Toni Meadow
Clarke County Tax Commissioner
P.O. Box 1768
Athens, GA 30603
tc@accgov.com

Phone: (706) 613-3120 Fax: (706) 613-3129

Tax Payer: BINDU PROPERTIES, LLC
Map Code: 044C5 R004 REAL
Description: 140 COUPLET DR
Location: 140 COUPLET DR
Bill No: 2022-4538
District: 001 ATHENS-CLARKE COUNTY

| Building Value | Land Value | Acres | Fair Market Value | Due Date | Billing Date | | Payment Good Through | Exemptions |
|---|---|---|---|---|---|---|---|---|
| 266,261 | 30,000 | 0.0000 | 296,261 | 10/20/2022 | | | 10/20/2022 | |

| Entity | Adjusted FMV | Net Assessment | Exemptions | Taxable Value | Millage Rate | Gross Tax | Credit | Net Tax |
|---|---|---|---|---|---|---|---|---|
| STATE TAX | 296,261.00 | 118,504.00 | 0.00 | 118,504.00 | .000 | 0.00 | 0.00 | 0.00 |
| ATHENS-CLARKE M&O | 296,261.00 | 118,504.00 | 0.00 | 118,504.00 | 17.976 | 2,130.23 | 0.00 | 1,552.40 |
| SALES TAX CREDIT | 296,261.00 | 118,504.00 | 0.00 | 118,504.00 | 4.876 | 0.00 | -577.83 | 0.00 |
| SCHOOL M&O | 296,261.00 | 118,504.00 | 0.00 | 118,504.00 | 18.800 | 2,227.88 | 0.00 | 2,227.88 |
| TOTALS | | | | | 31.900 | 4,358.11 | -577.83 | 3,780.28 |

BILL NUMBER BARCODE

If you own and live in a home in Clarke County, you may be entitled to homestead exemption. Citizens over sixty-five, who qualify for homestead, are eligible for additional exemptions. April 1 is the deadline to apply for homestead exemption each year. Applications received after that date will be held and credited the following year.

| Bill No: 2022-4538 | |
|---|---|
| Current Due | 3,780.28 |
| Penalty | 0.00 |
| Interest | 0.00 |
| Other Fees | 0.00 |
| Previous Payment | 0.00 |
| Back Taxes | 0.00 |
| **TOTAL DUE** | 3,780.28 |

TRUIST BANK
P.O. BOX 26149
RICHMOND, VA 23260-6149

1-800-634-7928

+ 0712375 000002523 OST098 0936633

RAMAKRISHNA SADHU
4005 BAILEY PARK DR
CUMMING GA 30041-1668

## Instructions for Payer/Borrower

A person (including a financial institution, a governmental unit, and a cooperative housing corporation) who is engaged in a trade or business and, in the course of such trade or business, received from you at least $600 of mortgage interest (including certain points) on any one mortgage in the calendar year must furnish this statement to you.

If you received this statement as the payer of record on a mortgage on which there are other borrowers, furnish each of the other borrowers with information about the proper distribution of amounts reported on this form. Each borrower is entitled to deduct only the amount each borrower paid and points paid by the seller that represent each borrower's share of the amount allowable as a deduction. Each borrower may have to include in income a share of any amount reported in box 4.

If your mortgage payments were subsidized by a government agency, you may not be able to deduct the amount of the subsidy. See the instructions for Schedule A, C, or E (Form 1040) for how to report the mortgage interest. Also, for more information, see Pub. 936 and Pub. 535.

**Payer's/Borrower's taxpayer identification number (TIN).** For your protection, this form may show only the last four digits of your TIN (SSN, ITIN, ATIN, or EIN). However, the issuer has reported your complete TIN to the IRS.

**Account number.** May show an account or other unique number the lender has assigned to distinguish your account.

**Box 1.** Shows the mortgage interest received by the recipient/lender during the year. This amount includes interest on any obligation secured by real property, including a mortgage, home equity loan, or line of credit. This amount does not include points, government subsidy payments, or seller payments on a "buydown" mortgage. Such amounts are deductible by you only in certain circumstances.

