Department of the Treasury Internal Revenue Service

IRS e-file Signature Authorization

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

Submission Identification Number (SID)

Taxpay	er's name	Social securi	Social security number					
SU№	IANTH REDDY KUDUMULA	683-72	-0609	Э				
Spouse	s's name	Spouse's so	cial secu	rity number				
Par	t I Tax Return Information – Tax Year Ending December 31, 2023 (Ente	r year you a	are aut	horizing.)				
Enter	whole dollars only on lines 1 through 5.							
Note	Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.							
1	Adjusted gross income		1	247,386.				
2	Total tax		2	54,280.				
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3	53,794.				
4	Amount you want refunded to you		4					
5	Amount you owe		5	486.				
Par	Taxpayer Declaration and Signature Authorization (Be sure you get and	keep a cor	by of y	our return)				

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

Taxpayer's PIN: check one box only

				ERO firm name	-	Er	1
\times	I authorize	GLOBAL	TAXES	LLC	to enter or generate my PIN		
			-			1.2	1

2 Ent	0 er fiv	6 Je di	0 nits	9 but	as my
Ent don					

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

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

Your signature

Date

Spouse's	PIN:	check	one	box	only	
----------	------	-------	-----	-----	------	--

I authorize

to enter or generate my PIN

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

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

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

Du											
Practitioner PIN Method Returns Only—continue below											
nly											
1.	2	2							2	7	1
	inue nly	inue bele nly	nly	inue below nly	inue below hly J. 2 2 2 4	inue below hly J. 2 2 2 4 9	inue below hly J. 2 2 2 4 9 6	inue below Ily J. 2 2 2 4 9 6 0	inue below hly	inue below Ily J. 2 2 2 4 9 6 0 8 2	inue below Inly J. 2 2 2 4 9 6 0 8 2 7

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

ERO's signature >	Date 🕨								
Don'i	ERO Must Retain This Form — See Instructions Don't Submit This Form to the IRS Unless Requested To Do So								
For Depenverk Reduction Act Nation	ooo your toy roturn instructions		DEV 02/07/24 DDO	Form 8879 (Pov. 01 2021)					

1040		artment of the Treasury—Internal Revenue Servi S. Individual Income Tax		turn	202	3	OMB No. 1545	-0074	IRS Use O	nly—Do no	t write or	staple in	this space.
For the year Jan	. 1–Dec	c. 31, 2023, or other tax year beginning			, 2023, end	ling			, 20	See s	separate	e instru	uctions.
Your first name	and m	iddle initial	Last r	name						Your	social s	ecurity	number
SUMANTH	RED	DY	KUE	UMULA						683	3 72	06	09
		s first name and middle initial	Last										rity number
-													-
Home address	(numbe	er and street). If you have a P.O. box, see	instruc	ctions.				A	Apt. no.	Presi	dential E	lection	n Campaign
450 N MA	ТНТ	IDA AVE						C	0304		k here if		
		ice. If you have a foreign address, also co	mplete	spaces be	low.	Sta	ite	ZIP o	0				y, want \$3
SUNNYVAI	Ε					CZ	A	940	85	U U	to this f elow wi		hecking a
Foreign country				Foreign p	rovince/state/	count	ty	Foreig	n postal coo		ax or re		lange
												You	Spouse
Filing Status	; X	Single					Head of h	ouseh	old (HOH)	•			
Check only] Married filing jointly (even if only or	ne hao	l income)									
one box.] Married filing separately (MFS)					Qualifying	surviv	ing spous/	e (QSS)			
	lf y	you checked the MFS box, enter the	name	of your s	pouse. If you	ı che	ecked the HOH	l or Q	SS box, er	nter the c	child's r	iame if	the
	qu	alifying person is a child but not you	ır dep	endent:									
Digital	Atar	ny time during 2023, did you: (a) rece	eive (a	s a reward	d award or	navr	ment for prope	rtv or	services):	or (b) sel	1		
Assets		hange, or otherwise dispose of a digi						-				Yes	🗙 No
Standard		neone can claim: You as a de		·			a dependent	/ (,			
Deduction		Spouse itemizes on a separate return	•				•						
Age/Blindness	s You	: Were born before January 2, 1	959	Are b	lind Spc	ouse	: 🗌 Was bor	m befo	ore Januar	v 2. 1959	а П	ls blin	d
Dependents				<u> </u>	Social security		(3) Relationsh			•			nstructions):
If more		irst name Last name		(-)	number		to you		Child tax	credit	Credit	for othe	r dependents
than four]]
dependents,]]
see instructions and check	s ——]]
here]]
Income	1a	Total amount from Form(s) W-2, be	ox 1 (s	see instruc	ctions) .						1a	269	9,752.
Attach Form(s)	b	Household employee wages not re	eporte	d on Form	n(s) W-2 .					· [-	1b		
W-2 here. Also	С	Tip income not reported on line 1a	ι (see i	nstruction	ns)					· [-	1c		
attach Forms W-2G and	d	Medicaid waiver payments not rep	orted	on Form(s	s) W-2 (see ir	nstru	uctions)			· [-	1d		
1099-R if tax	е	Taxable dependent care benefits f	rom F	orm 2441,	, line 26					· [-	1e		
was withheld.	f	Employer-provided adoption bene	fits fro	om Form 8	8839, line 29					· _	1f		
lf you did not get a Form	g	Wages from Form 8919, line 6 .								· [-	lg		
W-2, see	h	Other earned income (see instructi	,					· ·		· [-	1h		0.
instructions.	i	Nontaxable combat pay election (s	see ins	structions)			1 i			_		0.00	0 7 5 0
		Add lines 1a through 1h			· · · ·						1z	265	9,752.
Attach Sch. B if required.	2a	' –	2a				axable interes				2b		20.
	<u>3a</u>		3a				Ordinary divide				3b		
Standard	4a 50		4a				axable amoun				4b		
Deduction for—	5a 6a		5a 6a				axable amoun axable amoun				5b 6b		
 Single or Married filing 	6a	Social security benefits		mothod	abaak bara			ι		⊢ ⊢			
separately, \$13,850	с 7	Capital gain or (loss). Attach Scher						• •			7	_^	3,000.
 Married filing 	8	Additional income from Schedule						• •			8		9,386.
jointly or Qualifying	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7,						• •			9		7,386.
surviving spouse, \$27,700	10	Adjustments to income from Sche		-			• · · · ·				10		,
 Head of household, 	11	Subtract line 10 from line 9. This is									11	24	7,386.
\$20,800	12	Standard deduction or itemized	•	-	-						12		3,850.
 If you checked any box under 	13	Qualified business income deducti					95-A				13		.,
Standard Deduction,	14	Add lines 12 and 13									14	1.	3,850.
see instructions.	15	Subtract line 14 from line 11. If zer		ss, enter	-0 This is v	our t	taxable incom	ne .			15		3,536.
			-		,					I			

