## Form **8879**

(Rev. January 2021)

Department of the Treasury Internal Revenue Service

## IRS e-file Signature Authorization

▶ ERO must obtain and retain completed Form 8879.

► Go to www.irs.gov/Form8879 for the latest information.

OMB No. 1545-0074

payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation requests must be received no later than business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment 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, mellectronic Funds Withdrawal Consent.  **Taxpayer's PIN: check one box only**		5.5				
Spouse's social security number  Part II Tax Return Information — Tax Year Ending December 31, 2021 (Enter year you are authorizing.)  Enter whole dollars only on lines 1 through 5.  Note: Form 1040-SS files use line 4 only. Leave lines 1, 2, 3, and 5 blank.  1	Submis	sion Identification Number (SID)				
Part   Tax Return Information — Tax Year Ending December 31, 2021 (Enter year you are authorizing.)   Enter whole dollars only on lines 1 through 5.   Note: Form 1040-SS filers use line 4 only, Leave lines 1, 2, 3, and 5 blank.   1	Taxpayer'	s name	Social securi	ty numb	per	
Part   Tax Return Information — Tax Year Ending December 31, 2021 (Enter year you are authorizing.)   Enter whole dollars only on lines 1 through 5.   Note: Form 1040-SS filers use line 4 only, Leave lines 1, 2, 3, and 5 blank.   1	VENK.	ATA JAGADEES KOPPARTHI	846-81	-000	3	
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	Spouse's	name				er
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	Dout I	Toy Deturn Information Toy Voor Ending December 21 0001 /Ento		KO 011	th o rizing	<u>,</u> \
Note: Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.  1 Adjusted gross income 2 Total tax 3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099 3 1 6, 160, 2 4 Amount you want refunded to you 4 2 13, 171. 3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099 5 Amount you want refunded to you 4 2 2, 389, 5 5 Amount you want refunded to you 1 Taxpayer Declaration and Signature Authorization (Be sure you get and keep a copy of your return) 1 Under penalties of periup, 1 declare that I have examined a copy of the income tax return (original or amended) I am now authorizing, and to the best for some of the penalties of periup, 1 declare that I have examined a copy of the income tax return (original or amended) I am now authorizing, I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERC to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of receive for noting from the income to return (original or amended) I am now authorizing, I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERC to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the reservation of the penalties of received from the IRS (a) an acknowledgement of receipt or reason for rejection of the declared from the IRS (a) an acknowledgement of receipt or reason for rejection of the declared from the IRS (a) an acknowledgement of receipt or reason for rejection for return originator of the penalties of the penalties of received no later than business days prior to the payment of the penalties of			year you a	re au	ınorızınç	].)
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Spouse's PIN: check one box only  □ I authorize	Under pomy know return (o to send for any of Agent to payment authorize payment business taxes to personal Electronial Taxpay	enalties of perjury, I declare that I have examined a copy of the income tax return (original or amended vieldge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above riginal or amended) I am now authorizing. I consent to allow my intermediate service provider, transmy return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejetelay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indiction from federal taxes owed on this return and/or a payment of estimated tax, and the financial institution is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation required days prior to the payment (settlement) date. I also authorize the financial institutions involved in the receive confidential information necessary to answer inquiries and resolve issues related to the process didentification number (PIN) below is my signature for the income tax return (original or amended) I are a FIN: check one box only  I authorize GLOBAL TAXES LLC to enter or generate 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 nif you are entering your own PIN and your return is filed using the Practitioner PIN methologous.	I am now autre are the ameitter, or electroction of the tree. Treasury a cated in the tent to debit the extremental the extremental than the tent authorize uests must be processing of ayment. I furth now author	thorizing ounts of points of answer and its of anx preparation. The receif of the elaboration and of the receif of the elaboration of the receipt of the rec	g, and to rom the intern origin the intern origin the internet of the internet	the best of necome tale ator (ERC) the reaso definancial of the count. This (cancel) ter than beyoment of the that the icable, many as my box only
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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 onlif you are entering your own PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part I below.  Spouse's signature  ☐ Practitioner PIN Method Returns Only—continue below  Part III Certification and Authentication — Practitioner PIN Method Only  ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN.  ☐ Selected PIN. ☐	Spouse	e's PIN: check one box only				1
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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 I below.    Spouse's signature   Date						
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ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN.  5 8 7 2 7 8 6 1 9 8 9  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 not 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		Practitioner PIN Method Returns Only—continue below				
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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 not 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 <b>Pub. 1345</b> , Handbook for Authorized IRS e-file Providers of Individual Income Tax Returns.  ERO's signature ▶ Date ▶	ERO's	<b>EFIN/PIN.</b> Enter your six-digit EFIN followed by your five-digit self-selected PIN. 5 8				8 9
0	authorize	ed to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am subm	ıx return (origi itting this retu	nal or urn in a	amended) accordanc	
ERO Must Retain This Form — See Instructions	ERO's	0				
Don't Submit This Form to the IRS Unless Requested To Do So		ERO Must Retain This Form — See Instructions				

E1040 Department of the Treasury—Internal Revenue Service (99)
U.S. Individual Income Tax Return

IRS Use Only-Do not write or staple in this space.

