Internal Revenue Service

IRS e-file Signature Authorization

OMB No. 1545-0074

Social accurity number

ERO must obtain and retain completed Form 8879. ▶ Go to www.irs.gov/Form8879 for the latest information.

Submission Identification Number (SID)

Taypayar'a nama

| талраз | | Social Security Humber | | | |
|--------|--|------------------------|-------------|----------|-------------|
| SWA | APNIL KALE | 38 | 381-95-2808 | | |
| Spouse | 's name | Spou | ise's soc | ial secu | rity number |
| Par | t I Tax Return Information – Tax Year Ending December 31, 2023 (Enter | er year | r you a | re aut | horizing.) |
| Enter | whole dollars only on lines 1 through 5. | | | | |
| Note | Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank. | | | | |
| 1 | Adjusted gross income | | | 1 | 113,847. |
| 2 | Total tax | | | 2 | 17,394. |
| 3 | Federal income tax withheld from Form(s) W-2 and Form(s) 1099 | | | 3 | 20,614. |
| 4 | Amount you want refunded to you | | | 4 | 3,220. |
| 5 | Amount you owe | | | 5 | |
| Part | Taxpayer Declaration and Signature Authorization (Be sure you get and | keep | a cop | y of y | our return) |

Under penalties of periury. I declare that I have examined a copy of the income tax return (original or amended) I am now authorizing, and to the best of my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above are the amounts from the income tax return (original or amended) I am now authorizing. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution to debit the entry to this account. This authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate the authorization. To revoke (cancel) a payment, I must contact the U.S. Treasury Financial Agent at **1-888-353-4537**. Payment cancellation requests must be received no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I further acknowledge that the personal identification number (PIN) below is my signature for the income tax return (original or amended) I am now authorizing and, if applicable, my Electronic Funds Withdrawal Consent.

Taxpayer's PIN: check one box only

| X | l authorize | GLOBAL TAX | ES LLC | to enter or generate my PIN |
|---|-------------|------------|--------|-----------------------------|
| | | | | |

| Ent don | er fiv i't en | ve dig nter a | gits, all ze | but ros | as my |
|------------|------------------|------------------|-----------------|------------|-------|
| 5 | 2 | 8 | 0 | 8 | |

ERO firm name signature on the income tax return (original or amended) I am now authorizing.

I will enter my PIN as my signature on the income tax return (original or amended) I am now authorizing. Check this box only if you are entering your own PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Your signature 🕨

Date 🕨

Spouse's PIN: check one box only

I authorize

| to | enter | or | generate | my | PIN |
|----|-------|----|----------|----|-----|

as mv Enter five digits, but don't enter all zeros

ERO firm name signature on the income tax return (original or amended) I am now authorizing.

I will enter my PIN as my signature on the income tax return (original or amended) I am now authorizing. Check this box only if you are entering your own PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

| Spouse's signation | ature Da | ate 🕨 | • | | | | | | |
|--------------------|---|-------|----|--|-----------------|--|---|---|---|
| | Practitioner PIN Method Returns Only—continue | bel | ow | | | | | | |
| Part III C | Certification and Authentication – Practitioner PIN Method Only | | | | | | | | |
| ERO's EFIN/P | PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN. | 2 | 2 | | 6 nter a | | 2 | 7 | 1 |

I certify that the above numeric entry is my PIN, which is my signature for the electronic individual income tax return (original or amended) I am now authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am submitting this return in accordance with the requirements of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers of Individual Income Tax Returns.

| ERO's signature > | | Date 🕨 | |
|----------------------------------|--|----------------------|--------------------------|
| Don't | ERO Must Retain This For t Submit This Form to the IF | | |
| For Denergy Peduction Act Nation | | DEV 03/07/34 DDO | Earm 8879 (Payr 01 2021) |

For Paperwork Reduction Act Notice, see your tax return instructions. BAA REV 03/07/24 PRO

