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Rental Report for Anish Patel

Identity	From Application	From Equifax
Name:	Anish Patel	ANISH PATEL
SSN:	374-19-****	374-19-****
Birth Date:	12/**/1995	12/**/1995

Addresses	From Application	From Equifax
	445 W 35 St, 7N New York, NY 10001 - US	44413 MIDWAY DR. NOVI, MI 48375 (Applicant) Reported 6/2024

Employment	From Application	From Equifax
Applicant:	Investment Banking Leerink Partners $225,000.00/Yr. Total annual Income: $225,000.00	

Criminal and Other Public Records				
Requested For	**Location Searched**	**Period Searched**	**Requested**	**Returned**
Anish Patel	Multistate Search	7/2/2017 - 7/2/2024	7/2/2024	7/2/2024
Results				
No Records Found				

National Sex Offender Registry History		
Requested For	**Date Requested**	**Date Returned**
Anish Patel	7/2/2024	7/2/2024
Results		
No Records Found		

Restricted Person Search

Requested For	Requested	Returned
Anish Patel	7/2/2024	7/2/2024

Results
No Records Found

Risk Models

From RealPage

Risk Model Name	Score	Score Factors
RealPage AI Score (Applicant)	805	Tradeline scoring Debt-to-income ratio Credit Score Rental Payment History

Description
RealPage AI Score uses machine-learning and data patterns in credit score, debt/liability types, trade lines, rental payment history, and renter behavior to achieve reduced bad debt. The RealPage AI Score range is between 1 and 1000 (the higher the score, the less risky the consumer).

From Equifax

Risk Model Name	Score	Score Factors
Credit Score (Applicant)	756	The date that you opened your oldest account is too recent Lack of sufficient credit history Lack of sufficient relevant real estate account information The total of all balances on your open accounts is too high

Description
This credit score is a widely used risk model that uses credit report data to predict the likelihood of default. The credit score range is between 300 and 850 (the higher the score, the less risky the consumer).

Credit Accounts

From Equifax

Account Name	Opened	Last Active	30-59	60-89	90+	Past Due	Balance
DISCOVER BANK (Applicant)	7/2019	5/2024					$2,765.00

Monthly Payment	High Credit	Type	Comments
$56.00	$2,765.00	REVOLVING	Rate/Status 1: Pays account as agreed

Payment History

6/24	4/24	2/24	12/23	10/23	8/23	6/23	4/23	2/23	12/22	10/22	8/22
0	0	0	0	0	0	0	0	0	0	0	0
0	0	0	0	0	0	0	0	0	0	0	0
0	0	0	0	0	0	0	0	0	0	0	0

Account Name	Opened	Last Active	30-59	60-89	90+	Past Due	Balance
FMC-OMAHA SERVICE CT (Applicant)	3/2022	5/2022					$0.00

Monthly Payment	High Credit	Type	Comments
	$14,234.00	INSTALLMENT	FIXED RATE Rate/Status 1: Pays account as agreed

Payment History

7/22	5/22
0	0
0	0
0	0
0	0

Account Name	Opened	Last Active	30-59	60-89	90+	Past Due	Balance
JPMCB CARD SERVICES (Joint)	3/2021	6/2021					$0.00

Monthly Payment	High Credit	Type	Comments
	$9,677.00	REVOLVING	Rate/Status 1: Pays account as agreed

Payment History

6/24	4/24	2/24	12/23	10/23	8/23	6/23	4/23	2/23	12/22	10/22	8/22
0	0	0	0	0	0	0	0	0	0	0	0
0	0	0	0	0	0	0	0	0	0	0	0
0	0	0	0	0	0	0	0	0	0	0	0

Account Name	Opened	Last Active	30-59	60-89	90+	Past Due	Balance
ALLY FINANCIAL (Applicant)	12/2019	2/2022					$0.00
	Monthly Payment	**High Credit**	**Type**	**Comments**			
		$8,772.00	INSTALLMENT	FIXED RATE Rate/Status 1: Pays account as agreed			

Payment History

0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
4/ 22		2/ 22		12/ 21		10/ 21		8/ 21		6/ 21		4/ 21		2/ 21		12/ 20		10/ 20		8/ 20		6/ 20	

Account Name	Opened	Last Active	30-59	60-89	90+	Past Due	Balance
CAPITAL ONE (Applicant)	7/2020	10/2021					$0.00
	Monthly Payment	**High Credit**	**Type**	**Comments**			
		$393.00	REVOLVING	ACCOUNT CLOSED BY CREDIT GRANTOR Rate/Status 1: Pays account as agreed			

Payment History

0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
3/ 24		1/ 24		11/ 23		9/ 23		7/ 23		5/ 23		3/ 23		1/ 23		11/ 22		9/ 22		7/ 22		5/ 22	

Account Name	Opened	Last Active	30-59	60-89	90+	Past Due	Balance
CAPITAL ONE (Applicant)	6/2022						$0.00
	Monthly Payment	**High Credit**	**Type**	**Comments**			
		$0.00	REVOLVING	Rate/Status 1: Pays account as agreed			

Payment History

0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
6/ 24		4/ 24		2/ 24		12/ 23		10/ 23		8/ 23		6/ 23		4/ 23		2/ 23		12/ 22		10/ 22		8/ 22	

Account Name	Opened	Last Active	30-59	60-89	90+	Past Due	Balance
ELAN FINANCIAL SERVI (Applicant)	7/2020						$0.00
	Monthly Payment	**High Credit**	**Type**	**Comments**			
		$0.00	REVOLVING	Rate/Status 1: Pays account as agreed			

Payment History

0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
5/ 24		3/ 24		1/ 24		11/ 23		9/ 23		7/ 23		5/ 23		3/ 23		1/ 23		11/ 22		9/ 22		7/ 22	

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Rental Report for Maxwell G. Snider

Identity	From Application	From Equifax
Name:	Maxwell G. Snider	MAXWELL G. SNIDER
SSN:	233-45-****	233-45-****
Birth Date:	8/**/1997	8/**/1997

Addresses	From Application	From Equifax
	2131 Lawrence Street Denver, CO 80205 - US	1521 CASTLE CT. MORGANTOWN, WV 26508 (Applicant) Reported 7/2024 2131 LAWRENCE ST. 605 DENVER, CO 80205 (Applicant) Reported 6/2024 415 SOUTH ST. WALTHAM, MA 02453 (Applicant) Reported 11/2018

Employment	From Application	From Equifax
Applicant:	Private Equity Associate Partners Group $173,000.00/Yr. Total annual Income: $173,000.00	

Criminal and Other Public Records				
Requested For	**Location Searched**	**Period Searched**	**Requested**	**Returned**
Maxwell G. Snider	Multistate Search	7/2/2017 - 7/2/2024	7/2/2024	7/2/2024
Results *No Records Found*				

National Sex Offender Registry History

Requested For	Date Requested	Date Returned
Maxwell G. Snider	7/2/2024	7/2/2024

Results
No Records Found

Restricted Person Search

Requested For	Requested	Returned
Maxwell G. Snider	7/2/2024	7/2/2024

Results
No Records Found

Risk Models

From RealPage

Risk Model Name	Score	Score Factors
RealPage AI Score (Applicant)	816	Tradeline scoring Debt-to-income ratio Credit Score Rental Payment History

Description
RealPage AI Score uses machine-learning and data patterns in credit score, debt/liability types, trade lines, rental payment history, and renter behavior to achieve reduced bad debt. The RealPage AI Score range is between 1 and 1000 (the higher the score, the less risky the consumer).

From Equifax

Risk Model Name	Score	Score Factors
Credit Score (Applicant)	767	Total of all balances on bankcard or revolving accounts is too high Balances on bankcard or revolving accounts too high compared to credit limits Lack of sufficient credit history on bankcard or revolving accounts Lack of sufficient relevant first mortgage account information

Description
This credit score is a widely used risk model that uses credit report data to predict the likelihood of default. The credit score range is between 300 and 850 (the higher the score, the less risky the consumer).

Credit Accounts

From Equifax

Account Name	Opened	Last Active	30-59	60-89	90+	Past Due	Balance
CITICARDS CBNA (Applicant)	11/1986	4/2024					$11,147.00

Monthly Payment	High Credit	Type	Comments
$111.00	$26,021.00	REVOLVING	CONSUMER DISPUTES AFTER RESOLUTION Rate/Status 1: Pays account as agreed

Payment History

6/24	4/24	2/24	12/23	10/23	8/23	6/23	4/23	2/23	12/22	10/22	8/22
0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0

Account Name	Opened	Last Active	30-59	60-89	90+	Past Due	Balance
APPLE CARD - GS BANK (Applicant)	9/2022	4/2024					$10,326.00

Monthly Payment	High Credit	Type	Comments
$84.00	$12,776.00	REVOLVING	Rate/Status 1: Pays account as agreed

Payment History

5/24	3/24	1/24	11/23	9/23	7/23	5/23	3/23	1/23	11/22
0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0

Account Name	Opened	Last Active	30-59	60-89	90+	Past Due	Balance
AMERICAN EXPRESS (Applicant)	6/2020	5/2024					$6,274.00
	Monthly Payment	**High Credit**	**Type**	**Comments**			
		$15,600.00	OPEN ACCOUNT	Rate/Status 1: Pays account as agreed			

Payment History

6/24	4/24	2/24	12/23	10/23	8/23	6/23	4/23	2/23	12/22	10/22	8/22
0	0	0	0	0	0	0	0	0	0	0	0

Account Name	Opened	Last Active	30-59	60-89	90+	Past Due	Balance
BANK OF AMERICA (Applicant)	8/2016	5/2024					$325.00
	Monthly Payment	**High Credit**	**Type**	**Comments**			
	$25.00	$19,977.00	REVOLVING	Rate/Status 1: Pays account as agreed			

Payment History

6/24	4/24	2/24	12/23	10/23	8/23	6/23	4/23	2/23	12/22	10/22	8/22
0	0	0	0	0	0	0	0	0	0	0	0

Account Name	Opened	Last Active	30-59	60-89	90+	Past Due	Balance
RD/ SAKO AND PARTNER (Joint)	4/2022	4/2024					$0.00
	Monthly Payment	**High Credit**	**Type**	**Comments**			
		$4,068.00	OPEN ACCOUNT	Rate/Status 1: Pays account as agreed			

Payment History

5/24	3/24	1/24	11/23	9/23	7/23	5/23	3/23	1/23	11/22	9/22	7/22
0	0	0	0	0	0	0	0	0	0	0	0

Account Name	Opened	Last Active	30-59	60-89	90+	Past Due	Balance
DISCOVER BANK (Applicant)	4/2018	4/2024					$0.00
	Monthly Payment	**High Credit**	**Type**	**Comments**			
		$3,095.00	REVOLVING	Rate/Status 1: Pays account as agreed			

Payment History

6/24	4/24	2/24	12/23	10/23	8/23	6/23	4/23	2/23	12/22	10/22	8/22
0	0	0	0	0	0	0	0	0	0	0	0

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Rental Report for Murad Berdyklychev

Identity	From Application	From Equifax
Name:	Murad Berdyklychev	MURAD BERDYKLYCHEV
SSN:	167-88-****	167-88-****
Birth Date:	12/**/1998	12/**/1998

Addresses	From Application	From Equifax
	2131 Lawrence Street Denver, CO 80205 - US	2131 LAWRENCE ST. 605 DENVER, CO 80205 (Applicant) Reported 7/2024 415 SOUTH ST. WALTHAM, MA 02453 (Applicant) Reported 2/2023 253 SOUTH ST. WALTHAM, MA 02453 (Applicant) Reported 5/2022 45 MOODY ST. 304 WALTHAM, MA 02453 (Applicant) Reported 7/2020

Employment	From Application	From Equifax
Applicant:	Investment analyst Partners Group $130,000.00/Yr. Total annual Income: $130,000.00	

Criminal and Other Public Records

Requested For	Location Searched	Period Searched	Requested	Returned
Murad Berdyklychev	Multistate Search	7/2/2017 - 7/2/2024	7/2/2024	7/2/2024

Results
No Records Found

National Sex Offender Registry History

Requested For	Date Requested	Date Returned
Murad Berdyklychev	7/2/2024	7/2/2024

Results
No Records Found

Restricted Person Search

Requested For	Requested	Returned
Murad Berdyklychev	7/2/2024	7/2/2024

Results
No Records Found

Risk Models

From RealPage

Risk Model Name	Score	Score Factors
RealPage AI Score (Applicant)	785	Tradeline scoring Debt-to-income ratio Credit Score Rental Payment History

Description
RealPage AI Score uses machine-learning and data patterns in credit score, debt/liability types, trade lines, rental payment history, and renter behavior to achieve reduced bad debt. The RealPage AI Score range is between 1 and 1000 (the higher the score, the less risky the consumer).

From Equifax

Risk Model Name	Score	Score Factors
Credit Score (Applicant)	787	Lack of sufficient credit history on bankcard or revolving accounts The date that you opened your oldest account is too recent Lack of sufficient relevant first mortgage account information You have either very few loans or too many loans with recent delinquencies

Description
This credit score is a widely used risk model that uses credit report data to predict the likelihood of default. The credit score range is between 300 and 850 (the higher the score, the less risky the consumer).

Credit Accounts

From Equifax

Account Name	Opened	Last Active	30-59	60-89	90+	Past Due	Balance
RD/ SAKO AND PARTNER (Joint)	4/2022	4/2024					$0.00

Monthly Payment	High Credit	Type	Comments
	$4,068.00	OPEN ACCOUNT	Rate/Status 1: Pays account as agreed

Payment History

0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
5/ 24		3/ 24		1/ 24		11/ 23		9/ 23		7/ 23		5/ 23		3/ 23		1/ 23		11/ 22		9/ 22		7/ 22	

Account Name	Opened	Last Active	30-59	60-89	90+	Past Due	Balance
JPMCB CARD SERVICES (Joint)	6/2022	5/2024					$0.00
	Monthly Payment	**High Credit**	**Type**	**Comments**			
		$3,823.00	REVOLVING	Rate/Status 1: Pays account as agreed			

Payment History

0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
6/24		4/24		2/24		12/23		10/23		8/23		6/23		4/23		2/23		12/22		10/22		8/22	

Account Name	Opened	Last Active	30-59	60-89	90+	Past Due	Balance
BANK OF AMERICA (Applicant)	8/2018	11/2023					$0.00
	Monthly Payment	**High Credit**	**Type**	**Comments**			
		$2,419.00	REVOLVING	ACCOUNT CLOSED AT CONSUMER'S REQUEST Rate/Status 1: Pays account as agreed			

Payment History

0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
12/23		10/23		8/23		6/23		4/23		2/23		12/22		10/22		8/22		6/22		4/22		2/22	

Account Name	Opened	Last Active	30-59	60-89	90+	Past Due	Balance
BANK OF AMERICA (Applicant)	7/2021	6/2022					$0.00
	Monthly Payment	**High Credit**	**Type**	**Comments**			
		$833.00	REVOLVING	ACCOUNT CLOSED AT CONSUMER'S REQUEST Rate/Status 1: Pays account as agreed			

Payment History

0	0	0	0	0	0	0	0	0	0	0	0
7/22		5/22		3/22		1/22		11/21		9/21	

Account Name	Opened	Last Active	30-59	60-89	90+	Past Due	Balance
JPMCB CARD SERVICES (Joint)	4/2023	5/2024					$0.00
	Monthly Payment	**High Credit**	**Type**	**Comments**			
		$220.00	REVOLVING	Rate/Status 1: Pays account as agreed			

Payment History

0	0	0	0	0	0	0	0	0	0	0	0	0	0
6/24		4/24		2/24		12/23		10/23		8/23		6/23	

Para información en español, visite www.consumerfinance.gov/learnmore o escribe a la Consumer Financial Protection Bureau, 1700 G Street N.W., Washington, DC 20552.

A Summary of Your Rights Under the Fair Credit Reporting Act

The federal Fair Credit Reporting Act (FCRA) promotes the accuracy, fairness, and privacy of information in the files of consumer reporting agencies. There are many types of consumer reporting agencies, including credit bureaus and specialty agencies (such as agencies that sell information about check writing histories, medical records, and rental history records). Here is a summary of your major rights under FCRA. **For more information, including information about additional rights, go to www.consumerfinance.gov/learnmore or write to: Consumer Financial Protection Bureau, 1700 G Street N.W., Washington, DC 20552.**

- **You must be told if information in your file has been used against you.** Anyone who uses a credit report or another type of consumer report to deny your application for credit, insurance, or employment – or to take another adverse action against you – must tell you, and must give you the name, address, and phone number of the agency that provided the information.
- **You have the right to know what is in your file.** You may request and obtain all the information about you in the files of a consumer reporting agency (your "file disclosure"). You will be required to provide proper identification, which may include your Social Security number. In many cases, the disclosure will be free. You are entitled to a free file disclosure if:
  - a person has taken adverse action against you because of information in your credit report;
  - you are the victim of identity theft and place a fraud alert in your file;
  - your file contains inaccurate information as a result of fraud;
  - you are on public assistance;
  - you are unemployed but expect to apply for employment within 60 days.

In addition, all consumers are entitled to one free disclosure every 12 months upon request from each nationwide credit bureau and from nationwide specialty consumer reporting agencies. See www.consumerfinance.gov/learnmore for additional information.

- **You have the right to ask for a credit score.** Credit scores are numerical summaries of your credit-worthiness based on information from credit bureaus. You may request a credit score from consumer reporting agencies that create scores or distribute scores used in residential real property loans, but you will have to pay for it. In some mortgage transactions, you will receive credit score information for free from the mortgage lender.
- **You have the right to dispute incomplete or inaccurate information.** If you identify information in your file that is incomplete or inaccurate, and report it to the consumer reporting agency, the agency must investigate unless your dispute is frivolous. See www.consumerfinance.gov/learnmore for an explanation of dispute procedures.
- **Consumer reporting agencies must correct or delete inaccurate, incomplete, or unverifiable information.** Inaccurate, incomplete, or unverifiable information must be removed or corrected, usually within 30 days. However, a consumer reporting agency may continue to report information it has verified as accurate.
- **Consumer reporting agencies may not report outdated negative information.** In most cases, a consumer reporting agency may not report negative information that is more than seven years old, or bankruptcies that are more than 10 years old.
- **Access to your file is limited.** A consumer reporting agency may provide information about you only to people with a valid need – usually to consider an application with a creditor, insurer, employer, landlord, or other business. The FCRA specifies those with a valid need for access.
- **You must give your consent for reports to be provided to employers.** A consumer reporting agency may not give out information about you to your employer, or a potential employer, without your written consent given to the employer. Written consent generally is not required in the trucking industry. For more information, go to www.consumerfinance.gov/learnmore
- **You may limit "prescreened" offers of credit and insurance you get based on information in your credit report.** Unsolicited "prescreened" offers for credit and insurance must include a toll-free phone number you can call if you choose to remove your name and address form the lists these offers are based on. You may opt out with the nationwide credit bureaus at 1-888-5-OPTOUT (1-888-567-8688).
- The following FCRA right applies with respect to nationwide consumer reporting agencies:

  CONSUMERS HAVE THE RIGHT TO OBTAIN A SECURITY FREEZE

  You have a right to place a "security freeze" on your credit report, which will prohibit a consumer reporting agency from releasing information in your credit report without your express authorization. The security freeze is designed to prevent credit, loans, and services from being approved in your name without your consent. However, you should be aware that using a security freeze to take control over who gets access to the personal and financial information in your credit report may delay, interfere with, or prohibit the timely approval of any subsequent request or application you make regarding a new loan, credit, mortgage, or any other account involving the extension of credit.

