8879 Form

(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

| Internal Nevertue Service | | |
|---|--|---|
| Submission Identification Number (SID) | | |
| Taxpayer's name | | Social security number |
| AVIRAT BELEKAR | | 490-77-9559 |
| Spouse's name | | Spouse's social security number |
| Part I Tax Return Information | - Tax Year Ending December 31, 2022 (En | nter year you are authorizing.) |
| Enter whole dollars only on lines 1 through | <u> </u> | ntor your you are darrienzing. |
| Note: Form 1040-SS filers use line 4 only | | |
| • | | 1 87,250. |
| | | · |
| 3 Federal income tax withheld from F | Form(s) W-2 and Form(s) 1099 | |
| 4 Amount you want refunded to you | | |
| 5 Amount you owe | | 5 |
| Part II Taxpayer Declaration an | d Signature Authorization (Be sure you get ar | nd keep a copy of your return) |
| return (original or amended) I am now authoriz to send my return to the IRS and to receive fro for any delay in processing the return or refund Agent to initiate an ACH electronic funds with payment of my federal taxes owed on this retu authorization is to remain in full force and eff payment, I must contact the U.S. Treasury business days prior to the payment (settlemer taxes to receive confidential information necepersonal identification number (PIN) below is reflectronic Funds Withdrawal Consent. Taxpayer's PIN: check one box only I authorize GLOBAL TAXES signature on the income tax return I will enter my PIN as my signature figure are entering your own PIN | and complete. I further declare that the amounts in Part I along. I consent to allow my intermediate service provider, tracement of the IRS (a) an acknowledgement of receipt or reason for d, and (c) the date of any refund. If applicable, I authorize the drawal (direct debit) entry to the financial institution account arm and/or a payment of estimated tax, and the financial institution account arm and/or a payment of estimated tax, and the financial institution account arm and/or a payment of estimated tax, and the financial institution account arm and/or a payment of estimated tax, and the financial institution account are and a 1-888-353-4537. Payment cancellation at 1-888-353-4537. Payment cancellation are season to answer inquiries and resolve issues related to the my signature for the income tax return (original or amended and to enter or generative firm name are continuously and your return is filed using the Practitioner PIN mandal and your return is filed using the Practitioner PIN mandal and the II and your return is filed using the Practitioner PIN mandal and the II and your return is filed using the Practitioner PIN mandal and the II and your return is filed using the Practitioner PIN mandal and the II and II and your return is filed using the Practitioner PIN mandal and the II and II an | Insmitter, or electronic return originator (ERC rejection of the transmission, (b) the reasone U.S. Treasury and its designated Financia tindicated in the tax preparation software for itution to debit the entry to this account. Thi inate the authorization. To revoke (cancel) requests must be received no later than the processing of the electronic payment of the payment. I further acknowledge that the payment. I further acknowledge that the payment of the payment of the payment of the payment. I further acknowledge that the payment of the payment of the payment of the payment. I further acknowledge that the payment of the payment of the payment of the payment. I further acknowledge that the payment of |
| below. Your signature ▶ | Date I | > |
| Spouse's PIN: check one box only | | |
| · · | to ontox ox conox | rate my DINI |
| I authorize | ERO firm name to enter or generate | ate my PIN [as my Enter five digits, but |
| ☐ I will enter my PIN as my signatu | rn (original or amended) I am now authorizing. ure on the income tax return (original or amended) I a I and your return is filed using the Practitioner PIN m | don't enter all zeros im now authorizing. Check this box onl |
| Spouse's signature ▶ | Date I | • |
| | titioner PIN Method Returns Only—continue be | low |
| | tication — Practitioner PIN Method Only | |
| ERO's EFIN/PIN. Enter your six-digit EFI | N followed by your five-digit self-selected PIN. 2 | 2 2 4 9 6 6 1 9 8 9 Don't enter all zeros |
| authorized to file for tax year indicated above | IN, which is my signature for the electronic individual incone for the taxpayer(s) indicated above. I confirm that I am s and Pub. 1345, Handbook for Authorized IRS e-file Providers | submitting this return in accordance with th |
| ERO's signature ▶ | Date I | |
| | BO Must Retain This Form - See Instructions | • |