Filing Status Check only one box.	If yo	Single Married filing jointly under the result on the MFS box, enter the result on is a child but not your dependent.	ame of	ed filing separately your spouse. If you				•	. –	_		. , , ,
Your first name	and mi	ddle initial	Last na	ame					Y	our so	cial securit	y number
VENKATA	JAG	ADEES	KOPI	PARTHI					8	846-8	81-000	3
If joint return, s	pouse's	first name and middle initial	Last na	ame					S	Spouse's	s social sec	curity number
Home address	(numbe	er and street). If you have a P.O. box, see	instruct	ions.				Apt. no.	F	Presider	ntial Election	on Campaign
13281A	LEAF	CREST LN						102			nere if you,	,
to go												tly, want \$3 Checking a
FAIRFAX					V	A	22	2033		_	ow will not	•
Foreign country	/ name			Foreign province/stat	te/coun	ty	Fore	eign postal c	ode y	our tax	or refund.	
											You	Spouse
At any time du	ring 20	021, did you receive, sell, exchange	, or othe	erwise dispose of a	ny fina	ancial intere	st in an	y virtual cı	urrenc	:y?	X Yes	☐ No
Standard	Som	eone can claim:	penden	t Your spor	use as	a depender	nt					
Deduction		Spouse itemizes on a separate retur	n or you	u were a dual-statu	ıs alien	1						
Age/Blindness	You:	Were born before January 2, 1	957	Are blind S	pouse	: Was I	born be	efore Janua	arv 2.	1957	☐ Is bli	ind
Dependents	s (see	instructions):		(2) Social secur	ritv	(3) Relation	nship	(4) 🗸	if gua	lifies for	r (see instru	ctions):
If more	,	rst name Last name		number	ity	to you			ax cred	1	•	her dependents
than four												
dependents,	_										[	<u> </u>
see instruction: and check	S ——											
here ▶												
	1	Wages, salaries, tips, etc. Attach	orm(s)	W-2						1	10	01,475.
Attach	2a	Tax-exempt interest	2a		b T	axable inter	est			2b		
Sch. B if required.	3a	Qualified dividends	3a	4.	<b>b</b> C	ordinary divi	dends			3b		4.
required.	4a	IRA distributions	4a		<b>b</b> T	axable amo	unt .			4b		
	5a	Pensions and annuities	5a		b T	axable amo	unt .			5b		
Standard	6a	Social security benefits	6a		b T	axable amo	unt .			6b		
Deduction for—	7	Capital gain or (loss). Attach Sche	dule D i	f required. If not re	quired	, check here	э.		<b>▶</b> □	7		386.
Single or Married filing	8	Other income from Schedule 1, lin	ie 10							8	-	-9 <b>,</b> 705.
separately, \$12,550	9	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7,	and 8.	This is your <b>total ir</b>	come				. ▶	9	9	92,160.
Married filing	10	Adjustments to income from Sche	dule 1,	line 26						10		
jointly or Qualifying	11_	Subtract line 10 from line 9. This is	s your <b>a</b>	djusted gross inc	ome				. ▶	11	9	92,160.
widow(er), \$25,100	12a	Standard deduction or itemized	deduct	tions (from Schedu	ıle A)		12a	12,	550			
Head of	b	Charitable contributions if you take	the sta	ndard deduction (se	ee instr	ructions)	12b		300.	_		
household, \$18,800	С	Add lines 12a and 12b								120	; 1	12,850.
If you checked	13	Qualified business income deduct	ion fron	n Form 8995 or For	rm 899	5-A				13		
any box under Standard	14	Add lines 12c and 13								14	1	12,850.
Deduction, see instructions.	15	Taxable income. Subtract line 14	from lir	ne 11. If zero or les	s, ente	er -0				15	1 7	79,310.