  As an alternative to a security freeze, you have the right to place an initial or extended fraud alert on your credit file at no cost. An initial fraud alert is a 1-year alert that is placed on a consumer's credit file. Upon seeing a fraud alert display on a consumer's credit file, a business is required to take steps to verify the consumer's identity before extending new credit. If you are a victim of identity theft, you are entitled to an extended fraud alert, which is a fraud alert lasting 7 years.

  A security freeze does not apply to a person or entity, or its affiliates, or collection agencies acting on behalf of the person or entity, with which you have an existing account that requests information in your credit report for the purposes of reviewing or collecting the account. Reviewing the account includes activities related to account maintenance, monitoring, credit line increases, and account upgrades and enhancements.

- **You may seek damages from violators.** If a consumer reporting agency, or, in some cases, a user of consumer reports or a furnisher of information to a consumer reporting agency violates the FCRA, you may be able to sue in state or federal court.
- **Identity theft victims and active duty military personnel have additional rights.** For more information, visit www.consumerfinance.gov/learnmore.

States may enforce the FCRA, and many states have their own consumer reporting laws. In some cases, you may have more rights under state law. For more information, contact your state or local consumer protection agency or your state Attorney General. For information about your federal rights, contact:

TYPE OF BUSINESS:	CONTACT:
1.a. Banks, savings associations, and credit unions with total assets of over $10 billion and their affiliates b. Such affiliates that are not banks, savings associations, or credit unions also should list, in addition to the CFPB:	a. Consumer Financial Protection Bureau 1700 G Street, N.W. Washington, DC 20552 b. Federal Trade Commission Consumer Response Center 600 Pennsylvania Avenue, N.W. Washington, DC 20580 (877) 382-4357
2. To the extent not included in item 1 above: a. National banks, federal savings associations, and federal branches and federal agencies of foreign banks b. State member banks, branches and agencies of foreign banks (other than federal branches, federal agencies, and Insured State Branches of Foreign Banks), commercial lending companies owned or controlled by foreign banks, and organizations operating under section 25 or 25A of the Federal Reserve Act. c. Nonmember Insured Banks, Insured State Branches of Foreign Banks, and insured state savings associations d. Federal Credit Unions	a. Office of the Comptroller of the Currency Customer Assistance Group 1301 McKinney Street, Suite 3450 Houston, TX 77010-9050 b. Federal Reserve Consumer Help Center P.O. Box 1200 Minneapolis, MN 55480 c. FDIC Consumer Response Center 1100 Walnut Street, Box #11 Kansas City, MO 64106 d. National Credit Union Administration Office of Consumer Financial Protection (OCFP) Division of Consumer Compliance Policy and Outreach 1775 Duke Street Alexandria, VA 22314
3. Air carriers	Asst. General Counsel for Aviation Enforcement & Proceedings Aviation Consumer Protection Division Department of Transportation 1200 New Jersey Avenue, S.E. Washington, DC 20590
4. Creditors Subject to the Surface Transportation Board	Office of Proceedings, Surface Transportation Board Department of Transportation 395 E Street, S.W. Washington, DC 20423
5. Creditors Subject to the Packers and Stockyards Act, 1921	Nearest Packers and Stockyards Administration area supervisor
6. Small Business Investment Companies	Associate Deputy Administrator for Capital Access United States Small Business Administration 409 Third Street, S.W., Suite 8200 Washington, DC 20416
7. Brokers and Dealers	Securities and Exchange Commission 100 F Street, N.E. Washington, DC 20549
8. Federal Land Banks, Federal Land Bank Associations, Federal Intermediate Credit Banks, and Production Credit Associations	Farm Credit Administration 1501 Farm Credit Drive McLean, VA 22102-5090
9. Retailers, Finance Companies, and All Other Creditors Not Listed Above	Federal Trade Commission Consumer Response Center 600 Pennsylvania Avenue, N.W. Washington, DC 20580 (877) 382-4357

A Summary of Your Additional Rights in New York

You have a right to place a "security freeze" on your credit report, which will prohibit a consumer credit reporting agency from releasing information in your credit report without your express authorization. A security freeze must be requested in writing by certified or overnight mail. The security freeze is designed to prevent credit, loans, and services from being approved in your name without your consent.

To place a security freeze on your credit report, you must contact each of these credit reporting agencies:

Equifax Security Freeze
P.O. Box 105788
Atlanta, GA 30348
(800) 685-1111
https://www.freeze.equifax.com

Experian Security Freeze
P.O. Box 9554
Allen, TX 75013
(888) 397-3742
https://www.experian.com/freeze/center.html

TransUnion LLC
P.O. Box 2000
Chester, PA 19022-2000
(888) 909-8872
www.transunion.com/personal-credit/credit-disputes/credit-freezes.page

However, you should be aware that using a security freeze to take control over who gets access to the personal and financial information in your credit report may delay, interfere with, or prohibit the timely approval of any subsequent request or application you make regarding a new loan, credit mortgage, government services or payments, insurance, rental housing, employment, investment, license, cellular phone, utilities, digital signature, Internet credit card transaction, or other services, including an extension of credit at point of sale. When you place a security freeze on your credit report, you will be provided a personal identification number or password to use if you choose to remove the freeze on your credit report or authorize the release of your credit report to a specific party or for a period of time after the freeze is in place. To provide that authorization you must contact the consumer credit reporting agency and provide all of the following:

1. The personal identification number or password;
2. Proper identification to verify your identity;
3. The proper information regarding the party or parties who are to receive the credit report or the period of time for which the report shall be available to users of the credit report; and
4. Payment of any applicable fee.

A consumer reporting agency must authorize the release of your credit report no later than three business days after receiving the above information.

A security freeze does not apply to circumstances in which you have an existing account relationship and a copy of your report is requested by your existing creditor or its agents or affiliates for certain types of account review, collection, fraud control or similar activities.

If you are actively seeking credit, you should understand that the procedures involved in lifting a security freeze may slow your application for credit. You should plan ahead and lift a freeze, either completely if you are shopping around, or specifically for a certain creditor, before applying for new credit.

Additional rights under your state's law, which are also in the federal Fair Credit Reporting Act, are explained in the enclosed Summary of Your Rights under the Fair Credit Reporting Act.

Rental Application for **685 First Ave**

Notice: All adult applicants (18 years or older) must complete a separate application for rental.

APPLICANT INFORMATION

LAST NAME	FIRST NAME	M.I.	SUFFIX
Snider	Maxwell	G.	

SSN	BIRTH DATE	PHONE - TYPE
233-45-****	8/20/1997	(304) 282 - 9069 - Mobile

EMAIL
max.snider87@gmail.com

CURRENT ADDRESS

STREET ADDRESS	CITY	STATE	ZIP
2131 Lawrence Street	Denver	CO	80205

DATE IN	DATE OUT	MONTHLY RENT
	current	$3,000.00 / Mo.

EMPLOYMENT & INCOME INFORMATION

OCCUPATION	EMPLOYER/COMPANY
Private Equity Associate	Partners Group

SUPERVISOR	SUPERVISOR PHONE	SALARY	START DATE
Lauren Zieroff	(303) 606 - 3701	$173,000.00/Yr.	

EMPLOYER ADDRESS	CITY	STATE	ZIP
1200 Eldorado Blvd	Broomfield	CO	80021

BACKGROUND INFORMATION

Have you ever filed for bankruptcy?	Have you ever willfully refused to pay rent when due?
NO	NO
Have you ever been evicted from a tenancy or left owing money?	**Have you ever been convicted of a crime?**
NO	NO

Preferred Mailing Address:
2131 Lawrence Street, Denver, CO 80205 - US

APPLICATION CONSENT

I hereby warrant that all statements set forth above are true.

I understand that a consumer report and/or an investigative consumer report may be requested in connection with my prospective or continuing housing or guarantor application with **685 First Ave** through RP On-Site LLC (On-Site). I understand that these reports may include information concerning my character, employment and income verification, general reputation, personal characteristics, public records information, criminal records information, education, qualifications, motor vehicle record, mode of living, credit and indebtedness information, and any other information which may reflect upon my potential for tenancy or guarantor status gathered from any individual, organization, entity, agency, or other source which may have knowledge concerning any such items of information.

I understand that **685 First Ave** may require income and employment verification in connection with my application. I further understand that income and employment verification require access to my employment, income, and payroll related information. I authorize and consent to the access to, use, and release of such information by On-Site, Trans Union LLC, and other applicable credit bureaus for the purpose of providing the verification services in relation to my application and during the course of any ongoing lease obligation arising from such application.

I understand that if an investigative consumer report is requested about me, I have the right to make a written request to **685 First Ave**, within a reasonable period of time, for complete and accurate disclosure of the nature and scope of the investigation requested.

I consent to the delivery of all notices or disclosures required by law via any medium so chosen by **685 First Ave** or On-Site, including but not limited to email or other electronic transmission. I understand that all notices shall be deemed received upon being sent.

By submitting this application, I certify that I have read and fully understand the disclosures and my rights detailed above and authorize On-Site to obtain, for the purpose of determining my eligibility for initial or continued tenancy or guarantor status, a consumer report and/or investigative consumer report and to disclose all information obtained by On-Site to **685 First Ave**, its affiliates, and assigns now and in the future. I also certify that I have read and fully understand my rights under the FCRA available at https://www.on-site.com/resources/consent/fcraDisclosuresConsent.pdf.

I understand that, upon written request, I will be informed whether or not a consumer report or an investigative consumer report was requested and, if such a report was requested, informed of the name and address of the credit reporting agency that furnished the report. With regard to "investigative consumer reports", I further understand that when I receive the name and address of the consumer reporting agency, I may request a copy of such report by contacting such agency. I acknowledge that I have received and read Article 23-A of the New York Correction Law (https://www.on-site.com/resources/consent/correctionLawArticle23a.pdf)

☒ *Application consent was digitally accepted by Maxwell G. Snider*

Signed by Maxwell G. Snider
Tue Jun 25 2024 11:56:43 PM EDT
Key: BFD078D1; IP Address: 185.238.231.238

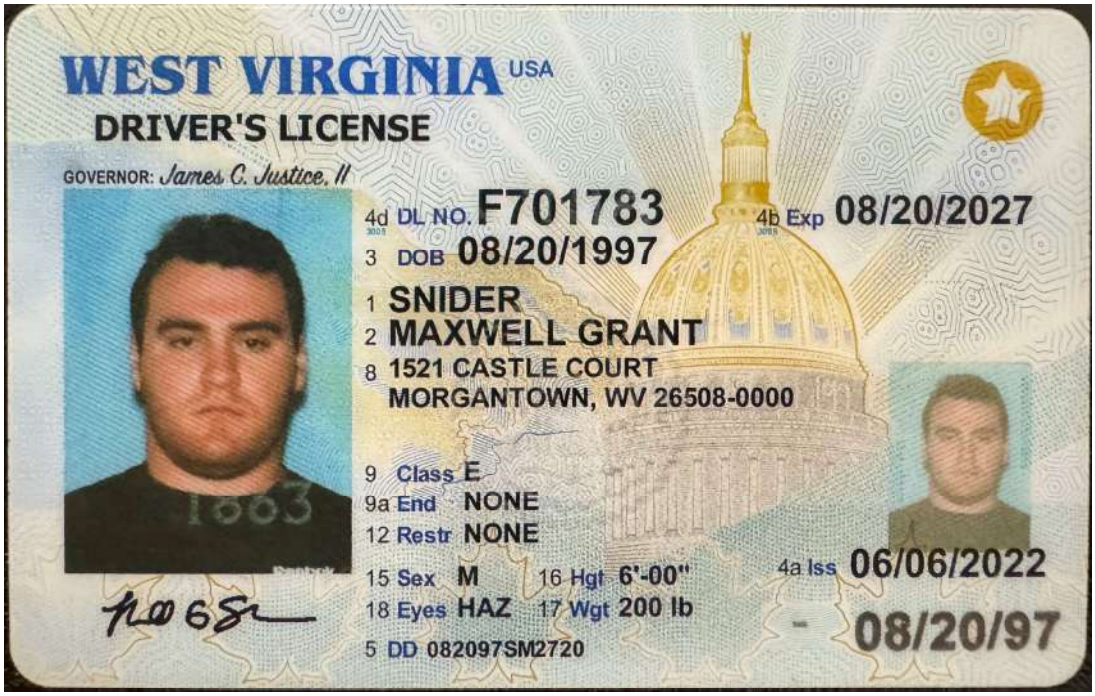
Maxwell G. Snider *(Applicant)* *Date*

The following charge(s) will appear on your card statement as *"ClickPay"*

Application Fee - Charge Details

Name on Card	Account Number	Reference Number	Authorized
Maxwell Snider	XXXXXXXXXXXX4017	14765815	$21.50

This card has been authorized for the amount above and will be charged when the application is processed.



WEST VIRGINIA USA

DRIVER'S LICENSE

GOVERNOR: James C. Justice, II

4d DL NO. F701783

4b Exp 08/20/2027

3 DOB 08/20/1997

1 SNIDER

2 MAXWELL GRANT

8 1521 CASTLE COURT
MORGANTOWN, WV 26508-0000

9 Class E

9a End NONE

12 Restr NONE

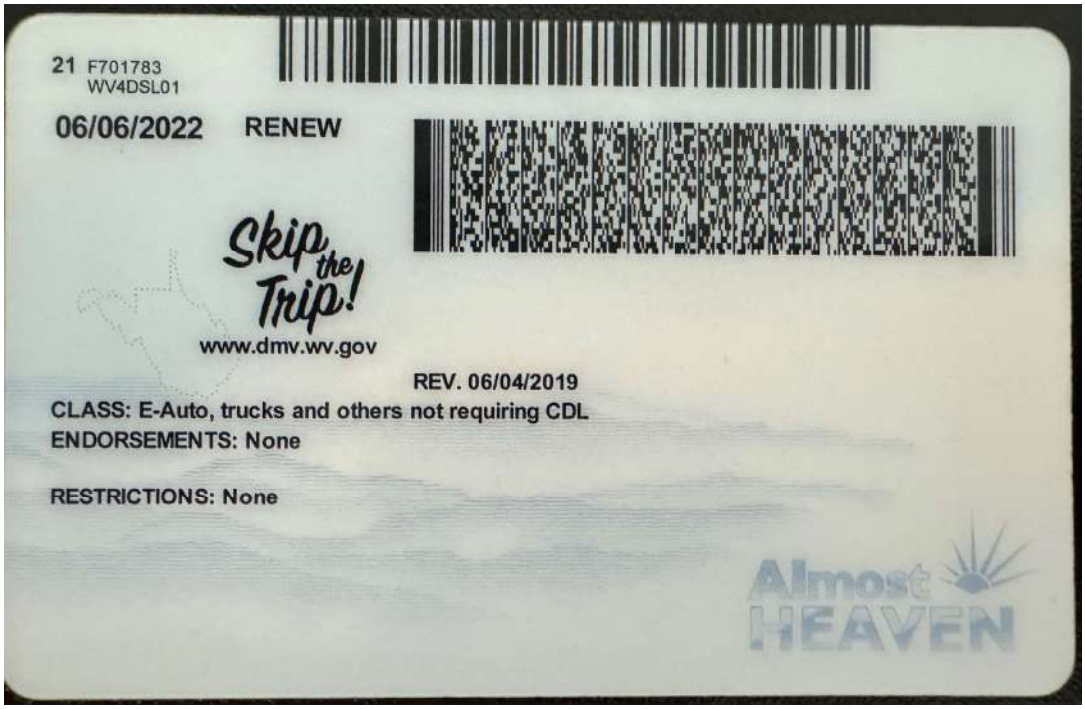
15 Sex M 16 Hgt 6'-00"

18 Eyes HAZ 17 Wgt 200 lb

4a Iss 06/06/2022

5 DD 082097SM2720

08/20/97



21 F701783
WV4DSL01

06/06/2022 RENEW

Skip the Trip!

www.dmv.wv.gov

REV. 06/04/2019

CLASS: E-Auto, trucks and others not requiring CDL

ENDORSEMENTS: None

RESTRICTIONS: None

Almost HEAVEN

Form **1040** Department of the Treasury—Internal Revenue Service **U.S. Individual Income Tax Return** **2023** OMB No. 1545-0074 IRS Use Only—Do not write or staple in this space.

For the year Jan. 1–Dec. 31, 2023, or other tax year beginning _____, 2023, ending _____, 20 _____ See separate instructions.

Your first name and middle initial	Last name	Your social security number
MAXWELL G	SNIDER	233 45 6741
If joint return, spouse's first name and middle initial	Last name	Spouse's social security number

Home address (number and street). If you have a P.O. box, see instructions. Apt. no.
2131 LAWRENCE STREET 605

City, town, or post office. If you have a foreign address, also complete spaces below. State ZIP code
DENVER CO 80205

Foreign country name | Foreign province/state/county | Foreign postal code

Presidential Election Campaign
Check here if you, or your spouse if filing jointly, want $3 to go to this fund. Checking a box below will not change your tax or refund. ☐ You ☐ Spouse

Filing Status Check only one box.
☒ Single ☐ Head of household (HOH)
☐ Married filing jointly (even if only one had income)
☐ Married filing separately (MFS) ☐ Qualifying surviving spouse (QSS)
If you checked the MFS box, enter the name of your spouse. If you checked the HOH or QSS box, enter the child's name if the qualifying person is a child but not your dependent: _____

Digital Assets At any time during 2023, did you: (a) receive (as a reward, award, or payment for property or services); or (b) sell, exchange, or otherwise dispose of a digital asset (or a financial interest in a digital asset)? (See instructions.) ☐ Yes ☒ No

Standard Deduction **Someone can claim:** ☐ You as a dependent ☐ Your spouse as a dependent
☐ Spouse itemizes on a separate return or you were a dual-status alien

Age/Blindness **You:** ☐ Were born before January 2, 1959 ☐ Are blind **Spouse:** ☐ Was born before January 2, 1959 ☐ Is blind

Dependents (see instructions): If more than four dependents, see instructions and check here . . ☐

(1) First name Last name	(2) Social security number	(3) Relationship to you	(4) Check the box if qualifies for (see instructions): Child tax credit	Credit for other dependents
			☐	☐
			☐	☐
			☐	☐
			☐	☐

Income

Attach Form(s) W-2 here. Also attach Forms W-2G and 1099-R if tax was withheld.
If you did not get a Form W-2, see instructions.