Don't Submit This Form to the IRS Unless Requested To Do So

1040-NR Department of the Treasury—Internal Revenue Service U.S. Nonresident Alien Income Tax Return

| 2022 |
|-------------|
|-------------|

OMB No. 1545-0074

IRS Use Only—Do not write or staple in this space.

| For the year Ja | an. 1–E | Dec. 31, 2022, or other tax year be | ginning | | , 2022, | ending | | , | 20 | | See separate instructions. |
|---------------------------------|--|--|--------------|------------------------------|--------------|--------------|--------------|---------------------------|--------------|---------------------|--------------------------------------|
| Filing Status | X Single Married filing separately (MES) Qualifying surviving spouse (OSS) | | | | | | | Est | | ☐ Trust | |
| Check only one box. | | | | | | | | | | | |
| Your first name | e and | middle initial | Last na | ame | | | | | Your ide | | ying number ions) |
| AVIRAT | | | BELE | KAR | | | | | 490- | 77- | -9559 |
| Home address | (num | ber and street). If you have a P.O. | box, see ins | structions. | | | | | • | | Apt. no. |
| 14 POPLA | R SI | REET | | | | | | | | | |
| City, town, or | post o | ffice. If you have a foreign address | s, also comp | olete spaces belo | W. | | | State | | ZIP (| code |
| JERSEY C | ITY | | | | | | | NJ | | 073 | 307 |
| Foreign countr | y nam | е | Foreig | n province/state/ | county | | | Foreign | postal co | ek | |
| Digital Asset | | ny time during 2022, did you: (a) r erwise dispose of a digital asset (o | | | | | | | | | ange, gift, or ☑ Yes ⊠ No |
| Dependent | s | | | | | | | (4) Ch | eck the box | if qu | alifies for (see inst.) |
| (see instructions | - 1 | (1) First name Last na | ame | (2) Depender identifying nur | | (3) Relation | onship to yo | u Chi | ld tax credi | credit Credit for o | |
| | | (1) Thot hame Last he | arrio | 1.00.1 | | (O) Holati | onomp to ye | <u> </u> | | + | dependents |
| If more than fou | | | | | | | | | | + | |
| dependents, se instructions and | | | | | | | | | | \pm | |
| check here | · | | | | | | | | | + | |
| Income | 1a | Total amount from Form(s) W-2, | box 1 (see i | instructions) | | | | | . 1a | \top | 94,697. |
| Effectively | b | Household employee wages not | • | • | | | | | | T | |
| Connected | С | Tip income not reported on line | | | | | | | | | |
| With U.S. | d | Medicaid waiver payments not r | | | | | | | | | |
| Trade or | е | Taxable dependent care benefits | | | | | | | . 1e | | |
| Business | f | Employer-provided adoption be | | | | | | | . 1f | | |
| | g | Wages from Form 8919, line 6 . | | | | | | | . 1g | | |
| Attach Form(s) W-2, | h | Other earned income (see instru | ctions) . | | | | | | . 1h | | |
| 1042-S, | i | Reserved for future use | | | | | | | | | |
| SSA-1042-S, | j | Reserved for future use | | | | | | | . <u>1j</u> | | |
| RRB-1042-S, and 8288-A | k | Total income exempt by a treaty | from Sched | lule OI (Form 104 | 0-NR), i | item L, | | | | | |
| here. Also | | line 1(e) | | | | | lk | | | | |
| attach | Z | Add lines 1a through 1h | | | | | | | . 1z | | 94,697. |
| Form(s) 1099-R if | 2a | Tax-exempt interest | 2a | | b Tax | kable intere | est | | . 2b | | |
| tax was | 3a | Qualified dividends | 3a | 43. | | dinary divic | | | | \perp | 43. |
| withheld. | 4a | IRA distributions | 4a | | | kable amou | | | | | |
| If you did not get a Form | 5a | Pensions and annuities | 5a | | | kable amou | | | | | |
| W-2, see | 6 | Reserved for future use | | | | | | | | | |
| instructions. | 7 | Capital gain or (loss). Attach Sch | • | , . | | • | | | | _ | |
| | 8 | Other income from Schedule 1 (Form 1040), line 10 | | | | | | | | + | <u>-7,490.</u> |
| | 9 | Add lines 1z, 2b, 3b, 4b, 5b, 7, and 8. This is your total effectively connected income | | | | | | | | \vdash | 87 , 250. |
| | 10 | Adjustments to income: | | | | | | | | | |
| | a | From Schedule 1 (Form 1040), line 26 | | | | | | | | | |
| | b | Reserved for future use | | | | | | | | | |
| | q | Reserved for future use | | | | | | | | | |
| | d 11 | Subtract line 10d from line 9. Th | · - | | | | | | | + | 07 050 |
| | | | - | - | | | | | | + | 87 , 250. |
| | 12 | Itemized deductions (from Sch deduction (see instructions) | | | | | . "Std Dedn. | a, standa US/India.Tre | I | | 12,950. |
| | 13a | Qualified business income dedu | | | | | 3a | | | | |
| | b | Exemptions for estates and trus | • • | , | | | 3b | | | 4 | |
| | C | Add lines 13 and 13b | | | | | | | | + | 10.050 |
| | 14 15 | Add lines 12 and 13c | | | | | | | . 14 | + | 12,950. 74 300 |
| | 13 | - SUDITACI IIIA 14 IMM IINA 11 IT 7 | PIO OF 1866 | PIDE THE INCH | VOLUE TO | ENDIE IDCO | 1116 | | 1 72 | 1 | , A ≺IIII |