For Disclosure, Privacy Act, and Paperwork Reduction Act Notice, see separate instructions.

Form **1040** (2023)

Form 1040 (2023	3)								Page 2
Tax and	16	Tax (see instructions). Check	if any from Form	(s): 1 🗌 881	4 2 4972	3 🗌		16	53 , 632.
Credits	17	Amount from Schedule 2, lin	e3					17	
	18	Add lines 16 and 17						18	53 , 632.
	19	Child tax credit or credit for	other dependent	ts from Sched	ule 8812			19	
	20	Amount from Schedule 3, lin	e8					20	
	21	Add lines 19 and 20						21	
	22	Subtract line 21 from line 18	. If zero or less,	enter -0				22	53,632.
	23	Other taxes, including self-e						23	648.
	24	Add lines 22 and 23. This is						24	54,280.
Payments	25	Federal income tax withheld							,
. aymente	а	Form(s) W-2				25a 5	53,146		
	b	Form(s) 1099				25b		-	
	С	Other forms (see instructions				25c	648		
	d	Add lines 25a through 25c	,					25d	53,794.
	26	2023 estimated tax payment						26	
If you have a l qualifying child,	27	Earned income credit (EIC)				27			
attach Sch. EIC.	28	Additional child tax credit from				28		-	
	29	American opportunity credit				29		-	
	30	Reserved for future use .				30			
	31	Amount from Schedule 3, lin				31		-	
	32	Add lines 27, 28, 29, and 31				-		32	
	33	Add lines 25d, 26, and 32. T	,	-	-			33	53,794.
Defined	34	If line 33 is more than line 24						34	33,794.
Refund	34 35a	Amount of line 34 you want				, .		34 35a	
Direct deposit?		Routing number X X X							
See instructions.	b	Account number X X X			c Type:] Checking [Savings		
	d	· · · · · ·							
.	36	Amount of line 34 you want a				36		_	
Amount You Owe	37	Subtract line 33 from line 24 For details on how to pay, g						07	100
rou Owe	0 0					1 1		37	486.
	38	Estimated tax penalty (see in	,			38			
Third Party		you want to allow another	•				Complete	bolow	🔀 No
Designee							•		
	nai	signee's ne		Phone no.			rsonal iden mber (PIN)	lincation	
Sign	Un	der penalties of perjury, I declare tl	nat I have examined	d this return and	accompanying sche	dules and stateme	ents, and to	the best	of my knowledge and
Here	bel	ief, they are true, correct, and com	plete. Declaration of	of preparer (othe	r than taxpayer) is ba	ased on all informa	ation of whi	ch prepare	er has any knowledge.
пеге	Yo	ur signature		Date	Your occupation		lf ti	ne IRS ser	nt you an Identity
									IN, enter it here
Joint return?					SENIOR DAT		.SI (e inst.)	
See instructions. Keep a copy for	Sp	ouse's signature. If a joint return, I	ooth must sign.	Date	Spouse's occupat	ion			nt your spouse an ection PIN, enter it here
your records.									
	Ph	one no. (470) 309-974	9	Email address	SUMANTH162	270CMATL C	'∩M		
		eparer's name	9 Preparer's signat		501-1411 1111 02	Date			Check if:
Paid		M PRIYA RAM SAGAR GUPTA	-1		CAR CLIDWA	03/21/2024		32703	Self-employed
Preparer		m's name GLOBAL TAX		A TATA DAG	JUIL OUL IN	100/21/202			(678) 965-9522
Use Only			Y CT E BRU	NGWICK N	J 08816			m's EIN	0101905-9522
Co to united into an		1040 for instructions and the late		TIONICI/ IN				II S L'IIN	Form 1040 (2023)
Go to www.irs.go		TO 40 TOP INSTRUCTIONS and the late	si information.		BAA	REV 03/07/24 PR0)		Form 1040 (2023)

