Form **8879**

(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

Social security number SIDD	Internal Revenue Service Go to www.irs.gov/Form8879 for the latest information	on.	
Part II Tax Return Information — Tax Year Ending December 31, 2023 (Enter year you are authorizing.) Finer 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	Submission Identification Number (SID)		
Spouse's scribe Spouse's s	Taxpayer's name	Social security	y number
Part II Tax Return Information — Tax Year Ending December 31, 2023 (Enter year you are authorizing.) 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	PRATIK RAJENDRA KHARE	822-82-	-0843
Enter whole dollars only on lines 1 through 5. Note: Form 1040-SS files use line 4 only. Leave lines 1, 2, 3, and 5 blank. 1	Spouse's name	Spouse's soci	al security number
Enter whole dollars only on lines 1 through 5. Note: Form 1040-SS files use line 4 only. Leave lines 1, 2, 3, and 5 blank. 1	Part I Tax Return Information — Tax Year Ending December 31. 2023	 (Enter vear vou ar	re authorizing.)
Note: Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank. 1 Adjusted gross income 2 Total tax 3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099 3 20, 090. 4 Amount you want refunded to you 4 7, 841. 5 Amount you want refunded to you 1 Taxpayer Declaration and Signature Authorization (Be sure you get and keep a copy of your return) 1 Under penalties of penjur, I declare that I have examined a copy of the income tax return (original or amended) I am now authorizing and the best of the penglus or amended) I am now authorizing. I consent to allow my intermediate service provider, transmitter, or electronic return to return (original or amended) I am now authorizing. I consent to allow my intermediate service provider, transmitter, or electronic return to return (original or amended) I am now authorizing. I consent to allow my intermediate service provider, transmitter, or electronic return to return (original or amended) I am now authorizing. I consent to allow my intermediate service provider, transmitter, or electronic return to return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reson for rejection of the transmission, (b) the consent of any delay in processing the return or returnd, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to Intermit an ACH electronic funds withdrawal (cinez debit) and intermit to the IRS and intertition account. This authorization is to receive from the incore and effect until I notify the U.S. Treasury and intertition and intertition account. This authorization is to receive from the incore and effect until 1 notify the U.S. Treasury financial institution to obtain the entry to inscort intermited the authorization. To receive (cancel) as a fundamental distribution and authorization. To receive (cancel) as a fundamental distribution and authorization. To receive (cancel) as a fundamental distribution and the payment of the payment of the payment of the payme		(
1 Adjusted gross income 2 Total tax 3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099 3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099 4 Amount you want refunded to you 5 Amount you want refunded to you 6 Amount you want refunded to you 7 Ag41. 5 Amount you want refunded to you 7 Ag41. 8 Amount you want refunded to you 8 Amount you want refunded to you 9 Amount you want refunded to you 9 Amount you want refunded to make you get and keep a copy of your return) 1 Under penalties of perjury, I declare that I have seamined 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, and to the best of my return to the IRS (a) an acknowledgement of receipt or reason for rejection of the transmisson, (b) the reason or 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 or any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury Financial Agent to terminate the authorization in the processing of the			
3 20,090. 4 Amount you want refunded to you			1 91,085.
3 20,090. 4 Amount you want refunded to you	2 Total tax		2 12,249.
Amount you want refunded to you Taxpayer Declaration and Signature Authorization (Be sure you get and keep a copy of your return) Under penalties of penjury, 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 your knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above are mounts from the income tax return (original or amended) I am now authorizing, and to the best of or any delay in processing the return or refund, and (o) the date of any refund. It applicable, I authorize the U.S. Treadard Financial Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for any delay in processing the return or refund, and (o) the date of any refund. It applicable, I authorize the U.S. Treadard Financial Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for any delay in processing the refund that the 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 18-88-835-4837. 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. The control of the payment is the electronic payment of the payment is extended to the payment is extended to the payment it will be control of the payment is the electronic payment of the payment is extended to the payment it will be control of the payment is extended to the payment it will be control of the payment is extended to the payment it will be control of the p	3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099		