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| Form 1040-NR (| 2022) | | | | | | | | | | | Page 2 |
|---------------------------|--|--|----------------------|-------------------------|--------------|------------|----------|-------------|----------|-----------|-----------|-------------|
| Tax and | 16 | Tax (see instructions). Check if ar | ny from Foi | rm(s): 1 | 314 2 | <u>497</u> | 2 3 | B 🗌 | | 16 | | 11,964. |
| Credits | 17 | Amount from Schedule 2 (Form | 1040), line | 3 | | | | | | 17 | | 0. |
| | 18 | Add lines 16 and 17 | | | | | | | | 18 | | 11,964. |
| | 19 | Child tax credit or credit for other | er depende | ents from Sched | ule 8812 (F | orm 10 | 40) . | | | 19 | | |
| | 20 | Amount from Schedule 3 (Form | 1040), line | 8 | | | | | | 20 | | 1. |
| | 21 | Add lines 19 and 20 | | | | | | | | 21 | | 1. |
| | 22 | Subtract line 21 from line 18. If z | zero or less | s, enter -0 | | | | | | 22 | | 11,963. |
| | 23a | Tax on income not effectively co Schedule NEC (Form 1040-NR), | | | | | 23a | | | | | |
| | b | Other taxes, including self-empl | • | • | ` | ,. | 23b | | | | | |
| | С | Transportation tax (see instruction | ons) | | | | 23c | | | | | |
| | d | Add lines 23a through 23c | | | | | <u> </u> | | | 23d | | |
| | 24 | Add lines 22 and 23d. This is yo | ur total ta | x | | | | | | 24 | 1 | L1,963. |
| Payments | 25 | Federal income tax withheld from | m: | | | | | | | | | |
| • | а | Form(s) W-2 | | | | | 25a | 16 | 5,483. | | | |
| | b | Form(s) 1099 | | | | | 25b | | | | | |
| | С | Other forms (see instructions) | | | | | 25c | | | | | |
| | d | Add lines 25a through 25c | | | | | | | | 25d | 1 | L6,483. |
| | е | Form(s) 8805 | | | | | | | | 25e | | |
| | f | Form(s) 8288-A | | | | | | | | 25f | | |
| | g | Form(s) 1042-S | | | | | | | | 25g | | |
| | 26 | 2022 estimated tax payments ar | nd amount | applied from 20 | 21 return | | | | | 26 | | |
| | 27 | Reserved for future use | | | | | 27 | | | | | |
| | 28 | Additional child tax credit from S | Schedule 8 | 3812 (Form 1040) | | | 28 | | | | | |
| | 29 | Credit for amount paid with Form | m 1040-C | | | | 29 | | | | | |
| | 30 | Reserved for future use | | | | | 30 | | | | | |
| | 31 | Amount from Schedule 3 (Form | 1040), line | 15 | | | 31 | | | | | |