| 1040 | - | IR Department of the Treasury-Intern U.S. Nonresident Ali | | | leturn | 2023 | OMB No. 1 | 545-0074 | or stapl | Dnly—Do not write le in this space. |
|---|---------------------|--|--------------|---------------------------------|------------|---------------------|--------------|---|---------------|--|
| For the year Jan. 1–Dec. 31, 2023, or other tax year beginning, 2 | | | | | , 2023, e | nding | | , 20 | Se | e separate structions. |
| Your first name | | | Last name Yo | | | | Your i | Your identifying number (see instructions) | | |
| SWAPNIL | | | KALE | | | | | 381 | -95-2 | 808 |
| | numl | per and street). If you have a P.O. box | , see ins | tructions. | | | | 1 | | Apt. no. |
| 1725 TURT | LE | BAY LOOP | | | | | | | | |
| City, town, or po | ost o | ffice. If you have a foreign address, als | so comp | lete spaces belo | w. | | State | | ZIP co | de |
| LEANDER | | | | | | | TX | | 7864 | 1 |
| Foreign country | nam | e | Foreigr | n province/state/ | county | | Foreign | postal co | ode | |
| Filing Status Check only one box. | lf : | Single | hild's na | ame if the qualify | ing perso | | ot your dep | | - | Trust |
| Digital Assets | | ny time during 2023, did you: (a) receir erwise dispose of a digital asset (or a fi | | | | | | | | |
| Dependents | | | | | | | (4) C | heck the bo | ox if qualifi | ies for (see inst.): |
| (see instructions): | | (1) First name Last name | | (2) Depender identifying nun | | (3) Relationship to | Ch | ild tax cre | | redit for other dependents |
| | | | | | | | <u>you</u> | | | |
| If more than four | | | | | | | | | | |
| dependents, see instructions and | | | | | | | | \square | | $\overline{\Box}$ |
| check here | | | | | | | | | | |
| Income | 1a | Total amount from Form(s) W-2, box | 1 (see i | nstructions) . | | | | . 1a | 1 : | 128,759. |
| Effectively | b | Household employee wages not rep | orted on | Form(s) W-2 . | | | | . 1k |) | |
| Connected | с | Tip income not reported on line 1a (s | see instr | uctions) | | | | . 10 | ; | |
| With U.S. | d | Medicaid waiver payments not repor | ted on F | ^F orm(s) W-2 (see | instructio | ons) | | . 10 | 1 | |
| Trade or | е | Taxable dependent care benefits fro | m Form | 2441, line 26 . | | | | . 16 | , | |
| Business | f | Employer-provided adoption benefit | s from F | orm 8839, line 29 | θ. | | | . 11 | F | |
| Attach | g | Wages from Form 8919, line 6 | | | | | | . 1g | 1 | |
| Form(s) W-2, | h | Other earned income (see instruction | | | | | | . 1ł | 1 | |
| 1042-S, | i | Reserved for future use | | | | | | | | |
| SSA-1042-S, RRB-1042-S, | j | | | | | | . 1 j | | | |
| and 8288-A | k | Total income exempt by a treaty from | | | | | | | | |
| here. Also attach | _ | | | | | | | - 1 | | 100 750 |
| Form(s) | z 2a | Add lines 1a through 1h | 1 | · · · · . | | ble interest | | | | 128,759. |
| 1099-R if | 2a 3a | Qualified dividends 3a | | | | hary dividends . | | | | |
| tax was withheld. | 3a 4a | IRA distributions 4a | | | | ble amount | | | | |
| If you did not | та 5а | Pensions and annuities | - | | | ble amount | | | | |
| get a Form | 6 | Reserved for future use | | | | | | | | |
| W-2, see instructions. | 7 | Capital gain or (loss). Attach Schedu | | | | | | | _ | -304. |
| | 8 | Additional income from Schedule 1 (| Form 10 | 40), line 10 | | | | . 8 | | -14,608. |
| | 9 | Add lines 1z, 2b, 3b, 4b, 5b, 7, and 8 | 3. This is | your total effec | tively co | nnected income | | . 9 | | 113,847. |
| | 10 | Adjustments to income from Schedu | • | , | | • | - | |) | |
| | 11 | Subtract line 10 from line 9. This is y | | | | | | | _ | 113,847. |
| | 12 | Itemized deductions (from Schedu deduction (see instructions) | le A (Fo | rm 1040-NR)) or, | for certa | ain residents of Ir | ndia, stanc | lard | | 13,850. |
| | 13a | Qualified business income deduction | | | | | , | | - | |
| | b | Exemptions for estates and trusts or | | | | | | | | |
| | c | Add lines 13a and 13b | | , | | | | . 13 | с | |
| | 14 | | | | | | | | | 13,850. |
| | 15 | Subtract line 14 from line 11. If zero | | | | | | | | 99,997. |
| | | cy Act, and Paperwork Reduction Act | | | | | | | | 040-NR (2023) |