Part II	4 Amount you want refunded to you		
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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 original or amended.) But the ransmission, (b) the reason for receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or return, and (c) the date of any return, 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 pyment of my return and/or a payment of estimated tax, and the financial institution account indicated in the tax preparation software for pyment of my return and/or a payment of estimated tax, and the financial institution account indicated in the tax preparation software for pyment of the standard tax, and the financial institution account indicated in the tax preparation software for the pyment of the tax preparation in the pyment of the tax preparation software for the pyment of the tax preparation software for the pyment of the tax preparation software for the pyment of the tax preparation in the pyment of the tax preparation software for the pyment of the tax preparation of the tax preparation software for the pyment of the tax preparation software for the pyment of the tax preparation pyment of the tax preparation in the tax preparation software for the pyment of the tax preparation of the tax preparation software for the pyment of the tax preparation in the pyment of the tax preparation of the tax preparation of the tax preparation of the pyment of the tax preparation of the tax preparation of the pyment of t	Part II Taxpayer Declaration and Signature Authorization (Be sure you get	and keep a copy	y of your return)
I authorize GLOBAL TAXES LLC ERG 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 PIN: check one box only □ Lauthorize □ Lau	to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorized Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution according payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial in authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to tepayment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellating business days prior to the payment (settlement) date. I also authorize the financial institutions involved taxes to receive confidential information necessary to answer inquiries and resolve issues related to personal identification number (PIN) below is my signature for the income tax return (original or amend	for rejection of the tra- e the U.S. Treasury ar- unt indicated in the ta- astitution to debit the rminate the authoriza- on requests must be in the processing of the payment. I furth	ansmission, (b) the reason and its designated Financial ax preparation software for entry to this account. This titon. To revoke (cancel) a received no later than 2 the electronic payment of the racknowledge that the
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I authorize	Your signature ▶ Dat	re▶	
I authorize	Spouse's PIN: check one box only		
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Part III Certification and Authentication — Practitioner PIN Method Only ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN. Don't enter all zeros 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 ▶ ERO Must Retain This Form — See Instructions	if you are entering your own PIN and your return is filed using the Practitioner PIN		9
Part III Certification and Authentication — Practitioner PIN Method Only ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN. Don't enter all zeros 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 ▶ ERO Must Retain This Form — See Instructions	Spouse's signature ▶ Dat	re ▶	
ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN. 2 2 2 4 9 6 0 8 2 7 1 Don't enter all zeros 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 ERO Must Retain This Form — See Instructions	Practitioner PIN Method Returns Only—continue k	oelow	
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ERO Must Retain This Form — See Instructions	authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am	n submitting this retu	rn in accordance with the
	ERO's signature ▶ Dat	e >	