| | 32 | Add lines 28, 29, and 31. These | are your t | otal other paym | ents and | refunda | ıble cr | edits . | | 32 | | |
| | 33 | Add lines 25d, 25e, 25f, 25g, 26 | , and 32. T | hese are your to | tal payme | ents . | | | | 33 | 1 | 16,483. |
| Refund | 34 | If line 33 is more than line 24, su | ıbtract line | 24 from line 33. | This is the | e amour | nt you (| overpaid | | 34 | | 4,520. |
| | 35a | Amount of line 34 you want refu | | | is attache | ed, chec | k here | | 🗆 | 35a | | 4,520. |
| Direct deposit? | b | Routing number 0 2 1 2 | | | с Туре | e: 🛛 | Check | ting \Box | Savings | | | |
| See instructions. | d | Account number 5 2 5 | 5 2 6 | 5 7 7 | | | | | | | | |
| | е | If you want your refund check nenter it here. | | n address outsic | | | es not | shown on | page 1, | | | |
| | 36 | Amount of line 34 you want app | | | | | 36 | | | | | |
| Amount | 37 | Subtract line 33 from line 24. Th | is is the a ı | mount you owe. | | | | | | | | |
| You Owe | | For details on how to pay, go to | www.irs.g | ov/Payments or | see instru | ctions . | | | | 37 | | |
| | 38 | Estimated tax penalty (see instru | uctions) . | | | | 38 | | | | | |
| Third | Do yo | ou want to allow another person to | discuss t | his return with th | ne IRS? Se | e instru | ctions. | □ Ye | es. Com | olete bel | OW. | ⊠ No |
| Party Designee | Designee's Phone Personal identification name no. number (PIN) | | | | | | fication | | | | | |
| | | penalties of perjury, I declare that I hat they are true, correct, and complete. I | | | | | | | | | | |
| Sign | Your | signature | | Date | Your occ | upation | | | If th | ne IRS s | ent you a | an Identity |
| Here | | | | | | | | | | | PIN, ente | er it here |
| | | | | | TECHNO | OLOGY | ANA | LYST | (se | e inst.) | | |
| | Phon | | D.: | Email address | | | I . | | DTIV | | | |
| Paid | Prepa | arer's name | 1 | 's signature | | | Date | | PTIN | | Check i | |
| Preparer | | | - | RIYA RAM SAGAF | R GUPTA I | TALLAM | 03/0 | 4/2023 | P0208 | | | f-employed |
| Use Only | | s name SYMLPMMLRAMAXMAS G | | | | | | | Phone | | | 5-9522 |
| · · · · · · · · · · · · · | Firm' | s address 245 DOONEY (| זם ק חי | IN VOTINDINIIC | T 0001 | 6 | | | Firm's I | -IN ♀ | 4 - 317 | 1965 |