1a	Total amount from Form(s) W-2, box 1 (see instructions)				1a	226,495.
b	Household employee wages not reported on Form(s) W-2				1b	
c	Tip income not reported on line 1a (see instructions)				1c	
d	Medicaid waiver payments not reported on Form(s) W-2 (see instructions)				1d	
e	Taxable dependent care benefits from Form 2441, line 26				1e	
f	Employer-provided adoption benefits from Form 8839, line 29				1f	
g	Wages from Form 8919, line 6				1g	
h	Other earned income (see instructions)				1h	0.
i	Nontaxable combat pay election (see instructions)	1i				
z	Add lines 1a through 1h				1z	226,495.
2a	Tax-exempt interest	2a		b Taxable interest	2b	69.
3a	Qualified dividends	3a		b Ordinary dividends	3b	
4a	IRA distributions	4a		b Taxable amount	4b	
5a	Pensions and annuities	5a		b Taxable amount	5b	
6a	Social security benefits	6a		b Taxable amount	6b	
c	If you elect to use the lump-sum election method, check here (see instructions) ☐					
7	Capital gain or (loss). Attach Schedule D if required. If not required, check here ☐				7	
8	Additional income from Schedule 1, line 10				8	0.
9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your **total income**				9	226,564.
10	Adjustments to income from Schedule 1, line 26				10	
11	Subtract line 10 from line 9. This is your **adjusted gross income**				11	226,564.
12	**Standard deduction or itemized deductions** (from Schedule A)				12	13,850.
13	Qualified business income deduction from Form 8995 or Form 8995-A				13	0.
14	Add lines 12 and 13				14	13,850.
15	Subtract line 14 from line 11. If zero or less, enter -0-. This is your **taxable income**				15	212,714.

Attach Sch. B if required.

Standard Deduction for—
- Single or Married filing separately, $13,850
- Married filing jointly or Qualifying surviving spouse, $27,700
- Head of household, $20,800
- If you checked any box under *Standard Deduction*, see instructions.

Tax and Credits	16	**Tax** (see instructions). Check if any from Form(s): 1 ☐ 8814 2 ☐ 4972 3 ☐		16	46,900.
	17	Amount from Schedule 2, line 3		17	
	18	Add lines 16 and 17		18	46,900.
	19	Child tax credit or credit for other dependents from Schedule 8812		19	
	20	Amount from Schedule 3, line 8		20	
	21	Add lines 19 and 20		21	
	22	Subtract line 21 from line 18. If zero or less, enter -0-		22	46,900.
	23	Other taxes, including self-employment tax, from Schedule 2, line 21		23	276.
	24	Add lines 22 and 23. This is your **total tax**		24	47,176.
Payments	25	Federal income tax withheld from:			
	a	Form(s) W-2	25a 43,137.		
	b	Form(s) 1099	25b		
	c	Other forms (see instructions)	25c 272.		
	d	Add lines 25a through 25c		25d	43,409.
If you have a qualifying child, attach Sch. EIC.	26	2023 estimated tax payments and amount applied from 2022 return		26	
	27	Earned income credit (EIC) No	27		
	28	Additional child tax credit from Schedule 8812	28		
	29	American opportunity credit from Form 8863, line 8	29		
	30	Reserved for future use	30		
	31	Amount from Schedule 3, line 15	31		
	32	Add lines 27, 28, 29, and 31. These are your **total other payments and refundable credits**		32	
	33	Add lines 25d, 26, and 32. These are your **total payments**		33	43,409.
Refund	34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you **overpaid**		34	
	35a	Amount of line 34 you want **refunded to you**. If Form 8888 is attached, check here ☐		35a	
Direct deposit? See instructions.	b	Routing number X X X X X X X X X	c Type: ☐ Checking ☐ Savings		
	d	Account number X X X X X X X X X X X X X X X X			
	36	Amount of line 34 you want **applied to your 2024 estimated tax**	36		
Amount You Owe	37	Subtract line 33 from line 24. This is the **amount you owe.** For details on how to pay, go to *www.irs.gov/Payments* or see instructions		37	3,767.
	38	Estimated tax penalty (see instructions)	38		

Third Party Designee

Do you want to allow another person to discuss this return with the IRS? See instructions ☒ **Yes.** Complete below. ☐ **No**

Designee's name HERMAN J. PRICE, CPA | Phone no. (304)599-8075 | Personal identification number (PIN) 25982

Sign Here

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 belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Your signature	Date	Your occupation	If the IRS sent you an Identity Protection PIN, enter it here (see inst.)
		PRIVATE EQUITY	
Spouse's signature. If a joint return, **both** must sign.	Date	Spouse's occupation	If the IRS sent your spouse an Identity Protection PIN, enter it here (see inst.)

Joint return? See instructions. Keep a copy for your records.

Phone no. | Email address max.snider87@gmail.com

Paid Preparer Use Only

Preparer's name	Preparer's signature	Date	PTIN	Check if:
HERMAN J. PRICE, CPA	HERMAN J. PRICE, CPA	03/04/2024	P00476885	☐ Self-employed

Firm's name HERMAN J. PRICE, CPA, AC | Phone no. (304)599-8075

Firm's address 195 GREENBAG RD MORGANTOWN WV 26501 | Firm's EIN 55-0668009

CO.	FILE	DEPT.	CLOCK	VCHR. NO.	030
GKN	000544	100342		0000240073	1

Earnings Statement

PARTNERS GROUP (USA) INC.
1200 ENTREPRENEURIAL DRIVE
BROOMFIELD,CO 80021

Period Beginning: 06/01/2024
Period Ending: 06/15/2024
Pay Date: 06/14/2024

Filing Status: Single/Married filing separately
Exemptions/Allowances:
Federal: Standard Withholding Table

MAXWELL SNIDER
2131 LAWRENCE STREET
APT 605
DENVER CO 80205

Earnings	rate	salary/hours	this period	year to date
Regular	7208.33	86.67	7,208.33	79,291.63
LTD			8.94	98.34
Bonus				97,500.00
Meal Allowance				557.09
Referral Bonus				3,000.00
Gross Pay			**$7,217.27**	180,447.06

Deductions	Statutory		
	Federal Income Tax	-1,189.65	35,935.36
	Medicare Tax	-103.43	2,603.12
	CO State Income Tax	-288.85	7,734.88
	Social Security Tax		10,453.20
	Other		
	LTD	-8.94	
	Medical	-85.26*	937.86
	401K$	-360.42*	1,441.68
	Misc Reimbursem		-720.90
	401K loan		3,419.75
	Net Pay	**$5,180.72**	
	Checking1	-5,180.72	
	Net Check	**$0.00**	

*** Excluded from federal taxable wages**

Your federal taxable wages this period are $6,773.09

Other Benefits and Information	this period	total to date
Annualized Slry	172,999.92	
Eligib Earns	7,208.33	179,791.63
Er Dental	25.73	283.03
Er Medical	374.05	
Er Vision	3.38	
Group Term Life	1.50	16.50
LTD	8.94	
401K Match	360.42	1,441.68
Er Pri		556.38
Totl Hrs Worked	86.67	
Sick Leave		56.00

Important Notes

COMPANY PH 303-606-3736

BASIS OF PAY: SALARY

Additional Tax Withholding Information

Taxable Marital Status:
CO: Single

PARTNERS GROUP (USA) INC.
1200 ENTREPRENEURIAL DRIVE
BROOMFIELD,CO 80021

Advice number: **00000240073**
Pay date: 06/14/2024

Deposited to the account of	account number	transit ABA	amount
MAXWELL SNIDER	xxxxxxx2336	xxxx xxxx	$5,180.72

NON-NEGOTIABLE

CO.	FILE	DEPT.	CLOCK	VCHR. NO.	030
GKN	000544	100342		0000220077	1

Page 1(Con't Next Page)

Earnings Statement

PARTNERS GROUP (USA) INC.
1200 ENTREPRENEURIAL DRIVE
BROOMFIELD,CO 80021

Period Beginning: 05/16/2024
Period Ending: 05/31/2024
Pay Date: 05/31/2024

Filing Status: Single/Married filing separately
Exemptions/Allowances:
Federal: Standard Withholding Table

MAXWELL SNIDER
2131 LAWRENCE STREET
APT 605
DENVER CO 80205

Earnings	rate	salary/hours	this period	year to date
Regular	7208.33	86.67	7,208.33	72,083.30
LTD			8.94	89.40
Meal Allowance			98.82	557.09
Bonus				97,500.00
Referral Bonus				3,000.00
Gross Pay			**$7,316.09**	173,229.79

Deductions	Statutory		
	Federal Income Tax	-1,213.37	34,745.71
	Social Security Tax	-213.29	10,453.20
	Medicare Tax	-104.87	2,499.69
	CO State Income Tax	-293.20	7,446.03
	Other		
	LTD	-8.94	
	Meal Allowance	-98.82	
	Medical	-85.26*	852.60
	PRICOFL	-13.45	
	401K$	-360.42*	1,081.26
	Misc Reimbursem		-720.90
	401K loan		3,419.75
	Net Pay	**$4,924.47**	
	Checking1	-4,924.47	
	Net Check	**$0.00**	

*** Excluded from federal taxable wages**

Your federal taxable wages this period are $6,871.91

Other Benefits and Information	this period	total to date
Annualized Slry	172,999.92	
Eligib Earns	7,208.33	172,583.30
Er Dental	25.73	257.30
Er Medical	374.05	
Er Pri	9.85	556.38
Er Vision	3.38	
Group Term Life	1.50	15.00
LTD	8.94	
401K Match	360.42	1,081.26
Totl Hrs Worked	86.67	
Sick Leave		56.00

Important Notes

COMPANY PH 303-606-3736

BASIS OF PAY: SALARY

EFFECTIVE THIS PAY PERIOD YOU HAVE SATISFIED THE SOCIAL SECURITY TAX LIMIT.

PARTNERS GROUP (USA) INC.
1200 ENTREPRENEURIAL DRIVE
BROOMFIELD,CO 80021

Advice number: **00000220077**
Pay date: 05/31/2024

Deposited to the account of	account number	transit ABA	amount
MAXWELL SNIDER	xxxxxxxx2336	xxxx xxxx	$4,924.47

NON-NEGOTIABLE

CO.	FILE	DEPT.	CLOCK	VCHR. NO.	030
GKN	000544	100342		0000220077	1

Earnings Statement

PARTNERS GROUP (USA) INC.
1200 ENTREPRENEURIAL DRIVE
BROOMFIELD,CO 80021

Period Beginning:	05/16/2024
Period Ending:	05/31/2024
Pay Date:	05/31/2024

MAXWELL SNIDER
2131 LAWRENCE STREET
APT 605
DENVER CO 80205

Filing Status: Single/Married filing separately
Exemptions/Allowances:
Federal: Standard Withholding Table

Additional Tax Withholding Information

Taxable Marital Status:
CO: Single

CONTINUED FROM PRIOR PAGE
YOUR VOUCHER IS PROVIDED ON PAGE 1

NON-NEGOTIABLE

CO.	FILE	DEPT.	CLOCK	VCHR. NO.	030
GKN	000544	100342		0000200072	1

Earnings Statement

PARTNERS GROUP (USA) INC.
1200 ENTREPRENEURIAL DRIVE
BROOMFIELD,CO 80021

Period Beginning: 05/01/2024
Period Ending: 05/15/2024
Pay Date: 05/15/2024

Filing Status: Single/Married filing separately
Exemptions/Allowances:
Federal: Standard Withholding Table

MAXWELL SNIDER
2131 LAWRENCE STREET
APT 605
DENVER CO 80205

Earnings	rate	salary/hours	this period	year to date
Regular	7208.33	86.67	7,208.33	64,874.97
LTD			8.94	80.46
Bonus				97,500.00
Meal Allowance				458.27
Referral Bonus				3,000.00
Gross Pay			**$7,217.27**	165,913.70

Deductions	Statutory		
	Federal Income Tax	-1,189.65	33,532.34
	Social Security Tax	-442.28	10,239.91
	Medicare Tax	-103.44	2,394.82
	CO State Income Tax	-288.85	7,152.83
	Other		
	LTD	-8.94	
	Medical	-85.26*	767.34
	PRICOFL	-32.44	
	401K$	-360.42*	720.84
	Misc Reimbursem		-720.90
	401K loan		3,419.75
	Net Pay	**$4,705.99**	
	Checking1	-4,705.99	
	Net Check	**$0.00**	

*** Excluded from federal taxable wages**

Your federal taxable wages this period are $6,773.09

Other Benefits and Information	this period	total to date
Annualized Slry	172,999.92	
Eligib Earns	7,208.33	165,374.97
Er Dental	25.73	231.57
Er Medical	374.05	
Er Pri	23.79	546.53
Er Vision	3.38	
Group Term Life	1.50	13.50
LTD	8.94	
401K Match	360.42	720.84
Totl Hrs Worked	86.67	
Sick Leave		56.00

Important Notes

COMPANY PH 303-606-3736

BASIS OF PAY: SALARY

Additional Tax Withholding Information

Taxable Marital Status:
CO: Single

PARTNERS GROUP (USA) INC.
1200 ENTREPRENEURIAL DRIVE
BROOMFIELD,CO 80021

Advice number: **00000200072**
Pay date: 05/15/2024

Deposited to the account of	account number	transit ABA	amount
MAXWELL SNIDER	xxxxxxxx2336	xxxx xxxx	$4,705.99

NON-NEGOTIABLE

BANK OF AMERICA

P.O. Box 15284
Wilmington, DE 19850

Customer service information

Customer service: 1.800.432.1000

En Español: 1.800.688.6086

bankofamerica.com

Bank of America, N.A.
P.O. Box 25118
Tampa, FL 33622-5118

MAXWELL GRANT SNIDER
1521 CASTLE CT
MORGANTOWN, WV 26508-9190

Your combined statement

for May 14, 2024 to June 10, 2024

Your deposit accounts	Account/plan number	Ending balance	Details on
Adv Plus Banking	0046 6156 2336	$3,314.54	Page 3
Regular Savings	0046 6716 5287	$230.46	Page 5
Total balance		**$3,545.00**	

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BANK DEPOSIT ACCOUNTS

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Electronic transfers: In case of errors or questions about your electronic transfers - If you think your statement or receipt is wrong or you need more information about an electronic transfer (e.g., ATM transactions, direct deposits or withdrawals, point-of-sale transactions) on the statement or receipt, telephone or write us at the address and number listed on the front of this statement as soon as you can. We must hear from you no later than 60 days after we sent you the FIRST statement on which the error or problem appeared.

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Direct deposits - If you have arranged to have direct deposits made to your account at least once every 60 days from the same person or company, you may call us to find out if the deposit was made as scheduled. You may also review your activity online or visit a financial center for information.

Your Adv Plus Banking

MAXWELL GRANT SNIDER

Account summary

Beginning balance on May 14, 2024	$8,019.59
Deposits and other additions	14,263.50
Withdrawals and other subtractions	-18,968.55
Checks	-0.00
Service fees	-0.00
Ending balance on June 10, 2024	**$3,314.54**

Deposits and other additions

Date	Description	Amount
05/15/24	PARTNERS GROUP (DES:DIRECT DEP ID:588067927218GKN INDN:SNIDER,MAXWELL CO ID:9111111103 PPD	4,705.99
05/31/24	PARTNERS GROUP (DES:DIRECT DEP ID:420072539799GKN INDN:SNIDER,MAXWELL CO ID:9111111103 PPD	4,924.47
06/03/24	Goldman Sachs Ba DES:P2P ID:Snider,Maxwell INDN:Maxwell Snider CO ID:0124085260 WEB	2,500.00
06/03/24	Goldman Sachs Ba DES:P2P ID:Snider,Maxwell INDN:Maxwell Snider CO ID:0124085260 WEB	1,500.00
06/10/24	BKOFAMERICA MOBILE 06/08 3730789947 DEPOSIT *MOBILE MA	633.04
Total deposits and other additions		**$14,263.50**

Withdrawals and other subtractions

Date	Description	Amount
05/14/24	InstaMed DES:INSTAMED A ID:021000021489921 INDN:Maxwell Snider CO ID:9221883201 WEB	-633.04
05/15/24	AMERICAN EXPRESS DES:ACH PMT ID:M0800 INDN:Maxwell Snider CO ID:1133133497 WEB	-3,182.84
05/16/24	APPLECARD GSBANK DES:PAYMENT ID:59767843 INDN:Maxwell Snider CO ID:9999999999 WEB	-2,989.81
05/17/24	GOLDMAN SACHS BA DES:COLLECTION ID:000300052787133 INDN:Snider,Maxwell CO ID:0124085260 WEB	-300.00
05/17/24	GOLDMAN SACHS BA DES:COLLECTION ID:000300052787337 INDN:Snider,Maxwell CO ID:0124085260 WEB	-250.00
05/20/24	VENMO DES:PAYMENT ID:1034452206338 INDN:MAX S CO ID:3264681992 WEB	-800.00
05/31/24	Online scheduled transfer to SAV 5287 Confirmation# 1868496434	-25.00
06/03/24	AMERICAN EXPRESS DES:ACH PMT ID:M9856 INDN:Maxwell Snider CO ID:1133133497 WEB	-8,452.50
06/03/24	BILT-RP-ACH DES:RENT PMT ID:BILT3 INDN:Maxwell Snider CO ID:1084437240 WEB	-1,720.42
06/03/24	GOLDMAN SACHS BA DES:COLLECTION ID:000300052787133 INDN:Snider,Maxwell CO ID:0124085260 WEB	-300.00
06/03/24	GOLDMAN SACHS BA DES:COLLECTION ID:000300052787337 INDN:Snider,Maxwell CO ID:0124085260 WEB	-250.00
06/03/24	XCEL ENERGY-PSCO DES:XCELENERGY ID:00126806545 INDN:BOA CHECKING XXXXXXXXX CO ID:7840296600 WEB	-64.94

Total withdrawals and other subtractions **-$18,968.55**

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Your Regular Savings

MAXWELL GRANT SNIDER

Account summary

Beginning balance on May 14, 2024	$210.46
Deposits and other additions	25.00
Withdrawals and other subtractions	-0.00
Service fees	-5.00
Ending balance on June 10, 2024	**$230.46**

Deposits and other additions

Date	Description	Amount
05/31/24	Online scheduled transfer from CHK 2336 Confirmation# 1868496434	25.00
Total deposits and other additions		**$25.00**

Service fees

Date	Transaction description	Amount
06/10/24	Monthly Maintenance Fee	-5.00
Total service fees		**-$5.00**

Note your Ending Balance already reflects the subtraction of Service Fees.