E 1040-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 Jan	ı. 1–D	ec. 31, 2023, or other tax year beginnir	ng	, 202	23, end	ding	,	20	-	See separate instructions.
Your first name	and r	niddle initial	Last na	ame				Your i	dent	tifying number
								(see in	stru	ctions)
PRATIK RA	JEN	DRA	KHAR	E				822	-82	2-0843
Home address (numk	per and street). If you have a P.O. box,	see ins	tructions.						Apt. no.
2201 4TH	AVE									219
City, town, or po	ost of	fice. If you have a foreign address, also	comp	lete spaces below.			State		ZIF	ode code
SEATTLE							WA		98	3121
Foreign country	nam	e	Foreig	n province/state/count	ty		Foreign	postal c	ode	
Filing	×	Single Married filing separ	ataly (N	AES) Dualit	fyina s	surviving spouse ((22O		state	e 🔲 Trust
Status		ou checked the QSS box, enter the ch	• .	,	, ,	0 , ,	,		Sidio	, Indst
Check only	" '	ou officiated the QCC Box, efficient the of		arrio ii trio quamyirig pi	010011	io a orma bat riot	your dop	CHOCHE.		
one box.									-	
Digital Assets		ny time during 2023, did you: (a) receiv								
		rwise dispose of a digital asset (or a fir	ianciai	interest in a digital ass	Sei): (See instructions.)				☐ Yes ☒ No
Dependents	1			(2) Dependent's			1			qualifies for (see inst.): Credit for other
(see instructions):		(1) First name Last name		identifying number	(3) Relationship to yo	u Chi	ild tax cre	dit	dependents
If more than four dependents, see										
instructions and										
check here										
Income	1a	Total amount from Form(s) W-2, box	1 (see i	nstructions)				. 1	а	101,742.
Effectively	b	Household employee wages not repo	rted or	Form(s) W-2				. 1	b	
Connected	С	Tip income not reported on line 1a (se	e instr	uctions)				. 10	c	
With U.S.	d	Medicaid waiver payments not report	. 10	d						
Trade or	е	Taxable dependent care benefits from		•				. 10	Э	
Business	f	Employer-provided adoption benefits		•				. 1	f	
Attach	g	Wages from Form 8919, line 6						. 19		
Form(s) W-2,	h	Other earned income (see instructions	,					. 1	h	
1042-S,	i	Reserved for future use				. 1i				
SSA-1042-S, RRB-1042-S,	J	Reserved for future use						. 1	J	
and 8288-A [°]	k	Total income exempt by a treaty from			R), item					
here. Also attach		line 1(e)			•	. 1k				101 740
Form(s)	Z	Add lines 1a through 1h			Tavah			. 1:		101,742.
1099-R if	2a 3a	Tax-exempt interest 2a Qualified dividends 3a						. 2	_	3.
tax was withheld.	4a	Qualified dividends 3a IRA distributions 4a				ıry dividends le amount		. 3l		131.
If you did not	1 а	Pensions and annuities 5a				le amount .				
get a Form	6	Reserved for future use								
W-2, see	7	Capital gain or (loss). Attach Schedule								755.
instructions.	8	Additional income from Schedule 1 (F	•			•				-11,546.
	9	Add lines 1z, 2b, 3b, 4b, 5b, 7, and 8.							_	91,085.
	10	Adjustments to income from Schedu		•						,
	. •	income	,			•			0	
	11	Subtract line 10 from line 9. This is yo	ur adj u	sted gross income				. 1	1	91,085.
	12	Itemized deductions (from Schedule	A (Fo	rm 1040-NR)) or, for a	certair	n residents of Indi	a, standa	ard	\top	
		deduction (see instructions)							2	13,850.
	13a	Qualified business income deduction	from F	orm 8995 or Form 899	95-A	. 13a				
	b	Exemptions for estates and trusts only	y (see i	nstructions)		. 13b				
	С	Add lines 13a and 13b						. 13	c	
	14								4	13 , 850.
	15	Subtract line 14 from line 11. If zero of	r less,	enter -0 This is your	taxab	ole income		. 1	5	77 , 235.

