

OMB APPROVAL	
OMB Number:	3235-0287
Estimated average burden hours per response:	0.5

**STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP**

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person* <u>CHADHA PAR</u> <hr/> (Last) (First) (Middle) 8550 WEST DESERT INN ROAD, SUITE 102-452 <hr/> (Street) LAS VEGAS NV 89117 <hr/> (City) (State) (Zip)	2. Issuer Name and Ticker or Trading Symbol <u>Exela Technologies, Inc. [ XELA ]</u>	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) <input checked="" type="checkbox"/> Director 10% Owner <input checked="" type="checkbox"/> Officer (give title below) Other (specify below) <p style="text-align: center;"><b>Executive Chairman</b></p>
	3. Date of Earliest Transaction (Month/Day/Year) 03/07/2023	
4. If Amendment, Date of Original Filed (Month/Day/Year)		

**Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned**

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code	V	Amount	(A) or (D)	Price			
Special Voting Stock <sup>(1)(2)</sup>	03/07/2023		A		1,000,000	A	\$0.0001	1,000,000	I	See Footnote <sup>(2)</sup>

**Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)**

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	V	(A)	(D)	Date Exercisable	Expiration Date					

1. Name and Address of Reporting Person* <u>CHADHA PAR</u> <hr/> (Last) (First) (Middle) 8550 WEST DESERT INN ROAD, SUITE 102-452 <hr/> (Street) LAS VEGAS NV 89117 <hr/> (City) (State) (Zip)
1. Name and Address of Reporting Person* <u>Chadha Sharon</u> <hr/> (Last) (First) (Middle) 3003 PENNSYLVANIA AVE <hr/> (Street) SANTA MONICA CA 90404 <hr/> (City) (State) (Zip)

**Explanation of Responses:**

1. On March 7, 2023, the Company created a new class of its preferred stock and designated such stock as "Special Voting Stock" and entered into a Subscription, Voting and Redemption Agreement (the "Voting Agreement") related to the issuance, voting and redemption of the Special Voting Stock. Each share of Special Voting Stock is entitled to 75,000 votes per share on certain items to be voted upon at an upcoming special meeting of the Company's stockholders and will be redeemed following the vote on such items.

2. Shares held directly by GP-HGM LLC of which Mr. Chadha is the manager.

/s/ Par Chadha

03/09/2023

/s/ Sharon Chadha

03/09/2023

\*\* Signature of Reporting Person

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

\* If the form is filed by more than one reporting person, see Instruction 4 (b)(v).

\*\* Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

**Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.**