



Georgia Student Scholarship Org.
PO Box 1752
Cumming, GA 30028

www.georgiasso.us
info@georgiasso.us
678-947-0238

Vishwanath Hegadekatte
3998 Cyrus Crest Cir NW
Kennesaw, GA 30152

2017 Tax Receipt

January 3, 2018

Dear Vishwanath Hegadekatte,

On behalf of the staff and board of directors of Georgia Student Scholarship Organization, thank you for your continued, generous support of this organization. Please use this document as a tax receipt for your 2017 donation.

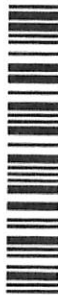
If you have questions about this receipt, please contact us at 678-947-0238 or at info@georgiasso.us

Sincerely,

Donation Amount \$1237

Date of Donation 2/28/2017

*Georgia Student Scholarship Organization is a 501(c)3 nonprofit organization, Federal Tax ID# 26-2903667
No goods or services were received in consideration of this gift.*



1206404013

Georgia Form IT-QEE-SSO (Last Rev. 12/11)
Qualified Education Expense Credit Letter of Confirmation
Georgia Department of Revenue Version 1

Please print your numbers like this in black or blue ink:
9876543210

This form is the second step in the process of applying for the qualified education expense credit. It should be completed by the student scholarship organization and provided to the taxpayer. This form is used to confirm that the taxpayer made the contribution to the student scholarship organization.

Enter for Student Scholarship Organization:

FISCAL YEAR ENDING: 1 2 3 1 2 0 1 7

TAXPAYER IDENTIFICATION NUMBER: 2 6 2 9 0 3 6 6 7

NAME OF STUDENT SCHOLARSHIP ORGANIZATION: G E O R G I A S T U D E N T S C H O L A R S H I P O R G

STREET ADDRESS: P O B O X 1 7 5 1 2

CITY: C U M I N G STATE: G A ZIP CODE: 3 0 0 2 8

CONTACT PERSON: S T E P H A N I S A N C H E Z TELEPHONE NUMBER: 6 7 8 9 4 7 0 2 3 8

DEPARTMENT USE ONLY

The Official Code of Georgia Annotated Section 48-7-29.16 establishes an income tax credit for qualified education expenses. A credit is allowed for the expenditure of funds by the taxpayer to a student scholarship organization, operating pursuant to Chapter 2A of Title 20, which uses the contribution for tuition and fees for a qualified school or program.

In order to claim this tax credit, this letter of confirmation of donation should be attached to the taxpayer's return when it is filed.

Enter for Contributing Taxpayer

FIRST NAME ZIP NAME OF P.O. BOX: Vishwanath

LAST NAME OF INDIVIDUAL: Hegadekatti

ADDRESS NUMBER AND STREET OF P.O. BOX: 3998 Cyrus Crest Cir NW

CITY: Kennesaw STATE: GA ZIP CODE: 30152

DATE OF CONTRIBUTION: 2/28/2017

TAXPAYER IDENTIFICATION NUMBER: XXX-XX-4773

AMOUNT OF CONTRIBUTION: \$1237.00

PRE-APPROVED AMOUNT OF CREDIT: \$1237.00



1206404023

Georgia Form IT-QEE-SSO (Last Rev. 12/11)
Qualified Education Expense Credit Letter of Confirmation
Georgia Department of Revenue Version 1

C. CERTIFICATION BY STUDENT SCHOLARSHIP ORGANIZATION

The Student Scholarship Organization certifies that all information contained above and attached hereto is true to their best knowledge and belief.

Name of Student Scholarship Organization: G E O R G I A S T U D E N T S C H O L A R S H I P O R G

By: *[Signature]* Signatory of Authorized Officer

Name of Officer Signing: S T E P H A N I S A N C H E Z

Date: 0 7 - 0 1 - 2 0 1 7

Title: D I R E C T O R

Phone Number: 6 7 8 9 4 7 0 2 3 8

RECIPIENT'S/LENDER'S name, address and telephone number

Wells Fargo Bank N.A.
Return Mail Operations
PO Box 14411
Des Moines IA 50306-3411

12/31/17

*** 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.
1545-0901
2017
Form
1098

MORTGAGE INTEREST STATEMENT

Copy B For Payer

We accept telecommunications relay service calls.
Phone #: 1-800-222-0238
Fax #: 1-866-278-1179

CORRECTED (if checked)