Form 1040-NR (2023)									Page ∠
Tax and	16	Tax (see instructions). Check if an	y from For	m(s): 1 88	314 2 497	2 ;	3 🗌		16	12,249.
Credits	17	Amount from Schedule 2 (Form	1040), line	3					17	0.
	18	Add lines 16 and 17							18	12,249.
	19	Child tax credit or credit for other	r depende	ents from Sched	ule 8812 (Form 10-	40) .			19	
	20	Amount from Schedule 3 (Form	20							
	21	Add lines 19 and 20							21	
	22	Subtract line 21 from line 18. If z	ero or less	s, enter -0					22	12,249.
	23a									
	b	Other taxes, including self-emplo								
		line 21	•		,	23b				
	С	Transportation tax (see instruction				23c				
	d	Add lines 23a through 23c							23d	
	24	Add lines 22 and 23d. This is you							24	12,249.
Payments	25	Federal income tax withheld from								
. ayınıonto	а	Form(s) W-2				25a	19	9,902.		
	b	Form(s) 1099				25b		188.		
	С	Other forms (see instructions) .				25c				
	d	Add lines 25a through 25c							25d	20,090.
	e	Form(s) 8805							25e	
	f	Form(s) 8288-A							25f	
	g g	Form(s) 1042-S							25g	
	26	2023 estimated tax payments ar							26	
	27	Reserved for future use				27				
	28	Additional child tax credit from S				28				
	29	Credit for amount paid with Forn		•		29			-	
	30	Reserved for future use					1			
	31	Amount from Schedule 3 (Form								
	32	Add lines 28, 29, and 31. These	32							
	33	Add lines 25d, 25e, 25f, 25g, 26,	-						33	20,090.
Refund	34	If line 33 is more than line 24, su							34	7,841.
neiulia	35a	Amount of line 34 you want refu	35a	7,841.						
Direct deposit?	b	Routing number 0 4 3 0	. Ш Savings	33a	7,041.					
See instructions.		Account number 1 0 9 2								
	d									
	е	If you want your refund check menter it here.			e the United State		snown on	page 1,		
	36	Amount of line 34 you want app				36				
Amount	37	Subtract line 33 from line 24. Thi		-						
You Owe		For details on how to pay, go to	www.irs.g	ov/Payments or	see instructions .				37	
	38	Estimated tax penalty (see instru	ctions) .			38				
Third	Do yo	u want to allow another person to	discuss tl	his return with th	ne IRS? See instruc	ctions	□ Ye	es. Compl	ete bel	ow. 🛛 No
Party	Desig	nee's		Phone			Persor	nal identifi	cation	
Designee	name									
		penalties of perjury, I declare that I have they are true correct, and complete.								
Sign	belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of									
-	Your	signature		Date	Your occupation					ent you an Identity PIN, enter it here
Here					CATEGORY M	ANAG	FR		inst.)	in, cittor it ficio
	Phone	e no.		Email address				, (556	,	
Daid		rer's name	Preparer'	s signature		Date		PTIN		Check if:
Paid		PRIYA RAM SAGAR GUPTA TALLAM		•	R GUPTA TALLAM		5/2024	P02082	703	Self-employed
Preparer		s name GLOBAL TAXES		PRIYA RAM SAGAR GUPTA TALLAM 03/05/2024				Phone n		78) 965-9522
Use Only		0202112 1111120		TINGMICTOR N	T 00016			Firm's El		4-3171965
	Firm's address 245 ROONEY CT E BRUNSWICK NJ 08816 Firm's EIN 84-3171965							1 01/1/00		