SCHEDULE 1 (Form 1040)

Additional Income and Adjustments to Income

OMB No. 1545-0074

2022
Attachment Sequence No. 01

Your social security number

Department of the Treasury Internal Revenue Service

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

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

Go to www.irs.gov/Form1040 for instructions and the latest information.

| AVIR | ATBELEKAR | | 490-77-95 | 559 |
|------|--|--------------|-----------|---------|
| 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. Atta | ach Schedule | E . 5 | -7,490. |
| 6 | Farm income or (loss). Attach Schedule F | | | |
| 7 | Unemployment compensation | | 7 | |
| 8 | Other income: | | | |
| а | Net operating loss | 8a (|) | |
| b | Gambling | 8b | | |
| С | Cancellation of debt | 8c | | |
| d | Foreign earned income exclusion from Form 2555 | 8d (|) | |
| е | Income from Form 8853 | 8e | | |
| f | Income from Form 8889 | 8f | | |
| g | Alaska Permanent Fund dividends | 8g | | |
| h | Jury duty pay | 8h | | |
| i | Prizes and awards | 8i | | |
| j | Activity not engaged in for profit income | 8j | | |
| k | Stock options | 8k | | |
| - 1 | Income from the rental of personal property if you engaged in the rental | | | |
| | for profit but were not in the business of renting such property | 81 | | |
| m | Olympic and Paralympic medals and USOC prize money (see | | | |
| | instructions) | 8m | | |
| n | Section 951(a) inclusion (see instructions) | 8n | | |
| 0 | Section 951A(a) inclusion (see instructions) | 80 | | |
| р | Section 461(I) excess business loss adjustment | 8p | | |
| q | Taxable distributions from an ABLE account (see instructions) | 8q | | |
| r | Scholarship and fellowship grants not reported on Form W-2 | 8r | | |
| S | Nontaxable amount of Medicaid waiver payments included on Form | | | |
| | 1040, line 1a or 1d | 8s (|) | |
| t | Pension or annuity from a nonqualifed deferred compensation plan or a nongovernmental section 457 plan | 8t | | |

Total other income. Add lines 8a through 8z

Combine lines 1 through 7 and 9. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 8

u Wages earned while incarcerated

9

z Other income. List type and amount:

-7,490.

9

10

8u

8z

Schedule 1 (Form 1040) 2022 Page **2**

| Par | Adjustments to Income | | | |
|-----|---|-------------|-----|--|
| 11 | Educator expenses | | 11 | |
| 12 | Certain business expenses of reservists, performing artists, and fee-t | | | |
| | officials. Attach Form 2106 | | 12 | |
| 13 | Health savings account deduction. Attach Form 8889 | | 13 | |
| 14 | Moving expenses for members of the Armed Forces. Attach Form 3903 | | 14 | |
| 15 | Deductible part of self-employment tax. Attach Schedule SE | | 15 | |
| 16 | Self-employed SEP, SIMPLE, and qualified plans | | 16 | |
| 17 | Self-employed health insurance deduction | | 17 | |
| 18 | Penalty on early withdrawal of savings | | 18 | |
| 19a | Alimony paid | | 19a | |
| b | Recipient's SSN | | | |
| С | Date of original divorce or separation agreement (see instructions): | | | |
| 20 | IRA deduction | | 20 | |
| 21 | Student loan interest deduction | | 21 | |
| 22 | Reserved for future use | | 22 | |
| 23 | Archer MSA deduction | | 23 | |
| 24 | Other adjustments: | | | |
| а | Jury duty pay (see instructions) | 24a | | |
| b | Deductible expenses related to income reported on line 8I from the | | | |
| | rental of personal property engaged in for profit | 24b | | |
| С | Nontaxable amount of the value of Olympic and Paralympic medals | | | |
| | | 24c | | |
| d | | 24d | | |
| е | Repayment of supplemental unemployment benefits under the Trade | | | |
| | | 24e | | |
| f | | 24f | | |
| g | , | 24g | | |
| h | Attorney fees and court costs for actions involving certain unlawful | | | |
| | · | 24h | - | |
| i | Attorney fees and court costs you paid in connection with an award | | | |
| | from the IRS for information you provided that helped the IRS detect | | | |
| | F | 24i | - | |
| j | <u> </u> | 24j | - | |
| k | Excess deductions of section 67(e) expenses from Schedule K-1 (Form | | | |
| | | 24k | - | |
| Z | Other adjustments. List type and amount: | na_ | | |
| 05 | | 24z | 05 | |
| 25 | Total other adjustments. Add lines 24a through 24z | | 25 | |
| 26 | Add lines 11 through 23 and 25. These are your adjustments to income . | | 00 | |
| | Form 1040 or 1040-SR, line 10, or Form 1040-NR, line 10a | | 26 | |