REV 03/07/24 PRO

SCHEDULE	1
(Form 1040)	

Department of the Treasury

Additional Income and Adjustments to Income

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

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

OMB No. 1545-0074 2023

Attachment Sequence No. **01**

Internal Revenue Service Name(s) shown on Form 1040, 1040-SR, or 1040-NR Your social security number SUMANTH REDDY KUDUMULA 683-72-0609

Par	t I Additional Income		
1	Taxable refunds, credits, or offsets of state and local income taxes	. 1	
2a	Alimony received		
b	Date of original divorce or separation agreement (see instructions):		
3	Business income or (loss). Attach Schedule C	. 3	
4	Other gains or (losses). Attach Form 4797		
5	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E		-19,386.
6	Farm income or (loss). Attach Schedule F	. 6	
7	Unemployment compensation	. 7	
8	Other income:		
а	Net operating loss)	
b	Gambling		
С	Cancellation of debt		
d	Foreign earned income exclusion from Form 2555 . . 8d ()	
е	Income from Form 8853		
f	Income from Form 8889		
g	Alaska Permanent Fund dividends	_	
h	Jury duty pay	_	
i	Prizes and awards	_	
J	Activity not engaged in for profit income	_	
k	Stock options 8k Income from the rental of personal property if you engaged in the rental	_	
I	for profit but were not in the business of renting such property 8		
m	Olympic and Paralympic medals and USOC prize money (see		
	instructions)		
n	Section 951(a) inclusion (see instructions)	_	
0	Section 951A(a) inclusion (see instructions)	_	
p	Section 461(I) excess business loss adjustment		
a	Taxable distributions from an ABLE account (see instructions) 8g		
r	Scholarship and fellowship grants not reported on Form W-2 ² 8r		
S	Nontaxable amount of Medicaid waiver payments included on Form		
	1040, line 1a or 1d)	
t	Pension or annuity from a nonqualifed deferred compensation plan or		
	a nongovernmental section 457 plan		
u	Wages earned while incarcerated		
Z	Other income. List type and amount:		
	8z		
9	Total other income. Add lines 8a through 8z	. 9	
10	Combine lines 1 through 7 and 9. This is your additional income . Enter here and on Fo		10.000
	1040, 1040-SR, or 1040-NR, line 8		-19,386.
For Pa	perwork Reduction Act Notice, see your tax return instructions.	Sched	ule 1 (Form 1040) 2023