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BANK OF AMERICA

P.O. Box 15284
Wilmington, DE 19850

MAXWELL GRANT SNIDER
1521 CASTLE CT
MORGANTOWN, WV 26508-9190

Customer service information

Customer service: 1.800.432.1000

En Español: 1.800.688.6086

bankofamerica.com

Bank of America, N.A.
P.O. Box 25118
Tampa, FL 33622-5118

Your combined statement

for April 12, 2024 to May 13, 2024

Your deposit accounts	Account/plan number	Ending balance	Details on
Adv Plus Banking	0046 6156 2336	$8,019.59	Page 3
Regular Savings	0046 6716 5287	$210.46	Page 5
Total balance		**$8,230.05**	

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BANK DEPOSIT ACCOUNTS

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Your Adv Plus Banking

MAXWELL GRANT SNIDER

Account summary

Beginning balance on April 12, 2024	$13,538.53
Deposits and other additions	14,179.87
Withdrawals and other subtractions	-19,698.81
Checks	-0.00
Service fees	-0.00
Ending balance on May 13, 2024	**$8,019.59**

Deposits and other additions

Date	Description	Amount
04/15/24	PARTNERS GROUP (DES:DIRECT DEP ID:546093032189GKN INDN:SNIDER,MAXWELL CO ID:9111111103 PPD	4,872.51
04/19/24	PARTNERS GROUP (DES:DIRECT DEP ID:762070358841GKN INDN:SNIDER,MAXWELL CO ID:9111111103 PPD	720.90
04/22/24	VENMO DES:CASHOUT ID:1033892487445 INDN:MAX S CO ID:5264681992 PPD	165.00
04/30/24	PARTNERS GROUP (DES:DIRECT DEP ID:638089633858GKN INDN:SNIDER,MAXWELL CO ID:9111111103 PPD	4,658.45
05/13/24	BKOFAMERICA MOBILE 05/12 3633916770 DEPOSIT *MOBILE MA	1,210.00
05/13/24	BKOFAMERICA MOBILE 05/12 3633933750 DEPOSIT *MOBILE MA	1,156.65

continued on the next page

Deposits and other additions - continued

Date	Description	Amount
05/13/24	VENMO PPD DES:CASHOUT ID:1034356134687 INDN:MAX S CO ID:5264681992	754.69
05/13/24	VENMO PPD DES:CASHOUT ID:1034360840799 INDN:MAX S CO ID:5264681992	641.67
Total deposits and other additions		**$14,179.87**

Withdrawals and other subtractions

Date	Description	Amount
04/15/24	INTERACTIVE BROK DES:ACH TRANSF ID:REQ :XXXXXXXXX INDN:MAXWELL G SNIDER CO ID:8133863700 WEB PMT INFO:ACH TRANSFER REFCODE:XXXXXXXXX TRANNO: 1 1619111	-2,000.00
04/22/24	AMERICAN EXPRESS DES:ACH PMT ID:M6088 INDN:Maxwell Snider CO ID:1133133497 WEB	-7,238.44
04/22/24	VENMO WEB DES:PAYMENT ID:1033883445422 INDN:MAX S CO ID:3264681992	-200.00
04/24/24	GOLDMAN SACHS BA DES:COLLECTION ID:000300052787337 INDN:Snider,Maxwell CO ID:0124085260 WEB	-2,000.00
04/25/24	InstaMed DES:UNIVERSITY ID:021000027868659 INDN:Maxwell Snider CO ID:9221883201 WEB	-973.67
04/25/24	InstaMed DES:INSTAMED A ID:021000027868733 INDN:Maxwell Snider CO ID:9221883201 WEB	-137.86
04/29/24	APPLECARD GSBANK DES:PAYMENT ID:59767843 INDN:Maxwell Snider CO ID:9999999999 WEB	-2,000.00
04/30/24	Online scheduled transfer to SAV 5287 Confirmation# 1858896145	-25.00
05/02/24	BILT-RP-ACH DES:RENT PMT ID:BILT3 INDN:Maxwell Snider CO ID:1084437240 WEB	-1,734.18
05/03/24	GOLDMAN SACHS BA DES:COLLECTION ID:000300052787133 INDN:Snider,Maxwell CO ID:0124085260 WEB	-300.00
05/03/24	GOLDMAN SACHS BA DES:COLLECTION ID:000300052787337 INDN:Snider,Maxwell CO ID:0124085260 WEB	-250.00
05/03/24	XCEL ENERGY-PSCO DES:XCELENERGY ID:00126806545 INDN:BOA CHECKING XXXXXXXXX CO ID:7840296600 WEB	-55.65
05/13/24	DISCOVER DES:E-PAYMENT ID:4169 INDN:SNIDER MAXWELL CO ID:2510020270 WEB	-1,223.05
05/13/24	GOLDMAN SACHS BA DES:COLLECTION ID:000300052787133 INDN:Snider,Maxwell CO ID:0124085260 WEB	-1,210.00
05/13/24	BANK OF AMERICA - LINE OF CREDIT Bill Payment	-350.96
Total withdrawals and other subtractions		**-$19,698.81**

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Your Regular Savings

MAXWELL GRANT SNIDER

Account summary

Beginning balance on April 12, 2024	$190.46
Deposits and other additions	25.00
Withdrawals and other subtractions	-0.00
Service fees	-5.00
Ending balance on May 13, 2024	**$210.46**

Deposits and other additions

Date	Description	Amount
04/30/24	Online scheduled transfer from CHK 2336 Confirmation# 1858896145	25.00
Total deposits and other additions		**$25.00**

Service fees

Date	Transaction description	Amount
05/13/24	Monthly Maintenance Fee	-5.00
Total service fees		**-$5.00**

Note your Ending Balance already reflects the subtraction of Service Fees.

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BANK OF AMERICA

P.O. Box 15284
Wilmington, DE 19850

Customer service information

Customer service: 1.800.432.1000

En Español: 1.800.688.6086

bankofamerica.com

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P.O. Box 25118
Tampa, FL 33622-5118

MAXWELL GRANT SNIDER
1521 CASTLE CT
MORGANTOWN, WV 26508-9190

Your combined statement

for March 13, 2024 to April 11, 2024

Your deposit accounts	Account/plan number	Ending balance	Details on
Adv Plus Banking	0046 6156 2336	$13,538.53	Page 3
Regular Savings	0046 6716 5287	$190.46	Page 5
Total balance		**$13,728.99**	

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BANK DEPOSIT ACCOUNTS

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Your Adv Plus Banking

MAXWELL GRANT SNIDER

Account summary

Beginning balance on March 13, 2024	$7,635.70
Deposits and other additions	43,273.40
Withdrawals and other subtractions	-37,012.64
Checks	-275.00
Service fees	-82.93
Ending balance on April 11, 2024	**$13,538.53**

Deposits and other additions

Date	Description	Amount
03/15/24	PARTNERS GROUP (DES:DIRECT DEP ID:931532452732GKN INDN:SNIDER,MAXWELL CO ID:9111111103 PPD	4,249.55
03/29/24	PARTNERS GROUP (DES:DIRECT DEP ID:932731176757GKN INDN:SNIDER,MAXWELL CO ID:9111111103 PPD	32,841.56
03/29/24	PARTNERS GROUP (DES:DIRECT DEP ID:932731176756GKN INDN:SNIDER,MAXWELL CO ID:9111111103 PPD	4,917.68
04/01/24	VENMO DES:CASHOUT ID:1033459180958 INDN:MAX S CO ID:5264681992 PPD	1,225.87
04/01/24	Bank of America DES:CASHREWARD ID:SNIDER INDN:00000004036144510000000 CO ID:2002290310 PPD	38.74
Total deposits and other additions		**$43,273.40**

Withdrawals and other subtractions

Date	Description	Amount
03/21/24	BANK OF AMERICA - LINE OF CREDIT Bill Payment	-10,334.99
03/29/24	AMERICAN EXPRESS DES:ACH PMT ID:M9836 INDN:Maxwell Snider CO ID:1133133497 WEB	-7,663.39
03/29/24	Bank of America - Line of Credit Bill Payment	-171.00
03/29/24	Online scheduled transfer to SAV 5287 Confirmation# 1849984358	-25.00
04/01/24	APPLECARD GSBANK DES:PAYMENT ID:59767843 INDN:Maxwell Snider CO ID:9999999999 WEB	-10,948.40
04/01/24	DISCOVER DES:E-PAYMENT ID:4169 INDN:SNIDER MAXWELL CO ID:2510020270 WEB	-1,310.41
04/02/24	BILT-RP-ACH DES:RENT PMT ID:BILT3 INDN:Maxwell Snider CO ID:1084437240 WEB	-1,728.62
04/05/24	VENMO DES:PAYMENT ID:1033564027765 INDN:MAX S CO ID:3264681992 WEB	-863.00
04/05/24	XCEL ENERGY-PSCO DES:XCELENERGY ID:00126806545 INDN:BOA CHECKING XXXXXXXXX CO ID:7840296600 WEB	-59.82
04/08/24	APPLECARD GSBANK DES:PAYMENT ID:59767843 INDN:Maxwell Snider CO ID:9999999999 WEB	-141.01
04/11/24	US TREASURY IRS DES:PAYMENT CHECK #:0103 INDN:PUSB85241010049655 CO ID:2009290085 ARC	-3,767.00
Total withdrawals and other subtractions		**-$37,012.64**

Checks

Date	Check #	Amount
04/05/24	101	-275.00
Total checks		**-$275.00**
Total # of checks		**1**

Service fees

Date	Transaction description	Amount
04/04/24	CHECK ORDER00493 DES:FEE ID:16U62890 PMT INFO: PRODUCT(S): 29.48 S&H: 48.75 WV TAX: 4.70	-82.93
Total service fees		**-$82.93**

Note your Ending Balance already reflects the subtraction of Service Fees.

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Your Regular Savings

MAXWELL GRANT SNIDER

Account summary

Beginning balance on March 13, 2024	$170.46
Deposits and other additions	25.00
Withdrawals and other subtractions	-0.00
Service fees	-5.00
Ending balance on April 11, 2024	**$190.46**

Deposits and other additions

Date	Description	Amount
03/29/24	Online scheduled transfer from CHK 2336 Confirmation# 1849984358	25.00
Total deposits and other additions		**$25.00**

Service fees

Date	Transaction description	Amount
04/11/24	Monthly Maintenance Fee	-5.00
Total service fees		**-$5.00**

Note your Ending Balance already reflects the subtraction of Service Fees.

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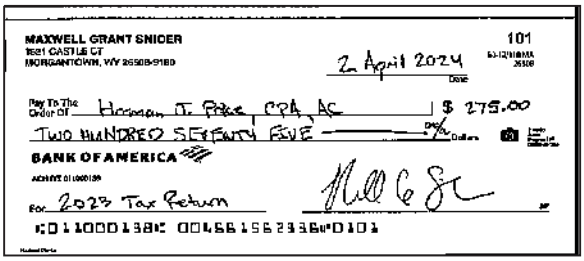
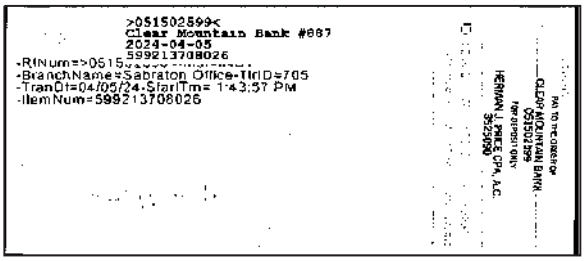
Check images

Account number: 0046 6156 2336
Check number: 101 | Amount: $275.00





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Rental Application for **685 First Ave**

Notice: All adult applicants (18 years or older) must complete a separate application for rental.

APPLICANT INFORMATION				
LAST NAME Patel	**FIRST NAME** Anish		**M.I.**	**SUFFIX**
SSN 374-19-****	**BIRTH DATE** 12/13/1995	**PHONE - TYPE** (248) 420 - 4787 - Mobile		
EMAIL Anishp1995@gmail.com				
CURRENT ADDRESS				
STREET ADDRESS 445 W 35 St, 7N	**CITY** New York	**STATE** NY	**ZIP** 10001	
DATE IN	**DATE OUT** current	**MONTHLY RENT** $9,532.00 / Mo.		
EMPLOYMENT & INCOME INFORMATION				
OCCUPATION Investment Banking	**EMPLOYER/COMPANY** Leerink Partners			
SUPERVISOR Gian Boria	**SUPERVISOR PHONE** (305) 562 - 6204	**SALARY** $225,000.00/Yr.	**START DATE**	
EMPLOYER ADDRESS 1301 6th Ave, 12th Floor	**CITY** New York	**STATE** NY	**ZIP** 10019	
BACKGROUND INFORMATION				
Have you ever filed for bankruptcy? NO	**Have you ever willfully refused to pay rent when due?** NO			
Have you ever been evicted from a tenancy or left owing money? NO	**Have you ever been convicted of a crime?** NO			
Preferred Mailing Address: 445 W 35 St, 7N, New York, NY 10001 - US				

APPLICATION CONSENT

I hereby warrant that all statements set forth above are true.

I understand that a consumer report and/or an investigative consumer report may be requested in connection with my prospective or continuing housing or guarantor application with **685 First Ave** through RP On-Site LLC (On-Site). I understand that these reports may include information concerning my character, employment and income verification, general reputation, personal characteristics, public records information, criminal records information, education, qualifications, motor vehicle record, mode of living, credit and indebtedness information, and any other information which may reflect upon my potential for tenancy or guarantor status gathered from any individual, organization, entity, agency, or other source which may have knowledge concerning any such items of information.

I understand that **685 First Ave** may require income and employment verification in connection with my application. I further understand that income and employment verification require access to my employment, income, and payroll related information. I authorize and consent to the access to, use, and release of such information by On-Site, Trans Union LLC, and other applicable credit bureaus for the purpose of providing the verification services in relation to my application and during the course of any ongoing lease obligation arising from such application.

I understand that if an investigative consumer report is requested about me, I have the right to make a written request to **685 First Ave**, within a reasonable period of time, for complete and accurate disclosure of the nature and scope of the investigation requested.

I consent to the delivery of all notices or disclosures required by law via any medium so chosen by **685 First Ave** or On-Site, including but not limited to email or other electronic transmission. I understand that all notices shall be deemed received upon being sent.

By submitting this application, I certify that I have read and fully understand the disclosures and my rights detailed above and authorize On-Site to obtain, for the purpose of determining my eligibility for initial or continued tenancy or guarantor status, a consumer report and/or investigative consumer report and to disclose all information obtained by On-Site to **685 First Ave**, its affiliates, and assigns now and in the future. I also certify that I have read and fully understand my rights under the FCRA available at https://www.on-site.com/resources/consent/fcraDisclosuresConsent.pdf.

I understand that, upon written request, I will be informed whether or not a consumer report or an investigative consumer report was requested and, if such a report was requested, informed of the name and address of the credit reporting agency that furnished the report. With regard to "investigative consumer reports", I further understand that when I receive the name and address of the consumer reporting agency, I may request a copy of such report by contacting such agency. I acknowledge that I have received and read Article 23-A of the New York Correction Law (https://www.on-site.com/resources/consent/correctionLawArticle23a.pdf)

☒ *Application consent was digitally accepted by Anish Patel*

Signed by Anish Patel
Tue Jun 25 2024 11:46:39 PM EDT
Key: 92F78CC0; IP Address: 209.150.57.180

Anish Patel *(Applicant)* *Date*

The following charge(s) will appear on your card statement as *"ClickPay"*

Application Fee - Charge Details

Name on Card	Account Number	Reference Number	Authorized
Anish Patel	XXXXXXXXXXXX5114	14765793	$21.50

This card has been authorized for the amount above and will be charged when the application is processed.

Form **1040** Department of the Treasury-Internal Revenue Service **U.S. Individual Income Tax Return** **2023** OMB No. 1545-0074 IRS Use Only-Do not write or staple in this space.

For the year Jan. 1–Dec. 31, 2023, or other tax year beginning _____, 2023, ending _____ See separate instructions.

Your first name and middle initial	Last name	Your social security number
ANISH	PATEL	374-19-5736
If joint return, spouse's first name and middle initial	Last name	Spouse's social security number

Home address (number and street). If you have a P.O. box, see instructions. Apt. no.
445 W 35TH ST 7N

City, town, or post office. If you have a foreign address, also complete spaces below. State ZIP code
New York NY 10001

Foreign country name | Foreign province/state/county | Foreign postal code

Presidential Election Campaign
Check here if you, or your spouse if filing jointly, want $3 to go to this fund. Checking a box below will not change your tax or refund.
☐ You ☐ Spouse

Filing Status Check only one box.
☒ Single ☐ Head of household (HOH)
☐ Married filing jointly (even if only one had income)
☐ Married filing separately (MFS) ☐ Qualifying surviving spouse (QSS)
If you checked the MFS box, enter the name of your spouse. If you checked the HOH or QSS box, enter the child's name if the qualifying person is a child but not your dependent: _____

Digital Assets At any time during 2023, did you: (a) receive (as a reward, award, or payment for property or services); or (b) sell, exchange, or otherwise dispose of a digital asset (or a financial interest in a digital asset)? (See instructions.) . . ☐ Yes ☒ No

Standard Deduction **Someone can claim:** ☐ You as a dependent ☐ Your spouse as a dependent
☐ Spouse itemizes on a separate return or you were a dual-status alien

Age/Blindness **You:** ☐ Were born before January 2, 1959 ☐ Are blind **Spouse:** ☐ Was born before January 2, 1959 ☐ Is blind

Dependents (see instructions): If more than four dependents, see instructions and check here . . ☐

(1) First name Last name	(2) Social security number	(3) Relationship to you	(4) Check if qualifies for (see instructions): Child tax credit	Credit for other dependents
			☐	☐
			☐	☐
			☐	☐
			☐	☐

Income

Attach Form(s) W-2 here. Also attach Forms W-2G and 1099-R if tax was withheld.

If you did not get a Form W-2, see instructions.

Attach Sch. B if required.

Standard Deduction for-
- Single or Married filing separately, $13,850
- Married filing jointly or Qualifying surviving spouse, $27,700
- Head of household, $20,800
- If you checked any box under *Standard Deduction,* see instructions.