PAYER/BORROWER'S name, street address, city, state and ZIP code

056370 1 AV 0.373 1243505



VISHWANATH S HEGADEKATTE
3998 CYRUS CREST CIR NW
KENNESAW, GA 30152-2510



RECIPIENT Federal Identification no.
94-1347393

PAYER/BORROWER'S taxpayer identification no.
XXX-XX-4773

1 Mortgage Interest received from payer(s)/borrower(s) \$4,107.63

2 Outstanding mortgage principal as of 1/1/2017 \$119,507.23
3 Mortgage origination date 03/31/2015

4 Refund of overpaid interest \$0.00
5 Mortgage insurance premiums \$65.83

6 Points paid on purchase of principal residence \$0.00

7 The address of the property securing the mortgage will be entered in box 8 and may be the same as PAYER/BORROWER'S address.
See box 8 or 9 below.

9 If property securing mortgage has no address, provide description of the property.

8 Address of property securing mortgage
3998 CYRUS CREST CIR NW
KENNESAW, GA 30152

Payment information		Account number
\$826.45	Total current payment	0428103667
\$226.66	Escrow portion of pmt	

10 Number of mortgaged properties

11 Real Estate Taxes \$2,092.01

The information in boxes 1 through 10 is important tax information and is being furnished to the Internal Revenue Service. 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 the mortgage interest or for these points, reported in boxes 1 and 6; or because you did not report the refund of interest (box 4); or because you claimed a non-deductible item.

Form 1098 SEE BACK SIDE FOR IMPORTANT INFORMATION (Keep for your records.) Department of the Treasury - Internal Revenue Service

Please consult a Tax Advisor about the deductibility of any payments made by you or others.

If Box 5 (Mortgage Insurance Premiums) is populated, that amount may not be deductible. Please consult the IRS or your tax advisor to determine the deductibility.

----- 2017 INTEREST DETAIL -----

TOTAL INTEREST APPLIED 2017	\$4,107.63
2017 MORTGAGE INTEREST RECEIVED FROM PAYER / BORROWER(S)	\$4,107.63

If you have questions about your loan, you can use the number listed at the top of this statement. By selecting one of the options listed, you can receive information regarding:

- Taxes paid year-to-date
- Interest paid year-to-date
- The amount & date of your last payment
- Other valuable information

We issue tax documents to the primary account owner.

Wells Fargo Home Mortgage, a division of Wells Fargo Bank, N.A., believes Customers come first. You can always count on us to provide the excellent service you've come to expect.

NNNNNNNNNN

DC175CUT1AC 056370 NNNNNNNNNN NNN 001 001

113031

206517322

THE BANK OF NEW YORK MELLON
 BENEFITWALLET H.S.A.
 PO BOX 535473
 PITTSBURGH PA 15253-5473

IMPORTANT NOTICE

Please review these tax documents carefully. If you find a discrepancy, please contact the Customer Service number provided on your statement no later than May 31

HSA Account Holders:

If your maximum contribution limit has not been reached, we can accept contributions to your HSA until April 15. If you do make an additional contribution, or have already done so, we will furnish a final 5498-SA by May 31 reflecting the additional contribution.



256770



VISHWANATH S HEGADEKATTE
 3998 CYRUS CREST CIR NW
 KENNESAW GA 30152-2510



CORRECTED (if checked)

TRUSTEE'S/PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone number THE BANK OF NEW YORK MELLON BENEFITWALLET H.S.A. PO BOX 535473 PITTSBURGH, PA 15253-5473		OMB No. 1545-1517 2017 Form 1099-SA		Distributions From an HSA, Archer MSA, or Medicare Advantage MSA Copy B For Recipient This information is being furnished to the Internal Revenue Service.
PAYER'S federal identification number 13-5160382	RECIPIENT'S identification number ***-**-4773	1 Gross distribution 4,382.14	2 Earnings on excess cont.	
RECIPIENT'S name, street address, city or town, state or province, country, and ZIP or foreign postal code VISHWANATH S HEGADEKATTE 3998 CYRUS CREST CIR NW KENNESAW, GA 30152		3 Distribution code 1	4 FMV on date of death	
Account Number: 95001150219446		5 HSA <input checked="" type="checkbox"/> Archer MSA <input type="checkbox"/> MA MSA <input type="checkbox"/>		

Form 1099-SA (keep for your records) www.irs.gov/form1099sa Department of the Treasury - Internal Revenue Service

CORRECTED (if checked)