	16	Tax (see instructions). Check if any from Form(s):	<b>1</b> 8814	<b>2</b> 4972	3 🗌 _			16	13,171.
	17	Amount from Schedule 2, line 3						17	
	18	Add lines 16 and 17						18	13,171.
	19	Nonrefundable child tax credit or credit for other	r dependen	ts 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	er -0					22	13,171.
	23	Other taxes, including self-employment tax, from	n Schedule	2, line 21				23	0.
	24	Add lines 22 and 23. This is your <b>total tax</b> .						24	13,171.
	25	Federal income tax withheld from:							
	а	Form(s) W-2			25a	16,1	60.		
	b	Form(s) 1099			25b				
	С	Other forms (see instructions)			25c				
	d	Add lines 25a through 25c						25d	16,160.
	26	2021 estimated tax payments and amount applie						26	·
If you have a Lagrangian qualifying child,	27a	Earned income credit (EIC)		NΩ	27a				
attach Sch. EIC.		Check here if you were born after January							
		January 2, 2004, and you satisfy all the o	ther requir	ements for					
		taxpayers who are at least age 18, to claim the E	1 1	structions					
	b	Nontaxable combat pay election	27b		-				
	С	Prior year (2019) earned income	27c						
	28	Refundable child tax credit or additional child tax			28				
	29	American opportunity credit from Form 8863, lin							
	30	Recovery rebate credit. See instructions							
	31	Amount from Schedule 3, line 15			31				
	32	Add lines 27a and 28 through 31. These are you						32	16 160
	33	Add lines 25d, 26, and 32. These are your total						33	16,160.
Refund	34	If line 33 is more than line 24, subtract line 24 fro			-	=	Ċ	34	2,989.
Di	35a	Amount of line 34 you want <b>refunded to you.</b> If Routing number 0 8 1 0 0 0 0 3					_	35a	2,989.
Direct deposit? See instructions.	►b	Account number 3 5 5 0 0 4 4 3			Checkin	g ∐ Sav	ings		
	▶ d 36								
A		Amount of line 34 you want applied to your 202	37						
Amount You Owe	37 38	<b>Amount you owe.</b> Subtract line 33 from line 24. Estimated tax penalty (see instructions)			38	cuons .	•	31	
Third Party Designee		you want to allow another person to discuss				Yes. Comp	olete b	elow.	X No
Boolgiloo		ignee's	Phone			Personal			
	nar	ne ►	no. 🕨			number (	PIN)		
Sign		der penalties of perjury, I declare that I have examined the							
Here		ef, they are true, correct, and complete. Declaration of pro-			sed on all	information of			, ,
	You	r signature Da	te	Your occupation					t you an Identity N, enter it here
Joint return?			SR. SOFTWARE ENGINEER					nst.) ▶	
See instructions.	Spo	use's signature. If a joint return, <b>both</b> must sign.	Date Spouse's occupation				If the	IRS sen	t your spouse an
Keep a copy for your records.							1	,	ction PIN, enter it here
your records.							(see ir	nst.) 🖊	
		(0=0)0000	nail address	JAGADEESHREDI	1		TINI		01 1 17
Paid		parer's name Preparer's signature			Date		IN		Check if:
Preparer		PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA RAM	M SAGAR (	GUPTA TALLAM	03/04	/2022   PO	2082		Self-employed
Use Only		n's name ► GLOBAL TAXES LLC	~ '	Q7 00045					678) 965-9522
		n's address ▶ 2530 Pebble Creek Ln	Cumming	g GA 30041			Firm's	s EIN ▶	
Go to www.irs.go	ov/Form	1040 for instructions and the latest information.		BAA	REV 02/17	/22 PRO			Form <b>1040</b> (2021)

Form 1040 (2021)

Page 2

## SCHEDULE 1 (Form 1040)

## **Additional Income and Adjustments to Income**

OMB No. 1545-0074

2021

Attachment Sequence No. 01

Department of the Treasury Internal Revenue Service

Name(s) shown on Form 1040, 1040-SR, or 1040-NR

► Attach to Form 1040, 1040-SR, or 1040-NR.
 Go to www.irs.gov/Form1040 for instructions and the latest information.

Your social security number 846-81-0003

VENK	ATA JAGADEES KOPPARTHI		846-8	31-00	03
Par	t I Additional Income				
1	Taxable refunds, credits, or offsets of state and local income taxe	s		1	
<b>2</b> a	Alimony received			2a	
b	Date of original divorce or separation agreement (see instructions)	<b></b>			
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, tr Schedule E			5	-9,705.
6	Farm income or (loss). Attach Schedule F			6	
7	Unemployment compensation			7	
8	Other income:				
а	Net operating loss	8a (	)		
b	Gambling income	8b			
С	Cancellation of debt	8c			
d	Foreign earned income exclusion from Form 2555	8d (	)		
е	Taxable Health Savings Account distribution	8e			
f	Alaska Permanent Fund dividends	8f			
g	Jury duty pay	8g			
h	Prizes and awards	8h			
i	Activity not engaged in for profit income	8i			
j	Stock options	8j			
k	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	8k			
I	Olympic and Paralympic medals and USOC prize money (see instructions)	81			
m	Section 951(a) inclusion (see instructions)	8m			
n	Section 951A(a) inclusion (see instructions)	8n			
0	Section 461(I) excess business loss adjustment	80			
р	Taxable distributions from an ABLE account (see instructions) .	8p			
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. Enter here and on Form 1				
	1040-NR, line 8			10	-9,705.

Schedule 1 (Form 1040) 2021 Page **2** 

Par	Adjustments to Income			
11	Educator expenses		. 11	
12	Certain business expenses of reservists, performing artists, and fee-officials. Attach Form 2106			
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	<b>&gt;</b>	_	
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)	24a		
b	Deductible expenses related to income reported on line 8k from the rental of personal property engaged in for profit	24b		
С	Nontaxable amount of the value of Olympic and Paralympic medals and USOC prize money reported on line 8l	24c		
d	Reforestation amortization and expenses	24d		
е	Repayment of supplemental unemployment benefits under the Trade Act of 1974	24e		
f	Contributions to section 501(c)(18)(D) pension plans	24f		
g	Contributions by certain chaplains to section 403(b) plans	24g		
h	Attorney fees and court costs for actions involving certain unlawful discrimination claims (see instructions)	24h		
i	Attorney fees and court costs you paid in connection with an award from the IRS for information you provided that helped the IRS detect tax law violations	24i		
j	Housing deduction from Form 2555	<b>24</b> j		
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form 1041)	24k		
z	Other adjustments. List type and amount ▶	24z		
25	Total other adjustments. Add lines 24a through 24z		. 25	
26	Add lines 11 through 23 and 25. These are your <b>adjustments t</b> here and on Form 1040 or 1040-SR, line 10, or Form 1040-NR, line			

#### **SCHEDULE D** (Form 1040)

### **Capital Gains and Losses**

OMB No. 1545-0074

Attachment Sequence No. 12

Department of the Treasury Internal Revenue Service (99) ► Attach to Form 1040, 1040-SR, or 1040-NR.