| Form 1040-NR (2 | 2023) | | | | | Page 2 |
|--------------------------------------|------------|---|----------------|-------------|-----------------------|-------------------------|
| Tax and | 16 | Tax (see instructions). Check if any from Form(s): 1 | 3 🗌 | | 16 | 17,394. |
| Credits | 17 | Amount from Schedule 2 (Form 1040), line 3 | | | 17 | 0. |
| | 18 | Add lines 16 and 17 | | | 18 | 17,394. |
| | 19 | Child tax credit or credit for other dependents from Schedule 8812 (Form 1040) | | | 19 | |
| | 20 | Amount from Schedule 3 (Form 1040), line 8 | | | 20 | |
| | 21 | Add lines 19 and 20 | | | 21 | |
| | 22 | Subtract line 21 from line 18. If zero or less, enter -0 | | | 22 | 17,394. |
| | 23a | Tax on income not effectively connected with a U.S. trade or business from | | | | |
| | | Schedule NEC (Form 1040-NR), line 15 | a | | | |
| | b | Other taxes, including self-employment tax, from Schedule 2 (Form 1040), | | | | |
| | | line 21 | b | | | |
| | С | Transportation tax (see instructions) | | | | |
| | d | Add lines 23a through 23c | | | 23d | |
| | 24 | Add lines 22 and 23d. This is your total tax | <u> </u> | | 24 | 17,394. |
| Payments | 25 | Federal income tax withheld from: | | | | |
| | а | Form(s) W-2 | a 20 | 0,614. | | |
| | b | Form(s) 1099 | b | | | |
| | С | Other forms (see instructions) | - | | | |
| | d | Add lines 25a through 25c | | | 25d | 20,614. |
| | е | Form(s) 8805 | | | 25e | |
| | f | Form(s) 8288-A | | | 25f | |
| | g | Form(s) 1042-S | | | 25g | |
| | 26 | 2023 estimated tax payments and amount applied from 2022 return | | | 26 | |
| | 27 | Reserved for future use . | - | | | |
| | 28 | Additional child tax credit from Schedule 8812 (Form 1040) 28 | | | _ | |
| | 29 | Credit for amount paid with Form 1040-C | | | | |
| | 30 | Reserved for future use | | | - | |
| | 31 | Amount from Schedule 3 (Form 1040), line 15 | | | | |
| | 32 | Add lines 28, 29, and 31. These are your total other payments and refundable | | | 32 | 00 (14 |
| <u> </u> | 33 | Add lines 25d, 25e, 25f, 25g, 26, and 32. These are your total payments | | | 33 | 20,614. |
| Refund | 34 25 o | If line 33 is more than line 24, subtract line 24 from line 33. This is the amount yo | | | 34 35a | <u>3,220.</u> 3,220. |
| Divert deperit? | 35a | Amount of line 34 you want refunded to you . If Form 8888 is attached, check he Routing number $\begin{vmatrix} 1 & & 1 \end{vmatrix} \begin{vmatrix} 9 & & 0 \end{vmatrix} \begin{vmatrix} 0 & & 6 \end{vmatrix} \begin{vmatrix} 5 & & 9 \end{vmatrix}$ c Type: \square Check he | | | 358 | 5,220. |
| Direct deposit? See instructions. | b d | Account number 9 2 3 2 0 7 6 8 5 2 | | Savings | | |
| | | If you want your refund check mailed to an address outside the United States no | | nogo 1 | | |
| | е | | | | | |
| | 36 | enter it here. Amount of line 34 you want applied to your 2024 estimated tax 36 | | | - | |
| Amount | 37 | Subtract line 33 from line 24. This is the amount you owe . | · | | | |
| You Owe | • | For details on how to pay, go to www.irs.gov/Payments or see instructions . | | | 37 | |
| | 38 | Estimated tax penalty (see instructions) | | | | |
| Third | Do yo | bu want to allow another person to discuss this return with the IRS? See instruction | is. 🗌 Ye | es. Comp | lete below. | |
| Party | Desia | inee's Phone | Perso | nal identif | ication | |
| Designee | name | | numbe | er (PIN) | | |
| | | penalties of perjury, I declare that I have examined this return and accompanying schedules a | | | | |
| 0: | belief, | they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on | all informatio | n of which | preparer has | any knowledge. |
| Sign | - | signature Date Your occupation | | | | ou an Identity |
| Here | Sw | raphil Kale 03/15/2024 DURCHASTING AN | INTVOM | | ection PIN, inst.) | enter it here |
| - | Dhon | | ALISI | (566 | : IIISL.) | |
| | Phone | e no. Email address arer's name Preparer's signature Da | te | PTIN | Cha | ck if: |
| Paid | • | | /15/2024 | P02082 | | Self-employed |
| Preparer | | | 110/2024 | Phone n | | |
| Use Only | | | | Firm's E | (• • • / | 965-9522 |
| Co to united in | | rm1040NID for instructions and the latest information | | | | |
| Go to www.irs.g | gov/Foi | rm1040NR for instructions and the latest information. BAA | EV 03/07/24 PR | 0 | Form 1 | 040-NR (2023) |

| SCHEDULE | 1 |
|-------------|---|
| (Form 1040) | |

Department of the Treasury

Additional Income and Adjustments to Income

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

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

OMB No. 1545-0074

202 23 Attachment Sequence No. **01**

| Internal Revenue Service | Go to www.irs.gov/Form1040 for instructions and the latest information. | | Sequence No. 01 |
|--------------------------|---|----------|---------------------|
| Name(s) shown on Fo | rm 1040, 1040-SR, or 1040-NR | Your soc | ial security number |
| SWAPNIL KALE | | 381-95 | -2808 |
| | | | |