BAA

SCHEDULE 1 (Form 1040)

Additional Income and Adjustments to Income

OMB No. 1545-0074

2023
Attachment
Sequence No. 01

Department of the Treasury Internal Revenue Service

PRATIK RAJENDRA KHARE

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 822-82-0843

Par	t 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	ich Schedule E .	5	-11,546.
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	-11,546.

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-				
	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	, , , , , , , , , , , , , , , , , , ,	24a			
b	Deductible expenses related to income reported on line 8l from the				
		24b			
С	Nontaxable amount of the value of Olympic and Paralympic medals	04			
_1	• • • • • • • • • • • • • • • • • • • •	24c		_	
d		24d		-	
е	Repayment of supplemental unemployment benefits under the Trade Act of 1974	24e			
f		24f			
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)	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				
	-	24i			
j		24j			
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form				
		24k			
Z	Other adjustments. List type and amount:	24z			
				-	
25	Total other adjustments. Add lines 24a through 24z			25	
26	Add lines 11 through 23 and 25. These are your adjustments to income .	. Enter	nere and on		
	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

Attachment

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service

Name shown on Form 1040-NR

connected with a U.S. business

on Schedule D (Form 1040).

Form 4797, or both.

Attach to Form 1040-NR. Go to www.irs.gov/Form1040NR for instructions and the latest information. Sequence No. 7B

Your identifying number

PRATIK RAJENDRA KHARE 822-82-0843 Enter **amount of income** under the appropriate rate of tax. See instructions. (d) Other (specify) Nature of Income (a) 10% **(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 2b 2c C 3 4 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 _____ 10c Losses Gambling-Residents of countries other than Canada. 11 Other (specify): 12 12 13 Add lines 1a through 12 in columns (a) through (d) 13 14 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 Enter only the capital gains and 16 (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), mm/dd/yyyy mm/dd/yyyy other basis 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

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-

17 Add columns (f) and (g) of line 16

18

SCHEDULE OI (Form 1040-NR)

Other Information

Attach to Form 1040-NR.

Department of the Treasury Internal Revenue Service

OMB No. 1545-0074 Attachment Sequence No. **7C**

Go to www.irs.gov/Form1040NR for instructions and the latest information. Answer all questions. Name shown on Form 1040-NR Your identifying number

PR.	ATIK RAJENDRA KHARE			822-82-0	843						
Α	Of what country or countries were you a citizen or national	al during the tax year?	'INDIA								
В	In what country did you claim residence for tax purposes during the tax year? United States										
С	Have you ever applied to be a green card holder (lawful p	☐ Yes	⊠ No								
D	Were you ever:										
	1. A U.S. citizen?				☐ Yes	⊠ No					
:	2. A green card holder (lawful permanent resident) of the Un	ited States?			☐ Yes	⊠ No					
	If you answer "Yes" to (1) or (2), see Pub. 519, chapter 4,	for expatriation rules	that apply to you.								
Ε	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 type (nonimmigrant status) or U.S. immigration status?										
-	Have you ever changed your visa type (nonimmigrant status) or U.S. immigration status?										
G	List all dates you entered and left the United States during 2023. See instructions.										
	Note: If you're a resident of Canada or Mexico AND cor	~		ent intervals,							
	check the box for Canada or Mexico and skip to item h	1	\square Canada	☐ Mexico							
	Date entered United States Date departed United State mm/dd/yy mm/dd/yy	es Da	ate entered United States mm/dd/yy		arted Unite mm/dd/yy	d States					
Н	Give number of days (including vacation, nonworkdays, and										
	2021 , 2022	, and 20	23 365	··	S						
1	Did you file a U.S. income tax return for any prior year?				⊠ Yes	∐ No					
	If "Yes," give the latest year and form number you filed: 1040NR Are you filing a return for a trust?										
J	Are you filing a return for a trust?				☐ Yes	⊠ No					
	U.S. person, or receive a contribution from a U.S. person				Yes	□No					
K	Did you receive total compensation of \$250,000 or more				☐ Yes	⊠ No					
•	If "Yes," did you use an alternative method to determine				☐ Yes	□ No					
L	Income Exempt From Tax—If you are claiming exempti		-								
	complete (1) through (3) below. See Pub. 901 for more int					,					
	1. Enter the name of the country, the applicable tax treaty art	icle, the number of mo	onths in prior years you	claimed the tre	eaty benefi	t, and the					
	amount of exempt income in the columns below. Attach Fo	orm 8833 if required. S	See instructions.								
	(a) Country	(b) Tax treaty article	(c) Number of month		ount of ex						
			claimed in prior tax year	ars income i	in current to	ax year					
	(e) Total. Enter this amount on Form 1040-NR, line 1k. D	o not enter it anvwhei	re else on line 1								
:	2. Were you subject to tax in a foreign country on any of the	-			☐ Yes	□ No					
	3. Are you claiming treaty benefits pursuant to a Competent					⊠ No					
	If "Yes," attach a copy of the Competent Authority detern										
М	Check the applicable box if:	•									
	1. This is the first year you are making an election to treat in										
	with a U.S. trade or business under section 871(d). See in					_					
2	You have made an election in a previous year that has States as effectively connected with a U.S. trade or busin										

SCHEDULE E (Form 1040)

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.

