Form 8879
(Rev. January 2021)
Department of the Treesury

epartment 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 security	/ number	
SUN	IEET KUMAR BOMMA	726-20-	8147	
Spouse	s's name	Spouse's socia	al security number	
Par	Tax Return Information – Tax Year Ending December 31, 2023 (Enter	r year you ar	e authorizing.)	
Enter	whole dollars only on lines 1 through 5.			
Note:	Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.			
1	Adjusted gross income		1 80,47	1.
2	Total tax	[2 9,95	6.
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099	[3 12,23	7.
4	Amount you want refunded to you	[4 2,28	1.
5	Amount you owe	[5	

Part II Taxpayer Declaration and Signature Authorization (Be sure you get and keep a copy of your 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

~ ~ ~ ~ ~ ~ ~				
GLOBAL	TAXES	LГС	to enter or generate my	' PIN

	0	8	1	4	7	as		
Enter five digits, but don't enter all zeros								

my

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.

Your signature

Date

Spouse's PIN: check one box only

I authorize

X 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.

Spouse's signature ►	Date 🕨			
Practitioner PIN Method Returns Only—continue below				
Part III Certification and Authentication – Pra	ctitioner PIN Method Only			
ERO's EFIN/PIN. Enter your six-digit EFIN followed by yo	ur five-digit self-selected PIN. 2 2 2 4 9 6 0 8 2 7 1 Don't enter all zeros			

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

RO's signature ► Date ►						
ERO Must Retain This Form — See Instructions Don't Submit This Form to the IRS Unless Requested To Do So						
For Paperwork Reduction Act Notice, see your tax return instruction	ons. BAA	REV 02/11/24 PRO	Form 8879 (Rev. 01-2021)			

1040		artment of the Treasury—Internal Revenue Servi S. Individual Income Ta >		turn	202	3	OMB No. 1545	-0074	IRS Use Only	/—Do not w	vrite or sta	aple in this space.
For the year Jan	. 1-Dec	c. 31, 2023, or other tax year beginning			, 2023, end	ing			, 20	See se	parate	instructions.
Your first name	and m	iddle initial	Last r	name						Your so	cial sec	curity number
SUNEET K	UMA	R	вом	IMA						726	20	8147
		s first name and middle initial	Last r							Spouse		l security numbe
Home address	(numbe	er and street). If you have a P.O. box, see	instruc	ctions.				A	pt. no.	Preside	ntial Ele	ection Campaigr
<u>380 e sc</u>												/ou, or your
City, town, or p	ost offi	ce. If you have a foreign address, also co	mplete	spaces be	low.	Sta	ite	ZIP co	ode			jointly, want \$3 nd. Checking a
TROY				1		MI		480		box bel	ow will	not change
Foreign country	name			Foreign p	rovince/state/c	count	ty	Foreig	n postal code	your tax	_	_
							<u> </u>				L Yo	ou Spouse
Filing Status		Single					Head of h	ouseh	old (HOH)			
Check only		Married filing jointly (even if only or Married filing concretely (MES)	ne nac	income)			Qualifying					
one box.	L If y	Married filing separately (MFS) you checked the MFS box, enter the	name	ofvours	nouse If you	ı cha			- ·		ild'e na	me if the
		alifying person is a child but not you									10 5 114	
Digital Assets		ny time during 2023, did you: (a) rece nange, or otherwise dispose of a digi										es 🛛 No
	-	neone can claim: You as a de					a dependent	i): (00		115.)		
Standard Deduction	_	Spouse itemizes on a separate return	•		•		•					
		: Were born before January 2, 1		Are b		ouse		n hofe	re January	0 1050		s blind
Dependents	_		333	$\overline{}$	•			14				(see instructions):
-		irist name Last name		(2) :	Social security number		to you					or other dependents
lf more than four	(.)						,					<u>·</u>
dependents,												
see instructions and check	s ——											
here												
Income	1a	Total amount from Form(s) W-2, be	ox 1 (s	see instruc	ctions)					. 1a	1	95,100.
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								. 10	;	
attach Forms W-2G and	d	Medicaid waiver payments not rep				nstru	uctions)			. 1d		
1099-R if tax	е	Taxable dependent care benefits f						• •		. <u>1</u> e		
was withheld.	f	Employer-provided adoption bene						• •		. <u>1</u> f		
lf you did not get a Form	g	Wages from Form 8919, line 6 .				• •		• •		. 1g		0.
W-2, see	h :	Other earned income (see instructions)								. <u>1</u> h	1	0.
instructions.	i z	Add lines 1a through 1h	300 II 18	50 00018)		•••	[]]			. 1z		95,100.
Attach Sch. B	2	Ŭ	2a		· · · · ·	b т	axable interest	•••		· 12		
if required.	3a		3a				Ordinary divide			. 3b		99.
	4a		4a				axable amoun			. 4b		
Standard Deduction for –	5a		5a				axable amoun			. 5b		
 Single or 	6a	Social security benefits	6a				axable amoun			. 6b		
Married filing separately,	с	If you elect to use the lump-sum e	lectior	n method,	check here ((see	instructions)		[
\$13,850 • Married filing	7	Capital gain or (loss). Attach Schee	dule D	if require	d. If not requ	ired	, check here		[7		-6.
jointly or	8	Additional income from Schedule								. 8		-14,722.
Qualifying surviving spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7,	, and 8	3. This is y	our total inc	ome	e			. 9		80,471.
\$27,700 • Head of	10	Adjustments to income from Sche								. 10		
household,	11	Subtract line 10 from line 9. This is								. 11		80,471.
\$20,800 • If you checked _T	12	Standard deduction or itemized		•		'				. 12		13,850.
any box under Standard	13	Qualified business income deduction	ion fro	m Form 8	995 or Form	899	5-A	• •		. 13		0.
Deduction, see instructions.	14 15	Add lines 12 and 13	· ·			· ·				. 14		13,850.
	15	Subtract line 14 from line 11. If zer	o or le	ess, enter	-u I nis is y	our	laxable incom	ie .		. 15		66,621.

