E1040-NR Department of the Treasury-Internal Revenue Service U.S. Nonresident Alien Income Tax Return 2023 OMB No. 1545-0074

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

For the year Jar	ı. 1–D	ec. 31, 2023, or other tax year beginn	ing	, 2023,	ending	, , 2	20	See separate instructions.	
Your first name and middle initial			Last name Yo					our identifying number see instructions)	
ADITYA PU	JRI		GOSWAMI				039-2	27-3555	
Home address	(numl	per and street). If you have a P.O. box	, see ins	tructions.		-		Apt. no.	
4001 PIN	OAK	TER						321	
City, town, or p	ost of	fice. If you have a foreign address, als	so comp	lete spaces below.		State	Z	IP code	
EULESS						TX	-	76040	
Foreign country	nam	е	Foreigr	n province/state/county		Foreign p	ostal code	Э	
Filing Status	☐ Single ☐ Married filing separately (MFS) ☐ Qualifying surviving spouse (QSS) ☐ If you checked the QSS box, enter the child's name if the qualifying person is a child but not your dependent.						Esta	te Trust	
Check only one box.									
Digital Assets		ny time during 2023, did you: (a) receivrwise dispose of a digital asset (or a f					(b) sell, ex		
Dependents						(4) Che	ck the box i	f qualifies for (see inst.):	
(see instructions):		(1) First name Last name		(2) Dependent's identifying number	(3) Relationship to yo	Child	tax credit	Credit for other dependents	
		(i) Last name		jgiiio	(S) Holadonship to yo			Gependents	
If more than four									
dependents, see instructions and									
check here									
Income	1a	Total amount from Form(s) W-2, box	1 (see i	nstructions)			1a	121,934.	
Effectively	b	Household employee wages not rep	•	•					
Connected	С	Tip income not reported on line 1a (s		` '					
With U.S.	d	Medicaid waiver payments not report			ions)		1d		
Trade or	е	Taxable dependent care benefits fro	m Form	2441, line 26			1e		
Business	f	Employer-provided adoption benefit	s from F	orm 8839, line 29 .			1f		
	g	Wages from Form 8919, line 6							
Attach Form(s) W-2,	h	Other earned income (see instruction	ns) .		<u> </u>		1h		
1042-S,	i	Reserved for future use							
SSA-1042-S,	j	Reserved for future use	1j						
RRB-1042-S, and 8288-A here. Also	k	Total income exempt by a treaty from line 1(e)							
attach	z	Add lines 1a through 1h	, .	,			1z	121,934.	
Form(s) 1099-R if	2a	Tax-exempt interest 2a	ı	b Tax	able interest		2b		
tax was	За	a Qualified dividends					3b		
withheld.	4a	IRA distributions 4a	1		able amount				
If you did not	5a	Pensions and annuities 5a	1	b Tax	able amount				
get a Form W-2, see	6	Reserved for future use					_		
instructions.	7	Capital gain or (loss). Attach Schedu	•		•				
	8	Additional income from Schedule 1 (-14,723.	
	9	Add lines 1z, 2b, 3b, 4b, 5b, 7, and 8. This is your total effectively connected income						107,211.	
	10	Adjustments to income from Schedule 1 (Form 1040), line 26. These are your total adjustments to income							
	11	Subtract line 10 from line 9. This is y	-	•				107,211.	
	12	Itemized deductions (from Schedu deduction (see instructions)						13,850.	
	13a Qualified business income deduction from Form 8995 or Form 8995-A . 13a								
	b	Exemptions for estates and trusts or	nly (see i	instructions)	13b				
	С	Add lines 13a and 13b					13c		
	14							13,850.	
	15	Subtract line 14 from line 11. If zero	or less,	enter -0 This is your tax	xable income .	<u> </u>	15	93,361.	