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

Name(s) shown on return Your social security number 846-81-0003 VENKATA JAGADEES KOPPARTHI

Did you dispose of any investment(s) in a qualified opportunity fund during the tax year?

#### If "Yes," attach Form 8949 and see its instructions for additional requirements for reporting your gain or loss. Short-Term Capital Gains and Losses – Generally Assets Held One Year or Less (see instructions) Part I See instructions for how to figure the amounts to enter on the (h) Gain or (loss) (g) Adjustments Subtract column (e) lines below. Proceeds Cost to gain or loss from from column (d) and This form may be easier to complete if you round off cents to (sales price) (or other basis) Form(s) 8949, Part I, combine the result whole dollars. line 2, column (g) 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 . . . . . . . . . . . . . . 169. 366. -197. Totals for all transactions reported on Form(s) 8949 with Box B checked . . . . . . . . . . . . . 3 Totals for all transactions reported on Form(s) 8949 with 225. 356. 131. Short-term gain from Form 6252 and short-term gain or (loss) from Forms 4684, 6781, and 8824 4 Net short-term gain or (loss) from partnerships, S corporations, estates, and trusts from 5 Short-term capital loss carryover. Enter the amount, if any, from line 8 of your Capital Loss Carryover 6 Net short-term capital gain or (loss). Combine lines 1a through 6 in column (h). If you have any longterm capital gains or losses, go to Part II below. Otherwise, go to Part III on the back . . . . . . . . 7 -66.

#### 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.	(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 <b>Box D</b> checked	1,878.	1,426.			452.
9	Totals for all transactions reported on Form(s) 8949 with <b>Box E</b> checked					
10	Totals for all transactions reported on Form(s) 8949 with <b>Box F</b> checked					
11	Gain from Form 4797, Part I; long-term gain from Forms from Forms 4684, 6781, and 8824				11	
12	Net long-term gain or (loss) from partnerships, S corporat	12				
13	Capital gain distributions. See the instructions		13			
14	Carryover	14	( )			
15	15	452.				

BAA

Schedule D (Form 1040) 2021 Page 2

#### Part III Summary 16 Combine lines 7 and 15 and enter the result 16 386. • 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 • 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? X 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 are you not filing Form 4952? X Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Forms 1040 and 1040-SR, 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. If line 16 is a loss, enter here and on Form 1040, 1040-SR, or 1040-NR, line 7, the smaller of: 21 • The loss on line 16; or 21 • (\$3,000), or if married filing separately, (\$1,500) **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 Forms 1040 and 1040-SR, line 16. No. Complete the rest of Form 1040, 1040-SR, or 1040-NR.

## 8949

#### Sales and Other Dispositions of Capital Assets

Department of the Treasury Internal Revenue Service

▶ Go to www.irs.gov/Form8949 for instructions and the latest information.

Attachment Sequence No. 12A

OMB No. 1545-0074

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

Social security number or taxpayer identification number

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.

846-81-0003 VENKATA JAGADEES KOPPARTHI 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 Short-Term. Transactions involving capital assets you held 1 year or less are generally short-term (see Part I 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 Adjustment, if any, to gain or loss. 1 If you enter an amount in column (a). (h) (e) enter a code in column (f). (d) Cost or other basis Gain or (loss). (c) (a) (b) Date sold or Proceeds See the **Note** below See the separate instructions. Subtract column (e) Description of property Date acquired disposed of and see Column (e) (sales price) from column (d) and (Example: 100 sh. XYZ Co.) (Mo., day, yr.) (Mo., day, yr.) combine the result (see instructions) in the separate (g) Code(s) from Amount of adjustment instructions with column (a) instructions 05/05/21 12/12/21 169. 366. -197.

Robinhood Securities LLC 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 1b (if Box A above is checked), line 2 (if Box B 169. 366. -197.

above is checked), or line 3 (if Box C above is checked) ▶ 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.

Form 8949 (2021) 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  $VENKATA\ JAGADEES\ KOPPARTHI$ 

Social security number or taxpayer identification number 846-81-0003

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.

<ul><li>X (D) Long-term transactions</li><li>☐ (E) Long-term transactions</li><li>☐ (F) Long-term transactions</li></ul>	reported on l	Form(s) 1099	-B showing bas				<b>)</b>
(a) Description of property	(b) Date acquired	(c) Date sold or	<b>(d)</b> Proceeds	(e) Cost or other basis. See the <b>Note</b> below	If you enter an enter a c	f 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	<b>(g)</b> Amount of adjustment	from column (d) and combine the result with column (g)
Robinhood Securities LLC	05/05/20	12/12/21	1,878.	1,426.			452.
2 Totals. Add the amounts in columns negative amounts). Enter each total Schedule D, line 8b (if Box D above above is checked), or line 10 (if Box D above is checked).	I here and inc is checked), <b>lir</b>	lude on your ne 9 (if Box E	1,878.	1,426.			452.