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	9,956.
Credits	17	Amount from Schedule 2, lir	e3				[17	
	18	Add lines 16 and 17					[18	9,956.
	19	Child tax credit or credit for	other dependen	ts from Sched	ule 8812		[19	
	20	Amount from Schedule 3, lir	e8				[20	
	21	Add lines 19 and 20					[21	
	22	Subtract line 21 from line 18	. If zero or less,	enter -0			[22	9,956.
	23	Other taxes, including self-e	mployment tax,	from Schedule	e 2, line 21 .		[23	0.
	24	Add lines 22 and 23. This is	your total tax				[24	9,956.
Payments	25	Federal income tax withheld							
•	а	Form(s) W-2				25a 12	,237.		
	b	Form(s) 1099				25b			
	с	Other forms (see instruction	s)			25c			
	d	Add lines 25a through 25c						25d	12,237.
If you have a	26	2023 estimated tax payment	ts and amount a	pplied from 20)22 return		[26	
qualifying child,	27	Earned income credit (EIC)			No .	27			
attach Sch. EIC.	28	Additional child tax credit from				28			
	29	American opportunity credit	from Form 8863	8, line 8		29			
	30	Reserved for future use .				30			
	31	Amount from Schedule 3, lir				31			
	32	Add lines 27, 28, 29, and 31	. These are your	total other pa	ayments and ref	undable credits		32	
	33	Add lines 25d, 26, and 32. T	hese are your to	tal payments	·		[33	12,237.
Refund	34	If line 33 is more than line 24	l, subtract line 2	4 from line 33.	This is the amou	nt you overpaid		34	2,281.
	35a	Amount of line 34 you want refunded to you . If Form 8888 is attached, check here							2,281.
Direct deposit?	b	Routing number 0 6 4 0 0 0 2 0 c Type: X Checking Savings							
See instructions.	d	Account number 0 0 4	4 4 3 2	8 0 5 '	7 7				
	36	Amount of line 34 you want a	applied to your	2024 estimate	ed tax	36			
Amount	37	Subtract line 33 from line 24	. This is the amo	ount you owe					
You Owe		For details on how to pay, g	o to <i>www.irs.go</i> u	//Payments or	see instructions			37	
	38	Estimated tax penalty (see in	nstructions) .			38			
Third Party	Do	you want to allow another	person to disc	cuss this retu	rn with the IRS?				_
Designee	ins	structions				🗌 Yes. Co	omplete be	ow.	X No
	De na	signee's		Phone no.			onal identifica oer (PIN)	ation	
Ciarra		der penalties of perjury, I declare tl	nat I have examined		accompanying sch		. ,	hest	of my knowledge and
Sign		ief, they are true, correct, and com							
Here	Yo	ur signature		Date	Your occupation		If the IF	RS ser	nt you an Identity
								tion Pl	IN, enter it here
Joint return?					SOFTWARE ENGINEER (st.)	
See instructions. Keep a copy for	Sp	ouse's signature. If a joint return, I	ooth must sign.	Date	Spouse's occupat	tion			nt your spouse an action PIN, enter it here
your records.				l lde (se					ection Pin, enter it here
	Ph	one no. (203)824-732	0	Email address			<u>``</u>		
		one no. (203)824-732 eparer's name	0 Preparer's signat		SONGEI.VKI	088@GMAIL.CC	PTIN		Check if:
Paid		PRIYA RAM SAGAR GUPTA TALLAM					P020827	202	Self-employed
Preparer				TAUAL DAGAR	GUEIR IRLLAM	02/20/2024			678)965-9522
Use Only			Y CT E BRU	NGWICK N	J 08816		Firm's		
Go to wave in a				TIONICI IN			1-111115	_11 N	84-3171965 Form 1040 (2023)
GO IO WWW.IIS.go	JVIFOR	n1040 for instructions and the late	st mornation.		BAA	REV 02/11/24 PRO			Form 1040 (2023)