BAA

SCHEDULE 3 (Form 1040)

Additional Credits and Payments

OMB No. 1545-0074

2022

Attachment Sequence No. 03

Department of the Treasury Internal Revenue Service

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

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

Go to www.irs.gov/Form1040 for instructions and the latest information.

Your social security number

| AVI | RAT BELEKAR | 490-7 | 77-95 | 59 |
|-----|--|---------|-------|----|
| Par | t I Nonrefundable Credits | | | |
| 1 | Foreign tax credit. Attach Form 1116 if required | | 1 | 1. |
| 2 | Credit for child and dependent care expenses from Form 2441, line 11. Form 2441 | Attach | 2 | |
| 3 | Education credits from Form 8863, line 19 | | 3 | |
| 4 | Retirement savings contributions credit. Attach Form 8880 | 4 | | |
| 5 | Residential energy credits. Attach Form 5695 | | 5 | |
| 6 | Other nonrefundable credits: | | | |
| а | General business credit. Attach Form 3800 6a | | | |
| b | Credit for prior year minimum tax. Attach Form 8801 6b | | | |
| С | Adoption credit. Attach Form 8839 6c | | | |
| d | Credit for the elderly or disabled. Attach Schedule R 6d | | | |
| е | Alternative motor vehicle credit. Attach Form 8910 6e | | | |
| f | Qualified plug-in motor vehicle credit. Attach Form 8936 6f | | | |
| g | Mortgage interest credit. Attach Form 8396 6g | | | |
| h | District of Columbia first-time homebuyer credit. Attach Form 8859 6h | | | |
| i | Qualified electric vehicle credit. Attach Form 8834 6i | | | |
| j | Alternative fuel vehicle refueling property credit. Attach Form 8911 6j | | | |
| k | Credit to holders of tax credit bonds. Attach Form 8912 6k | | | |
| -1 | Amount on Form 8978, line 14. See instructions 6I | | | |
| Z | Other nonrefundable credits. List type and amount: | | | |
| | 6z | | | |
| 7 | Total other nonrefundable credits. Add lines 6a through 6z | | 7 | |
| 8 | Add lines 1 through 5 and 7. Enter here and on Form 1040, 1040-SR, or 10 line 20 |)40-NR, | 8 | 1 |

Schedule 3 (Form 1040) 2022 Page **2**

| Par | Other Payments and Refundable Credits | | | |
|-----|---|-----|----|--|
| 9 | Net premium tax credit. Attach Form 8962 | | 9 | |
| 10 | Amount paid with request for extension to file (see instructions) . | | 10 | |
| 11 | Excess social security and tier 1 RRTA tax withheld | | 11 | |
| 12 | Credit for federal tax on fuels. Attach Form 4136 | | 12 | |
| 13 | Other payments or refundable credits: | | | |
| а | Form 2439 | 13a | | |
| b | Credit for qualified sick and family leave wages paid in 2022 from Schedule(s) H for leave taken before April 1, 2021 | 13b | | |
| С | Reserved for future use | 13c | | |
| d | | 13d | | |
| е | Reserved for future use | 13e | | |
| f | Deferred amount of net 965 tax liability (see instructions) | 13f | | |
| g | Reserved for future use | 13g | | |
| h | from Schedule(s) H for leave taken after March 31, 2021, and | 13h | | |
| Z | Other payments or refundable credits. List type and amount: | | | |
| | | 13z | | |
| 14 | Total other payments or refundable credits. Add lines 13a through | 13z | 14 | |
| 15 | Add lines 9 through 12 and 14. Enter here and on Form 1040, 1040-line 31 | | 15 | |

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SCHEDULE NEC (Form 1040-NR)

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

Department of the Treasury Internal Revenue Service

Form 4797, or both.