**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.

## 8949

#### Sales and Other Dispositions of Capital Assets

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

▶ Go to www.irs.gov/Form8949 for instructions and the latest information.

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

Attachment Sequence No. 12A

OMB No. 1545-0074

. ,		
VENKATA	JAGADEES	KOPPARTHI

Social security number or taxpayer identification number

846-81-0003

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

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 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. (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 X (C) Short-term transactions not reported to you on Form 1099-B Adjustment, if any, to gain or loss. 1 If you enter an amount in column (a). enter a code in column (f). (c) (d) Cost or other basis Gain or (loss). (2)

(a)  Description of property	(b) Date acquired	Date sold or	Proceeds	See the <b>Note</b> below		arate instructions.	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	<b>(g)</b> Amount of adjustment	from column (d) and combine the result with column (g)
ROBINHOOD CRYPTO LLC	05/05/21	12/12/21	356.	225.			131.
2 Totals. Add the amounts in columns negative amounts). Enter each total Schedule D, line 1b (if Box A above above is checked), or line 3 (if Box 6).	al here and inc is checked), <b>lir</b>	lude on your ne 2 (if Box B	356.	225.			131.

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.

#### **SCHEDULE E** (Form 1040)

### **Supplemental Income and Loss**

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

► Attach to Form 1040, 1040-SR, 1040-NR, or 1041.

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service (99)