Par	t II Adjustments to Income		
11	Educator expenses	11	
12	Certain business expenses of reservists, performing artists, and fee-basis government		
	officials. Attach Form 2106	12	
13	Health savings account deduction. Attach Form 8889	13	
14	Moving expenses for members of the Armed Forces. Attach Form 3903	14	
15	Deductible part of self-employment tax. Attach Schedule SE	15	
16	Self-employed SEP, SIMPLE, and qualified plans	16	
17	Self-employed health insurance deduction	17	
18	Penalty on early withdrawal of savings	18	
19a	Alimony paid	19a	
b	Recipient's SSN		
С	Date of original divorce or separation agreement (see instructions):		
20	IRA deduction	20	
21	Student loan interest deduction	21	
22	Reserved for future use	22	
23	Archer MSA deduction	23	
24	Other adjustments:		
а	Jury duty pay (see instructions)		
b	Deductible expenses related to income reported on line 8I from the		
	rental of personal property engaged in for profit		
С	Nontaxable amount of the value of Olympic and Paralympic medals		
	and USOC prize money reported on line 8m	_	
d	Reforestation amortization and expenses 24d		
е	Repayment of supplemental unemployment benefits under the Trade		
	Act of 1974	_	
f	Contributions to section 501(c)(18)(D) pension plans	-	
g	Contributions by certain chaplains to section 403(b) plans 24g	_	
h	Attorney fees and court costs for actions involving certain unlawful		
	discrimination claims (see instructions)	_	
i	Attorney fees and court costs you paid in connection with an award		
	from the IRS for information you provided that helped the IRS detect		
	tax law violations	-	
j	Housing deduction from Form 2555	-	
K	Excess deductions of section 67(e) expenses from Schedule K-1 (Form		
	1041)	-	
Z	Other adjustments. List type and amount:		
05	Tatal athen adjustments. Add lines 04a through 04a	05	
25 06	Total other adjustments. Add lines 24a through 24z	25	
26	Add lines 11 through 23 and 25. These are your adjustments to income . Enter here and on Form 1040, 1040-SR, or 1040-NR, line 10	06	
		26	
	BAA REV 03/07/24 PRO	Schedule	1 (Form 1040) 2023

SCHEDULE 2 (Form 1040)

Additional Taxes

OMB No. 1545-0074

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

2023 Department of the Treasury Attachment Go to www.irs.gov/Form1040 for instructions and the latest information. Internal Revenue Service Sequence No. 02 Name(s) shown on Form 1040, 1040-SR, or 1040-NR Your social security number SUMANTH REDDY KUDUMULA 683-72-0609 Part I Tax 1 Alternative minimum tax. Attach Form 6251 1 2 2 Excess advance premium tax credit repayment. Attach Form 8962 3 Add lines 1 and 2. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 17 . . 3 Part II **Other Taxes** 4 4 5 Social security and Medicare tax on unreported tip income. 5 Attach Form 4137 Uncollected social security and Medicare tax on wages. Attach 6 6 Form 8919 7 Total additional social security and Medicare tax. Add lines 5 and 6 7 Additional tax on IRAs or other tax-favored accounts. Attach Form 5329 if required. 8 8 9 9 . Repayment of first-time homebuyer credit. Attach Form 5405 if required 10 10 Additional Medicare Tax. Attach Form 8959 11 11 648. 12 12 13 Uncollected social security and Medicare or RRTA tax on tips or group-term life 13 Interest on tax due on installment income from the sale of certain residential lots 14 14

Interest on the deferred tax on gain from certain installment sales with a sales price 15 15 Recapture of low-income housing credit. Attach Form 8611 16 16 (continued on page 2)

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

Schedule 2 (Form 1040) 2023

Par	Other Taxes (continued)				
17	Other additional taxes:				
а	Recapture of other credits. List type, form number, and amount:				
		17a			
b	Recapture of federal mortgage subsidy, if you sold your home				
		17b	-		
	Additional tax on HSA distributions. Attach Form 8889	17c	-		
d	Additional tax on an HSA because you didn't remain an eligible individual. Attach Form 8889	17d			
е	Additional tax on Archer MSA distributions. Attach Form 8853 .	17e			
f	Additional tax on Medicare Advantage MSA distributions. Attach Form 8853	17f			
g	Recapture of a charitable contribution deduction related to a fractional interest in tangible personal property	17g			
h	Income you received from a nonqualified deferred compensation plan that fails to meet the requirements of section 409A	17h			
i	Compensation you received from a nonqualified deferred compensation plan described in section 457A	17i			
j	Section 72(m)(5) excess benefits tax	17j			
k	Golden parachute payments	17k			
I	Tax on accumulation distribution of trusts	171			
m	Excise tax on insider stock compensation from an expatriated corporation	17m			
n	Look-back interest under section 167(g) or 460(b) from Form 8697 or 8866	17n			
0	Tax on non-effectively connected income for any part of the year you were a nonresident alien from Form 1040-NR	170			
р	Any interest from Form 8621, line 16f, relating to distributions from, and dispositions of, stock of a section 1291 fund	17p			
q	Any interest from Form 8621, line 24	17q			
z	Any other taxes. List type and amount:				
		17z			
18	Total additional taxes. Add lines 17a through 17z		18		
19	Reserved for future use		19		
20	Section 965 net tax liability installment from Form 965-A	20			
21	Add lines 4, 7 through 16, and 18. These are your total other taxe on Form 1040 or 1040-SR, line 23, or Form 1040-NR, line 23b.		21	6.	48.
	ваа			ule 2 (Form 1040)	

SCHEDULE D (Form 1040)

Capital Gains and Losses

OMB No. 1545-0074

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

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

2023 Attachment Sequence No. 12

Internal Revenue Service Name(s) shown on return

Department of the Treasury

SUMANTH REDDY KUDUMULA

Your social security number

683-72-0609

Did you dispose of any investment(s) in a qualified opportunity fund during the tax year?
Yes X No
If "Yes," attach Form 8949 and see its instructions for additional requirements for reporting your gain or loss.