SCHEDULE	1
(Form 1040)	

Department of the Treasury

Additional Income and Adjustments to Income

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

OMB No. 1545-0074 20 3

Department of the Treasury Internal Revenue Service	Go to www.irs.gov/Form1040 for instructions and the latest information.		Attachment Sequence No. 01
Name(s) shown on Fo	Your soc	ial security number	
SUNEET KUMAR B	OMMA	726-20	-8147

Par	t Additional Income			
1	Taxable refunds, credits, or offsets of state and local income taxes		1	
2a	Alimony received		2a	
b	Date of original divorce or separation agreement (see instructions):			
3	Business income or (loss). Attach Schedule C		3	
4	Other gains or (losses). Attach Form 4797		4	
5	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Atta	ach Schedule E .	5	-14,722.
6	Farm income or (loss). Attach Schedule F.		6	
7	Unemployment compensation		7	
8	Other income:			
а	Net operating loss	8a ()	
b	Gambling	8b		
С	Cancellation of debt	8c		
d	Foreign earned income exclusion from Form 2555	8d ()	
е	Income from Form 8853	8e		
f	Income from Form 8889	8f		
g	Alaska Permanent Fund dividends	8g		
h	Jury duty pay	8h		
i	Prizes and awards	8i		
j	Activity not engaged in for profit income	8j		
k	Stock options	8k		
	Income from the rental of personal property if you engaged in the rental			
	for profit but were not in the business of renting such property	81	_	
m	Olympic and Paralympic medals and USOC prize money (see			
		<u>8m</u>	_	
n	Section 951(a) inclusion (see instructions)	<u>8n</u>	-	
0	Section 951A(a) inclusion (see instructions)	80	-	
р	Section 461(I) excess business loss adjustment	8p	-	
q	Taxable distributions from an ABLE account (see instructions)	8q	-	
r	Scholarship and fellowship grants not reported on Form W-2	8r	-	
S	Nontaxable amount of Medicaid waiver payments included on Form	0- (
	1040, line 1a or 1d	8s (4	
t	Pension or annuity from a nonqualifed deferred compensation plan or	01		
	a nongovernmental section 457 plan	8t	-	
u _	Wages earned while incarcerated	8u	-	
z	Other income. List type and amount:	8z		
9	Total other income. Add lines 8a through 8z		9	
9 10	Combine lines 1 through 7 and 9. This is your additional income . Enter		3	
10	1040, 1040-SR, or 1040-NR, line 8	nere and on Ponn	10	-14,722.
For Pa	nerwork Beduction Act Notice, see your tax return instructions.			le 1 (Form 1040) 2023