| Par | 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. Attac | ch Schedule E . | 5 | -14,608. |
| 6 | Farm income or (loss). Attach Schedule F. | | 6 | |
| 7 | Unemployment compensation | | 7 | |
| 8 | Other income: | | | |
| а | Net operating loss | 8a (|) | |
| b | Gambling | 8b | | |
| С | | 8c | | |
| d | Foreign earned income exclusion from Form 2555 | 8d (|) | |
| е | Income from Form 8853 | 8e | | |
| f | | 8f | | |
| g | Alaska Permanent Fund dividends | 8g | | |
| h | Jury duty pay | 8h | | |
| i | | 8i | | |
| j | | 8j | | |
| k | | 8k | | |
| I | Income from the rental of personal property if you engaged in the rental | | | |
| | | 81 | | |
| m | Olympic and Paralympic medals and USOC prize money (see | | | |
| | · · · · · · · · · · · · · · · · · · · | 8m | | |
| n | | 8n | | |
| 0 | | 80 | | |
| р | | 8р | | |
| q | | 8q | | |
| r | | 8r | | |
| S | Nontaxable amount of Medicaid waiver payments included on Form | | | |
| | | 8s (| 2 | |
| t | Pension or annuity from a nonqualifed deferred compensation plan or | _ | | |
| | o 1 | 8t | - | |
| u | | 8u | _ | |
| z | Other income. List type and amount: | _ | | |
| - | | 8z | | |
| 9 | Total other income. Add lines 8a through 8z | | 9 | |
| 10 | Combine lines 1 through 7 and 9. This is your additional income . Enter 1040, 1040-SR, or 1040-NR, line 8 | here and on Form | 10 | -14,608. |
| For Pa | perwork Reduction Act Notice, see your tax return instructions. | | Schedule | e 1 (Form 1040) 2023 |

| Par | t II Adjustments to Income | | |
|----------|---|----------|--------------------|
| 11 | Educator expenses | 11 | |
| 12 | Certain business expenses of reservists, performing artists, and fee-basis government | | |
| | 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) | | |
| b | Deductible expenses related to income reported on line 8I from the | | |
| | rental of personal property engaged in for profit | | |
| С | Nontaxable amount of the value of Olympic and Paralympic medals | | |
| | and USOC prize money reported on line 8m | _ | |
| d | Reforestation amortization and expenses 24d | | |
| е | Repayment of supplemental unemployment benefits under the Trade | | |
| | Act of 1974 | _ | |
| f | Contributions to section 501(c)(18)(D) pension plans | - | |
| g | Contributions by certain chaplains to section 403(b) plans 24g | _ | |
| h | Attorney fees and court costs for actions involving certain unlawful | | |
| | discrimination claims (see instructions) | _ | |
| 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 | | |
| | tax law violations | - | |
| j | Housing deduction from Form 2555 | - | |
| K | Excess deductions of section 67(e) expenses from Schedule K-1 (Form | | |
| | 1041) | - | |
| Z | Other adjustments. List type and amount: | | |
| 05 | Tatal athen adjustments. Add lines 04a through 04a | 05 | |
| 25 06 | Total other adjustments. Add lines 24a through 24z | 25 | |
| 26 | Add lines 11 through 23 and 25. These are your adjustments to income . Enter here and on Form 1040, 1040-SR, or 1040-NR, line 10 | 06 | |
| | | 26 | |
| | BAA REV 03/07/24 PRO | Schedule | 1 (Form 1040) 2023 |

SCHEDULE NEC (Form 1040-NR)

Department of the Treasury

Internal Revenue Service

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

OMB No. 1545-0074

Attach to Form 1040-NR.

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

Name shown on Form 1040-NR

2 23 Attachment Sequence No. 7B

Your identifying number

381-95-2808

SWAPNIL KALE

Enter **amount of income** under the appropriate rate of tax. See instructions.