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**CAUTION** *If you prepaid interest in the calendar year that accrued in full by January 15, of the subsequent year, this prepaid interest may be included in box 1. However, you cannot deduct the prepaid amount in the calendar year paid even though it may be included in box 1.*

[redacted]

If you hold a mortgage credit certificate and can claim the mortgage interest credit, see Form 8396. If the interest was paid on a mortgage, home equity loan, or line of credit secured by a qualified residence, you can only deduct the interest paid on acquisition indebtedness, and you may be subject to a deduction limitation.

**Box 2.** Shows the outstanding principal on the mortgage as of January 1 of the calendar year. If the mortgage originated in the calendar year, shows the mortgage principal as of the date of origination. If the recipient/lender acquired the loan in the calendar year, shows the mortgage principal as of the date of acquisition.

**Box 3.** Shows the date of the mortgage origination.

**Box 4. Do not deduct this amount.** It is a refund (or credit) for overpayment(s) of interest you made in a prior year or years. If you itemized deductions in the year(s) you paid the interest, you may have to include part or all of the box 4 amount on the "Other income" line of your calendar year Schedule 1 (Form 1040). No adjustment to your prior year(s) tax return(s) is necessary. For more information, see Pub. 936 and *Itemized Deduction Recoveries* in Pub. 525.

**Box 5.** If an amount is reported in this box, it may qualify to be treated as deductible mortgage interest. See the calendar year Schedule A (Form 1040) instructions and Pub. 936.

**Box 6.** Not all points are reportable to you. Box 6 shows points you or the seller paid this year for the purchase of your principal residence that are required to be reported to you. Generally, these points are fully deductible in the year paid, but you must subtract seller-paid points from the basis of your residence. Other points not reported in box 6 may also be deductible. See Pub. 936 to figure the amount you can deduct.

**Box 7.** If the address of the property securing the mortgage is the same as the payer's/borrower's, either the box has been checked, or box 8 has been completed.

**Box 8.** Shows the address or description of the property securing the mortgage.

**Box 9.** If more than one property secures the loan, shows the number of properties securing the mortgage. If only one property secures the loan, this box may be blank.

**Box 10.** The interest recipient may use this box to give you other information, such as real estate taxes or insurance paid from escrow.

**Box 11.** If the recipient/lender acquired the mortgage in the calendar year, shows the date of acquisition.

**Future developments.** For the latest information about developments related to Form 1098 and its instructions, such as legislation enacted after they were published, go to *www.irs.gov/Form1098.*

**Free File.** Go to *www.irs.gov/FreeFile* to see if you qualify for no-cost online federal tax preparation, e-filing, and direct deposit or payment options.

☐ CORRECTED (if checked)

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| | | |
|---|---|---|
| RECIPIENT'S/LENDER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.<br>TRUIST BANK<br>P.O. BOX 26149<br>RICHMOND, VA 23260-6149<br><br>PHONE NO. 1-800-634-7928 | * Caution: The amount shown may not be fully deductible by you. Limits based on the loan amount and the cost and value of the secured property may apply. Also, you may only deduct interest to the extent it was incurred by you, actually paid by you, and not reimbursed by another person.<br>OMB No. 1545-1380 Substitute Form **1098** (Rev. January 2022)<br>For calendar year **2022** | **Mortgage Interest Statement** |
| | 1 Mortgage interest received from payer(s)/borrower(s)*<br>$ 4,019.12 | **Copy B For Payer/Borrower** |
| RECIPIENT'S/LENDER'S TIN: 59-3482833 / PAYER'S/BORROWER'S TIN: XXX-XX-4891 | 2 Outstanding mortgage principal: $ 186,343.60 / 3 Mortgage origination date: 07/10/20 | The information in boxes 1 through 9 and 11 is important tax information and is being furnished to the IRS. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if the IRS determines that an underpayment of tax results because you overstated a deduction for this mortgage interest or for these points, reported in boxes 1 and 6; or because you didn't report the refund of interest (box 4); or because you claimed a nondeductible item. |
| PAYER'S/BORROWER'S name, street address (including apt. no.) city or town, state or province, country, and ZIP or foreign postal code<br><br>RAMAKRISHNA SADHU<br>4005 BAILEY PARK DR<br>CUMMING GA 30041-1668 | 4 Refund of overpaid interest: $ 0.00 / 5 Mortgage insurance premiums: $ 0.00<br>6 Points paid on purchase of principal residence: $ 0.00<br>7 ☐ If address of property securing mortgage is the same as PAYER'S/ BORROWER'S address, the box is checked, or the address or description is entered in box 8.<br>8 Address or description of property securing mortgage<br>4450 NOBEL PASS<br>CUMMING GA 30041 | |
| 9 Number of properties securing the mortgage: 001 / 10 Other Real Estate Taxes Paid: $3,854.33 | | 11 Mortgage acquisition date |
| Account number (see instructions)<br>0070253943 | | |