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

Attachment Sequence No. 13

VENKATA JAGADEDS KOPPARTHI	( )											security		ŧI.
Schedule C. See instructions. If you are an individual, report farm rental income or loss from Form 4835 on page 2, line 40.   A Did you make any payments in 2021 that would require you to file Form(s) 1099?   Yes   No														
A Did you make any payments in 2021 that would require you to file Form(s) 1099? See instructions	Part				-									use
B   f "Yes." did you or will you file required Form(s) 1099?	<b>A</b> Did		<u> </u>								<u>.                                     </u>			l Na
1a   Physical address of each property (street, city, state, ZIP code)         A 15/581 PANDURANGASWAMY TEMPL ST, MYDURR ROAD PRODDATUR, KADAPA DIST, ANDHRA PRADESH IN 51636(BB)           B   C   The property (from list below)         2 For each rental real estate property listed approximate above, report the number of fair rental and personal use days. Check the QJV box only if you meet the requirements to file as a qualified joint venture. See instructions.         Fair Rental Days         Personal Use Days         QJV           Type of Property:         1 Single Family Residence 2 Multi-Family Residence 4 Commercial 4 Commercial 5 Land 4 Royalties received 4 Commercial 4 Commercial 5 Royalties received 4 Commercial 5 Royalties received 4 Royalties received 5 Royalties received 7 1, 920 .         7 1, 920 .         8 C           3 Rents received 8 Advertising 6 Auto and travel (see instructions) 7 Cleaning and maintenance 7 1, 920 .         8 Commissions 8 Royalties R														-
A   15/581 PANDURANGASWAMY TEMPL ST, MYDUKR ROAD PRODATUR, KADAPA DIST, ANDHRA PRADESH IN 516360		Dhysical address of	ou lile required Form(s) 10	099?						• •		T	es _	] NO
B   C   Type of Property (from list below)   2   For each rental real estate property listed above, report the number of fair rental and personal use days. Check the QJV box only if you meet the requirements to file as a qualified joint venture. See instructions.							IID	17 N D N D	וג חדמת ג	AIDIID:	ע חח ע	DECH	TNT E	1 ( ) ( )
Type of Property (from list below)		13/381 PANDURAN	GASWAMI TEMPL ST, I	MIDUKK K	UAD	PRODUAT	UK,	KADAPA	A DIST, AI	NDHRA	A PRE	DESH	IN 5	10300
Type of Property (from list below)   A   3   3   3   3   3   3   3   3   3														
(from list below)   above, report the number of fair cental and personal use days. Check the QVB box only if you meet the requirements to file as a qualified joint venture. See instructions.   B		Type of Droperty	0					Eair	Dontal	Dore	conal	Hee		
A 3   gersonal use days. Check the QJV box only   Growned the requirements to file as a qualified joint venture. See instructions.   A   365   0   □    Type of Property:   Single Family Residence   3 Vacation/Short-Term Rental   5 Land   6 Royalties   8 Other (describe)    Income:   Properties:   A   B   C    3 Rents received   4 Commercial   6 Royalties   8 Other (describe)    Income:   Properties:   A   B   C    3 Rents received   4   State   Stat	10		above, report the n	umber of fai	ir rent	al and							Q	JV
B		_ `	nersonal use days	Check the (	O.JV h	ox onlv—	Λ	_	-				Г	<del></del>
C		3	qualified joint ventu	re. See inst	ructio	ns.			303			<del>-</del>		=
Type of Property:  1 Single Family Residence			' '											
1 Single Family Residence 2 Multi-Family Residence 1 A Commercial 6 Royalties Income:       3 Vacation/Short-Term Rental 6 Royalties 8 Other (describe)         3 Rents received		of Property:												
2 Multi-Family Residence         4 Commercial         6 Royalties         8 Other (describe)           Income:         Properties:         A         B         C           3 Rents received			3 Vacation/Short-Te	rm Rental	5 la	nd		7 Self-l	Rental					
Income:	_	•		minontai										
3       Rents received				roperties:		Janioo		O Othe					С	
4       Royalties received					3			615						
Expenses:       5       Advertising       5         6       Auto and travel (see instructions)       6       7         7       Cleaning and maintenance       7       1,920         8       Commissions       8         9       Insurance       9         10       Legal and other professional fees       10         11       Management fees       11         12       Mortgage interest paid to banks, etc. (see instructions)         13       Other interest.         13       14         14       1,970         15       Supplies         16       15         17       2,350         18       Depreciation expense or depletion         19       Other (list)         10       19         10       10         11       10         12       10         13       10         14       1,970         15       2,150         16       17         17       2,350         18       19         10       10         10       10         11       10 <tr< th=""><td></td><td></td><td></td><td></td><td>+</td><td></td><td></td><td>010.</td><td></td><td></td><td></td><td></td><td></td><td></td></tr<>					+			010.						
5       Advertising       5         6       Auto and travel (see instructions)       6         7       Cleaning and maintenance       7       1,920.         8       Commissions.       8         9       Insurance       9         10       Legal and other professional fees       10         11       Management fees       11         12       Mortgage interest paid to banks, etc. (see instructions)         13       Other interest.         14       1,970.         15       Supplies         16       14         17       15         2,150.         18       Depreciation expense or depletion         18       Depreciation expense or fine out if you must file Form 6198         20       10,320.         21       -9,705.         22       9,705.         23       615.				· · ·	<u> </u>									
6 Auto and travel (see instructions)	-				5									
7					6									
8 Commissions					7		1,	920.						
9	8				8									
10       Legal and other professional fees       10         11       Management fees       11       1,930.         12       Mortgage interest paid to banks, etc. (see instructions)       12         13       Other interest.       13         14       Repairs.       14       1,970.         15       Supplies       15       2,150.         16       Taxes       16         17       Utilities       17       2,350.         18       Depreciation expense or depletion       18         19       Other (list) ►       19         20       Total expenses. Add lines 5 through 19       20       10,320.         21       Subtract line 20 from line 3 (rents) and/or 4 (royalties). If result is a (loss), see instructions to find out if you must file Form 6198       21       -9,705.         22       Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions)       22       9,705.)(       )(         23a       Total of all amounts reported on line 3 for all rental properties       23a       615.	9				9									
11       Management fees       11       1,930.         12       Mortgage interest paid to banks, etc. (see instructions)       12         13       Other interest.       13         14       Repairs.       14       1,970.         15       Supplies       15       2,150.         16       Taxes       16         17       Utilities       17       2,350.         18       Depreciation expense or depletion       18         19       Other (list) ►       19         20       Total expenses. Add lines 5 through 19       20       10,320.         21       Subtract line 20 from line 3 (rents) and/or 4 (royalties). If result is a (loss), see instructions to find out if you must file Form 6198       21       -9,705.         22       Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions)       22 ( 9,705. )( )(         23a       Total of all amounts reported on line 3 for all rental properties       23a       615.	10				10									
12       Mortgage interest paid to banks, etc. (see instructions)       12       13         13       Other interest.       13       14       1,970.         15       Supplies       15       2,150.       16         16       Taxes       16       17       2,350.       18         17       Utilities       17       2,350.       18       19       19         19       Other (list) ▶       19       20       10,320.<	11				11		1,	930.						
13       Other interest.       13         14       Repairs.       14       1,970.         15       Supplies       15       2,150.         16       Taxes       16         17       Utilities.       17       2,350.         18       Depreciation expense or depletion       18         19       Other (list) ►       19         20       Total expenses. Add lines 5 through 19       20       10,320.         21       Subtract line 20 from line 3 (rents) and/or 4 (royalties). If result is a (loss), see instructions to find out if you must file Form 6198       21       -9,705.         22       Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions)       21       -9,705.)(       )(         23a       Total of all amounts reported on line 3 for all rental properties       23a       615.	12				12									
14       1,970.         15       Supplies	13		The state of the s		13									
15 Supplies	14				14		1,	970.						
16       Taxes       16         17       Utilities       17       2,350.         18       Depreciation expense or depletion       18         19       Other (list) ▶       19         20       Total expenses. Add lines 5 through 19       20       10,320.         21       Subtract line 20 from line 3 (rents) and/or 4 (royalties). If result is a (loss), see instructions to find out if you must file Form 6198       21       -9,705.         22       Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions)       22       9,705. )(       )(         23a       Total of all amounts reported on line 3 for all rental properties       23a       615.	15				15		2,	150.						
18 Depreciation expense or depletion	16	Taxes			16									
19 Other (list) ► 19 20 Total expenses. Add lines 5 through 19	17	Utilities			17		2,	350.						
<ul> <li>Total expenses. Add lines 5 through 19</li> <li>Subtract line 20 from line 3 (rents) and/or 4 (royalties). If result is a (loss), see instructions to find out if you must file Form 6198</li> <li>Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions)</li> <li>Total of all amounts reported on line 3 for all rental properties</li> <li>20 10,320.</li> <li>21 -9,705.</li> <li>22 ( 9,705. )( )(</li> <li>23a 615.</li> </ul>	18	Depreciation expense	or depletion		18									
<ul> <li>Total expenses. Add lines 5 through 19</li> <li>Subtract line 20 from line 3 (rents) and/or 4 (royalties). If result is a (loss), see instructions to find out if you must file Form 6198</li> <li>Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions)</li> <li>Total of all amounts reported on line 3 for all rental properties</li> <li>20 10,320.</li> <li>21 -9,705.</li> <li>22 ( 9,705. )( )(</li> <li>23a 615.</li> </ul>	19	Other (list)			19									
result is a (loss), see instructions to find out if you must file Form 6198	20				20		10,	320.						
file Form 6198	21	Subtract line 20 from	line 3 (rents) and/or 4 (ro	yalties). If										
Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions)		result is a (loss), see	instructions to find out if	you must										
on <b>Form 8582</b> (see instructions)					21		<b>-9</b> ,	705.						
23a Total of all amounts reported on line 3 for all rental properties 23a 615.	22				-	,	0 -		,					,
	00-	•	•			(	9,1		(		)(			)
			•				•			6.	.5.			
b Total of all amounts reported on line 4 for all royalty properties					erties									
c Total of all amounts reported on line 12 for all properties			•				•							
d Total of all amounts reported on line 18 for all properties							•		1	0 20				
e Total of all amounts reported on line 20 for all properties					 tipol:			<b>23e</b>	1	.∪ <b>,</b> 3∠				
		•				•		 ntor tota		` .			0 -	705 \
											20 (		9,1	05.)
Total rental real estate and royalty income or (loss). Combine lines 24 and 25. Enter the result														
here. If Parts II, III, 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 . 26 -9,705.										OII	26		_9	705
For Paperwork Reduction Act Notice, see the separate instructions.  NPA  -9,705  Schedule E (Form 1040) 203	For Par							III IC 4 I		·		adule E (E		