Form 1040-NR (2023)									Page 2
Tax and	16	Tax (see instructions). Check if ar	ny from For	rm(s): 1	814 2 🗌 4	1972	3 🗌		16	15,850.
Credits	17	7 Amount from Schedule 2 (Form 1040), line 3								0.
	18	Add lines 16 and 17							18	15 , 850.
	19	Child tax credit or credit for other dependents from Schedule 8812 (Form 1040)								
	20	Amount from Schedule 3 (Form 1040), line 8								
	21	Add lines 19 and 20								
	22	Subtract line 21 from line 18. If zero or less, enter -0								15 , 850.
	23a	Tax on income not effectively co	nnected w	rith a U.S. trade	or business fror	m				
		Schedule NEC (Form 1040-NR),	line 15 .			23a				
	b	Other taxes, including self-empl	oyment ta	x, from Schedu	le 2 (Form 1040)),				
		line 21				23b				
	С	Transportation tax (see instruction	ons)			23c				
	d	Add lines 23a through 23c							23d	
	24	Add lines 22 and 23d. This is yo	ur total ta	x		., .			24	15 , 850.
Payments	25	Federal income tax withheld from	m:							
	а	Form(s) W-2				25a	2	0,709.		
	b	Form(s) 1099				25b				
	С	Other forms (see instructions)				25c				
	d	Add lines 25a through 25c							25d	20,709.
	е	Form(s) 8805							25e	
	f	Form(s) 8288-A							25f	
	g	Form(s) 1042-S							25g	
	26	2023 estimated tax payments ar				1			26	
	27	Reserved for future use								
	28	Additional child tax credit from S		,	•	28			-	
	29	Credit for amount paid with Forr				29				
	30	Reserved for future use								
	31	Amount from Schedule 3 (Form 1040), line 15								
	32								32	00.700
	33	Add lines 25d, 25e, 25f, 25g, 26							33	20,709.
Refund	34	If line 33 is more than line 24, su				•	=		34	4,859.
D	35a	Amount of line 34 you want refunded to you . If Form 8888 is attached, check here							35a	4,859.
Direct deposit? See instructions.	b	Routing number								
	d						<u> </u>			
	е	If you want your refund check m								
	26	enter it here.		0004 a atima		36	1		-	
A manuat	36 37	Amount of line 34 you want app Subtract line 33 from line 24. Th				30				
Amount You Owe	31	For details on how to pay, go to		-		9			37	
rou Owe	38	Estimated tax penalty (see instru	_	-		38	 	• •	31	
Third		u want to allow another person to				_		es. Compl	ete he	low. 🗵 No
Party	Desig	·	diocaco t	Phone		a donone		nal identifi		
Designee	name			no	,			er (PIN)	Cation	
	Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and							of my knowledge and		
_		they are true, correct, and complete. I								
Sign	Your	signature		Date	Your occupati	ion		If the	RS s	ent you an Identity
Here				· ·			I		PIN, enter it here	
				PROCUREMENT ANALYST			(see	inst.)		
	Phone		Dron and	Email address		D=1		DTIN		
Paid		rer's name	·	's signature	a. a	Date		PTIN		Check if:
Preparer		I PRIYA RAM SAGAR GUPTA		PRIYA RAM	SAGAR GUPI	'A 04/	09/2024	P02082		Self-employed
Use Only		s name GLOBAL TAXES						Phone no		78) 965-9522
	Firm's	address 245 ROONEY (CT E BF	RUNSWICK N	J 08816			Firm's El	N 8	4-3171965

SCHEDULE 1 (Form 1040)

Additional Income and Adjustments to Income

OMB No. 1545-0074

2023

Attachment
Seguence No. 01

Department of the Treasury Internal Revenue Service

ADITYA PURI GOSWAMI

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.

Attachment Sequence No. 01 Your social security number 039-27-3555

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	-14,723.
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	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		
u	Wages earned while incarcerated	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		10	-14 , 723.

Schedule 1 (Form 1040) 2023 Page **2**

Par	t II Adjustments to Income		
11	Educator expenses	. 11	
12	Certain business expenses of reservists, performing artists, and fee-basis government	nent	
	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		
15	Deductible part of self-employment tax. Attach Schedule SE		
16	Self-employed SEP, SIMPLE, and qualified plans		
17	Self-employed health insurance deduction	. 17	
18	Penalty on early withdrawal of savings		
19a	Alimony paid		a
b	Recipient's SSN		
С	Date of original divorce or separation agreement (see instructions):		
20	IRA deduction		
21	Student loan interest deduction		
22	Reserved for future use		
23	Archer MSA deduction	. 23	
24	Other adjustments:		
а	Jury duty pay (see instructions)		
b	Deductible expenses related to income reported on line 8l 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		
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		
_	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:		
	24z		
25	Total other adjustments. Add lines 24a through 24z		
26	Add lines 11 through 23 and 25. These are your adjustments to income. Enter here and		
	Form 1040, 1040-SR, or 1040-NR, line 10	. 26	