1a	Total amount from Form(s) W-2, box 1 (see instructions)	1a	95,978
b	Household employee wages not reported on Form(s) W-2	1b	
c	Tip income not reported on line 1a (see instructions)	1c	
d	Medicaid waiver payments not reported on Form(s) W-2 (see instructions)	1d	
e	Taxable dependent care benefits from Form 2441, line 26	1e	
f	Employer-provided adoption benefits from Form 8839, line 29	1f	
g	Wages from Form 8919, line 6	1g	
h	Other earned income (see instructions)	1h	
i	Nontaxable combat pay election (see instructions) 1i		
z	Add lines 1a through 1h	1z	95,978
2a	Tax-exempt interest 2a	b Taxable interest	2b
3a	Qualified dividends 3a	b Ordinary dividends	3b 1
4a	IRA distributions 4a	b Taxable amount	4b
5a	Pensions and annuities 5a	b Taxable amount	5b
6a	Social security benefits 6a	b Taxable amount	6b
c	If you elect to use the lump-sum election method, check here (see instructions) ☐		
7	Capital gain or (loss). Attach Schedule D if required. If not required, check here ☐	7	(3,000)
8	Additional income from Schedule 1, line 10	8	
9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your **total income**	9	92,979
10	Adjustments to income from Schedule 1, line 26	10	
11	Subtract line 10 from line 9. This is your **adjusted gross income**	11	92,979
12	**Standard deduction or itemized deductions** (from Schedule A)	12	13,850
13	Qualified business income deduction from Form 8995 or Form 8995-A	13	
14	Add lines 12 and 13	14	13,850
15	Subtract line 14 from line 11. If zero or less, enter -0-. This is your **taxable income**	15	79,129

Tax and Credits	16	**Tax** (see instructions). Check if any from Form(s): **1** ☐ 8814 **2** ☐ 4972 **3** ☐		16	12,715
	17	Amount from Schedule 2, line 3		17	
	18	Add lines 16 and 17		18	12,715
	19	Child tax credit or credit for other dependents from Schedule 8812		19	
	20	Amount from Schedule 3, line 8		20	
	21	Add lines 19 and 20		21	0
	22	Subtract line 21 from line 18. If zero or less, enter -0-		22	12,715
	23	Other taxes, including self-employment tax, from Schedule 2, line 21		23	
	24	Add lines 22 and 23. This is your **total tax**		24	12,715
Payments	25	Federal income tax withheld from:			
	a	Form(s) W-2	25a 13,376		
	b	Form(s) 1099	25b		
	c	Other forms (see instructions)	25c		
	d	Add lines 25a through 25c		25d	13,376
If you have a qualifying child, attach Sch. EIC.	26	2023 estimated tax payments and amount applied from 2022 return		26	
	27	Earned income credit (EIC)	27		
	28	Additional child tax credit from Schedule 8812	28		
	29	American opportunity credit from Form 8863, line 8	29		
	30	Reserved for future use	30		
	31	Amount from Schedule 3, line 15	31		
	32	Add lines 27, 28, 29, and 31. These are your **total other payments and refundable credits**		32	0
	33	Add lines 25d, 26, and 32. These are your **total payments**		33	13,376
Refund	34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you **overpaid**		34	661
	35a	Amount of line 34 you want **refunded to you.** If Form 8888 is attached, check here ☐		35a	661
Direct deposit? See instructions.	b	Routing number 072000326 **c** Type: ☒ Checking ☐ Savings			
	d	Account number 209107561			
	36	Amount of line 34 you want **applied to your 2024 estimated tax**	36		
Amount You Owe	37	Subtract line 33 from line 24. This is the **amount you owe.** For details on how to pay, go to *www.irs.gov/Payments* or see instructions		37	0
	38	Estimated tax penalty (see instructions)	38		

Third Party Designee

Do you want to allow another person to discuss this return with the IRS? See instructions ☐ **Yes.** Complete below. ☒ **No**

Designee's name | Phone no. | Personal identification number (PIN)

Sign Here

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 belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Your signature	Date	Your occupation	If the IRS sent you an Identity Protection PIN, enter it here (see inst.)
06797	02-19-2024		
Spouse's signature. If a joint return, **both** must sign.	Date	Spouse's occupation	If the IRS sent your spouse an Identity Protection PIN, enter it here (see inst.)

Joint return? See instructions. Keep a copy for your records.

Phone no. 248-767-2249 Email address rpatel1961@gmail.com

Paid Preparer Use Only

Preparer's signature	Date	PTIN	Check if:
HASMUKH PATEL	04-11-2024	P00142671	☐ Self-employed
Preparer's name HASMUKH PATEL	Phone no. 248-626-4200		
Firm's name HP AND ASSOCIATES PC			
Firm's address 27950 Orchard Lake Rd Ste110 Farmington Hills, MI 48334		Firm's EIN 38-3334800	

CHASE

JPMorgan Chase Bank, N.A.
P O Box 182051
Columbus, OH 43218 - 2051

March 26, 2024 through April 23, 2024
Account Number: **000000209107561**

CUSTOMER SERVICE INFORMATION

Web site:	**Chase.com**
Service Center:	**1-800-935-9935**
Para Espanol:	1-877-312-4273
International Calls:	1-713-262-1679

We accept operator relay calls

00064762 DRE 021 219 11524 NNNNNNNNNNN 1 000000000 17 0000

ANISH R PATEL
44413 MIDWAY DR
NOVI MI 48375-3947

00064762010100000021

Good news – we've eliminated the Non-Chase ATM Fee for balance inquiries and transfers

As of December 10, 2023, we stopped charging the $3 Non-Chase ATM Fee for each balance inquiry or transfer you make at a non-Chase ATM.

We continue to charge a fee for withdrawals made at a non-Chase ATM (waived for eligible accounts) and the ATM owner/network will still charge a Surcharge Fee.[1] You won't be charged these fees when you use a Chase ATM.

For more information, please see the Fee Schedule in the **Additional Banking Services and Fees** at chase.com/disclosures.

If you have any questions, please call us at the number listed on this statement. We accept operator relay calls.

[1]For Chase Sapphire[SM] Checking, Chase Private Client Checking [SM] and Chase Private Client Savings [SM] accounts, we waive the Chase fee and refund ATM Surcharge Fees charged to you at non-Chase ATMs. For Chase Premier Plus Checking [SM], we waive the Chase fee for the first four Non-Chase ATM transactions each statement period.

CHECKING SUMMARY

Chase College Checking

	AMOUNT
Beginning Balance	**$39,459.59**
Deposits and Additions	7,656.54
ATM & Debit Card Withdrawals	-102.15
Electronic Withdrawals	-5,675.86
Ending Balance	**$41,338.12**

A Monthly Service Fee was **not** charged to your Chase College Checking account. Here are the ways you can avoid this fee during any statement period.

- **Have electronic deposits made into this account totaling $500.00 or more, such as payments from payroll providers or government benefit providers, by using (i) the ACH network, (ii) the Real Time Payment or FedNow[SM] network, or (iii) third party services that facilitate payments to your debit card using the Visa or Mastercard network.**
  (Your total electronic deposits this period were $10,988.47. Note: some deposits may be listed on your previous statement)
- **OR, keep an average ending day balance of $1,500.00 or more in this account.**
  (Your average ending day balance in this account was $37,766.62)

TRANSACTION DETAIL

DATE	DESCRIPTION	AMOUNT	BALANCE
	Beginning Balance		**$39,459.59**
03/27	Recurring Card Purchase 03/27 Netflix.Com Netflix.Com CA Card 7819	-22.99	39,436.60
03/28	Card Purchase 03/26 Zoob Zlb New York NY Card 7819	-55.76	39,380.84
04/01	Zelle Payment To Dhaval N Patel 20333246589	-2,200.00	37,180.84
04/02	Discover E-Payment 5114 Web ID: 2510020270	-3,205.51	33,975.33
04/03	Con Ed of NY Cecony 74914330001 CCD ID: 2462467002	-120.35	33,854.98
04/05	Huron Consulting 72691 PPD ID: 2110666114	**3,330.66**	37,185.64
04/09	Huron Consulting 73091 PPD ID: 1910666114	**334.23**	37,519.87
04/15	Card Purchase 04/13 Edawy Bro (2) Astoria NY Card 7819	-23.40	37,496.47
04/15	Zelle Payment To Andrew Jpm99Afh5Hfr	-150.00	37,346.47
04/19	Irs Treas 310 Tax Ref PPD ID: 9111736946	**661.00**	38,007.47
04/22	Huron Consulting 73751 PPD ID: 2110666114	**3,330.65**	41,338.12
	Ending Balance		**$41,338.12**

IN CASE OF ERRORS OR QUESTIONS ABOUT YOUR ELECTRONIC FUNDS TRANSFERS:

Call us at 1-866-564-2262 or write us at the address on the front of this statement immediately if you think your statement or receipt is incorrect or if you need more information about a transfer listed on the statement or receipt.

For personal accounts only: We must hear from you no later than 60 days after we sent you the FIRST statement on which the problem or error appeared. Be prepared to give us the following information:

- Your name and account number;
- A description of the error or the transaction you are unsure about, and why you think it is an error or want more information; and
- The amount of the suspected error.

We will investigate your complaint and will correct any error promptly. If we take more than 10 business days (or 20 business days for new accounts) to do this, we will credit your account for the amount you think is in error so that you will have use of the money during the time it takes us to complete our investigation.

For business accounts, see your deposit account agreement or other applicable agreements that govern your account for details.

IN CASE OF ERRORS OR QUESTIONS ABOUT NON-ELECTRONIC FUNDS TRANSFERS: Contact us immediately if your statement is incorrect or if you need more information about any non-electronic funds transfers on this statement. For more details, see your deposit account agreement or other applicable agreements that govern your account.

JPMorgan Chase Bank, N.A. Member FDIC

CHASE

JPMorgan Chase Bank, N.A.
P O Box 182051
Columbus, OH 43218 - 2051

April 24, 2024 through May 23, 2024
Account Number: **000000209107561**

CUSTOMER SERVICE INFORMATION

Web site:	**Chase.com**
Service Center:	**1-800-935-9935**
Para Espanol:	1-877-312-4273
International Calls:	1-713-262-1679

We accept operator relay calls

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ANISH R PATEL
44413 MIDWAY DR
NOVI MI 48375-3947

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CHECKING SUMMARY

Chase College Checking

	AMOUNT
Beginning Balance	**$41,338.12**
Deposits and Additions	7,917.13
ATM & Debit Card Withdrawals	-1,290.96
Electronic Withdrawals	-7,349.45
Fees	-12.00
Ending Balance	**$40,602.84**

A Monthly Service Fee was **not** charged to your Chase College Checking account. Here are the ways you can avoid this fee during any statement period.

- **Have electronic deposits made into this account totaling $500.00 or more, such as payments from payroll providers or government benefit providers, by using (i) the ACH network, (ii) the Real Time Payment or FedNow[SM] network, or (iii) third party services that facilitate payments to your debit card using the Visa or Mastercard network.**
  (Your total electronic deposits this period were $11,878.78. Note: some deposits may be listed on your previous statement)

- **OR, keep an average ending day balance of $1,500.00 or more in this account.**
  (Your average ending day balance in this account was $39,064.68)

TRANSACTION DETAIL

DATE	DESCRIPTION	AMOUNT	BALANCE
	Beginning Balance		**$41,338.12**
04/26	NY State Nysttaxrfd PPD ID: 4146013200	**851.00**	42,189.12
04/29	Recurring Card Purchase 04/27 Netflix.Com Netflix.Com CA Card 7819	-22.99	42,166.13
04/29	Discover E-Payment 5114 Web ID: 2510020270	-2,896.83	39,269.30
05/01	Zelle Payment From Jude Jordan Pncaa0Kkf69J	**30.00**	39,299.30
05/02	Con Ed of NY Cecony 74914330001 CCD ID: 2462467002	-147.43	39,151.87
05/03	Zelle Payment To Dhaval N Patel 20658076510	-2,190.00	36,961.87
05/06	Payment Sent 05/03 Apple Cash Balance Ad 877-233-8552 CA Card 7819	-100.00	36,861.87
05/06	Non-Chase ATM Withdraw 05/03 3325 Las Vegas Blvd Sou Las Vegas NV Card 7819	-209.99	36,651.88
05/06	Non-Chase ATM Withdraw 05/04 3730 Las Vegas Blvd S N Las Vegas NV Card 7819	-109.99	36,541.89

TRANSACTION DETAIL *(continued)*

DATE	DESCRIPTION	AMOUNT	BALANCE
05/06	Non-Chase ATM Withdraw 05/04 3730 Las Vegas Blvd S N Las Vegas NV Card 7819	-109.99	36,431.90
05/06	Non-Chase ATM Withdraw 05/05 3025 Sammy Davis Jr Dri Las Vegas NV Card 7819	-360.00	36,071.90
05/06	Venmo Payment 1034182872749 Web ID: 3264681992	-100.00	35,971.90
05/06	Venmo Payment 1034201037104 Web ID: 3264681992	-200.00	35,771.90
05/06	Non-Chase ATM Fee-With	-3.00	35,768.90
05/06	Non-Chase ATM Fee-With	-3.00	35,765.90
05/06	Non-Chase ATM Fee-With	-3.00	35,762.90
05/06	Non-Chase ATM Fee-With	-3.00	35,759.90
05/07	Huron Consulting 74781 PPD ID: 2110666114	**3,341.77**	39,101.67
05/08	Venmo Payment 1034257900620 Web ID: 3264681992	-550.00	38,551.67
05/08	Venmo Payment 1034257995403 Web ID: 3264681992	-150.00	38,401.67
05/21	Huron Consulting 75791 PPD ID: 1910666114	**343.67**	38,745.34
05/21	Card Purchase With Pin 05/21 Maximeyes Optical 200 New York NY Card 7819	-328.00	38,417.34
05/22	Huron Consulting 75671 PPD ID: 2110666114	**3,350.69**	41,768.03
05/22	Payment Sent 05/21 Apple Cash Balance Ad 877-233-8552 CA Card 7819	-50.00	41,718.03
05/23	Zelle Payment To Eryn Jpm99Ahis9T2	-200.00	41,518.03
05/23	American Express ACH Pmt M9040 Web ID: 2005032111	-915.19	40,602.84
	Ending Balance		**$40,602.84**

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- A description of the error or the transaction you are unsure about, and why you think it is an error or want more information; and
- The amount of the suspected error.

We will investigate your complaint and will correct any error promptly. If we take more than 10 business days (or 20 business days for new accounts) to do this, we will credit your account for the amount you think is in error so that you will have use of the money during the time it takes us to complete our investigation.

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IN CASE OF ERRORS OR QUESTIONS ABOUT NON-ELECTRONIC FUNDS TRANSFERS: Contact us immediately if your statement is incorrect or if you need more information about any non-electronic funds transfers on this statement. For more details, see your deposit account agreement or other applicable agreements that govern your account.

JPMorgan Chase Bank, N.A. Member FDIC

CHASE

JPMorgan Chase Bank, N.A.
P O Box 182051
Columbus, OH 43218 - 2051

May 24, 2024 through June 26, 2024
Account Number: **000000209107561**

CUSTOMER SERVICE INFORMATION

Web site:	**Chase.com**
Service Center:	**1-800-935-9935**
Para Espanol:	1-877-312-4273
International Calls:	1-713-262-1679

We accept operator relay calls

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ANISH R PATEL
44413 MIDWAY DR
NOVI MI 48375-3947

00632740101000000021

CHECKING SUMMARY

Chase College Checking

	AMOUNT
Beginning Balance	**$40,602.84**
Deposits and Additions	7,103.53
ATM & Debit Card Withdrawals	-422.98
Electronic Withdrawals	-7,764.07
Fees	-3.00
Ending Balance	**$39,516.32**

A Monthly Service Fee was **not** charged to your Chase College Checking account. Here are the ways you can avoid this fee during any statement period.

- **Have electronic deposits made into this account totaling $500.00 or more, such as payments from payroll providers or government benefit providers, by using (i) the ACH network, (ii) the Real Time Payment or FedNow[SM] network, or (iii) third party services that facilitate payments to your debit card using the Visa or Mastercard network.**
  (Your total electronic deposits this period were $7,103.53. Note: some deposits may be listed on your previous statement)

- **OR, keep an average ending day balance of $1,500.00 or more in this account.**
  (Your average ending day balance in this account was $39,237.06)

TRANSACTION DETAIL

DATE	DESCRIPTION	AMOUNT	BALANCE
	Beginning Balance		**$40,602.84**
05/24	Discover E-Payment 5114 Web ID: 2510020270	-3,498.35	37,104.49
05/28	Huron Consulting 76301 PPD ID: 1910666114	**342.71**	37,447.20
05/28	Zelle Payment To Eryn Jpm99Ahnqzbg	-250.00	37,197.20
05/28	Non-Chase ATM Withdraw 05/26 505 West 37th Street New York NY Card 7819	-42.95	37,154.25
05/28	Recurring Card Purchase 05/27 Netflix.Com 408-5403700 CA Card 7819	-22.99	37,131.26
05/28	Non-Chase ATM Fee-With	-3.00	37,128.26
05/31	Payment Sent 05/30 Apple Cash Balance Ad 877-233-8552 CA Card 7819	-50.00	37,078.26
05/31	Con Ed of NY Cecony 74914330001 CCD ID: 2462467002	-183.32	36,894.94
06/07	Huron Consulting 76761 PPD ID: 2110666114	**2,356.84**	39,251.78

TRANSACTION DETAIL *(continued)*

DATE	DESCRIPTION	AMOUNT	BALANCE
06/07	Payment Sent 06/06 Apple Cash Balance Ad 877-233-8552 CA Card 7819	-50.00	39,201.78
06/10	Payment Sent 06/09 Apple Cash Balance Ad 877-233-8552 CA Card 7819	-50.00	39,151.78
06/10	Card Purchase 06/09 Sp Moma Design Store Store.Moma.OR NY Card 7819	-52.21	39,099.57
06/14	Leerink-Osv 0000504037 PPD ID: 00005074	**4,403.98**	43,503.55
06/20	Card Purchase 06/19 Tst* LA Pecora Bianca 1 New York NY Card 7819	-137.33	43,366.22
06/20	Card Purchase 06/19 Sundae's Best New York NY Card 7819	-17.50	43,348.72
06/21	Discover E-Payment 5114 Web ID: 2510020270	-3,658.66	39,690.06
06/24	Con Ed of NY Cecony 74914330001 CCD ID: 2462467002	-173.74	39,516.32
	Ending Balance		**$39,516.32**

IN CASE OF ERRORS OR QUESTIONS ABOUT YOUR ELECTRONIC FUNDS TRANSFERS:

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- Your name and account number;
- A description of the error or the transaction you are unsure about, and why you think it is an error or want more information; and
- The amount of the suspected error.

We will investigate your complaint and will correct any error promptly. If we take more than 10 business days (or 20 business days for new accounts) to do this, we will credit your account for the amount you think is in error so that you will have use of the money during the time it takes us to complete our investigation.

For business accounts, see your deposit account agreement or other applicable agreements that govern your account for details.

IN CASE OF ERRORS OR QUESTIONS ABOUT NON-ELECTRONIC FUNDS TRANSFERS: Contact us immediately if your statement is incorrect or if you need more information about any non-electronic funds transfers on this statement. For more details, see your deposit account agreement or other applicable agreements that govern your account.