Form **1098** (Rev. 1-2022) (keep for your records)

THE ABOVE INFORMATION WAS REPORTED TO THE IRS UNDER THE PRIMARY BORROWER'S SSN. PLEASE CALL 800.634.7928 WITH QUESTIONS.
*NOTE: THE AMOUNTS REPORTED MAY NOT BE FULLY DEDUCTIBLE BY YOU DEPENDING ON THE LOAN AMOUNT,THE SECURED PROPERTY'S PURCHASE PRICE, AND THE AMOUNT PAID BY A THIRD PARTY, PLEASE CONSULT A TAX ADVISOR REGARDING DEDUCTIBILITY.

**United Community Bank.** 4600 ROSWELL ROAD NORTH EAST
ATLANTA GA 30342

# IMPORTANT TAX INFORMATION ENCLOSED

77180 1 AV 0.452 P:77180 / T:238 / S:

RAMAKRISHNA SADHU
4005 BAILEY PARK DR
CUMMING GA 30041-1668

☐ CORRECTED (if checked)

| | | | |
|---|---|---|---|
| RECIPIENT'S/LENDER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.<br>UNITED COMMUNITY BANK (392)<br>4600 ROSWELL ROAD NORTH EAST<br>ATLANTA GA 30342<br>(800) 822-2651 | *Caution: The amount shown may not be fully deductible by you. Limits based on the loan amount and the cost and value of the secured property may apply. Also, you may only deduct interest to the extent it was incurred by you, actually paid by you, and not reimbursed by another person. | OMB No. 1545-1380<br>2022<br>Form 1098 | **Mortgage Interest Statement** |
| | 1 Mortgage interest received from payer(s)/borrower(s)*<br>$ 10,260.73 | | **Copy B For Payer/ Borrower**<br>The information in boxes 1 through 9 and 11 is important tax information and is being furnished to the IRS. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if the IRS determines that an underpayment of tax results because you overstated a deduction for this mortgage interest or for these points, reported in boxes 1 and 6; or because you didn't report the refund of interest (box 4); or because you claimed a nondeductible item. |
| RECIPIENT'S/LENDER'S TIN: 58-0554454<br>PAYER'S/BORROWER'S TIN: XXX-XX-4891 | 2 Outstanding mortgage principal<br>$ 461,138.26 | 3 Mortgage origination date<br>04/27/2021 | |
| | 4 Refund of overpaid interest<br>$ | 5 Mortgage insurance premiums<br>$ | |
| PAYER'S/BORROWER'S name and address<br>RAMAKRISHNA SADHU<br>4005 BAILEY PARK DR<br>CUMMING GA 30041 | 6 Points paid on purchase of principal residence<br>$ | | |
| | 7 [X] If address of property securing mortgage is the same as PAYER'S/BORROWER'S address, the box is checked, or the address or description is entered in box 8. | | |
| | 8 Address or description of property securing mortgage | | |
| 9 Number of properties securing the mortgage<br>10 Other: Real Estate Taxes Paid: 6,196.38 | | | 11 Mortgage acquisition date<br>00/00/0000 |
| Account number (see instructions)<br>XXXXXXXXXXX0597 | | | |

Form **1098** (Rev. 1-2022) (Keep for your records) www.irs.gov/Form1098 Department of the Treasury - Internal Revenue Service

## Instructions for Payer/Borrower

A person (including a financial institution, a governmental unit, and a cooperative housing corporation) who is engaged in a trade or business and, in the course of such trade or business, received from you at least $600 of mortgage interest (including certain points) on any one mortgage in the calendar year must furnish this statement to you.