Name shown on Form 1040-NR

Go to www.irs.gov/Form1040NR for instructions and the latest information. Attach to Form 1040-NR.

Sequence No. 7B Your identifying number

OMB No. 1545-0074

490-77-9559 AVIRAT BELEKAR Enter amount of income under the appropriate rate of tax. See instructions. (d) Other (specify) (a) 10% **Nature of Income (b)** 15% (c) 30% % % 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 а 2b 2c 3 Motion picture or TV copyright royalties 4 Other royalties (copyrights, recording, publishing, etc.) . . . 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 ____ Losses 10c Gambling winnings—Residents of countries other than Canada. 11 Other (specify): 12 12 13 Add lines 1a through 12 in columns (a) through (d) 13 14 Multiply line 13 by rate of tax at top of each column 14 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 16 Enter only the capital gains and (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), other basis mm/dd/yyyy mm/dd/yyyy 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 17 Add columns (f) and (g) of line 16 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-

18

SCHEDULE OI (Form 1040-NR)

Department of the Treasury

Name shown on Form 1040-NR

Other Information

Go to www.irs.gov/Form1040NR for instructions and the latest information. Attach to Form 1040-NR. Answer all questions.

Attachment Sequence No. 7C

Your identifying number

OMB No. 1545-0074

Internal Revenue Service

490-77-9559 AVIRAT BELEKAR 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 Have you ever applied to be a green card holder (lawful permanent resident) of the United States? C Were you ever: D X No 1. A U.S. citizen? Yes X No 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 didn't have a visa, enter your U.S. Ε immigration status on the last day of the tax year. F1 F Have you ever changed your visa type (nonimmigrant status) or U.S. immigration status? Yes X No If you answered "Yes," indicate the date and nature of the change: G List all dates you entered and left the United States during 2022. See instructions. Note: If you're a resident of Canada or Mexico AND commute to work in the United States at frequent intervals, Mexico 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 , **2021** ______, and **2022** ______365 ____. X Yes No ı 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 X No Yes If "Yes," did you use an alternative method to determine the source of this compensation? Income Exempt From Tax-If you are claiming exemption from income tax under a U.S. income tax treaty with a foreign country, L 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 year (e) Total. Enter this amount on Form 1040-NR, line 1k. Do not enter it anywhere else on line 1 2. Were you subject to tax in a foreign country on any of the income shown in 1(d) above? No Yes X No If "Yes," attach a copy of the Competent Authority determination letter to your return. М 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 E (Form 1040)

Supplemental Income and Loss

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

Department of the Treasury Internal Revenue Service

Attach to Form 1040, 1040-SR, 1040-NR, or 1041. Go to www.irs.gov/ScheduleE for instructions and the latest information. Attachment Sequence No. **13**