JPMorgan Chase Bank, N.A. Member FDIC

LEERINK PARTNERS

Leerink Partners LLC 53 State Street 40th Floor Boston, MA 02109

Anish Patel 505 W 37th St Apt 2907 New York, NY 10018

Name	Company	Employee ID	Pay Period Begin	Pay Period End	Check Date	Check Number
Anish Patel	Leerink Partners LLC	006410	06/01/2024	06/15/2024	06/14/2024	

	Gross Pay	Employee Pre Tax Deductions	Employee Taxes	Employee Post Tax Deductions	Net Pay
Current	6,944.46	139.24	2,401.24	0.00	4,403.98
YTD	6,944.46	139.24	2,401.24	0.00	4,403.98

Earnings

Description	Dates	Hours	Rate	Amount	YTD
GTL Imputed Income	06/01/2024 - 06/15/2024	0	0	6.00	12.00
Long Term Disability	06/01/2024 - 06/15/2024	0	0	10.94	21.88
Regular Salary	06/01/2024 - 06/15/2024	86.67	0	5,208.34	6,944.46
GTL Imputed Income	05/28/2024 - 05/31/2024	0	0	6.00	
Long Term Disability	05/28/2024 - 05/31/2024	0	0	10.94	
Regular Salary	05/28/2024 - 05/31/2024	28.88997	0	1,736.12	
Earnings				6,978.34	6,978.34

Employee Taxes

Description	Amount	YTD
OASDI	424.02	424.02
Medicare	99.17	99.17
Federal Withholding	1,202.61	1,202.61
State Tax - NY	405.93	405.93
City Tax - NY	268.21	268.21
NY SDI - NYSDI	1.30	1.30
Employee Taxes	2,401.24	2,401.24

Employee Pre Tax Deductions

Description	Amount	YTD
Pre Tax Dental	0.00	14.06
Pre Tax Med	0.00	121.74
Pre Tax Vision	0.00	3.44
Pre Tax Dental - 05/28/2024 - 05/31/2024	14.06	
Pre Tax Med - 05/28/2024 - 05/31/2024	121.74	
Pre Tax Vision - 05/28/2024 - 05/31/2024	3.44	
Employee Pre Tax Deductions	139.24	139.24

Employer Paid Benefits

Description	Amount	YTD
Basic AD&D (employer)	10.00	20.00
Basic AD&D (employer) - 05/28/2024 - 05/31/2024	10.00	
Employer Paid Benefits	20.00	20.00

Taxable Wages

Description	Amount	YTD
OASDI - Taxable Wages	6,839.10	6,839.10
Medicare - Taxable Wages	6,839.10	6,839.10
Federal Withholding - Taxable Wages	6,839.10	6,839.10

	Federal	State
Marital Status	Single or Married filing separately	Single or Head of Household
Allowances	0	0
Additional Withholding	0	0

PTO

Description	Accrued	Reduced	Available
USA - Personal Days	0	0	16
USA - Sick Days	0	0	64
USA - Vacation	0	0	1.29032

Payment Information

Bank	Account Name	Account Number	USD Amount	Amount	
Chase	Chase ******7561	******7561		4,403.98	USD

LEERINK PARTNERS

Leerink Partners LLC 53 State Street 40th Floor Boston, MA 02109

Anish Patel 505 W 37th St Apt 2907 New York, NY 10018

Name	Company	Employee ID	Pay Period Begin	Pay Period End	Check Date	Check Number
Anish Patel	Leerink Partners LLC	006410	06/16/2024	06/30/2024	06/28/2024	

	Gross Pay	Employee Pre Tax Deductions	Employee Taxes	Employee Post Tax Deductions	Net Pay
Current	5,208.34	139.24	1,640.11	0.00	3,428.99
YTD	12,152.80	278.48	4,041.35	0.00	7,832.97

Earnings

Description	Dates	Hours	Rate	Amount	YTD
GTL Imputed Income	06/16/2024 - 06/30/2024	0	0	6.00	18.00
Long Term Disability	06/16/2024 - 06/30/2024	0	0	10.94	32.82
Regular Salary	06/16/2024 - 06/30/2024	86.67	0	5,208.34	12,152.80
Earnings				5,225.28	12,203.62

Employee Taxes

Description	Amount	YTD
OASDI	315.34	739.36
Medicare	73.74	172.91
Federal Withholding	783.31	1,985.92
State Tax - NY	272.46	678.39
City Tax - NY	193.96	462.17
NY SDI - NYSDI	1.30	2.60
Employee Taxes	1,640.11	4,041.35

Employee Pre Tax Deductions

Description	Amount	YTD
Pre Tax Dental	14.06	28.12
Pre Tax Med	121.74	243.48
Pre Tax Vision	3.44	6.88
Employee Pre Tax Deductions	139.24	278.48

Employer Paid Benefits

Description	Amount	YTD
Basic AD&D (employer)	10.00	30.00
Employer Paid Benefits	10.00	30.00

Taxable Wages

Description	Amount	YTD
OASDI - Taxable Wages	5,086.04	11,925.14
Medicare - Taxable Wages	5,086.04	11,925.14
Federal Withholding - Taxable Wages	5,086.04	11,925.14

	Federal	State
Marital Status	Single or Married filing separately	Single or Head of Household
Allowances	0	0
Additional Withholding	0	0

PTO

Description	Accrued	Reduced	Available
USA - Personal Days	0	0	16
USA - Sick Days	0	0	64
USA - Vacation	10	0	11.29032

Payment Information

Bank	Account Name	Account Number	USD Amount	Amount	
Chase	Chase ******7561	******7561		3,428.99	USD


MICHIGAN MI USA
ENHANCED
DRIVER LICENSE
P 340 067 730 947
DOB 12-13-1995
ISS 08-02-2021
EXP 12-13-2024
ANISH RAJESH PATEL
44413 MIDWAY DR
NOVI, MI 48375-3947
Sex M
Hgt 604
Eyes BRO
Lic Type E,O
End NONE
Restrictions Corrective Lens
12-13-1995
DD 1201422759121
Rev 07-01-2012

Rental Application for **685 First Ave**

Notice: All adult applicants (18 years or older) must complete a separate application for rental.

APPLICANT INFORMATION

LAST NAME	FIRST NAME	M.I.	SUFFIX
Berdyklychev	Murad		

SSN	BIRTH DATE	PHONE - TYPE
167-88-****	12/4/1998	(857) 928 - 1002 - Mobile

EMAIL
murad.berdyklychev@gmail.com

CURRENT ADDRESS

STREET ADDRESS	CITY	STATE	ZIP
2131 Lawrence Street	Denver	CO	80205

DATE IN	DATE OUT	MONTHLY RENT
	current	$1,700.00 / Mo.

EMPLOYMENT & INCOME INFORMATION

OCCUPATION	EMPLOYER/COMPANY
Investment analyst	Partners Group

SUPERVISOR	SUPERVISOR PHONE	SALARY	START DATE
N/A	(857) 928 - 1002	$130,000.00/Yr.	

EMPLOYER ADDRESS	CITY	STATE	ZIP
1600 entrepreneurial drive	New York	NY	10016

BACKGROUND INFORMATION

Have you ever filed for bankruptcy?	Have you ever willfully refused to pay rent when due?
NO	NO
Have you ever been evicted from a tenancy or left owing money?	**Have you ever been convicted of a crime?**
NO	NO

Preferred Mailing Address:
2131 Lawrence Street, Denver, CO 80205 - US

APPLICATION CONSENT

I hereby warrant that all statements set forth above are true.

I understand that a consumer report and/or an investigative consumer report may be requested in connection with my prospective or continuing housing or guarantor application with **685 First Ave** through RP On-Site LLC (On-Site). I understand that these reports may include information concerning my character, employment and income verification, general reputation, personal characteristics, public records information, criminal records information, education, qualifications, motor vehicle record, mode of living, credit and indebtedness information, and any other information which may reflect upon my potential for tenancy or guarantor status gathered from any individual, organization, entity, agency, or other source which may have knowledge concerning any such items of information.

I understand that **685 First Ave** may require income and employment verification in connection with my application. I further understand that income and employment verification require access to my employment, income, and payroll related information. I authorize and consent to the access to, use, and release of such information by On-Site, Trans Union LLC, and other applicable credit bureaus for the purpose of providing the verification services in relation to my application and during the course of any ongoing lease obligation arising from such application.

I understand that if an investigative consumer report is requested about me, I have the right to make a written request to **685 First Ave**, within a reasonable period of time, for complete and accurate disclosure of the nature and scope of the investigation requested.

I consent to the delivery of all notices or disclosures required by law via any medium so chosen by **685 First Ave** or On-Site, including but not limited to email or other electronic transmission. I understand that all notices shall be deemed received upon being sent.

By submitting this application, I certify that I have read and fully understand the disclosures and my rights detailed above and authorize On-Site to obtain, for the purpose of determining my eligibility for initial or continued tenancy or guarantor status, a consumer report and/or investigative consumer report and to disclose all information obtained by On-Site to **685 First Ave**, its affiliates, and assigns now and in the future. I also certify that I have read and fully understand my rights under the FCRA available at https://www.on-site.com/resources/consent/fcraDisclosuresConsent.pdf.

I understand that, upon written request, I will be informed whether or not a consumer report or an investigative consumer report was requested and, if such a report was requested, informed of the name and address of the credit reporting agency that furnished the report. With regard to "investigative consumer reports", I further understand that when I receive the name and address of the consumer reporting agency, I may request a copy of such report by contacting such agency. I acknowledge that I have received and read Article 23-A of the New York Correction Law (https://www.on-site.com/resources/consent/correctionLawArticle23a.pdf)

☒ *Application consent was digitally accepted by Murad Berdyklychev*

Signed by Murad Berdyklychev
Wed Jun 26 2024 12:02:30 AM EDT
Key: A6535338; IP Address: 174.51.204.194

Murad Berdyklychev *(Applicant)* *Date*

The following charge(s) will appear on your card statement as *"ClickPay"*

Application Fee - Charge Details

Name on Card	Account Number	Reference Number	Authorized
Murad Berdyklychev	XXXXXXXXXXXX5882	14765828	$21.50

This card has been authorized for the amount above and will be charged when the application is processed.

Form **1040** Department of the Treasury—Internal Revenue Service **U.S. Individual Income Tax Return** **2023** OMB No. 1545-0074 IRS Use Only—Do not write or staple in this space.

For the year Jan. 1–Dec. 31, 2023, or other tax year beginning _____, 2023, ending _____, 20____ See separate instructions.

Your first name and middle initial	Last name	Your social security number
Murad	Berdyklychev	167 88 9917
If joint return, spouse's first name and middle initial	Last name	Spouse's social security number

Home address (number and street). If you have a P.O. box, see instructions.	Apt. no.
2131 Lawrence St	605

City, town, or post office. If you have a foreign address, also complete spaces below.	State	ZIP code
Denver	CO	802052896

Foreign country name	Foreign province/state/county	Foreign postal code

Presidential Election Campaign
Check here if you, or your spouse if filing jointly, want $3 to go to this fund. Checking a box below will not change your tax or refund. ☐ **You** ☐ **Spouse**

Filing Status Check only one box.
☒ Single ☐ Head of household (HOH)
☐ Married filing jointly (even if only one had income)
☐ Married filing separately (MFS) ☐ Qualifying surviving spouse (QSS)
If you checked the MFS box, enter the name of your spouse. If you checked the HOH or QSS box, enter the child's name if the qualifying person is a child but not your dependent: _____

Digital Assets At any time during 2023, did you: (a) receive (as a reward, award, or payment for property or services); or (b) sell, exchange, or otherwise dispose of a digital asset (or a financial interest in a digital asset)? (See instructions.) ☐ **Yes** ☒ **No**

Standard Deduction **Someone can claim:** ☐ You as a dependent ☐ Your spouse as a dependent
☐ Spouse itemizes on a separate return or you were a dual-status alien

Age/Blindness **You:** ☐ Were born before January 2, 1959 ☐ Are blind **Spouse:** ☐ Was born before January 2, 1959 ☐ Is blind

Dependents (see instructions): If more than four dependents, see instructions and check here . . ☐

(1) First name Last name	(2) Social security number	(3) Relationship to you	(4) Check the box if qualifies for (see instructions): Child tax credit	Credit for other dependents
			☐	☐
			☐	☐
			☐	☐
			☐	☐

Income

Attach Form(s) W-2 here. Also attach Forms W-2G and 1099-R if tax was withheld.
If you did not get a Form W-2, see instructions.

1a	Total amount from Form(s) W-2, box 1 (see instructions)				1a	135,080.
b	Household employee wages not reported on Form(s) W-2				1b	
c	Tip income not reported on line 1a (see instructions)				1c	
d	Medicaid waiver payments not reported on Form(s) W-2 (see instructions)				1d	
e	Taxable dependent care benefits from Form 2441, line 26				1e	
f	Employer-provided adoption benefits from Form 8839, line 29				1f	
g	Wages from Form 8919, line 6				1g	
h	Other earned income (see instructions)				1h	0.
i	Nontaxable combat pay election (see instructions)	1i				
z	Add lines 1a through 1h				1z	135,080.

Attach Sch. B if required.

2a	Tax-exempt interest	2a		b Taxable interest	2b	
3a	Qualified dividends	3a		b Ordinary dividends	3b	
4a	IRA distributions	4a		b Taxable amount	4b	
5a	Pensions and annuities	5a		b Taxable amount	5b	
6a	Social security benefits	6a		b Taxable amount	6b	
c	If you elect to use the lump-sum election method, check here (see instructions) ☐					
7	Capital gain or (loss). Attach Schedule D if required. If not required, check here ☐				7	
8	Additional income from Schedule 1, line 10				8	3,162.
9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your **total income**				9	138,242.
10	Adjustments to income from Schedule 1, line 26				10	
11	Subtract line 10 from line 9. This is your **adjusted gross income**				11	138,242.
12	**Standard deduction or itemized deductions** (from Schedule A)				12	13,850.
13	Qualified business income deduction from Form 8995 or Form 8995-A				13	
14	Add lines 12 and 13				14	13,850.
15	Subtract line 14 from line 11. If zero or less, enter -0-. This is your **taxable income**				15	124,392.

Standard Deduction for—
- Single or Married filing separately, $13,850
- Married filing jointly or Qualifying surviving spouse, $27,700
- Head of household, $20,800
- If you checked any box under *Standard Deduction*, see instructions.

Tax and Credits	16	**Tax** (see instructions). Check if any from Form(s): **1** ☐ 8814 **2** ☐ 4972 **3** ☐	16	23,254.
	17	Amount from Schedule 2, line 3	17	
	18	Add lines 16 and 17	18	23,254.
	19	Child tax credit or credit for other dependents from Schedule 8812	19	
	20	Amount from Schedule 3, line 8	20	
	21	Add lines 19 and 20	21	
	22	Subtract line 21 from line 18. If zero or less, enter -0-	22	23,254.
	23	Other taxes, including self-employment tax, from Schedule 2, line 21	23	0.
	24	Add lines 22 and 23. This is your **total tax**	24	23,254.
Payments	25	Federal income tax withheld from:		
	a	Form(s) W-2 — 25a: 22,085.		
	b	Form(s) 1099 — 25b:		
	c	Other forms (see instructions) — 25c:		
	d	Add lines 25a through 25c	25d	22,085.
If you have a qualifying child, attach Sch. EIC.	26	2023 estimated tax payments and amount applied from 2022 return	26	
	27	Earned income credit (EIC) — No — 27:		
	28	Additional child tax credit from Schedule 8812 — 28:		
	29	American opportunity credit from Form 8863, line 8 — 29:		
	30	Reserved for future use — 30:		
	31	Amount from Schedule 3, line 15 — 31:		
	32	Add lines 27, 28, 29, and 31. These are your **total other payments and refundable credits**	32	
	33	Add lines 25d, 26, and 32. These are your **total payments**	33	22,085.
Refund	34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you **overpaid**	34	
	35a	Amount of line 34 you want **refunded to you**. If Form 8888 is attached, check here ☐	35a	
Direct deposit? See instructions.	b	Routing number X X X X X X X X X — **c** Type: ☐ Checking ☐ Savings		
	d	Account number X X X X X X X X X X X X X X X X		
	36	Amount of line 34 you want **applied to your 2024 estimated tax** — 36:		
Amount You Owe	37	Subtract line 33 from line 24. This is the **amount you owe**. For details on how to pay, go to *www.irs.gov/Payments* or see instructions	37	1,169.
	38	Estimated tax penalty (see instructions) — 38:		

Third Party Designee

Do you want to allow another person to discuss this return with the IRS? See instructions ☐ **Yes.** Complete below. ☒ **No**

Designee's name | Phone no. | Personal identification number (PIN)

Sign Here

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 belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Your signature	Date	Your occupation	If the IRS sent you an Identity Protection PIN, enter it here (see inst.)
		Investment Analyst	
Spouse's signature. If a joint return, **both** must sign.	Date	Spouse's occupation	If the IRS sent your spouse an Identity Protection PIN, enter it here (see inst.)

Joint return? See instructions. Keep a copy for your records.

Phone no. (857)928-1002 | Email address

Paid Preparer Use Only

Preparer's name	Preparer's signature	Date	PTIN	Check if: ☐ Self-employed

Firm's name Self-Prepared | Phone no.

Firm's address | Firm's EIN

CHASE

JPMorgan Chase Bank, N.A.
P O Box 182051
Columbus, OH 43218 - 2051

March 07, 2024 through April 04, 2024
Account Number: **000000616886704**

CUSTOMER SERVICE INFORMATION

Web site:	**Chase.com**
Service Center:	**1-800-935-9935**
Para Espanol:	1-877-312-4273
International Calls:	1-713-262-1679

We accept operator relay calls

00028016 DRE 501 211 09624 NNNNNNNNNNN 1 000000000 04 0000
MURAD BERDYKLYCHEV
2131 LAWRENCE ST APT 605
DENVER CO 80205-2896

00280160201000000022

Good news – we've eliminated the Non-Chase ATM Fee for balance inquiries and transfers

As of December 10, 2023, we stopped charging the $3 Non-Chase ATM Fee for each balance inquiry or transfer you make at a non-Chase ATM.

We continue to charge a fee for withdrawals made at a non-Chase ATM (waived for eligible accounts) and the ATM owner/network will still charge a Surcharge Fee.[1] You won't be charged these fees when you use a Chase ATM.

For more information, please see the Fee Schedule in the **Additional Banking Services and Fees** at chase.com/disclosures.

If you have any questions, please call us at the number listed on this statement. We accept operator relay calls.

[1]For Chase Sapphire[SM] Checking, Chase Private Client Checking [SM] and Chase Private Client Savings [SM] accounts, we waive the Chase fee and refund ATM Surcharge Fees charged to you at non-Chase ATMs. For Chase Premier Plus Checking [SM], we waive the Chase fee for the first four Non-Chase ATM transactions each statement period.