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

See instructions for how to figure the amounts to enter on the lines below.		(d) Proceeds	(e) Cost	(g) Adjustment to gain or loss		(h) Gain or (loss) Subtract column (e) from column (d) and
	form may be easier to complete if you round off cents to e dollars.	Part I, n (g)	combine the result with column (g)			
1a	Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b.					
1b	Totals for all transactions reported on Form(s) 8949 with Box A checked	12,247.	12,693.			-446.
2	Totals for all transactions reported on Form(s) 8949 with Box B checked					
3	Totals for all transactions reported on Form(s) 8949 with Box C checked					
4	Short-term gain from Form 6252 and short-term gain or (I	oss) from Forms 4	684, 6781, and 88		4	
5	Net short-term gain or (loss) from partnerships, Schedule(s) K-1		5			
6	Short-term capital loss carryover. Enter the amount, if an Worksheet in the instructions	-	6	(15,978.)		
7	Net short-term capital gain or (loss). Combine lines 1a term capital gains or losses, go to Part II below. Otherwise	7	-16,424.			

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

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

Part	III Summary		
16	Combine lines 7 and 15 and enter the result	16	-16,424.
	• If line 16 is a gain , enter the amount from line 16 on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 17 below.		
	• If line 16 is a loss , skip lines 17 through 20 below. Then, go to line 21. Also be sure to complete line 22.		
	• If line 16 is zero , skip lines 17 through 21 below and enter -0- on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 22.		
17	Are lines 15 and 16 both gains?		
	\Box No. Skip lines 18 through 21, and go to line 22.		
18	If you are required to complete the 28% Rate Gain Worksheet (see instructions), enter the amount, if any, from line 7 of that worksheet	18	
19	If you are required to complete the Unrecaptured Section 1250 Gain Worksheet (see instructions), enter the amount, if any, from line 18 of that worksheet	19	
20	 Are lines 18 and 19 both zero or blank and you are not filing Form 4952? Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 16. Don't complete lines 21 and 22 below. 		
	□ No. Complete the Schedule D Tax Worksheet in the instructions. Don't complete lines 21 and 22 below.		
21	If line 16 is a loss, enter here and on Form 1040, 1040-SR, or 1040-NR, line 7, the smaller of:		
	 The loss on line 16; or (\$3,000), or if married filing separately, (\$1,500) 	21	(3,000.)
	Note: When figuring which amount is smaller, treat both amounts as positive numbers.		
22	Do you have qualified dividends on Form 1040, 1040-SR, or 1040-NR, line 3a?		
	☐ Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 16.		
	X No. Complete the rest of Form 1040, 1040-SR, or 1040-NR.		

BAA REV 03/07/24 PRO

Schedule D (Form 1040) 2023

Form **8949**

Name(s) shown on return

Sales and Other Dispositions of Capital Assets

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



Department of the Treasury Internal Revenue Service Go to www.irs.gov/Form8949 for instructions and the latest information.

Social security number or taxpayer identification number

SUMANTH REDDY KUDUMULA	683-72-0609

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

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

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

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

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

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

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

1 (a) Description of property	(b) Date acquired	(c) Date sold or	(d) Proceeds	(e) Cost or other basis See the Note below	If you enter an enter a c	if any, to gain or loss amount in column (g), ode in column (f). parate instructions.	(h) Gain or (loss) Subtract column (e)	
(Example: 100 sh. XYZ Co.)	(Mo., day, yr.)	disposed of (Mo., day, yr.)	(sales price) (see instructions)	and see Column (e) in the separate instructions.	(f) Code(s) from instructions	(g) Amount of adjustment	from column (d) and combine the result with column (g).	
AMERITRADE	01/01/23	12/31/23	12,247.	12,693.			-446.	
2 Totals. Add the amounts in columns negative amounts). Enter each tota Schedule D, line 1b (if Box A above above is checked), or line 3 (if Box C	al here and inc is checked), lir	lude on your ne 2 (if Box B	12,247.	12,693.			-446.	