## 2021 VA760CG Page 1





VENKATA JAGA KOPPARTHI

13281A LEAFCREST LN APT 102

FAIRFAX VA 22033

_					_
SSN - You	KOPP	846810003	Vendor ID 1	555	XXXXX
SSN - Spouse					
Fed Adj Gross Income (FAC	GI) 1.	92160.	Withholding (VA) - You	19A.	5319.
Additions	2.		Withholding (VA) - Spous	se 19B.	
Subtotal	3.	92160.	Estimated Payments	20.	
Age Deduction - You	4A.		2020 Overpayment	21.	
Age Deduction - Spouse	4B.		Extension Payments	22.	
Soc Sec & Tier 1 Railroad	5.		Credit - Low-Income or E	EIC 23.	
State Income Tax Overpayr	ment 6.		Credit - Schedule OSC	24.	
Subtractions	7.		Credits - Schedule CR	25.	
Subtotal Subtractions	8.		Total Payments / Credits	26.	5319.
Total VA Adj Gross Income	(VAGI) 9.	92160.	Tax You Owe	27.	
Itemized Deductions - VAS	sch A 10.		Tax Overpayment	28.	590.
Standard Deduction	11.	4500.	Overpayment Credited to	Next Year 29.	
Exemptions	12.	930.	VAC - Virginia 529 / ABLI	E 30.	
Deductions	13.		VAC - Other Contribution	s 31.	
Subtotal (Deductions & Exe	emptions) 14.	5430.	Addition to Tax, Penalty 8	& Interest 32.	
VA Taxable Income	15.	86730.	Sales and Use Tax	33.	
Amount of Tax	16.	4729.	Amount You Owe	ul Nī	
Spouse Tax Adjustment (S	TA) 17.		Will Pay by Credit/Debit Car Your Refund	rd N	590.
VAGI - Spouse	17A.		Donk Doubing #		001000033
Net Amount of Tax	18.	4729.	Bank Routing #	C 3550	081000032
	L		Bank Account #	3330	04439597

\_\_LAR \_\_DLAR \_\_DTD \_\_LTD \$\_\_\_\_

Page 1 of 2





#### Filing Status, Age & License Information Additional Filing Information 059 1 Filing Status Locality Federal Head of Household Uninsured & Authorize DMAS 08021993 DOB - You Name or Filing Status Change VA Driver's License ID - You Address Change VA Driver's License - Iss. Date - You VA Return Not Filed Last Year Spouse Name (Filing Status 3 Only) Dependent on Another's Return Farmer / Fisherman / Merchant Seaman DOB - Spouse Amended VA Driver's License ID - Spouse Reason Code VA Driver's License - Iss. Date - Spouse Overseas on Due Date Exemptions (B) Exemptions (A) 65 & Over - You Federal EIC & Amount You Spouse 65 & Over - Spouse Deceased Indicator Χ No Sales & Use Tax Due Indicator Dependents Blind - You Total (A) 1 Blind - Spouse Obtain Electronic 1099G Total (B) ID Theft PIN **Contact Information** I (We), the undersigned, declare under penalty of law that I (we) have examined this return & to the best of my (our) knowledge, it is a true, correct & complete return. If you are requesting direct deposit of your refund by providing bank information on your return, you are certifying that the information provided is for a domestic account within the territorial jurisdiction of the United States. Signature - You \_\_\_ Phone - You 8168889447 Date Signature - Spouse \_\_\_\_ Phone - Spouse Signature - Preparer SYAM PRIYA RAM SAGAR GUPTA TALLAM Date 030422 6789659522 Phone - Preparer

supporting 760CG documents.
1555 REV 02/16/22 PRO

The Tax Department may discuss my/our return with my/our preparer.