| | | Nature of Income | | | (a) 10% | (b) 15% | (c) 30% | (d) | Other | (specify) |
|--------------------|---|--|------------------------------------|---------|------------------------------------|-------------------------|--------------------------------|--|----------|---|
| | | Nature of Income | | | (a) 10% | (b) 15% | (C) 30% | | % | % |
| 1 | Dividends and divide | end equivalents: | | | | | | | | |
| а | Dividends paid by U. | S. corporations | | 1a | | | | | | |
| b | Dividends paid by fo | reign corporations | | 1b | | | | | | |
| с | Dividend equivalent p | ayments received with respect to section 871(m) trans | sactions | 1c | | | | | | |
| 2 | Interest: | | | | | | | | | |
| а | Mortgage | | | 2a | | | | | | |
| b | | orations | | 2b | | | | | | |
| с | Other | | [| 2c | | | | | | |
| 3 | Industrial royalties (p | atents, trademarks, etc.) | [| 3 | | | | | | |
| 4 | • " | copyright royalties | | 4 | | | | | | |
| 5 | | rights, recording, publishing, etc.) | | 5 | | | | | | |
| 6 | | e and natural resources royalties | | 6 | | | | | | |
| 7 | | ies | | 7 | | | | | | |
| 8 | | fits | | 8 | | | | | | |
| 9 | - | e 18 below | | 9 | | | | | | |
| 10 | | ts of Canada only. Enter net income in column (c). | | | | | | | | |
| а | Winnings | | | | | | | | | |
| b | Losses | | | 10c | | | | | | |
| 11 | Gambling – Resident Note: Enter winnings | ts of countries other than Canada. s only. Losses aren't allowed | [| 11 | | | | | | |
| 12 | Other (specify): | | | | | | | | | |
| | | | | 12 | | | | | | |
| 13 | | 12 in columns (a) through (d) | | 13 | | | | | | |
| 14 | Multiply line 13 by r | ate of tax at top of each column | [| 14 | | | | | | |
| 15 | Tax on income not e | ffectively connected with a U.S. trade or business. A | dd column | s (a) t | hrough (d) of line 14 | 1. Enter the total here | and on Form 1040- | NR, line 23a | 15 | |
| | | Capital Gains and Lo | osses Fr | om | Sales or Excha | nges of Proper | ty | | | |
| losses i exchan | nly the capital gains and from property sales or ges that are from sources the United States and not | |) Date acquir mm/dd/yyyy | | (c) Date sold mm/dd/yyyy | (d) Sales price | (e) Cost or other basis | (f) LOSS If (e) is more that subtract (d) from | | (g) GAIN If (d) is more than (e), subtract (e) from (d). |
| | vely connected with a U.S. ss. Do not include a gain | | | | | | | | | |
| or loss | on disposing of a U.S. real | | | | | | | | | |
| | ty interest; report these Ind losses on Schedule D 1040). | | | | | | | | | |
| Report | property sales or | | | | | | | | | |
| | iges that are effectively ted with a U.S. business | 17 Add columns (f) and (c) of line 10 | | | | | 47 | (| <u>۱</u> | |
| on Sch | edule D (Form 1040), | 17 Add columns (f) and (g) of line 16 18 Capital gain. Combine columns (f) and (g) of the columns (f) and (g) of th | | | | | | 1 |) | |
| | 1797, or both. | | or line 17. | Ente | - | | ove. Il a loss, entel | | 18 | |
| For Pa | aperwork Reduction A | ct Notice, see the Instructions for Form 1040-NR. | | | BAA REV 0 | 3/07/24 PRO | | Schedul | e NEC | (Form 1040-NR) 2023 |

SCHEDULE OI (Form 1040-NR)

Other Information

Attach to Form 1040-NR.

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

OMB No. 1545-0074 2023

| | ent of the Treasury Go | to www.irs.gov/Form1040N Ans | R for instructions and wer all questions. | the latest information. | | Attachment Sequence N | - 7C |
|------|---|---------------------------------|---|--------------------------|---------------|--------------------------|-------------|
| | nown on Form 1040-NR | | | | Your identify | | 0.70 |
| SWAP | NIL KALE | | | | 381-95- | | |
| A | Of what country or countries | were you a citizen or nation | al during the tax year? | INDIA | | | |
| в | In what country did you claim | n residence for tax purpose | s during the tax year? | United States | | | |
| С | Have you ever applied to be a | a green card holder (lawful p | permanent resident) of | the United States? . | | Ves | 🛛 No |
| D | Were you ever: | | | | | | |
| | | | | | | | 🛛 No |
| 2. | A green card holder (lawful pe | - | | | | Yes | 🛛 No |
| _ | If you answer "Yes" to (1) or (2 | | - | | | | |
| Е | If you had a visa on the last immigration status on the last | | | | | | |
| - | | | | | | Yes | 🛛 No |
| F | Have you ever changed your v If you answered "Yes," indicate | te the date and nature of th | e change: | | | | |
| G | List all dates you entered and | left the United States durin | a 2023. See instructio | ns | | | |
| | Note: If you're a resident of (| | - | | ent intervals | . | |
| | check the box for Canada o | | | | Mexico | | |
| | Date entered United States | Date departed United Stat | tes Da | te entered United States | s Date de | eparted Unite | d States |
| | mm/dd/yy | mm/dd/yy | | mm/dd/yy | | mm/dd/yy | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | <u> </u> | | | | | |
| н | Give number of days (including 2021 | | | | | 1 | |
| 1 | Did you file a U.S. income tax | , 2022 | , and 20, | 23 365 | ·• | X Yes | No |
| • | If "Yes," give the latest year a | nd form number you filed: | 104 | LONR | | 103 | |
| J | Are you filing a return for a tru | ust? | | | | Yes | 🛛 No |
| | If "Yes," did the trust have a | | | | | | |
| | U.S. person, or receive a cont | tribution from a U.S. person | 1? | | | Ves | 🗌 No |
| Κ | Did you receive total compens | sation of \$250,000 or more | during the tax year? . | | | . 🗌 Yes | 🛛 No |
| | If "Yes," did you use an altern | | | | | | 🗌 No |
| L | Income Exempt From Tax-I | | | | tax treaty w | ith a foreign | country |
| | complete (1) through (3) below | | | | | | |
| 1. | Enter the name of the country, amount of exempt income in the | | | | claimed the | treaty benefi | t, and the |
| | · · · · · · · · · · · · · · · · · · · | untry | | (c) Number of month | ie (4) | Amount of exe | emnt |
| | | and y | (b) Tax fronty article | claimed in prior tax ye | | e in current ta | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | (a) Total Enter this area and | | | | | | |
| 0 | (e) Total. Enter this amount of Were you subject to tax in a for | | - | | | Yes | No |
| | Are you claiming treaty benefi | | | | | | |
| 0. | If "Yes," attach a copy of the | | - | | | | |
| м | Check the applicable box if: | | | | | | |
| 1. | This is the first year you are m | aking an election to treat ir | ncome from real prope | rty located in the Unite | d States as | effectively c | onnected |
| | with a U.S. trade or business | | | | | | |
| 2 | You have made an election i | in a previous year that has | not been revoked to | treat income from re | al property | located in th | ne l Initer |