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

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

SCHEDULE E			Supplementa							OMB No	o. 1545-0074		
(Form 1040) (From rental real estate, royalties, partnerships, S corporations, estates, trusts, REM						ICs, etc.)	20	23					
	Department of the Treasury Internal Revenue Service Attach to Form 1040, 1040-SR, 1040-NR, or 1041. Go to www.irs.gov/ScheduleE for instructions and the latest information.						Attachm Sequen	nent ce No. 13					
Name(s) shown on return									Your soci	ial security	number	
SUMA	NTH REDDY	KUDUM	UL	A						683-7	2-0609		
Part	Note: If yo	ou are in t	the	From Rental Real Estate and business of renting personal proper	rty, use		e C . See	instru	ctions. If you	are an indi	vidual, rep	ort farm	
A [from Form 4835 on page 2, line 40. ts in 2023 that would require you		Eorm(c)	10002 0	Soo in	structions				
	•			· · ·									
1a				h property (street, city, state, Zl		,							
Α	UPPERGUDA	, KOHEI	DA	HYDERABAD TELANGANA	IN 5	01511							
B													
<u>C</u>													
1b	Type of Prope (from list below		6	For each rental real estate prope above, report the number of fair	rental	and		Fa	ir Rental Days		nal Use ays	QJV	
Α	3			personal use days. Check the Qa if you meet the requirements to			Α		365		0		
В				qualified joint venture. See instru			В						
С					aotion	5.	С						
1	of Property: Single Family R Multi-Family Re			3 Vacation/Short-Term Ren 4 Commercial	ntal	5 Land 6 Roya			Self-Rental Other (deso				
									Proper	ties:			
Incon	ne:						Α		В			С	
3					3		6	00.					
4		ived.			4								
Exper	ises:												
5					5								
6				ructions)	6								
7				ce	7		1,8	50.					
8					8								
9					9								
10				onal fees	10		1 0	0.0					
11 12				\cdots	11 12		1,2	00.					
12				b banks, etc. (see instructions)	13								
14	Benaire	• •	•		14		1 2	12.					
14	<u> </u>				14			94.					
16					16								
17					17		4,4	89.					
18				depletion	18			41.					
19	Other (list)			'	19								
20		s. Add li	ine	s 5 through 19	20		19,9	86.					
21		s), see ir	nst	e 3 (rents) and/or 4 (royalties). If ructions to find out if you must			-19 , 3	86.					
22				tate loss after limitation, if any, uctions)	22	(19,38	36.)	()	(
23a		-		orted on line 3 for all rental prope				23a	x	600.			
b			-	orted on line 4 for all royalty prop				23b					
с			-	orted on line 12 for all properties				23c					
d			-	orted on line 18 for all properties				23d		4,341.			
е	Total of all am	ounts re	ро	orted on line 20 for all properties				23e	1	9,986.			
24	Income. Add	oositive	am	nounts shown on line 21. Do no	t inclu	de any lo	sses			. 24			

SCHEDULE E

25 Losses. Add royalty losses from line 21 and rental real estate losses from line 22. Enter total losses here 26 Total rental real estate and royalty income or (loss). Combine lines 24 and 25. Enter the result here. If Parts II, III, and IV, and line 40 on page 2 do not apply to you, also enter this amount on Schedule 1 (Form 1040), line 5. Otherwise, include this amount in the total on line 41 on page 2

For Paperwork Reduction Act Notice, see the separate instructions.

25

26

NPA

19,386.

-19,386.

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Form **8959** Department of the Treasury

Internal Revenue Service

Name(s) shown on return

SUMANTH REDDY KUDUMULA

Additional Medicare Tax

If any line does not apply to you, leave it blank. See separate instructions. Attach to Form 1040, 1040-SR, 1040-NR, or 1040-SS.

Go to www.irs.gov/Form8959 for instructions and the latest information.