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service Name(s) shown on return

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

Attachment Sequence No. 13

Your social security number

PRAT	'IK RAJENDRA KHARE						822-	82-0843	3	
Part										
	Note: If you are in the business of renting personal proper rental income or loss from Form 4835 on page 2, line 40.	ty, use	Schedule	C . See	instru	ctions. If you ar	e an ind	dividual, rep	ort farm	
Α [Did you make any payments in 2023 that would require you	to file	Form(s) 1	099? S	See ins	structions		. \(\tau\)	es X No	
	f "Yes," did you or will you file required Form(s) 1099? .									
1a	Physical address of each property (street, city, state, ZIF									_
			<u> </u>	T A C A D	TNI	401004				_
A B	NEAR LAL CHAKKI OPP RANJAN BLDG PLOT 4	12/,	ULHASI	IAGAR	IN	421004				
C										
	Type of Property 2 For each rental real estate prope	rtv liot	tod		Ec	air Rental	Doros	nal Use		
10	(from list below) above, report the number of fair				Гс	Days		ays	QJV	
Α	personal use days. Check the Qu	JV box	c only	Α		365		0		
В	if you meet the requirements to f			В						
С	qualified joint venture. See instru	ictions	5.	С						_
Туре	of Property:					'				
1	Single Family Residence 3 Vacation/Short-Term Ren	tal	5 Land	l	7	Self-Rental				
2	Multi-Family Residence 4 Commercial		6 Roya	alties	8	Other (descri	be)			
						Propertie				
Incon	יאר			Α		В	, J.		С	_
3	Rents received	3			57.					
4	Royalties received	4			•					_
Exper										_
5	Advertising	5								
6	Auto and travel (see instructions)	6								
7	Cleaning and maintenance	7		2,4	15.					
8	Commissions	8								
9	Insurance	9								
10	Legal and other professional fees	10								
11	Management fees	11		1,8	57.					
12	Mortgage interest paid to banks, etc. (see instructions)	12								
13	Other interest	13								
14	Repairs	14			68.					
15	Supplies	15		3,4	15.					
16	Taxes	16								
17	Utilities	17		1,7	48.					
18	Depreciation expense or depletion	18								
19	Other (list)	19								
20	Total expenses. Add lines 5 through 19	20		12,4	03.					
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		-11 , 5	46					
22	Deductible rental real estate loss after limitation, if any,	21		11,5	10.					
22	on Form 8582 (see instructions)	22	(-	11,54	16)	()(١
23a	Total of all amounts reported on line 3 for all rental prope			± + , 0 4	23a	\	857.	/\)
b	Total of all amounts reported on line 4 for all royalty prop			•	23b		007.	-		
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					
e	Total of all amounts reported on line 20 for all properties				23e	12.	403.			
24	Income. Add positive amounts shown on line 21. Do not	inclu	de anv los	sses			24			
25	Losses. Add royalty losses from line 21 and rental real estate		•		nter to	tal losses here			11,546.	
26	Total rental real estate and royalty income or (loss).									
-	here. If Parts II, III, and IV, and line 40 on page 2 do no									
	Schedule 1 (Form 1040), line 5. Otherwise, include this ar						26		-11.546	

Department of the Treasury

Internal Revenue Service

Passive Activity Loss Limitations

See separate instructions.

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

Go to www.irs.gov/Form8582 for instructions and the latest information.