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If your mortgage payments were subsidized by a government agency, you may not be able to deduct the amount of the subsidy. See the instructions for Schedule A, C, or E (Form 1040) for how to report the mortgage interest. Also, for more information, see Pub. 936 and Pub. 535.

**Payer's/Borrower's taxpayer identification number (TIN).** For your protection, this form may show only the last four digits of your TIN (SSN, ITIN, ATIN, or EIN). However, the issuer has reported your complete TIN to the IRS.

**Account number.** May show an account or other unique number the lender has assigned to distinguish your account.

**Box 1.** Shows the mortgage interest received by the recipient/lender during the year. This amount includes interest on any obligation secured by real property, including a mortgage, home equity loan, or line of credit. This amount does not include points, government subsidy payments, or seller payments on a "buydown" mortgage. Such amounts are deductible by you only in certain circumstances.

CAUTION: If you prepaid interest in the calendar year that accrued in full by January 15, of the subsequent year, this prepaid interest may be included in box 1. However, you cannot deduct the prepaid amount in the calendar year paid even though it may be included in box 1.

If you hold a mortgage credit certificate and can claim the mortgage interest credit, see Form 8396. If the interest was paid on a mortgage, home equity loan, or line of credit secured by a qualified residence, you can only deduct the interest paid on acquisition indebtedness, and you may be subject to a deduction limitation.

**Box 2.** Shows the outstanding principal on the mortgage as of January 1 of the calendar year. If the mortgage originated in the calendar year, shows the mortgage principal as of the date of origination. If the recipient/lender acquired the loan in the calendar year, shows the mortgage principal as of the date of acquisition.

**Box 3.** Shows the date of the mortgage origination.

**Box 4.** Do not deduct this amount. It is a refund (or credit) for overpayment(s) of interest you made in a prior year or years. If you itemized deductions in the year(s) you paid the interest, you may have to include part or all of the box 4 amount on the "Other income" line of your calendar year Schedule 1 (Form 1040). No adjustment to your prior year(s) tax return(s) is necessary. For more information, see Pub. 936 and Itemized Deduction Recoveries in Pub. 525.

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**Box 6.** Not all points are reportable to you. Box 6 shows points you or the seller paid this year for the purchase of your principal residence that are required to be reported to you. Generally, these points are fully deductible in the year paid, but you must subtract seller-paid points from the basis of your residence. Other points not reported in box 6 may also be deductible. See Pub. 936 to figure the amount you can deduct.

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**Box 8.** Shows the address or description of the property securing the mortgage.

**Box 9.** If more than one property secures the loan, shows the number of properties securing the mortgage. If only one property secures the loan, this box may be blank.

**Box 10.** The interest recipient may use this box to give you other information, such as real estate taxes or insurance paid from escrow.

**Box 11.** If the recipient/lender acquired the mortgage in 2021, shows the date of acquisition.

**Future developments.** For the latest information about developments related to Form 1098 and its instructions, such as legislation enacted after they were published, go to www.irs.gov/Form1098.

**Free File.** Go to www.irs.gov/FreeFile to see if you qualify for no-cost online federal tax preparation, e-filing, and direct deposit or payment options.

1098-UCB

BANK OF AMERICA, N.A.
C/O HEALTH ACCOUNT SERVICES
PO BOX 2203
FARGO ND 58108

# TAX STATEMENT FOR YEAR 2022

THIS STATEMENT REPORTS 1099-SA (OMB No. 1545-1517), DEPARTMENT OF THE TREASURY-INTERNAL REVENUE SERVICE.