TRUSTEE'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone number THE BANK OF NEW YORK MELLON BENEFITWALLET H.S.A. PO BOX 535473 PITTSBURGH, PA 15253-5473		1 Employee or self-employed person's Archer MSA contributions made in 2017 and 2018 for 2017		OMB No. 1545-1518 2017 Form 5498-SA		HSA, Archer MSA, or Medicare Advantage MSA Information Copy B For Participant This information is being furnished to the Internal Revenue Service.
TRUSTEE'S federal identification number 13-5160382		PARTICIPANT'S social security number ***-**-4773		2 Total contributions made in 2017 \$4,650.00		
PARTICIPANT'S name, street address, city or town, state or province, country, and ZIP or foreign postal code VISHWANATH S HEGADEKATTE 3998 CYRUS CREST CIR NW KENNESAW, GA 30152		3 Total HSA or Archer MSA contributions made in 2018 for 2017		4 Rollover contributions		
Account Number: 95001150219446		5 Fair market value of HSA, Archer MSA, or MA MSA \$6,173.32		6 HSA <input checked="" type="checkbox"/> Archer MSA <input type="checkbox"/> MA MSA <input type="checkbox"/>		

Form 5498-SA (keep for your records) www.irs.gov/form5498sa Department of the Treasury - Internal Revenue Service



GEORGIA DEPARTMENT of REVENUE
 TAXPAYER SERVICES DIVISION
 P.O. Box 105499
 Atlanta, Georgia 30348-5499

1099G ENCLOSED

This is NOT a Bill

*AUTO**SCH 5-DIGIT 30152



40 1 21634

VISHWANATH HEGADEKATTE AND RASHMI PADIADPU
 3998 CYRUS CREST CIR NW
 KENNESAW GA 30152-2510



You are receiving this 1099-G because you itemized your deductions **and** received a refund, credit, or offset on your Georgia income tax return in 2017. You may need to include the amount shown in Box 2 below as income on your current year's income tax return filed with the IRS.

Please read the instructions carefully for Boxes 2 and 3. Boxes 1, 4, 6, and 7 do not apply to your Georgia refund, credit, or offset.

1099G Instructions for Recipient

Box 1. Shows the total unemployment compensation paid to you this year. This amount is taxable income to you. For details, see the instructions for your Federal income tax return. If you expect to receive these benefits next year, see Form 1040-ES for estimated tax payments.

Box 2. Shows refunds, credits, or offsets, of state or local income tax you received. If there is an entry in this box, it may be taxable to you if you deducted the tax paid as an itemized deduction on your Federal income tax return. Even if you did not received the amount shown, for example, because it was credited to your estimated tax, it is still taxable if it was deducted. Any interest received on this must be included as interest income on your return. See the instructions for Form 1040 or 1040A.

Box 3. Identifies the tax year for which the refund, credit, or offset shown in Box 2 was made. If there is no entry in this box, the refund is for last year's taxes.

Box 4. Shows backup withholding. For example, persons not furnishing their taxpayer identification number to the payer become subject to backup withholding at a 28% rate on certain payments. See Form W-9, Request for Taxpayer Identification Number and Certification, for information on backup withholding. Include this on your income tax return as tax withheld.

Box 6. Shows the amount of taxable grants you received from the Federal, state, or local government.

Box 7. Shows the amount of Department of Agriculture payments that are taxable to you. If the payer shown is anyone other than the Department of Agriculture, it means the payer has received a payment, as a nominee, that is taxable to you. This may represent the entire agriculture subsidy payment received on your behalf by the nominee, or it may be your pro rata share of the original payment. See Pub. 225, Farmer's Tax Guide, and the instructions for Schedule F (Form 1040), Profit or Loss From Farming, for information about where to report this income.

PAYER'S name, street address, city, state and ZIP code GEORGIA DEPARTMENT of REVENUE TAXPAYER SERVICES DIVISION P.O. BOX 105499 Atlanta, Georgia 30348-5499		1 Unemployment compensation	<i>OMB No. 1545-0120</i> COPY B For Recipient	Certain Government Payments
		2 State or local income tax refunds, credits or offsets \$1,089.00		
PAYER'S Federal identification number 58-6002015	RECIPIENT'S identification number XXX-XX-4773	3 Box 2 amount is for tax year 2016	4 Federal income tax withheld	CALENDAR YEAR 2017 This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.
RECIPIENT'S name and address VISHWANATH HEGADEKATTE AND RASHMI PADIADPU 3998 CYRUS CREST CIR NW KENNESAW GA 30152-2510		5	6 Taxable grants	
		7 Agriculture payments	8	
Account number (optional)				