F tice, see your ta ipe retu istructio

Schedule 1 (Form 1040) 2023

Par	t II Adjustments to Income			i
11	Educator expenses		11	
12	Certain business expenses of reservists, performing artists, and fee-basis governr	nent		
	officials. Attach Form 2106		12	
13	Health savings account deduction. Attach Form 8889		13	
14	Moving expenses for members of the Armed Forces. Attach Form 3903		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			
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:			
	24z			
25	Total other adjustments. Add lines 24a through 24z		25	
26	Add lines 11 through 23 and 25. These are your adjustments to income. Enter here and			
	Form 1040, 1040-SR, or 1040-NR, line 10		26	
	BAA REV 02/11/24 PRO		Schedule 1 (F	orm 1040) 2023

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

Department of the Treasury Internal Revenue Service

Name(s) shown on return

Your social security number 726-20-8147

SUNEET KUMAR BOMMA

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. This form may be easier to complete if you round off cents to whole dollars.	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustment to gain or loss Form(s) 8949, F line 2, columr	from Part I,	(h) Gain or (loss) Subtract column (e) from column (d) and 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					
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 (lo	oss) from Forms 4	684, 6781, and 88	324	4	
5 Net short-term gain or (loss) from partnerships, S Schedule(s) K-1	•			5	
6 Short-term capital loss carryover. Enter the amount, if an Worksheet in the instructions	•	-	-	6	()
7 Net short-term capital gain or (loss). Combine lines 1a term capital gains or losses, go to Part II below. Otherwise		7			

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 le dollars.	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustmen to gain or loss Form(s) 8949, l line 2, colum	s 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.	0.	б.			-б.
11 12	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	-6.

Part	III Summary			
16	Combine lines 7 and 15 and enter the result	16	_	6.
	• 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? Yes. Go to line 18.			
	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	(6	.)
	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?			
	X Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 16.			
	□ No. Complete the rest of Form 1040, 1040-SR, or 1040-NR.			

BAA REV 02/11/24 PRO

Schedule D (Form 1040) 2023

Form 8949 (2023)	Attachment Sequence No. 12A	Page 2
------------------	-----------------------------	---------------

Name(s) shown on return. Name and SSN or taxpayer identification no. not required if shown on other side SUNEET KUMAR BOMMA

Social security number or taxpayer identification number 726-20-8147

Before you check Box D, E, or F 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 II Long-Term. Transactions involving capital assets you held more than 1 year are generally long-term (see instructions). For short-term transactions, see page 1.

Note: You may aggregate all long-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 8a; you aren't required to report these transactions on Form 8949 (see instructions).

You *must* check Box D, E, or F below. Check only one box. If more than one box applies for your long-term transactions, complete a separate Form 8949, page 2, for each applicable box. If you have more long-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.

(D) Long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see **Note** above)

[] (E) Long-term transactions reported on Form(s) 1099-B showing basis wasn't reported to the IRS

(F) Long-term transactions not reported to you on Form 1099-B

1 (a) Description of property	(b) (c) Date sold or disposed of		(d) Proceeds	(e) Cost or other basis See the Note below	Adjustment, i If you enter an enter a c See the sep	(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).	
Robinhood Securities LLC	01/01/23	12/31/23	0.	6.			-6.	
2 Totals. Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts). Enter each total here and include on your Schedule D, line 8b (if Box D above is checked), line 9 (if Box E above is checked), or line 10 (if Box F above is checked).			0.	6.			-6.	

Note: If you checked Box D 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.