You have made an election in a previous year that has not been revoked, to treat income from real property located in the United z.

BAA

For Paperwork Reduction Act Notice, see the Instructions for Form 1040-NR.

REV 03/07/24 PRO Schedule OI (Form 1040-NR) 2023

SCHEDULE D (Form 1040)

Capital Gains and Losses

OMB No. 1545-0074

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

Use Form 8949 to list your transactions for lines 1b, 2, 3, 8b, 9, and 10. Go to *www.irs.gov/ScheduleD* for instructions and the latest information.

2023 Attachment Sequence No. 12

Internal Revenue Service Name(s) shown on return SWAPNIL KALE

Department of the Treasury

Your social security number 381-95-2808

Did you dispose of any investment(s) in a qualified opportunity fund during the tax year? If "Yes," attach Form 8949 and see its instructions for additional requirements for reporting your gain or loss.

Part I Short-Term Capital Gains and Losses – Generally Assets Held One Year or Less (see instructions)

| lines This | instructions for how to figure the amounts to enter on the below. form may be easier to complete if you round off cents to e dollars. | (d) Proceeds (sales price) | (e) Cost (or other basis) | (g) Adjustment to gain or loss Form(s) 8949, F line 2, columr | from Part I, | (h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g) |
|---------------|---|---|--|---|-----------------|---|
| 1 a | Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b. | | | | | |
| 1b | Totals for all transactions reported on Form(s) 8949 with Box A checked | | | | | |
| 2 | Totals for all transactions reported on Form(s) 8949 with Box B checked | 5,511. | 5,815. | | | -304. |
| 3 | Totals for all transactions reported on Form(s) 8949 with Box C checked | | | | | |
| 4 | Short-term gain from Form 6252 and short-term gain or (I | oss) from Forms 4 | 684, 6781, and 88 | | 4 | |
| 5 | Net short-term gain or (loss) from partnerships, Schedule(s) K-1 | | | | 5 | |
| 6 | Short-term capital loss carryover. Enter the amount, if an Worksheet in the instructions | y, from line 8 of y | our Capital Loss | Carryover | 6 | () |
| 7 | Net short-term capital gain or (loss). Combine lines 1a term capital gains or losses, go to Part II below. Otherwise | | | | 7 | -304. |

Part II Long-Term Capital Gains and Losses—Generally Assets Held More Than One Year (see instructions)

| lines This | instructions for how to figure the amounts to enter on the below. form may be easier to complete if you round off cents to e dollars. | (d) Proceeds (sales price) | (e) Cost (or other basis) | (g) Adjustmen to gain or loss Form(s) 8949, I line 2, colum | from Part II, | (h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g) |
|---------------|--|---|--|---|------------------|---|
| 8a | Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b. | | | | | |
| 8b | Totals for all transactions reported on Form(s) 8949 with Box D checked | | | | | |
| 9 | Totals for all transactions reported on Form(s) 8949 with Box E checked | | | | | |
| 10 | Totals for all transactions reported on Form(s) 8949 with Box F checked. | | | | | |
| | Gain from Form 4797, Part I; long-term gain from Forms from Forms 4684, 6781, and 8824 | | | | 11 | |
| 12 13 | Net long-term gain or (loss) from partnerships, S corporat Capital gain distributions. See the instructions | | | | 12 13 | |
| | Long-term capital loss carryover. Enter the amount, if any Worksheet in the instructions | /, from line 13 of y | our Capital Loss | Carryover | 14 | () |
| 15 | Net long-term capital gain or (loss). Combine lines 8a on the back | | | | 15 | |

