt. no.	Check if: X Individual			
15602 SE	10TH ST				☐ Estate or Trus			

Foreign province/state/county

ZIP code

98005

Foreign postal code

15

REV 04/30/21 PRO

BAA

56,292.

Form 1040-NR (2020)

IRS Use Only-Do not write

At any time duri	ng 20	020, did you receive, sell, send, exchange, or	otherwise acquire any fin	ancial ir	nterest in any vir	tual curren	cy?	☐ Yes	X No
							7		
Dependents (see instructions):		(1) First name Last name	(2) Dependent's identifying number		Dependent's onship to you	(4) ✓ i Child tax	-		instr.): or other ndents
If more than four dependents, see instructions and check here ▶ ☐]]]		
Income	1a	Wages, salaries, tips, etc. Attach Form(s) W	<i>I</i> -2				1a	73	,842.
Effectively	b	Scholarship and fellowship grants. Attach F	Form(s) 1042-S or required	d statem	ent. See instruc	tions .	1b		
Connected With U.S.	С	Total income exempt by a treaty from Sch L, line 1(e)	edule OI (Form 1040-NR)	, Item 	1c				
Trade or	2a	Tax-exempt interest 2a	b Tax	able inte	erest		2b		
Business	3a	Qualified dividends 3a	b Ord	linary di	vidends		3b		
	4a	IRA distributions 4a			ount		4b		
	5a	Pensions and annuities 5a	b Tax	able am	ount		5b		
	6	Reserved for future use					6		
	7	Capital gain or (loss). Attach Schedule D (F					7		
	8	Other income from Schedule 1 (Form 1040)					8		,150.
	9	Add lines 1a, 1b, 2b, 3b, 4b, 5b, 7, and 8. T	his is your total effective	ly conn	ected income	▶	9	68	,692.
	10	Adjustments to income:			40.				
	a	From Schedule 1 (Form 1040), line 22 Charitable contributions for certain resident			10a 10b				
	b	Scholarship and fellowship grants excluded			10b				
	d	Add lines 10a through 10c. These are your				•	10d		
	11	Subtract line 10d from line 9. This is your a					11	68	,692.
	12	Itemized deductions (from Schedule A (F deduction. See instructions	orm 1040-NR)) or, for cer	tain resi		standard	12		,400.
1	13a	Qualified business income deduction. Attack	ch Form 8995 or Form 899	95-A	13a				
	b	Exemptions for estates and trusts only. See	e instructions		13b				
	C	Add lines 13a and 13b					13c		
	14	Add lines 10 and 10s					44	1 2	400

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

For Disclosure, Privacy Act, and Paperwork Reduction Act Notice, see separate instructions.

Form 1040-NR (2020)						Page 2
	16	Tax (see instructions). Check if any from Form	(s): 1 8814 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	ts			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,	enter -0			22	8,171.
	23a	Tax on income not effectively connected v from Schedule NEC (Form 1040-NR), line 15					
	b	Other taxes, including self-employment tax, line 10	· ·	·	<u></u>		
	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 a				26	
	27	Reserved for future use		. 27			
	28	Additional child tax credit. Attach Schedule 8					
	29	Credit for amount paid with Form 1040-C					
	30	Reserved for future use					
	31	Amount from Schedule 3 (Form 1040), line 13					
	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				35a	
Direct deposit? See instructions.	▶b	Routing number X X X X X X X X X X X X X X X X X X X					
See mstructions.	▶ 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 tax .	▶ 36			
Amount You Owe	37	Amount you owe. Subtract line 33 from line		1 1	. ▶	37	1,692.
	38	1 31		▶ 38			
Third Party Designee	Do you want to allow another person (other than your paid preparer) to discuss this return with the IRS? See instructions						
(Other than paid preparer)	Desig name	nee's	Phone no. ►		nal identific er (PIN)	ation ► [
Sign Here	Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which						has any knowledge.
	Your signature Date Your occupation						nt you an Identity IN, enter it here
			ן כ∩בידעו או	RE DEVELOPER	I	ection F nst.) ▶	in, enter it nere
	Phone	200	Email address	CE DEVELOPER	11 000,11	.50.7	
	$\overline{}$	rer's name Preparer's sig		Date	PTIN	T	Check if:
Paid	CVAM DDIVA DAM CACAD CHIDTA TALLAM CVAM DDIVA DAM CACAD CHIDTA TALLAM 05/10/202					703	Self-employed
Preparer	Firm's name CLODAL TAYES LLC						78)965-9522
Use Only		address ► 2530 Pebble Creek L	n Cummina GA 300)41			0-1017196
		TOTAL CENTER OF CELL					