OMB No. 1545-0074

683	-72	-060)9

Your social security number

Part	Additional Medicare Tax on Medicare Wages			
1	Medicare wages and tips from Form W-2, box 5. If you have more than one			
	Form W-2, enter the total of the amounts from box 5	1 272,005.		
	Unreported tips from Form 4137, line 6	2		
	Wages from Form 8919, line 6	3		
	Add lines 1 through 3	4 272,005.		
	Enter the following amount for your filing status:			
	Married filing jointly			
	Married filing separately	-		
	Single, Head of household, or Qualifying surviving spouse \$200,000	5 200,000.		
	Subtract line 5 from line 4. If zero or less, enter -0		6	72,005.
		0	7	648.
Part	Part II Additional Medicare Tax on Self-Employment Income		1	010.
	Self-employment income from Schedule SE (Form 1040), Part I, line 6. If you			
	had a loss, enter -0	8		
	Enter the following amount for your filing status:			
	Married filing jointly.			
	Married filing separately			
	Single, Head of household, or Qualifying surviving spouse \$200,000	9		
10	Enter the amount from line 4	10		
11	Subtract line 10 from line 9. If zero or less, enter -0	11		
12	Subtract line 11 from line 8. If zero or less, enter -0		12	
13	Additional Medicare Tax on self-employment income. Multiply line 12 by 0.9% (0	0.009). Enter here and		
	go to Part III		13	
Part I		Compensation		
14	Railroad retirement (RRTA) compensation and tips from Form(s) W-2, box 14			
		14		
	Enter the following amount for your filing status:			
	Married filing jointly			
	Married filing separately	15		
	Subtract line 15 from line 14. If zero or less, enter -0	-	16	
	Additional Medicare Tax on railroad retirement (RRTA) compensation. Multiply line			
	Enter here and go to Part IV		17	
Part I	V Total Additional Medicare Tax			
	Add lines 7, 13, and 17. Also include this amount on Schedule 2 (Form 1040), lir	ne 11 (Form 1040-SS		
	filers, see instructions), and go to Part V		18	648.
Part V	Withholding Reconciliation			
19	Medicare tax withheld from Form W-2, box 6. If you have more than one Form			
	W-2, enter the total of the amounts from box 6	19 4,592.		
20	Enter the amount from line 1	20 272,005.		
	Multiply line 20 by 1.45% (0.0145). This is your regular Medicare tax			
	withholding on Medicare wages	21 3,944.		
	Subtract line 21 from line 19. If zero or less, enter -0 This is your Addi			
	withholding on Medicare wages		22	648.
	Additional Medicare Tax withholding on railroad retirement (RRTA) compensation			
			23	
	Total Additional Medicare Tax withholding. Add lines 22 and 23. Also inclu			
	federal income tax withholding on Form 1040, 1040-SR, or 1040-NR, line 25c (see instructions)	•	24	648.
	anwark Paduation Act Nation and your tax return instructions		27	Form 8959 (2023)
	erwork neduction act notice, see your tax return instructions. BAA	REV 03/07/24 PRO		

Form **8960**

Department of the Treasury

Internal Revenue Service

Net Investment Income Tax— Individuals, Estates, and Trusts

OMB No. 1545-2227 20

Attachment Sequence No. 72

3

Attach to your tax return.

Go to www.irs.gov/Form8960 for instructions and the latest information.

Name(s)	shown on your tax return					curity number or EIN
	NTH REDDY KUDUMULA			683-	-72-0	0609
Part	Investment Income Section 6013(g) election (see instructions)					
	Section 6013(h) election (see instructions)					
	Regulations section 1.1411-10(g) election (see in Regulations section 1.1411-10(g) election (see in Regulation (see in Regulatio	nstruction	าร)			
1	Taxable interest (see instructions)				1	20.
2	Ordinary dividends (see instructions)				2	
3	Annuities (see instructions)				3	
4a	Rental real estate, royalties, partnerships, S corporations, trusts, trades or					
	businesses, etc. (see instructions)	4a	-19,	386.		
b	Adjustment for net income or loss derived in the ordinary course of a non-					
	section 1411 trade or business (see instructions)	4b				
_c	Combine lines 4a and 4b	· - · ·		•••	4c	-19,386.
5a	Net gain or loss from disposition of property (see instructions)	5a	-3,	000.		
b	Net gain or loss from disposition of property that is not subject to net	_				
	investment income tax (see instructions)	5b				
С	Adjustment from disposition of partnership interest or S corporation stock (see	5.				
-		5c			E al	2 0 0 0
d	Combine lines 5a through 5c				5d 6	-3,000.
6 7	Other modifications to investment income (see instructions)				7	
8	Total investment income. Combine lines 1, 2, 3, 4c, 5d, 6, and 7				8	-22,366.
Part					0	-22,300.
9a	Investment interest expenses (see instructions)	9a	,			
b	State, local, and foreign income tax (see instructions)	9b				
c	Miscellaneous investment expenses (see instructions)	9c				
d	Add lines 9a, 9b, and 9c				9d	
10	Additional modifications (see instructions)				10	
11	Total deductions and modifications. Add lines 9d and 10				11	
	I Tax Computation					
12	Net investment income. Subtract Part II, line 11, from Part I, line 8. Individuals,	complete	e lines 13	3–17		
	Estates and trusts, complete lines 18a–21. If zero or less, enter -0				12	0.
	Individuals:					
13	Modified adjusted gross income (see instructions)	13	247,	386.		
14	Threshold based on filing status (see instructions)	14	200,			
15	Subtract line 14 from line 13. If zero or less, enter -0	15		386.		
16	Enter the smaller of line 12 or line 15				16	0.
17	Net investment income tax for individuals. Multiply line 16 by 3.8% (0.038). En	ter here	and inc	lude		
	on your tax return (see instructions)				17	0.
	Estates and Trusts:					
18a	Net investment income (line 12 above)	18a				
b	Deductions for distributions of net investment income and charitable					
	deductions (see instructions)	18b				
С	Undistributed net investment income. Subtract line 18b from line 18a (see					
	instructions). If zero or less, enter -0	18c				
19a	Adjusted gross income (see instructions)	19a				
b	Highest tax bracket for estates and trusts for the year (see instructions)	19b				
С	Subtract line 19b from line 19a. If zero or less, enter -0	19c				
20					20	
21	Net investment income tax for estates and trusts. Multiply line 20 by 3.8% (0.					
	include on your tax return (see instructions)				21	
For Pa	perwork Reduction Act Notice, see your tax return instructions. BAA	REV 03	/07/24 PRO			Form 8960 (2023)