| Part | III Summary | | | |
|------|--|----|---|-------|
| 16 | Combine lines 7 and 15 and enter the result | 16 | | -304. |
| | • If line 16 is a gain , enter the amount from line 16 on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 17 below. | | | |
| | • If line 16 is a loss , skip lines 17 through 20 below. Then, go to line 21. Also be sure to complete line 22. | | | |
| | • If line 16 is zero , skip lines 17 through 21 below and enter -0- on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 22. | | | |
| 17 | Are lines 15 and 16 both gains? Yes. Go to line 18. No. Skip lines 18 through 21, and go to line 22. | | | |
| 18 | If you are required to complete the 28% Rate Gain Worksheet (see instructions), enter the amount, if any, from line 7 of that worksheet | 18 | | |
| 19 | If you are required to complete the Unrecaptured Section 1250 Gain Worksheet (see instructions), enter the amount, if any, from line 18 of that worksheet | 19 | | |
| 20 | Are lines 18 and 19 both zero or blank and you are not filing Form 4952? Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 16. Don't complete lines 21 and 22 below. | | | |
| | □ No. Complete the Schedule D Tax Worksheet in the instructions. Don't complete lines 21 and 22 below. | | | |
| 21 | If line 16 is a loss, enter here and on Form 1040, 1040-SR, or 1040-NR, line 7, the smaller of: | | | |
| | The loss on line 16; or (\$3,000), or if married filing separately, (\$1,500) | 21 | (| 304.) |
| | Note: When figuring which amount is smaller, treat both amounts as positive numbers. | | | |
| 22 | Do you have qualified dividends on Form 1040, 1040-SR, or 1040-NR, line 3a? | | | |
| | ☐ Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 16. | | | |
| | ☑ No. Complete the rest of Form 1040, 1040-SR, or 1040-NR. | | | |

BAA REV 03/07/24 PRO

Schedule D (Form 1040) 2023

Form **8949**

Department of the Treasury

Internal Revenue Service

Sales and Other Dispositions of Capital Assets

File with your Schedule D to list your transactions for lines 1b, 2, 3, 8b, 9, and 10 of Schedule D.



Go to www.irs.gov/Form8949 for instructions and the latest information.

Social security number or taxpayer identification number

| Name(s) shown | on return |
|---------------|-----------|
| SWAPNTL | KALE |

| 381-95-2808 | |
|-------------|--|
| 001 JO 2000 | |

Before you check Box A, B, or C below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your broker and may even tell you which box to check.

Part I Short-Term. Transactions involving capital assets you held 1 year or less are generally short-term (see instructions). For long-term transactions, see page 2.

Note: You may aggregate all short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 1a; you aren't required to report these transactions on Form 8949 (see instructions).

You *must* check Box A, B, or C below. Check only one box. If more than one box applies for your short-term transactions, complete a separate Form 8949, page 1, for each applicable box. If you have more short-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

(A) Short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see Note above)

(B) Short-term transactions reported on Form(s) 1099-B showing basis wasn't reported to the IRS

C) Short-term transactions not reported to you on Form 1099-B

| 1 (a) Description of property | (b) Date acquired | (c) Date sold or | (d) Proceeds | (e) Cost or other basis See the Note below | or other basis ne Note below See the separate instructions. | | | |
|---|--|--------------------------------|-------------------------------------|--|--|--|---|--|
| (Example: 100 sh. XYZ Co.) | (Mo., day, yr.) | disposed of (Mo., day, yr.) | (sales price) (see instructions) | and see Column (e) in the separate instructions. | (f) (g) Code(s) from Amount of instructions adjustment | | from column (d) and combine the result with column (g). | |
| E*TRADE SECURITIES LLC | 01/01/23 | 12/31/23 | 3,854. | 4,125. | | | -271. | |
| Morgan Stanley Capital Management, LLC | 01/01/23 | 12/31/23 | 1,657. | 1,690. | | | -33. | |
| | | | | | | | | |
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| | | | | | | | | |
| | | | | | | | | |
| 2 Totals. Add the amounts in columns negative amounts). Enter each tota Schedule D, line 1b (if Box A above above is checked), or line 3 (if Box (| al here and inc is checked), lir | lude on your ne 2 (if Box B | 5,511. | 5,815. | | | -304. | |

Note: If you checked Box A above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See *Column* (g) in the separate instructions for how to figure the amount of the adjustment.