SCHEDULE NEC (Form 1040-NR)

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

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service

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

Sequence No. 7B

Name shown on Form 1040-NR Your identifying number ADITYA PURI GOSWAMI 039-27-3555 Enter **amount of income** under the appropriate rate of tax. See instructions.

	Nature of Income		(a) 100/ (b) 150/	(-) 000/	(d) Other (specify)		
	Nature of income		(a) 10%	(b) 15%	(c) 30%	%	%
1	Dividends and dividend equivalents:						
а	Dividends paid by U.S. corporations	1a					
b	Dividends paid by foreign corporations	1b					
С	Dividend equivalent payments received with respect to section 871(m) transactions	1c					
2	Interest:						
а	Mortgage	2a					
b	Paid by foreign corporations	2b					
С	Other	2c					
3	Industrial royalties (patents, trademarks, etc.)	3					
4	Motion picture or TV copyright royalties	4					
5	Other royalties (copyrights, recording, publishing, etc.)	5					
6	Real property income and natural resources royalties	6					
7	Pensions and annuities	7					
8	Social security benefits	8					
9	Capital gain from line 18 below	9					
10	Gambling—Residents of Canada only. Enter net income in column (c). If zero or less, enter -0						
а	Winnings						
b	Losses	10c					
11	Gambling—Residents of countries other than Canada. Note: Enter winnings only. Losses aren't allowed	11					
12	Other (specify):						
		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					
15	Tax on income not effectively connected with a U.S. trade or business. Add column					NR, line 23a 15	
	Capital Gains and Losses I	From	Sales or Excha	nges of Proper	ty		
losses f	nly the capital gains and from property sales or ges that are from sources he United States and not (a) Kind of property and description (if necessary, attach statement of descriptive details not shown below) (b) Date acq mm/dd/yy		(c) Date sold mm/dd/yyyy	(d) Sales price	(e) Cost or other basis	(f) LOSS If (e) is more than (d), subtract (d) from (e).	(g) GAIN If (d) is more than (e), subtract (e) from (d).
	ely connected with a U.S. ss. Do not include a gain						
or loss	on disposing of a U.S. real						
gains a	y interest; report these nd losses on Schedule D						
(Form 1	· I						
exchan	property sales or ges that are effectively						
						()	
	797, or both. 18 Capital gain. Combine columns (f) and (g) of line 17	7. Ente	er the net gain here	e and on line 9 abo	ove. If a loss, ente	r -0- · · 18	

SCHEDULE OI (Form 1040-NR)

Other Information

Attach to Form 1040-NR.