Department of the Treasury Internal Revenue Service Attach to Form 1040, 1040-SR, 1040-NR, or 1041. P Go to www.irs.gov/ScheduleE for instructions and the latest information. S S						Attachm Sequend	Attachment Sequence No. 13					
Name(s) shown on return	-								Your socia	al security	number
SUN	EET KUMAR B	OMMA	7							726-2	0-8147	
Par	Note: If yo	ou are	in th	From Rental Real Estate a e business of renting personal prop from Form 4835 on page 2, line 4	perty, use		e C . See	e instru	ctions. If you a	are an indiv	vidual, rep	ort farm
				nts in 2023 that would require yo	ou to file	Form(s)	1099? 8	See ins	structions .		. 🗌 Ye	s 🛛 No
В	If "Yes," did you	ı or w	ill yo	ou file required Form(s) 1099?							. 🗌 Ye	s 🗌 No
1a	Physical add	ress o	of ea	ch property (street, city, state, 2	ZIP cod	e)						
Α	EAST ANAN	DBAG	SH,	MALKAJGIRI HYDERABAD	TELAI	NGANA :	IN 50	0047				
В												
С												
1b	1		2	For each rental real estate prop				Fa	ir Rental	Person		QJV
	(from list belo	w)		above, report the number of fa personal use days. Check the					Days	Da	-	
<u>A</u>	3			if you meet the requirements to			A		365		0	
B C				qualified joint venture. See inst			B					
	of Property:						C					
	Single Family R	2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	nco	3 Vacation/Short-Term Re	ental	5 Lano	4	7	Self-Rental			
	Multi-Family Re			4 Commercial	ontai	6 Roya		-	Other (desc	ribe)		
			.00					0				
							•		Propert	ies:		•
Incor		4			2		A	00.	В			С
3 4				· · · · · · · · · · · · · ·	3		0	00.				
	noyanies rece	iveu			4							
5					5							
6				tructions)	6							
7					7		1,2	50.				
8					8							
9					9							
10	Legal and othe	er pro	fess	ional fees	10							
11	Management f	fees			11		8	50.				
12		-		to banks, etc. (see instructions)	12							
13					13							
14					14			96.				
15					15		2,8	88.				
16					16		4 2	65				
17 18				r depletion	17 18			65. 73.				
19	Other (list)	-		-	10		Δ,0	13.				
20		s Ado	d line	es 5 through 19	20		15,3	22				
21				ne 3 (rents) and/or 4 (royalties).			10,0					
				structions to find out if you mus								
					21		-14,7	22.				
22				state loss after limitation, if any ructions) .	′, 22	(14,72	22.)	()	(
23a	Total of all am	ounts	rep	orted on line 3 for all rental prop				23a		600.		
b				orted on line 4 for all royalty pro				23b				
С				orted on line 12 for all propertie				23c				
d				orted on line 18 for all propertie				23d		2,673.		
е				orted on line 20 for all propertie				23e	15	5,322.		
24	Income. Add	positi	ve a	mounts shown on line 21. Do n	ot inclu	de anv lo	sses			. 24		

14,722.

-14,722.

25

26

For Paperwork Reduction Act Notice, see the separate instructions.

Supplemental Income and Loss

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

	OMB No. 1545-0074
:.)	2023

Form 8995

Qualified Business Income Deduction Simplified Computation

Attach to your tax return.

Department of the Treasury Internal Revenue Service

....

Go to www.irs.gov/Form8995 for instructions and the latest information.

OMB No. 1545-2294 20 Attachment Sequence No. 55

ivame(s)	snown	on return	

Your taxpayer identification number

SUNEET KUMAR BOMMA

726-20-8147

Note. You can claim the qualified business income deduction only if you have qualified business income from a qualified trade or business, real estate investment trust dividends, publicly traded partnership income, or a domestic production activities deduction passed through from an agricultural or horticultural cooperative. See instructions.

Use this form if your taxable income, before your qualified business income deduction, is at or below \$182,100 (\$364,200 if married filing jointly), and you aren't a patron of an agricultural or horticultural cooperative.