Form 4562	Depreciation and Amortization
	(Including Information on Listed Property)
Department of the Treasury Internal Revenue Service	Attach to your tax return. Go to www.irs.gov/Form4562 for instructions and the latest information.

Name(s) shown on return

on and Amortization

mation on Listed Property) n to your tax return.

Business or activity to which this form relates

-	<u> </u>			
		Attach Seque	nment ence No.	179

OMB No. 1545-0172

2023

raciallying number	
683-72-0609	

17

SUMANTH REDDY KUDUMULA Sch E UPPERGUDA, KOHEDA Part I Election To Expense Certain Property Under Section 179 Note: If you have any listed property, complete Part V before you complete Part I

	reter i yeu have any neted property, comple	to r are r bororo you ou	inploto i alt n					
1	Maximum amount (see instructions)		1	1,160,000.				
2	Total cost of section 179 property placed in service (see		2					
3	Threshold cost of section 179 property before reduction	ions)	3	2,890,000.				
4	Reduction in limitation. Subtract line 3 from line 2. If zero		4					
5	Dollar limitation for tax year. Subtract line 4 from line	er -0 If married filing						
	separately, see instructions		5					
6	(a) Description of property	(b) Cost (business use only)						
7	Listed property. Enter the amount from line 29							
8	Total elected cost of section 179 property. Add amounts	d7	8					
9	Tentative deduction. Enter the smaller of line 5 or line 8			9				
10	Carryover of disallowed deduction from line 13 of your 2	2022 Form 4562		10				
11	Business income limitation. Enter the smaller of business in	or line 5. See instructions	11					
12	Section 179 expense deduction. Add lines 9 and 10, but	12						
13	Carryover of disallowed deduction to 2024. Add lines 9	and 10, less line 12 .	13					
	e: Don't use Part II or Part III below for listed property. In:	-						
Part II Special Depreciation Allowance and Other Depreciation (Don't include listed property. See instructions								

14	Specia	I depreciation	allowance	for	quali	fied	pro	ope	erty	(ot	her	th	an	list	ed	pro	ope	rty)	pla	acec	l in	s	erv	ice		
	during	the tax year. S	See instruction	ons																					14	
15	Proper	ty subject to s	ection 168(f)	(1) e	electio	on .																			15	
16	Other of	depreciation (ir	ncluding AC	RS)																					16	
Par	tIII N	ACRS Depi	reciation (I	Dor	i't ind	cluc	le li	ste	d p	rop	ber	ty.	Se	e in	str	'uc	tion	is.)								

Section A

17	MACRS deductions for assets placed in service in tax years beginning before 2023
18	If you are electing to group any assets placed in service during the tax year into one or more general
	asset accounts, check here

Section B—Assets Placed in Service During 2023 Tax Year Using the General Depreciation System											
(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only—see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction					
19a 3-year property											
b 5-year property											
c 7-year property											
d 10-year property											
e 15-year property											
f 20-year property											
g 25-year property			25 yrs.		S/L						
h Residential rental	01/23	124,571.	27.5 yrs.	MM	S/L	4,341.					
property			27.5 yrs.	MM	S/L						
i Nonresidential real			39 yrs.	MM	S/L						
property				MM	S/L						
Section C-	-Assets Place	d in Service During	2023 Tax Ye	ar Using the Alte	rnative Depreciati	ion System					
20a Class life					S/L						
b 12-year			12 yrs.		S/L						
c 30-year			30 yrs.	MM	S/L						
d 40-year			40 yrs.	MM	S/L						
Part IV Summary (See instructio	ons.)									
21 Listed property. En	ter amount fror	n line 28				21					
22 Total. Add amoun	ts from line 12.	lines 14 through 17,	lines 19 and	20 in column (a).	and line 21. Enter						
		of your return. Partner				22 4,341.					
23 For assets shown a	hove and plac	ed in service during t	ha current ve	ar enter the							

23	For assets shown above and placed in service during the current year, enter the	
	portion of the basis attributable to section 263A costs	23

For Paperwork Reduction Act Notice, see separate instructions.