BANK OF AMERICA BANK# 07202

| PAYER'S E.I.N. |
|---|
| 94-1687665 |

| CUSTOMER SERVICE PHONE NUMBER |
|---|
| 1-800-718-6710 |

RAMAKRISHNA SADHU
4005 BAILEY PARK DR
CUMMING GA 30041

| TAXPAYER'S IDENTIFICATION NUMBER |
|---|
| ***-**-4891 |

For Form 1099-SA: This information is being furnished to the IRS.

2022 - 1099-SA, DISTRIBUTIONS FROM AN HSA, ARCHER MSA, OR MEDICARE ADVANTAGE MSA

| | | |
|---|---|---|
| | ACCOUNT NUMBER | |
| HSA ACCOUNT | 000000028068366 | |
| BOX 1 | GROSS DISTRIBUTION | 1,328.03 |
| BOX 3 | DISTRIBUTION CODE | 1 |
| BOX 5 | HSA | X |
| RAMAKRISHNA SADHU | | |

PLEASE NOTE: INQUIRIES REGARDING THESE ACCOUNTS SHOULD BE DIRECTED TO OUR CUSTOMER SERVICE PHONE NUMBER ABOVE. PLEASE CHECK YOUR TAXPAYER IDENTIFICATION NUMBER AND CALL THE NUMBER LISTED ABOVE IF IT IS INCORRECT.

TDD HEARING IMPAIRED PLEASE CALL 1-800-305-5109

THIS INFORMATION IS BEING FURNISHED TO THE INTERNAL REVENUE SERVICE

Department of the Treasury—Internal Revenue Service

| | | |
|---|---|---|
| d Control number 2022-110326 | 1 Wages, tips, other compensation 480.00 | 2 Federal income tax withheld 37.92 |
| OMB No.1545-0008 | 3 Social security wages 480.00 | 4 Social security tax withheld 29.76 |
| | 5 Medicare wages and tips 480.00 | 6 Medicare tax withheld 6.96 |

c Employer's name, address and ZIP code
ELEVATE ENTERTAINMENT PAYROLL SERVICES
8500 MENAUL BLVD NE STE A-440
ALBUQUERQUE, NM 87112

| | | |
|---|---|---|
| 7 Social security tips | 8 Allocated tips | 9 |
| 10 Dependent care benefits | 11 Nonqualified plans | 12a See instructions for box 12 |
| 12b | 12c | 12d |

| | |
|---|---|
| b Employer identification number (EIN) 81-3484107 | a Employee's social security number 614-63-2050 |
| 13 Statutory employee / Retirement plan / Third-party sick pay | 14 Other |

e Employee's name, address and ZIP code
SAISHANKAR SADHU
4005 BAILEY PARK DR
CUMMING, GA 30041

This information is being furnished to the Internal Revenue Service. If you are required to file a tax return, a negligence penalty or other sanction may be imposed on you if this income is taxable and you fail to report it.

**2022**

| | |
|---|---|
| 15 State GA — Employer's state ID number 3268593-LU | 16 State wages, tips, etc. 480.00 |
| 17 State income tax 16.26 | 18 Local wages, tips, etc. |
| 19 Local income tax | 20 Locality name |

Form **W-2** Wage and Tax Statement

Copy C-For EMPLOYEE'S RECORDS (See *Notice to Employee* on the back of Copy B.)

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| | | |
|---|---|---|
| d Control number 2022-110326 | 1 Wages, tips, other compensation 480.00 | 2 Federal income tax withheld 37.92 |
| OMB No.1545-0008 | 3 Social security wages 480.00 | 4 Social security tax withheld 29.76 |
| This information is being furnished to the Internal Revenue Service. | 5 Medicare wages and tips 480.00 | 6 Medicare tax withheld 6.96 |

c Employer's name, address and ZIP code
ELEVATE ENTERTAINMENT PAYROLL SERVICES
8500 MENAUL BLVD NE STE A-440
ALBUQUERQUE, NM 87112

| | | |
|---|---|---|
| 7 Social security tips | 8 Allocated tips | 9 |
| 10 Dependent care benefits | 11 Nonqualified plans | 12a See instructions for box 12 |
| 12b | 12c | 12d |

| | |
|---|---|
| b Employer identification number (EIN) 81-3484107 | a Employee's social security number 614-63-2050 |
| 13 Statutory employee / Retirement plan / Third-party sick pay | 14 Other |

e Employee's name, address and ZIP code
SAISHANKAR SADHU
4005 BAILEY PARK DR
CUMMING, GA 30041