Department of the Treasury Internal Revenue Service

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

OMB No. 1545-0074

2023

Attachment
Sequence No. 7C

Name	shown on Form 1040-NR				Your identifying	number		
ADI	TYA PURI GOSWAMI				039-27-35			
Α	Of what country or countries we	re you a citizen or nationa	al during the tax y	ear? INDIA				
В	In what country did you claim residence for tax purposes during the tax year? India							
С	Have you ever applied to be a green card holder (lawful permanent resident) of the United States?							
D	Were you ever: A U.S. citizen?							
				⊠ No				
2	2. A green card holder (lawful permanent resident) of the United States?							
Е	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.							
-	immigration status on the last day of the tax year. F1							
F	Have you ever changed your visa If you answered "Yes," indicate t	a type (nonimmigrant stat the date and nature of the	tus) or U.S. immig change:	gration status?		∐ Yes	⊠ No	
G	List all dates you entered and lef	ft the United States during	g 2023. See instru	uctions.				
	Note: If you're a resident of Car							
	check the box for Canada or N				☐ Mexico			
	Date entered United States mm/dd/yy	Date departed United State mm/dd/yy	es	Date entered United State mm/dd/yy		ted Unite im/dd/yy	d States	
		,,			-	,, , ,		
Н	Give number of days (including va				_			
I	Did you file a U.S. income tax ref	turn for any prior year?.				⊠ Yes	□No	
J	Are you filing a return for a trust?					☐ Yes	⊠ No	
	If "Yes," did the trust have a U.S. Derson, or receive a contrib					☐Yes	□No	
K	Did you receive total compensat					☐ Yes	⊠ No	
	If "Yes," did you use an alternati					☐ Yes	☐ No	
L	Income Exempt From Tax—If y complete (1) through (3) below.				tax treaty with	a foreign	country,	
1	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.						t, and the	
	(a) Counti	ry	(b) Tax treaty art	(c) Number of month		ount of exe		
	_							
	(e) Total. Enter this amount on I	Form 1040-NR line 1k D	o not enter it any	where else on line 1				
2	. Were you subject to tax in a fore		-			☐ Yes	No	
	 Are you claiming treaty benefits 						⊠ No	
	If "Yes," attach a copy of the Co		-					
М	Check the applicable box if:	-	-					
1	 This is the first year you are mak with a U.S. trade or business und 	ing an election to treat in der section 871(d). See in	come from real p structions	roperty located in the Unite	ed States as eff	ectively c	onnected	
2	You have made an election in a States as effectively connected v							

SCHEDULE E (Form 1040)

Department of the Treasury

Supplemental Income and Loss

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

Attach to Form 1040, 1040-SR, 1040-NR, or 1041,

Attachment

Go to www.irs.gov/ScheduleE for instructions and the latest information. Internal Revenue Service

Sequence No. 13

OMB No. 1545-0074

Name(s) shown on return Your social security number ADITYA PURI GOSWAMI 039-27-3555 Part I Income or Loss From Rental Real Estate and Royalties **Note:** If you are in the business of renting personal property, use **Schedule C**. See instructions. If you are an individual, report farm rental income or loss from **Form 4835** on page 2, line 40. Did you make any payments in 2023 that would require you to file Form(s) 1099? See instructions Physical address of each property (street, city, state, ZIP code) 1a ROORKEE D-360 SUBHASH NAGAR UTTARAKHAND IN 247667 Α В C 1b Type of Property **Fair Rental Personal Use** For each rental real estate property listed QJV (from list below) above, report the number of fair rental and **Davs Davs** personal use days. Check the QJV box only Α Α 365 0 if you meet the requirements to file as a В В qualified joint venture. See instructions. С C Type of Property: 3 Vacation/Short-Term Rental 1 Single Family Residence 5 Land 7 Self-Rental 8 Other (describe) 2 Multi-Family Residence 4 Commercial 6 Royalties **Properties:** Α В C Income: 3 Rents received . 3 687. 4 4 Royalties received . **Expenses:** 5 5 Advertising 6 Auto and travel (see instructions) 6 7 Cleaning and maintenance . . . 7 2,141. 8 Commissions 8 9 9 Insurance . . . 10 10 Legal and other professional fees 2,552. 11 Management fees 11 12 Mortgage interest paid to banks, etc. (see instructions) 12 13 13 14 14 3,414. Repairs 2,632. 15 Supplies 15 16 16 Taxes 17 Utilities 17 2,074. 18 2,597. 18 Depreciation expense or depletion Other (list) 19 19 20 20 Total expenses. Add lines 5 through 19 15,410. 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 file Form 6198 21 -14,723.22 Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions) -14,723.) 687. Total of all amounts reported on line 3 for all rental properties 23a Total of all amounts reported on line 4 for all royalty properties 23b Total of all amounts reported on line 12 for all properties 23c 2,597. 23d Total of all amounts reported on line 18 for all properties 23e 15,410. Total of all amounts reported on line 20 for all properties 24 Income. Add positive amounts shown on line 21. Do not include any losses 24 25 Losses. Add royalty losses from line 21 and rental real estate losses from line 22. Enter total losses here 25 14,723. Total rental real estate and royalty income or (loss). Combine lines 24 and 25. Enter the result 26

26

-14,723.

here. If Parts II, III, and IV, and line 40 on page 2 do not apply to you, also enter this amount on Schedule 1 (Form 1040), line 5. Otherwise, include this amount in the total on line 41 on page 2

ADITYA PURI GOSWAMI

Health Savings Accounts (HSAs)

Department of the Treasury

Attach to Form 1040, 1040-SR, or 1040-NR. Go to www.irs.gov/Form8889 for instructions and the latest information. OMB No. 1545-0074 Attachment

Sequence No. **52**

Social security number of HSA beneficiary. If both spouses have HSAs, see instructions.