CHECKING SUMMARY

Chase Total Checking

	AMOUNT
Beginning Balance	**$52,036.51**
Deposits and Additions	9,937.03
ATM & Debit Card Withdrawals	-69.93
Electronic Withdrawals	-4,082.06
Fees	-3.00
Ending Balance	**$57,818.55**

TRANSACTION DETAIL

DATE	DESCRIPTION	AMOUNT	BALANCE
	Beginning Balance		**$52,036.51**
03/11	Real Time Payment Credit Recd From Aba/Contr Bnk-021214891 From: Bnf-Draftkings Credit Via Trustly Ref: 98395Faecd9D40F2 Info: Text-/Vxr/00100000145995171 Iid: 20240311021214273P1B12A601739678107 Recd: 23:44:38 Trn: 0123211072Gb	**188.01**	52,224.52
03/11	Real Time Payment Credit Recd From Aba/Contr Bnk-021214891 From: Bnf-Draftkings Credit Via Trustly Ref: 39367F933E3E4169 Info: Text-/Vxr/00100000145995171 Iid: 20240311021214273P1B6X7U80413222658 Recd: 20:46:37 Trn: 0032991072Gd	**93.00**	52,317.52
03/11	Card Purchase With Pin 03/09 S&S #505 Denver CO Card 4122	-24.92	52,292.60
03/11	Card Purchase With Pin 03/11 Valley Fuel Glenwood Spri CO Card 4122	-26.01	52,266.59
03/12	03/12 Payment To Chase Card Ending IN 8963	-1,300.00	50,966.59
03/12	03/12 Payment To Chase Card Ending IN 3295	-59.77	50,906.82
03/15	Partners Group (Direct Dep PPD ID: 9111111103	**3,687.76**	54,594.58
03/22	Partners Group (0003829123 US1020000006172 CTX ID: 5134118892	**2,334.37**	56,928.95
03/29	Partners Group (Direct Dep PPD ID: 9111111103	**3,633.89**	60,562.84
03/29	03/29 Payment To Chase Card Ending IN 3295	-0.28	60,562.56
04/01	Non-Chase ATM Withdraw 03/30 1201 20th St Denver CO Card 4122	-19.00	60,543.56
04/01	03/31 Payment To Chase Card Ending IN 5882	-1,000.00	59,543.56
04/01	Non-Chase ATM Fee-With	-3.00	59,540.56
04/02	Bilt-Rp-ACH Rent Pmt Bilt3 Web ID: 1084437240	-1,722.01	57,818.55
	Ending Balance		**$57,818.55**

A Monthly Service Fee was **not** charged to your Chase Total Checking account. Here are the three ways you can avoid this fee during any statement period.

- **Have electronic deposits made into this account totaling $500.00 or more, such as payments from payroll providers or government benefit providers, by using (i) the ACH network, (ii) the Real Time Payment or FedNow℠ network, or (iii) third party services that facilitate payments to your debit card using the Visa or Mastercard network.**
  (Your total electronic deposits this period were $9,937.03. Note: some deposits may be listed on your previous statement)

- **OR, keep a balance at the beginning of each day of $1,500.00 or more in this account.**
  (Your lowest beginning day balance was $50,906.82)

- **OR, keep an average beginning day balance of $5,000.00 or more in qualifying linked deposits and investments.**
  (Your average beginning day balance of qualifying linked deposits and investments was $55,265.50)

IN CASE OF ERRORS OR QUESTIONS ABOUT YOUR ELECTRONIC FUNDS TRANSFERS:

Call us at 1-866-564-2262 or write us at the address on the front of this statement immediately if you think your statement or receipt is incorrect or if you need more information about a transfer listed on the statement or receipt.

For personal accounts only: We must hear from you no later than 60 days after we sent you the FIRST statement on which the problem or error appeared. Be prepared to give us the following information:

- Your name and account number;
- A description of the error or the transaction you are unsure about, and why you think it is an error or want more information; and
- The amount of the suspected error.

We will investigate your complaint and will correct any error promptly. If we take more than 10 business days (or 20 business days for new accounts) to do this, we will credit your account for the amount you think is in error so that you will have use of the money during the time it takes us to complete our investigation.

For business accounts, see your deposit account agreement or other applicable agreements that govern your account for details.

IN CASE OF ERRORS OR QUESTIONS ABOUT NON-ELECTRONIC FUNDS TRANSFERS: Contact us immediately if your statement is incorrect or if you need more information about any non-electronic funds transfers on this statement. For more details, see your deposit account agreement or other applicable agreements that govern your account.

JPMorgan Chase Bank, N.A. Member FDIC

1028016020200000062

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CHASE

JPMorgan Chase Bank, N.A.
P O Box 182051
Columbus, OH 43218 - 2051

April 05, 2024 through May 06, 2024
Account Number: **000000616886704**

CUSTOMER SERVICE INFORMATION

Web site:	**Chase.com**
Service Center:	**1-800-935-9935**
Para Espanol:	1-877-312-4273
International Calls:	1-713-262-1679

We accept operator relay calls

00028322 DRE 501 211 12824 NNNNNNNNNNN 1 000000000 04 0000
MURAD BERDYKLYCHEV
2131 LAWRENCE ST APT 605
DENVER CO 80205-2896

00283220101000000021

CHECKING SUMMARY

Chase Total Checking

	AMOUNT
Beginning Balance	**$57,818.55**
Deposits and Additions	7,798.13
ATM & Debit Card Withdrawals	-452.91
Electronic Withdrawals	-53,447.73
Ending Balance	**$11,716.04**

TRANSACTION DETAIL

DATE	DESCRIPTION	AMOUNT	BALANCE
	Beginning Balance		**$57,818.55**
04/08	04/07 Payment To Chase Card Ending IN 5882	-1,200.00	56,618.55
04/11	04/11 Payment To Chase Card Ending IN 5882	-83.33	56,535.22
04/15	Partners Group (Direct Dep PPD ID: 9111111103	**3,687.76**	60,222.98
04/15	Irs Usataxpymt PPD ID: 3387702000	-1,169.00	59,053.98
04/15	Card Purchase With Pin 04/14 Peter Luger of Brookly Brooklyn NY Card 4122	-253.99	58,799.99
04/19	Partners Group (Direct Dep PPD ID: 9111111103	**508.23**	59,308.22
04/22	04/22 Payment To Chase Card Ending IN 5882	-1,900.00	57,408.22
04/22	04/22 Payment To Chase Card Ending IN 3295	-50.00	57,358.22
04/22	04/22 Online Transfer To Sav ...5532 Transaction#: 20546677822	-47,382.22	9,976.00
04/26	Card Purchase With Pin 04/26 Regala Card Littleton CO Card 4122	-18.67	9,957.33
04/29	04/27 Payment To Chase Card Ending IN 3295	-13.18	9,944.15
04/29	Card Purchase With Pin 04/27 Regala Card Littleton CO Card 4122	-26.25	9,917.90
04/30	Partners Group (Direct Dep PPD ID: 9111111103	**3,602.14**	13,520.04
04/30	04/30 Payment To Chase Card Ending IN 5882	-1,500.00	12,020.04
04/30	04/30 Payment To Chase Card Ending IN 3295	-150.00	11,870.04
05/06	Payment Sent 05/04 Venmo *Max Kauderer Visa Direct NY Card 4122	-52.00	11,818.04
05/06	Payment Sent 05/04 Venmo *Mace Lieberman Visa Direct NY Card 4122	-50.00	11,768.04
05/06	Payment Sent 05/05 Venmo *Mace Lieberman Visa Direct NY Card 4122	-52.00	11,716.04
	Ending Balance		**$11,716.04**

A Monthly Service Fee was **not** charged to your Chase Total Checking account. Here are the three ways you can avoid this fee during any statement period.

- **Have electronic deposits made into this account totaling $500.00 or more, such as payments from payroll providers or government benefit providers, by using (i) the ACH network, (ii) the Real Time Payment or FedNow[SM] network, or (iii) third party services that facilitate payments to your debit card using the Visa or Mastercard network.**
  (Your total electronic deposits this period were $7,798.13. Note: some deposits may be listed on your previous statement)

- **OR, keep a balance at the beginning of each day of $1,500.00 or more in this account.**
  (Your lowest beginning day balance was $9,917.90)

- **OR, keep an average beginning day balance of $5,000.00 or more in qualifying linked deposits and investments.**
  (Your average beginning day balance of qualifying linked deposits and investments was $37,228.42)

IN CASE OF ERRORS OR QUESTIONS ABOUT YOUR ELECTRONIC FUNDS TRANSFERS:

Call us at 1-866-564-2262 or write us at the address on the front of this statement immediately if you think your statement or receipt is incorrect or if you need more information about a transfer listed on the statement or receipt.

For personal accounts only: We must hear from you no later than 60 days after we sent you the FIRST statement on which the problem or error appeared. Be prepared to give us the following information:

- Your name and account number;
- A description of the error or the transaction you are unsure about, and why you think it is an error or want more information; and
- The amount of the suspected error.

We will investigate your complaint and will correct any error promptly. If we take more than 10 business days (or 20 business days for new accounts) to do this, we will credit your account for the amount you think is in error so that you will have use of the money during the time it takes us to complete our investigation.

For business accounts, see your deposit account agreement or other applicable agreements that govern your account for details.

IN CASE OF ERRORS OR QUESTIONS ABOUT NON-ELECTRONIC FUNDS TRANSFERS: Contact us immediately if your statement is incorrect or if you need more information about any non-electronic funds transfers on this statement. For more details, see your deposit account agreement or other applicable agreements that govern your account.

JPMorgan Chase Bank, N.A. Member FDIC

CHASE

JPMorgan Chase Bank, N.A.
P O Box 182051
Columbus, OH 43218 - 2051

May 07, 2024 through June 06, 2024
Account Number: **000000616886704**

CUSTOMER SERVICE INFORMATION

Web site:	**Chase.com**
Service Center:	**1-800-935-9935**
Para Espanol:	1-877-312-4273
International Calls:	1-713-262-1679

We accept operator relay calls

00028409 DRE 501 211 15924 NNNNNNNNNNN 1 000000000 04 0000
MURAD BERDYKLYCHEV
2131 LAWRENCE ST APT 605
DENVER CO 80205-2896

00264090101000000021

CHECKING SUMMARY

Chase Total Checking

	AMOUNT
Beginning Balance	**$11,716.04**
Deposits and Additions	14,703.03
ATM & Debit Card Withdrawals	-1,298.91
Electronic Withdrawals	-8,904.60
Fees	-3.00
Ending Balance	**$16,212.56**

TRANSACTION DETAIL

DATE	DESCRIPTION	AMOUNT	BALANCE
	Beginning Balance		**$11,716.04**
05/07	05/07 Payment To Chase Card Ending IN 5882	-2,600.00	9,116.04
05/07	Bilt-Rp-ACH Rent Pmt Bilt3 Web ID: 1084437240	-1,734.17	7,381.87
05/07	Payment Sent 05/07 Venmo *Max S Visa Direct NY Card 4122	-498.00	6,883.87
05/13	Real Time Payment Credit Recd From Aba/Contr Bnk-021214891 From: Bnf-Draftkings Credit Via Trustly Ref: F1315D5Aae544367 Info: Text-/Vxr/00100000145995171 Iid: 20240512021214273P1B862517335629758 Recd: 22:46:52 Trn: 0094930134GA	**118.45**	7,002.32
05/13	Remote Online Deposit 1	**1,073.00**	8,075.32
05/13	Payment Sent 05/13 Venmo *Max S Visa Direct NY Card 4122	-327.24	7,748.08
05/13	Payment Sent 05/13 Venmo *Max S Visa Direct NY Card 4122	-256.70	7,491.38
05/13	Payment Sent 05/13 Venmo *Max S Visa Direct NY Card 4122	-57.73	7,433.65
05/15	Partners Group (Direct Dep PPD ID: 9111111103	**3,657.76**	11,091.41
05/20	Card Purchase 05/17 Omnia Nightclub 702-2128804 NV Card 4122	-4.04	11,087.37
05/20	Non-Chase ATM Withdraw 05/18 3131 Las Vegas Blvd So Las Vegas NV Card 4122	-109.99	10,977.38
05/20	Non-Chase ATM Fee-With	-3.00	10,974.38
05/28	Online Transfer From Sav ...5532 Transaction#: 20893538868	**6,000.00**	16,974.38
05/28	05/26 Payment To Chase Card Ending IN 5882	-4,537.25	12,437.13
05/28	05/26 Payment To Chase Card Ending IN 3295	-33.18	12,403.95
05/28	Card Purchase With Pin 05/26 Regala Card Littleton CO Card 4122	-45.21	12,358.74

TRANSACTION DETAIL *(continued)*

DATE	DESCRIPTION	AMOUNT	BALANCE
05/31	Partners Group (Direct Dep PPD ID: 9111111103	**3,624.67**	15,983.41
06/03	Real Time Payment Credit Recd From Aba/Contr Bnk-021214891 From: Bnf-Draftkings Credit Via Trustly Ref: Ecd43D4Ce53249A8 Info: Text-/Vxr/00100000145995171 Iid: 20240602021214273P1B420Y50333794030 Recd: 00:26:43 Trn: 0156050154Gd	**51.50**	16,034.91
06/03	Draftkings Viatrustly PPD ID: 2481029880	**177.65**	16,212.56
	Ending Balance		**$16,212.56**

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  (Your total electronic deposits this period were $7,630.03. Note: some deposits may be listed on your previous statement)

- **OR, keep a balance at the beginning of each day of $1,500.00 or more in this account.**
  (Your lowest beginning day balance was $6,883.87)

- **OR, keep an average beginning day balance of $5,000.00 or more in qualifying linked deposits and investments.**
  (Your average beginning day balance of qualifying linked deposits and investments was $11,122.67)

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- Your name and account number;
- A description of the error or the transaction you are unsure about, and why you think it is an error or want more information; and
- The amount of the suspected error.

We will investigate your complaint and will correct any error promptly. If we take more than 10 business days (or 20 business days for new accounts) to do this, we will credit your account for the amount you think is in error so that you will have use of the money during the time it takes us to complete our investigation.

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JPMorgan Chase Bank, N.A. Member FDIC

CO.	FILE	DEPT.	CLOCK	VCHR. NO.	030
GKN	000857	100342		0000240025	1

Earnings Statement

PARTNERS GROUP (USA) INC.
1200 ENTREPRENEURIAL DRIVE
BROOMFIELD,CO 80021

Period Beginning: 06/01/2024
Period Ending: 06/15/2024
Pay Date: 06/14/2024

Filing Status: Single/Married filing separately
Exemptions/Allowances:
Federal: Standard Withholding Table

MURAD BERDYKLYCHEV
2131 LAWRENCE STREET
APT. 605
DENVER CO 80205

Earnings	rate	salary/hours	this period	year to date
Regular	5416.67	86.67	5,416.67	59,583.37
LTD			6.72	73.92
Bonus				47,500.00
Meal Allowance				898.11
Gross Pay			**$5,423.39**	108,055.40

Deductions	Statutory		
	Federal Income Tax	-801.09	19,542.53
	Social Security Tax	-336.35	6,700.46
	Medicare Tax	-78.66	1,567.04
	CO State Income Tax	-217.61	4,535.15
	Other		
	LTD	-6.72	
	PRICOFL	-24.38	
	401K$	-270.83*	2,708.30
	Misc Reimbursem		-508.23
	Net Pay	**$3,687.75**	
	Checking1	-3,687.75	
	Net Check	**$0.00**	

*** Excluded from federal taxable wages**

Your federal taxable wages this period are $5,154.06

Other Benefits and Information	this period	total to date
Annualized Slry	130,000.08	
Eligib Earns	5,416.67	107,083.37
Er Dental	25.73	283.03
Er Medical	429.54	
Er Pri	17.88	354.62
Er Vision	3.38	
Group Term Life	1.50	16.50
LTD	6.72	
401K Match	270.83	2,708.30
Employer Hsa		1,000.00
Totl Hrs Worked	86.67	
Sick Leave		56.00

Important Notes

COMPANY PH 303-606-3736

BASIS OF PAY: SALARY

Additional Tax Withholding Information

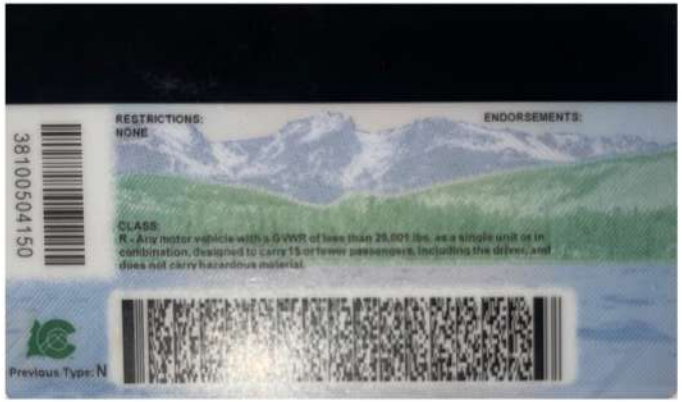
Taxable Marital Status:
CO: Single

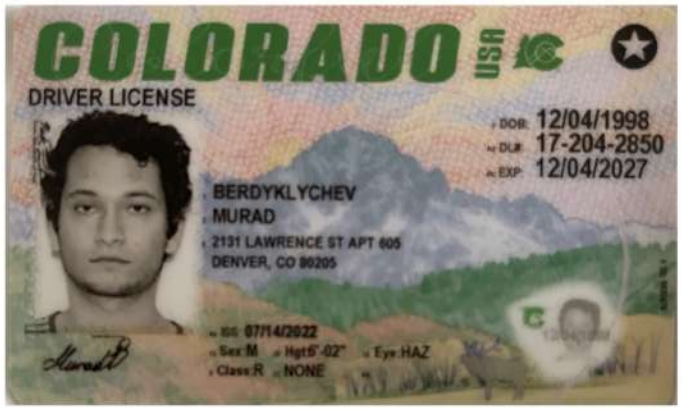
PARTNERS GROUP (USA) INC.
1200 ENTREPRENEURIAL DRIVE
BROOMFIELD,CO 80021

Advice number: **00000240025**
Pay date: 06/14/2024

Deposited to the account of	account number	transit ABA	amount
MURAD BERDYKLYCHEV	xxxxx6704	xxxx xxxx	$3,687.75

NON-NEGOTIABLE


RESTRICTIONS:
NONE
ENDORSEMENTS:
3810050415O
CLASS:
R - Any motor vehicle with a GVWR of less than 26,001 lbs. as a single unit or in combination, designed to carry 15 or fewer passengers, including the driver, and does not carry hazardous material.
Previous Type: N


COLORADO
USA
DRIVER LICENSE
DOB 12/04/1998
DLN 17-204-2850
EXP 12/04/2027
BERDYKLYCHEV
MURAD
2131 LAWRENCE ST APT 605
DENVER, CO 80205
ISS 07/14/2022
Sex M
Hgt 6'-02"
Eye HAZ
Class R
NONE

LEERINK PARTNERS

April 29, 2024

Anish Patel
445 West 35th Street
New York, NY 10001

Dear Anish,

I am delighted to extend to you a written offer for the position of Analyst II, in the Investment Banking Department of Leerink Partners LLC, ("Leerink" or the "Firm") in the New York office. This position reports to the Senior Managing Director, Global Co-Head of Investment Banking. We are confident that you will find your employment with us enjoyable and professionally rewarding and we look forward to you joining our team. Your start date of employment is considered to be the first date you are officially on our payroll which is currently expected to be June 3, 2024.

Compensation.