OMB No. 1545-0074

| • |) shown on return | | | | | | | al security | |
|----------|--|--------|------------------|-------------------|---------|----------------------------|-------------|----------------|----------|
| AVIE | | | | | | | 490-7 | 7-9559 | |
| Part | Income or Loss From Rental Real Estate and Note: If you are in the business of renting personal proper rental income or loss from Form 4835 on page 2, line 40. | | | e C. See | instruc | ctions. If you a | are an indi | vidual, rep | ort farm |
| | Did you make any payments in 2022 that would require you f "Yes," did you or will you file required Form(s) 1099? . | | | | | | | | |
| | Physical address of each property (street, city, state, ZIF | | | | | | | | |
| | | | | | | | | | |
| A_ | EKTA 703, EKTA VIVEK CHS LTD LINK RD | EXTI | N KANI | DERPAI | DA, DA | HISAR (WE | ST) MUM | IBAI I | N 400068 |
| B | | | | | | | | | |
| 1b | Type of Property (from list below) 2 For each rental real estate proper above, report the number of fair reports the number of f | | | | Fa | ir Rental Days | | nal Use nys | QJV |
| A | personal use days. Check the QJ | | | Α | | 365 | | 0 | П |
| В | if you meet the requirements to fi | | | В | | | | | |
| С | qualified joint venture. See instru | ctions | S. | С | | | | | |
| | of Property: | | | | | | | | |
| 1 | Single Family Residence 3 Vacation/Short-Term Rent Multi-Family Residence 4 Commercial | tal | 5 Land 6 Roya | | | Self-Rental Other (desc | ribe) | | |
| | | | | | | Propert | ies: | | |
| Incon | ne: | | | Α | | В | | | С |
| 3 | Rents received | 3 | | 5 | 10. | | | | |
| 4 | Royalties received | 4 | | | | | | | |
| Expe | | | | | | | | | |
| 5 | Advertising | 5 | | | | | | | |
| 6 | Auto and travel (see instructions) | 6 | | | | | | | |
| 7 | Cleaning and maintenance | 7 | | 6 | 00. | | | | |
| 8 | Commissions | 8 | | | | | | | |
| 9 | Insurance | 9 | | | | | | | |
| 10 | Legal and other professional fees | 10 | | | | | | | |
| 11 | Management fees | 11 | | 1,0 | 00. | | | | |
| 12 | Mortgage interest paid to banks, etc. (see instructions) | 12 | | | | | | | |
| 13 | Other interest | 13 | | | | | | | |
| 14 | Repairs | 14 | | 2,4 | | | | | |
| 15 | Supplies | 15 | | 2,5 | 00. | | | | |
| 16 | Taxes | 16 | | | | | | | |
| 17 | Utilities | 17 | | 1,5 | 00. | | | | |
| 18 | Depreciation expense or depletion | 18 | | | | | | | |
| 19 | Other (list) | 19 | | | | | | | |
| 20 | Total expenses. Add lines 5 through 19 | 20 | | 8,0 | 00. | | | | |
| 21 | Subtract line 20 from line 3 (rents) and/or 4 (royalties). If | | | | | | | | |
| | result is a (loss), see instructions to find out if you must | 04 | | 7 / | 00 | | | | |
| | file Form 6198 | 21 | | -7,4 | y∪. | | | | |
| 22 | Deductible rental real estate loss after limitation, if any, | | , | 7 40 | | | , | , | , |
| | on Form 8582 (see instructions) | 22 | | - 7,49 | | | [10 | (|) |
| 23a | Total of all amounts reported on line 3 for all rental proper | | | | 23a | | 510. | | |
| b | Total of all amounts reported on line 4 for all royalty properties | | | | 23b | | | | |
| G C | Total of all amounts reported on line 12 for all properties | | | | 23c | | | | |
| d | Total of all amounts reported on line 18 for all properties | | | | 23d | | 2 000 | | |
| e 24 | Total of all amounts reported on line 20 for all properties | | | | 23e | | . 24 | | |
| 24 25 | Income. Add positive amounts shown on line 21. Do not Losses. Add royalty losses from line 21 and rental real estat | | - | | | Ital losses he | | (| 7,490.) |
| | • • | | | | | | | \ | 1,430.) |
| 26 | Total rental real estate and royalty income or (loss). Ohere. If Parts II, III, IV, and line 40 on page 2 do not a | | | | | | | | |
| | Schedule 1 (Form 1040), line 5. Otherwise, include this ar | | | | | | . 26 | | -7,490. |