File by May 1, 2022 Include Page 1, Page 2 and all

2530 PEBBLE CREEK LN CUMMING

GLOBAL TAXES LLC

Preparer Information

GA 30041

7

Page 2 of 2

P02082703

#### 2021 Schedule INC/CG

846810003

Report all W-2s, 1099s & VK-1s with VA Withholding

VENKATA JAGA

KOPPARTHI



Your/ Spouse SSN	Withholding VA Employe Type Withholding FEIN		Employer FEIN	VA Account Number	VA Wages, tips, other comp.
Γ					⊣
846810003	W	1116.	223301374	30223301374F001	21271.
846810003	M	4203.	223301374	30223301374F001	80204.

Total VA Withholding

You

846810003

5319.

Spouse

Total # of W-2s,1099s & VK-1s

02

VA-8879 Virginia Department of Taxation

1555

# Virginia Individual Income Tax e-File Signature Authorization

Tax Year 2021

## DO NOT SEND THIS VA-8879 TO THE VIRGINIA DEPARTMENT OF TAXATION OR THE IRS. IT MUST BE MAINTAINED IN YOUR FILES!

Virginia Submission Identification Number (SID)				
Your Name		B Your Social Security Number		
VENKATA JAGADEES KOPPARTHI		846-81-0003		
Spouse's Name		A Spouse's Social Security Number		
Part	Tax Return Information	A Spouse	B Yourself	
1.	Federal Adjusted Gross Income (Form 760CG, Line 1; 760PY, Line 1, columns A & B; Form 763, Line 1)		92160.	
2.	Virginia Adjusted Gross Income (Form 760CG, Line 9; 760PY, Line 10, columns A & B; Form 763, Line 9)		92160.	
3.	Taxable Income (Form 760CG, Line 15; 760PY, Line 16, columns A & B; Form 763, Line 17)		86730.	
4.	Virginia Income Tax (Form 760CG, Line 18; 760PY, Line 17, columns A & B; Form 763 Line 18)		4729.	
5.	Withholding (Form 760CG, Line 19a & 19b; 760PY, Lines 19a & 19b; Form 763, Lines 19a & 19b)		5319.	
6.	Amount you Owe (Form 760CG, Line 35; Form 760PY, Line 35; Form 763, Line 35)		00131	
7.	Refund (Form 760CG, Line 36; 760PY, Line 36; Form 763, Line 36)		590.	
Part	Declaration of Taxpayer and Signature Authorization		030.	
Under penalties of perjury, I declare that I have examined a copy of my individual income tax return and accompanying schedules and statements for the year ending December 31, 2021, and to the best of my knowledge and belief, it is true, correct and complete. I further declare that the information I provided to my Electronic Return Originator (ERO), Transmitter, or Intermediate Service Provider (including my name, address and social security number or individual tax identification number) and the amount shown in Part I above agree with the information and amounts shown on the corresponding lines of my electronic income tax return. If I am filing a balance due return, I understand that if the Virginia Department of Taxation (Virginia Tax) does not receive full and timely payment of my tax liability, I remain liable for the tax liability and all applicable interest and penalties. I authorize my ERO, Transmitter or Intermediate Service Provider to transmit my complete return to Virginia Tax. I have selected a personal identification number (PIN) as my signature for my electronic income tax return and, if applicable, the direct deposit of my refund or direct debit of my tax due. In choosing either direct deposit or direct debit, I certify that the transaction does not directly involve a financial institution outside of the territorial jurisdiction of the United States at any point in the process. Taxpayers may sign the form using a rubber stamp, mechanical device, such as a signature pen, or computer software program.  Taxpayer's e-File PIN: check one box only				
	I authorize the ERO named below to enter my e-File PIN 1 0 0 0 3 as my signature on my 2021 e-filed Virginia individual income tax return.  Do not enter all zeros  GLOBAL TAXES LLC			
	ERO Firm Name			
	I will enter my e-File PIN as my signature on my 2021 e-filed Virginia individual income tax return. Check this box only if you are entering your own e-File PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part III below.			
Your S	Your Signature Date			
Spouse's e-File PIN: check one box only				
I authorize the ERO named below to enter my e-File PIN as my signature on my 2021 e-filed Virginia individual income tax return.  Do not enter all zeros				
	ERO Firm Name			
	I will enter my e-File PIN as my signature on my 2021 e-filed Virginia individual income tax return. Check this box only if you are entering your own e-File PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part III below.			
Spouse's Signature Date				
Part III Certification and Authentication – Practitioner PIN Method Only				
ERO's EFIN/PIN: Enter your six-digit EFIN followed by your five digit self-selected PIN.  5 8 7 2 7 8 6 1 9 8 9				
Do not enter all zeros  I certify that the above numeric entry is my ERO EFIN/PIN, which is my signature for the 2021 Virginia individual income tax return 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 Virginia's publication Handbook for Electronic Filers of Individual Income Tax Returns (Tax Year 2021). EROs may sign the form using a rubber stamp, mechanical device, such as a signature pen, or computer software program.				
ERO's Signature Date03-04-22				