1	(a) Trade, business, or aggregation name	(c) Qualified business income or (loss)		
i				
ii				
iii				
•••				
iv				
v				
2	Total qualified business income or (loss). Combine lines 1i through 1v,			
	column (c)	2		
3	Qualified business net (loss) carryforward from the prior year	3 ()		
4	Total qualified business income. Combine lines 2 and 3. If zero or less, enter -0-	4		
5	Qualified business income component. Multiply line 4 by 20% (0.20)		5	
6	Qualified REIT dividends and publicly traded partnership (PTP) income or (loss)			
	(see instructions)	6 2.		
7	Qualified REIT dividends and qualified PTP (loss) carryforward from the prior			
	year	7 ()		
8	Total qualified REIT dividends and PTP income. Combine lines 6 and 7. If zero or less, enter -0-	8 2.		
9	REIT and PTP component. Multiply line 8 by 20% (0.20)		9	0.
10	Qualified business income deduction before the income limitation. Add lines 5 and		10	0.
11	Taxable income before qualified business income deduction (see instructions)	11 66,621.		
12	Enter your net capital gain, if any, increased by any qualified dividends			
	(see instructions)	12 84.		
13	Subtract line 12 from line 11. If zero or less, enter -0-	13 66,537.		
14	Income limitation. Multiply line 13 by 20% (0.20)		14	13,307.
15	Qualified business income deduction. Enter the smaller of line 10 or line 14. Also	enter this amount on		
	the applicable line of your return (see instructions)		15	0.
16	Total qualified business (loss) carryforward. Combine lines 2 and 3. If greater than	zero, enter -0	16	(0.)
17	Total qualified REIT dividends and PTP (loss) carryforward. Combine lines 6 a			
	zero, enter -0		17	(0.)
For Priv	vacy Act and Paperwork Reduction Act Notice, see instructions. REV 02/	11/24 PRO		Form 8995 (2023)

	1562	Depreciation and Amortization (Including Information on Listed Property)						OMB No. 1545-0172	
Form							2023		
Departm	nent of the Treasury Revenue Service	Attach to your tax return. Go to www.irs.gov/Form4562 for instructions and the latest information.						Attachment Sequence No. 179	
Name(s) shown on return		Business or activity to which this form relates						tifying number	
SUNEET KUMAR BOMMA			Sch E EAST ANANDBAGH, MALKAJGIRI					5-20-8147	
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.									
1 Maximum amount (see instructions)								1,160,000.	
2 T	2 Total cost of section 179 property placed in service (see instructions)						2		
	Threshold cost of section 179 property before reduction in limitation (see instructions)							2,890,000.	
	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0						4		
							5		
<u> </u>		Description of proper			ness use only)	(c) Elected cost	5		
	(4)		.,	()		(0) 2.00100 0001		-	
7 Listed property. Enter the amount from line 29									
						17	8		
							9 10		
	· · · · · · · · · · · · · · · · · · ·								
	Business income limitation. Enter the smaller of business income (not less than zero) or line 5. See instructions Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11						11 12		
			to 2024. Add lines 9			13	12		
Note: Don't use Part II or Part III below for listed property. Instead, use Part V. Part II Special Depreciation Allowance and Other Depreciation (Don't include listed property. See instructions.)									
						erty) placed in service			
	• •		18				14		
							15 16		
16 Other depreciation (including ACRS) 16 Part III MACRS Depreciation (Don't include listed property. See instructions.)									
Section A									
	ACRS deductions for assets placed in service in tax years beginning before 2023						17		
	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 (b) Month and year (c) Basis for depreciation (d) Base year								em	
(a) Cla	assification of property	placed in service	(business/investment use only-see instructions)	(d) Recovery period	(e) Conventio	n (f) Method	(g) D	Depreciation deduction	
19a	3-year property								
b	5-year property								
C	7-year property								
	10-year property						<u> </u>		
	15-year property								
	20-year property 25-year property			25 yrs.		S/L	+		
	Residential rental	02/23	84,000.	27.5 yrs.	MM			2,673.	
	property	02/23	04,000.	27.5 yrs.	MM	S/L		2,075.	
	Nonresidential rea	al		39 yrs.	MM	S/L	-		
	property				MM	S/L			
Section C-Assets Placed in Service During 2023 Tax Year Using the Alternative Depreciation System									
	Class life					S/L	\perp		
	12-year			12 yrs.		S/L	—		
	30-year	_		30 yrs.	MM	S/L	+		
_	40-year	(Soo instructio		40 yrs.	MM	S/L	<u> </u>		
	art IV Summary (See instructions.) 21 Listed property. Enter amount from line 28								
	2 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter								
			of your return. Partne				22	2,673.	
	-		ed in service during t	-	-				
P	portion of the basi	s attributable to	section 263A costs .	<u>.</u>	<u></u>	23			

For Paperwork Reduction Act Notice, see separate instructions.