For Paperwork Reduction Act Notice, see your tax return instructions. BAA

| SCHE | DULE | Е |
|-------|-------|---|
| (Form | 1040) | |

Supplemental Income and Loss

OMB No. 1545-0074

(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.

| 2023 |
|--------------------------------------|
| Attachment Seguence No. 13 |

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

| |) shown on return | | | | | | | | | social security | | er |
|----------|------------------------------------|---------------|--|------------|---------------------|----------|----------|------------------|---------|-----------------|---------|----------|
| - | NIL KALE | | | | | | | | 381 | L-95-2808 | 3 | |
| Part | Note: If you a | re in the bus | m Rental Real Estate a iness of renting personal prop Form 4835 on page 2, line 40 | perty, use | yalties Schedule | e C. See | e instru | ctions. If you a | are an | individual, rep | oort fa | rm |
| | | | 2023 that would require yo | | | | | | | | es 🗵 | No |
| B I | f "Yes," did you or | will you file | required Form(s) 1099? | | | | | | | 🗌 Y | es 🗌 | No |
| 1a | | | operty (street, city, state, 2 | | | | | | | | | |
| _ | | • | | | , | | | | | | T.1. 4 | 11001 |
| <u>A</u> | 669 ZA/ZB NEA | K BIBMEMY | ADI POLICE STATION AN | BOVE J | ANSEVA | BANK F | SIBMF | WADI PUNE | MAH | HARASHTRA | IN 4 | 1103 |
| B | | | | | | | | | | | | |
| С | | | | | | | | | | | | |
| 1b | Type of Property (from list below) | | each rental real estate prop ve, report the number of fa | | | | Fa | ir Rental | Per | sonal Use | 0 | JV |
| • | , , | | onal use days. Check the | | | • | | Days | | Days | | |
| <u>A</u> | 3 | | u meet the requirements to | | | A | | 365 | | 0 | | <u> </u> |
| B | | | fied joint venture. See inst | | | В | | | | | | <u> </u> |
| С | | | - | | | С | | | | | | |
| | of Property: | | | | | | | | | | | |
| | Single Family Resid | | 3 Vacation/Short-Term Re | ental | 5 Lanc | - | | Self-Rental | | | | |
| 2 | Multi-Family Resid | ence | 4 Commercial | | 6 Roya | alties | 8 | Other (desc | ribe) _ | | | |
| | | | | | | | | Propert | | | | |
| ncon |)e' | | | | | Α | | В | | | С | |
| 3 | | | | 3 | | | 14. | | | | • | |
| 4 | | | | 4 | | , | <u> </u> | | | | | |
| | ises: | | | | | | | | | | | |
| 5 | | | | 5 | | | | | | | | |
| 6 | | | | 6 | | | | | | | | |
| | | | ons) | 7 | | | 11 | | | | | |
| 7 | - | | | | | Ζ,Ζ | 11. | | | | | |
| 8 | | | | 8 | | | | | | | | |
| 9 | | | | 9 | | | | | | | | |
| 10 | | | fees | 10 | | | 1.0 | | | | | |
| 11 | - | | | 11 | | 2,0 | 10. | | | | | |
| 12 | | | nks, etc. (see instructions) | 12 | | | | | | | | |
| 13 | | | | 13 | | | | | | | | |
| 14 | | | | 14 | | | 52. | | | | | |
| 15 | | | | 15 | | 2,7 | 58. | | | | | |
| 16 | | | | 16 | | | | | | | | |
| 17 | Utilities | | | 17 | | 2,3 | 33. | | | | | |
| 18 | Depreciation expe | ense or dep | letion | 18 | | 2,7 | 58. | | | | | |
| 19 | Other (list) | | | 19 | | | | | | | | |
| 20 | Total expenses. A | dd lines 5 t | hrough 19 | 20 | | 15,3 | 22. | | | | | |
| 21 | | | ents) and/or 4 (royalties). I | | | | | | | | | |
| | (<i>)</i> , | | ions to find out if you mus | st | | | | | | | | |
| | | | | 21 | · · | -14,6 | 08. | | | | | |
| 22 | | | loss after limitation, if any | ', | | | | | | | | |
| | | | ns) | 22 | (– | 14,60 |)8.) | (| |)(| | |
| 23a | Total of all amoun | its reported | on line 3 for all rental prop | perties | | | 23a | | 71 | 4. | | |
| b | | - | on line 4 for all royalty pro | - | | | 23b | | | | | |
| С | Total of all amoun | its reported | on line 12 for all propertie | es | | | 23c | | | | | |
| d | Total of all amoun | its reported | on line 18 for all propertie | es | | | 23d | 2 | 2,75 | 8. | | |
| е | Total of all amoun | its reported | on line 20 for all propertie | es | | | 23e | 15 | 5,32 | 2. | | |
| 24 | Income. Add pos | itive amour | nts shown on line 21. Do n | ot inclu | de any lo | sses | | | . : | 24 | | |
| 25 | Losses. Add royal | ty losses fro | m line 21 and rental real est | ate loss | es from lin | e 22. E | nter to | tal losses hei | re 1 | 25 (| 14,6 | 608. |
| 26 | Total rental real | estate and | royalty income or (loss) | . Comb | ine lines | 24 and | 25. E | inter the resi | ult | | | |
| | | | nd line 40 on page 2 do r | | | | | | | | | |
| | | | 5. Otherwise, include this | | | | | | | 26 | -14, | ,608 |

Schedule E (Form 1040) 2023