039-27-3555

internal nevertue Service		
Name(s) shown on Form 10	40, 1040-SR, or 1040-NR	

Befo	re you begin: Complete Form 8853, Archer MSAs and Long-Term Care Insurance Contracts, if	requ	ired.
Part	HSA Contributions and Deduction. See the instructions before completing this part. If y and both you and your spouse each have separate HSAs, complete a separate Part I for		
1	Check the box to indicate your coverage under a high-deductible health plan (HDHP) during 2023. See instructions	X Se	elf-only 🗌 Family
2	HSA contributions you made for 2023 (or those made on your behalf), including those made by the unextended due date of your tax return that were for 2023. Do not include employer contributions, contributions through a cafeteria plan, or rollovers. See instructions	2	0.
3	If you were under age 55 at the end of 2023 and, on the first day of every month during 2023, you were, or were considered, an eligible individual with the same coverage, enter \$3,850 (\$7,750 for family coverage). All others , see the instructions for the amount to enter	3	3 , 850.
4	Enter the amount you and your employer contributed to your Archer MSAs for 2023 from Form 8853, lines 1 and 2. If you or your spouse had family coverage under an HDHP at any time during 2023, also include any amount contributed to your spouse's Archer MSAs	4	0.
5	Subtract line 4 from line 3. If zero or less, enter -0	5	3,850.
6	Enter the amount from line 5. But if you and your spouse each have separate HSAs and had family		,
	coverage under an HDHP at any time during 2023, see the instructions for the amount to enter	6	3,850.
7	If you were age 55 or older at the end of 2023, married, and you or your spouse had family coverage under an HDHP at any time during 2023, enter your additional contribution amount. See instructions.	7	0.
8	Add lines 6 and 7	8	3 , 850.
9	Employer contributions made to your HSAs for 2023		
10	Qualified HSA funding distributions		
11	Add lines 9 and 10	11	100.
12	Subtract line 11 from line 8. If zero or less, enter -0	12	3 , 750.
13	HSA deduction. Enter the smaller of line 2 or line 12 here and on Schedule 1 (Form 1040), Part II, line 13	13	0.
	Caution: If line 2 is more than line 13, you may have to pay an additional tax. See instructions.		
Part	a separate Part II for each spouse.	rate l	HSAs, complete
14a	Total distributions you received in 2023 from all HSAs (see instructions)	14a	
b	Distributions included on line 14a that you rolled over to another HSA. Also include any excess contributions (and the earnings on those excess contributions) included on line 14a that were withdrawn by the due date of your return. See instructions	14b	
С	Subtract line 14b from line 14a	14c	
15	Qualified medical expenses paid using HSA distributions (see instructions)	15	
16	Taxable HSA distributions. Subtract line 15 from line 14c. If zero or less, enter -0 Also, include this amount in the total on Schedule 1 (Form 1040), Part I, line 8f	16	
17a	If any of the distributions included on line 16 meet any of the Exceptions to the Additional 20% Tax (see instructions), check here		
b	Additional 20% tax (see instructions). Enter 20% (0.20) of the distributions included on line 16 that are subject to the additional 20% tax. Also, include this amount in the total on Schedule 2 (Form 1040), Part II, line 17c	17b	
Part	Income and Additional Tax for Failure To Maintain HDHP Coverage. See the instructi completing this part. If you are filing jointly and both you and your spouse each have sep complete a separate Part III for each spouse.		
18	Last-month rule	18	
19	Qualified HSA funding distribution	19	
20	Total income. Add lines 18 and 19. Include this amount on Schedule 1 (Form 1040), Part I, line 8f .	20	
21	Additional tax. Multiply line 20 by 10% (0.10). Include this amount in the total on Schedule 2 (Form		
	1040). Part II. line 17d	21	