An outline of your compensation is as follows:

i) Your base salary will be $5,208.33 semi-monthly, or an annualized rate of $125,000, less applicable withholdings and deductions. Leerink's pay dates are the 15th and the last workday of every month. If the 15th falls on a Saturday or a Sunday, the pay date will be the prior Friday.

ii) Additionally, beginning in July of 2024, you are eligible to receive a discretionary bonus (expected to be paid in August of 2024), based on various considerations, including but not limited to general business conditions, the Firm satisfying its financial targets for the plan year, and consideration of your department's and your individual performance. The Firm will also consider your demonstrated commitment to compliance with applicable laws, rules and internal policies, sound risk management and ethical behavior. The decision whether to award a discretionary bonus, and the amount of any such bonus, is made in the sole and unreviewable discretion of the Firm. Annual discretionary bonuses will be paid according to the Firm's regular bonus cycle and, depending on the amount of the bonus, may be subject to the Firm's deferred compensation plan. In order to receive a discretionary annual bonus, you must be an active, full-time employee in good standing, and shall not have given notice of your intention to resign, at the time such payment is scheduled to be made.

Business Goals.

All employees are presented with business goals, mutually agreed upon goals/objectives, which outline their role and responsibility with the Firm ("Business Goals"). Your Business Goals will be established and discussed with your Manager shortly after your date of hire.

Benefits.

This offer of employment also includes a comprehensive and flexible benefits program offered that is available to you on your date of hire. A summary of these benefits is as follows:

- Health, Dental and Vision coverage is available to both employees and their qualified dependents immediately upon your date of hire.
- Flexible Spending Plans and a Health Savings Account for healthcare expenses that allow you to set aside tax-free dollars to pay for qualified expenses.

- Other voluntary benefits including Pet Insurance and gym memberships. You also have the option to participate in firm-sponsored wellness events.
- On your first day of employment, you will be automatically enrolled in the following Firm-paid insurance policies: Life, Dependent Life, Short and Long Term Disability, Travel and Accident and AD&D coverage.
- The opportunity to invest in the Firm's 401(k) Retirement Plan, a voluntary contribution plan administered by Empower Retirement Services. You are eligible to participate in the Plan beginning on the first day of the month following the completion of two full months of service. You may contribute up to the maximum allowed by the IRS each calendar year. You will be automatically enrolled with a 3% 401(k) contribution the 1st of the month following 60 days of employment unless you elect otherwise.
- Paid time off, including up to 15 days paid vacation, 2 personal days, Firm holidays, and paid sick time per Firm policy and applicable law.

Note: This is not a complete summary of insurance coverage. Plan documents are controlling and available upon hire. The Firm reserves the right to alter or eliminate its benefit plans at its sole discretion.

Licensing and Performance.

By August 31, 2024 barring unforeseen circumstances, we expect that you will have obtained all necessary licenses and registrations, including the Securities Industry Essentials (SIE) Exam (unless grandfathered), Series 63 & 79 and/or such other registrations as may be required by applicable rules or regulations.

Notice of Retirement/Resignation.

You shall not voluntarily retire, resign or otherwise terminate your employment relationship with the Firm or any of its affiliates without first giving the Firm at least 14 days prior written notice of the effective day of your retirement, resignation or other termination. Such written notice shall be sent by certified mail to Leerink Partners LLC, Attn: Human Resources Department, 53 State Street, 40th Floor, Boston MA 02109. The Firm retains the right to waive the notice requirement in whole or in part or to place you on paid leave for all or part of this fourteen 14 day period. In the alternative, at any time after you give notice, the Firm may, but shall not be obligated to provide you with work and (i) require you to comply with such conditions as it may specify in relation to transitioning your duties and responsibilities; (ii) assign you other duties; or (iii) withdraw any powers vested in, or duties assigned to you.

The notice period required is based on your job title. If promoted, the notice period may be longer, as set forth in the employee handbook, which shall apply.

Non-Solicitation.

You agree that if your employment is terminated for any reason by you or by the Firm, you shall not for a period of one year after notice of such termination, without the Firm's prior written consent, directly or indirectly: (a) solicit or induce, or cause or encourage others to solicit or induce, approach, counsel, attempt or cause or induce, or encourage others to solicit or induce, any employees of the Firm to leave the Firm; (b) hire or cause others to hire any employees of the Firm; (c) encourage or assist in the hiring process of any employees of the Firm; (d) or cause others to participate, encourage or assist in the hiring process of any employees of the Firm.

Non-Disclosure of Confidential Information.

You shall not at any time, whether during your employment or following the termination of your employment, for any reason whatsoever, directly or indirectly disclose or furnish to any entity, firm, corporation or person, except as otherwise required by law, any confidential or proprietary information of the Firm with respect to any aspect of its operations, business or clients. "Confidential or proprietary information" shall mean information generally not known to the public to which you gain access by reason of your employment by the Firm and includes, but is not limited to, information relating to all present or potential customers, business and marketing plans, sales, trading and financial data and strategies, salaries and employment benefits, and operational costs. This provision shall survive the expiration of this Agreement.

Nothing in this offer letter prohibits you from communicating with any governmental authority or making a report in good faith and with a reasonable belief of any violations of law or regulation to a governmental authority, or disclosing confidential or proprietary information acquired through lawful means in the course of employment to a governmental authority in connection with any communication or report, or from filing, testifying or participating in a legal proceeding related to any violations, including making other disclosures protected or required by any whistleblower law or regulation to the Securities and Exchange Commission, the Department of Labor, or any other appropriate government authority. To the extent you disclose any confidential or proprietary information in connection with communicating with a governmental authority, you will honor the other confidentiality obligations undertaken in the course of your employment with the Firm and will only share such confidential or proprietary information with your attorney, or with the government agency or entity. Nothing in this offer letter shall be construed to permit or condone unlawful conduct, including but not limited to the theft or misappropriation of Firm property, trade secrets or information.

"Confidential or proprietary information" does not include information lawfully acquired by a non-management employee about wages, hours or other terms and conditions of employment when used for purposes protected by §7 of the National Labor Relations Act such as joining or forming a union, engaging in collective bargaining, or engaging in other concerted activity for mutual aid or protection.

Leerink Property.

All records, files, memoranda, reports, customer information, client lists, documents and equipment relating to the business of the Firm, whether in electronic or any other format, which you prepare, possess or come into contact with while you are an employee of the Firm, shall remain the sole property of the Firm. You agree that upon the termination of your employment, you shall provide to the Firm all documents, papers, files, electronic media, or other material in your possession and under your control that are connected with or derived from your services to the Firm. You agree that the Firm owns all work products, patents, copyrights and other material produced by you during your employment with the Firm. This provision shall survive the expiration of this Agreement.

Remedies.

If you breach your obligations under this Agreement, the Firm, in addition to being entitled to exercise all rights granted by law, including recovery of damages, will be entitled to specific performance of its rights under this Agreement. You acknowledge that the Firm shall suffer irreparable harm because of a breach or prospective breach of the preceding four paragraphs hereof and that monetary damages would not be adequate relief. Accordingly, the Firm shall be entitled to seek injunctive relief in any federal or state court of competent jurisdiction located in Suffolk County in the Commonwealth of Massachusetts, or in any state in which you reside. You further agree that the Firm and its affiliates shall be entitled to recover all costs and expenses (including attorneys' fees) incurred in connection with the enforcement of the Firm's rights hereunder. If your employment is terminated for any reason, the Firm may offset, to the fullest extent permitted by law, any amounts due to the Firm from you, the reasonable value of any Firm property you improperly retain, or monies

advanced or loaned to you by the Firm, from any monies owed to you or your estate by reason of your termination.

Arbitration.

Subject to the preceding paragraph, any and all disputes arising out of or relating to your employment or the termination of your employment with the Firm, including any statutory claims based on alleged discrimination or harassment, including without limitation sexual harassment, will be submitted to and resolved exclusively by a panel of arbitrators from the Financial Industry Regulatory Authority, Inc. ("FINRA") in accordance with the Code of Arbitration Procedure For Industry Disputes ("Code"), which may be found at the FINRA Website: www.finra.org. The arbitration shall be held in the location specified by the Code. In agreeing to arbitrate your claims, you recognize that you are waiving your right to a trial in court and by a jury. The arbitration award shall be binding upon both parties, and judgment upon the award may be entered in a court of competent jurisdiction. A dispute arising under a whistleblower statute that prohibits the use of predispute arbitration agreements is not required to be arbitrated unless the parties have agreed to arbitrate it after the dispute arose. You and the Firm may seek Temporary Injunctive Orders and/or Permanent Injunctive Relief in accordance with the Code.

Miscellaneous.

During the course of your employment with Leerink, the Firm may, at its sole discretion, change your duties, accounts, and responsibilities and to whom you report in order to meet the needs of its business.

On your first day of employment, you will receive the Leerink Partners Employee Handbook. The documentation included in that Handbook is designed to outline the Firm's general guidelines and practices. In accepting employment, you agree to comply with the Handbook.

FINRA regulations require that all Firm employees' outside business activities and outside brokerage accounts be disclosed and monitored. Upon acceptance of this offer and verification of references, resume, and any other background checks that Leerink Partners deems appropriate, on your first day of employment, you will be asked to disclose any outside business activities in which you engage and to provide the most recent copies of all outside brokerage account statements for review of electronic feed availability to the Firm's compliance platform. If your accounts are held at a firm that provides a compatible electronic data feed for monitoring and review purposes, you will not need to move your accounts in-house. If an electronic feed is not available, you will be required to transfer accounts in-house or to a firm providing appropriate electronic data feeds. Furthermore, the Firm periodically submits employee names to CDC/Equifax, service providers to the securities industry, to ensure that all outside brokerage accounts are properly reported. By signing below, you acknowledge your agreement to this policy.
As a condition of your continued employment, from time to time, in order to protect the business interests of the Firm, you may be required to sign other agreements regarding confidentiality or containing restrictive covenants.

You warrant and represent that you are not bound by any employment contract, restrictive covenant or other restriction preventing you from entering into employment with or limiting your ability to conduct the activities contemplated by this Agreement or to carry out your responsibilities to the Firm, or which is in any other way inconsistent with the terms of this Agreement, and you are and will continue to be in compliance with any restrictions on solicitation or use or possession of confidential information which apply to you.

Leerink Partners complies with the Immigration Reform and Control Act, and accordingly, we request that you bring appropriate verification of authorization to work in the United States (e.g., U.S. Passport, INS issued Alien Registration Card, or original birth certificate and social security card with a driver's license) with you **on your first day** of employment.

Please note that employment is offered on an at-will basis. Nothing in this Agreement or any discussions with you may be construed in any manner as an agreement to employ you for any fixed term. This Agreement will be construed and interpreted in accordance with the laws of the Commonwealth of Massachusetts, without regard to choice of law principles. This Agreement contains the entire understanding of the parties with respect to the matters addressed in it, and supersedes any prior agreements or understanding with respect thereto.

Your employment is subject to the verification of any background checks that Leerink deems appropriate. Please treat the details of this offer with the utmost confidentiality.

Please feel free to contact me if you have any questions. We are excited to have you join our team and believe the relationship will be mutually rewarding.

Sincerely,

Barry D Blake

Barry Blake
Senior Managing Director
Global Co-Head of Investment Banking

I hereby accept Leerink Partners' offer of employment on the terms described above. Please accept this offer of employment by signing via DocuSign no later than May 3, 2024 at 12:00pm ET.

DocuSigned by:
Anish Patel
BF511BF2C367437...

4/29/2024

Anish Patel **DATE**

Anticipated Start Date: June 3, 2024 **-** (please confirm)

Max Snider

Functional title:	Associate, Private Equity
Seniority level:	Professional
Business Department:	Private Equity
Bussiness Unit:	Private Equity Technology
Office:	Denver

Zug, 21 November 2023

Compensation Statement 2023

		annualized
Overall Compensation 2023		
Sum of 2023 annualized base salary, bonus (if any), MCP (if any)[1]	USD	212'500

		annualized
Detailed Annual Compensation 2023[2]		
Total Base salary 2023[6]	**USD**	**165'000**
Base salary 2023	USD	165'000
Total Performance Based Bonus[7]	**USD**	**47'500**
Cash Bonus	USD	47'500

Base salary 2024		
New base salary as of 1 January 2024 incl. fixed allowances (if any)[6]	USD	173'000

(1) Please note that the aggregate value includes allocations that have yet to vest over time as described in the respective plan rules and individual allocation sheet(s). The MCP are presented in USD and the EPP presented in local currency. PGH shares are denominated in CHF. Consequently, the number of PGH shares or share options delivered under the EPP will be calculated (i) by converting the local currency EPP amount into CHF on 21 November 2023 and (ii) based on the closing price of the PGH share of 21 November 2023 for shares and for share options, the calculated option value for EPP plan 2023.

(2) The displayed amounts on effective bonus are based on effective work quota and days worked in 2023, if not employed the entire year. Please note that amounts indicated in this statement will be paid at the company's full discretion. There is no legal or contractual right to receive these amounts other than the base salary; in particular, the payment of bonuses constitutes a voluntary non-contractual contribution, even if repeatedly made. Without limiting the generality of the foregoing, amounts are typically only paid if your employment with Partners Group is ongoing/not under notice of termination at the time of the payment.

(3) There is no legal or contractual right to be granted benefits under Partners Group's EPP and/or MCP; the granting of such benefits constitutes a voluntary non-contractual, non-compensation contribution, even if repeatedly made. Benefits are granted in addition to salary and bonuses, if any, and are not to be taken into account for purposes of calculating any severance payments or bonus payments, pension benefits or similar payments.

(4) Equity incentives consist of a certain number of PGH shares and are expressed in nominal amounts for illustrative purposes only. Such nominal amounts have been calculated based on several assumptions. For the EPP 2023, the number of PGH shares allocated is based on the closing price of the PGH share on 21 November 2023 and has been rounded. Benefits from equity incentives depend on various factors and the actual development of the PGH share price and may substantially differ from the amounts shown and can be zero (0).

(5) MCP are expressed in nominal amounts for illustrative purposes only. Such nominal amounts have been calculated based on several assumptions including as detailed in the MCP rules. Benefits payable in discharge of carry rights depend on various factors and the actual development of the underlying assets and may substantially differ from the amounts shown and can be zero (0). Furthermore, carry rights bear currency risks which may result in substantially smaller than anticipated benefits payable by the company in discharge of carry rights to employees. These risks include, but are not limited to, the following: (i) depreciation of the product currency against the USD with the consequence of a decrease in the amount of performance fees received by Partners Group qualifying as carry dollars; (ii) depreciation of the USD against employees' local currencies.

(6) The annual base salary increase as per 1 January 2024 (if any) is only executed in case your employment with Partners Group is ongoing / not under notice of termination. The annual base salary 2024 includes any regulatory base salary increases, if any (such as the index increase in Luxembourg as well as the union increase in Brazil).

(7) **Bonus payments are contingent upon the condition that you are employed with the firm (non-terminated) at the time of bonus payment.** This means that if you have terminated your contract with Partners Group or are under notice on the bonus pay date in February 2024 which is depending on jurisdiction, you will not be entitled to receive the bonus.

(8) The granting of the MCP is subject to the execution of a non-compete undertaking.

PARTNERS GROUP

March 20, 2024

Adjustment to 2023 Bonus

Dear Max,

We have reviewed your 2023 annual performance bonus. As a special exception, an additional amount of USD 50,000 has been approved. Your total 2023 bonus has been adjusted to USD 97,500. Your confidential handling of this information is appreciated.

USD 47,500 was paid on February 29, 2024. USD 50,000 (gross) will be included on the March 31, 2024 payroll.

Many thanks for your contributions in 2023, and your continued efforts in 2024.

Kind regards,

Lauren Zierolf
Regional Head, People Operations and Services

Murad Berdyklychev

Functional title:	Financial Analyst (FA Program)
Seniority level:	Professional
Business Department:	Financial Analyst Program
Bussiness Unit:	Financial Analyst Program US
Office:	Denver

Zug, 21 November 2023

Compensation Statement 2023

		annualized
Overall Compensation 2023		
Sum of 2023 annualized base salary, bonus (if any), MCP (if any)[1]	USD	162'500

Detailed Annual Compensation 2023[2]		annualized
Total Base salary 2023[6]	**USD**	**115'000**
Base salary 2023	USD	115'000
Total Performance Based Bonus[7]	**USD**	**47'500**
Cash Bonus	USD	47'500

Base salary 2024		
New base salary as of 1 January 2024 incl. fixed allowances (if any)[6]	USD	130'000

(1) Please note that the aggregate value includes allocations that have yet to vest over time as described in the respective plan rules and individual allocation sheet(s). The MCP are presented in USD and the EPP presented in local currency. PGH shares are denominated in CHF. Consequently, the number of PGH shares or share options delivered under the EPP will be calculated (i) by converting the local currency EPP amount into CHF on 21 November 2023 and (ii) based on the closing price of the PGH share of 21 November 2023 for shares and for share options, the calculated option value for EPP plan 2023.

(2) The displayed amounts on effective bonus are based on effective work quota and days worked in 2023, if not employed the entire year. Please note that amounts indicated in this statement will be paid at the company's full discretion. There is no legal or contractual right to receive these amounts other than the base salary; in particular, the payment of bonuses constitutes a voluntary non-contractual contribution, even if repeatedly made. Without limiting the generality of the foregoing, amounts are typically only paid if your employment with Partners Group is ongoing/not under notice of termination at the time of the payment.

(3) There is no legal or contractual right to be granted benefits under Partners Group's EPP and/or MCP; the granting of such benefits constitutes a voluntary non-contractual, non-compensation contribution, even if repeatedly made. Benefits are granted in addition to salary and bonuses, if any, and are not to be taken into account for purposes of calculating any severance payments or bonus payments, pension benefits or similar payments.

(4) Equity incentives consist of a certain number of PGH shares and are expressed in nominal amounts for illustrative purposes only. Such nominal amounts have been calculated based on several assumptions. For the EPP 2023, the number of PGH shares allocated is based on the closing price of the PGH share on 21 November 2023 and has been rounded. Benefits from equity incentives depend on various factors and the actual development of the PGH share price and may substantially differ from the amounts shown and can be zero (0).

(5) MCP are expressed in nominal amounts for illustrative purposes only. Such nominal amounts have been calculated based on several assumptions including as detailed in the MCP rules. Benefits payable in discharge of carry rights depend on various factors and the actual development of the underlying assets and may substantially differ from the amounts shown and can be zero (0). Furthermore, carry rights bear currency risks which may result in substantially smaller than anticipated benefits payable by the company in discharge of carry rights to employees. These risks include, but are not limited to, the following: (i) depreciation of the product currency against the USD with the consequence of a decrease in the amount of performance fees received by Partners Group qualifying as carry dollars; (ii) depreciation of the USD against employees' local currencies.

(6) The annual base salary increase as per 1 January 2024 (if any) is only executed in case your employment with Partners Group is ongoing / not under notice of termination. The annual base salary 2024 includes any regulatory base salary increases, if any (such as the index increase in Luxembourg as well as the union increase in Brazil).

(7) **Bonus payments are contingent upon the condition that you are employed with the firm (non-terminated) at the time of bonus payment.** This means that if you have terminated your contract with Partners Group or are under notice on the bonus pay date in February 2024 which is depending on jurisdiction, you will not be entitled to receive the bonus.

(8) The granting of the MCP is subject to the execution of a non-compete undertaking.