**2022**

| | |
|---|---|
| 15 State GA — Employer's state ID number 3268593-LU | 16 State wages, tips, etc. 480.00 |
| 17 State income tax 16.26 | 18 Local wages, tips, etc. |
| 19 Local income tax | 20 Locality name |

Form **W-2** Wage and Tax Statement

Copy B-To Be Filed With Employee's FEDERAL Tax Return

Department of the Treasury—Internal Revenue Service

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| | | |
|---|---|---|
| d Control number 2022-110326 | 1 Wages, tips, other compensation 480.00 | 2 Federal income tax withheld 37.92 |
| OMB No.1545-0008 | 3 Social security wages 480.00 | 4 Social security tax withheld 29.76 |
| | 5 Medicare wages and tips 480.00 | 6 Medicare tax withheld 6.96 |

c Employer's name, address and ZIP code
ELEVATE ENTERTAINMENT PAYROLL SERVICES
8500 MENAUL BLVD NE STE A-440
ALBUQUERQUE, NM 87112

| | | |
|---|---|---|
| 7 Social security tips | 8 Allocated tips | 9 |
| 10 Dependent care benefits | 11 Nonqualified plans | 12a |
| 12b | 12c | 12d |

| | |
|---|---|
| b Employer identification number (EIN) 81-3484107 | a Employee's social security number 614-63-2050 |
| 13 Statutory employee / Retirement plan / Third-party sick pay | 14 Other |

e Employee's name, address and ZIP code
SAISHANKAR SADHU
4005 BAILEY PARK DR
CUMMING, GA 30041

**2022**

| | |
|---|---|
| 15 State GA — Employer's state ID number 3268593-LU | 16 State wages, tips, etc. 480.00 |
| 17 State income tax 16.26 | 18 Local wages, tips, etc. |
| 19 Local income tax | 20 Locality name |

Form **W-2** Wage and Tax Statement

Copy 2-To Be Filed With Employee's State, City, or Local Income Tax Return

Department of the Treasury—Internal Revenue Service

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| | | |
|---|---|---|
| d Control number 2022-110326 | 1 Wages, tips, other compensation 480.00 | 2 Federal income tax withheld 37.92 |
| OMB No. 1545-0008 | 3 Social security wages 480.00 | 4 Social security tax withheld 29.76 |
| | 5 Medicare wages and tips 480.00 | 6 Medicare tax withheld 6.96 |

c Employer's name, address and ZIP code
ELEVATE ENTERTAINMENT PAYROLL SERVICES
8500 MENAUL BLVD NE STE A-440
ALBUQUERQUE, NM 87112

| | | |
|---|---|---|
| 7 Social security tips | 8 Allocated tips | 9 |
| 10 Dependent care benefits | 11 Nonqualified plans | 12a |
| 12b | 12c | 12d |

| | |
|---|---|
| b Employer identification number (EIN) 81-3484107 | a Employee's social security number 614-63-2050 |
| 13 Statutory employee / Retirement plan / Third-party sick pay | 14 Other |

e Employee's name, address and ZIP code
SAISHANKAR SADHU
4005 BAILEY PARK DR
CUMMING, GA 30041

**2022**

| | |
|---|---|
| 15 State GA — Employer's state ID number 3268593-LU | 16 State wages, tips, etc. 480.00 |
| 17 State income tax 16.26 | 18 Local wages, tips, etc. |
| 19 Local income tax | 20 Locality name |

Form **W-2** Wage and Tax Statement

Copy 2-To Be Filed With Employee's State, City, or Local Income Tax Return.

Department of the Treasury—Internal Revenue Service