OMB No. 1545-1008 Attachment Sequence No. 858

Name(s) shown on return Identifying number PRATIK RAJENDRA KHARE 822-82-0843 Part I 2023 Passive Activity Loss Caution: Complete Parts IV and V before completing Part I. Rental Real Estate Activities With Active Participation (For the definition of active participation, see Special Allowance for Rental Real Estate Activities in the instructions.) 1a Activities with net income (enter the amount from Part IV, column (a)) . . . **b** Activities with net loss (enter the amount from Part IV, column (b)) 1b 11,546. c Prior years' unallowed losses (enter the amount from Part IV, column (c)) . . -11**,**546<u>.</u> 1d **All Other Passive Activities** 2a Activities with net income (enter the amount from Part V, column (a)) . . . 2a **b** Activities with net loss (enter the amount from Part V, column (b)) 2b c Prior years' unallowed losses (enter the amount from Part V, column (c)) . 2c (2d Combine lines 1d and 2d and subtract any prior year unallowed CRD. See instructions. If this line is zero or more, stop here and include this form with your return; all losses are allowed, including any prior year unallowed losses entered on line 1c or 2c. Report the losses on the forms and schedules 3 -11,546. If line 3 is a loss and: • Line 1d is a loss, go to Part II. • Line 2d is a loss (and line 1d is zero or more), skip Part II and go to line 10. Caution: If your filing status is married filing separately and you lived with your spouse at any time during the year, do not complete Part II. Instead, go to line 10. Special Allowance for Rental Real Estate Activities With Active Participation Part II Note: Enter all numbers in Part II as positive amounts. See instructions for an example. Enter the **smaller** of the loss on line 1d or the loss on line 3 4 11,546. 5 Enter \$150,000. If married filing separately, see instructions 150,000. 6 Enter modified adjusted gross income, but not less than zero. See instructions 102,631. Note: If line 6 is greater than or equal to line 5, skip lines 7 and 8 and enter -0on line 9. Otherwise, go to line 7. 7 47,369. Multiply line 7 by 50% (0.50). **Do not** enter more than \$25,000. If married filing separately, see instructions 8 23,685. Enter the **smaller** of line 4 or line 8. If line 3 includes any CRD, see instructions 11,546. **Total Losses Allowed** Part III 10 10 0. Total losses allowed from all passive activities for 2023. Add lines 9 and 10. See instructions to find 11,546. 11 Complete This Part Before Part I, Lines 1a, 1b, and 1c. See instructions. Part IV Overall gain or loss Current year Prior years Name of activity (a) Net income (b) Net loss (c) Unallowed (d) Gain (e) Loss (line 1a) loss (line 1c) (line 1b) 0. 11,546. 11,546. NEAR LAL CHAKKI

0.

11,546.

Total. Enter on Part I, lines 1a, 1b, and 1c

Form 8582 (2023) Page **2**

Part V	Complete This Part Befor	e P	art I, Lines 2	a, 2b,	and 2c. S	ee instru	ctions.					
	Name of activity	Current yea		ent year Prior ye			vears Overa			all gain or loss		
Name of activity		(a) Net income (line 2a)		(b) Net loss (line 2b)		(c) Unallowed loss (line 2c)		(d) Gain		(e) Loss		
		_										
		-										
Total. Enter o	on Part I, lines 2a, 2b, and 2c											
Part VI	Use This Part if an Amour	nt Is	Shown on F	Part II.	Line 9. S	ee instru	ctions.					
	Name of activity	Form or schedule) Loss	(b) R		(c) Special allowance		(d) Subtract column (c) from column (a).		
NEAR LAL	CHAKKI		E Ln 22		11,546.	1.0000	00000	11,54	6.	0.		
		-										
Total					11,546.	1.0	0	11,54	6.	0.		
Part VII	Allocation of Unallowed L	.oss	ses. See instr					, -				
	Name of activity		Form or sche and line nun to be reporte (see instruct	nber ed on	(a) l	(a) Loss		b) Ratio	(с) Unallowed loss		
Total								1.00				
Part VIII	Allowed Losses. See instr								<u> </u>			
	Name of activity		Form or sche and line nun to be reporte (see instruct	nber ed on	(a) Loss		(b) Unallowed		(c) Allowed loss		
			l									
Total												