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

- Internal n	lever the Get vice									
Submis	ssion Identification Number (SID)									
Taxpayer	's name	Social secu	Social security number							
MOUN	IKA NAGINENI	737-79	737-79-7374							
Spouse's	s name		Spouse's social security number							
Part	Tax Return Information — Tax Year Ending December 31, 2021 (Enter year you	are au	horiz	ina.)					
,	whole dollars only on lines 1 through 5.	Zintor your you	are aa		9./					
	Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.									
	Adjusted gross income		1		53,	692.				
	Total tax		2		4,	741.				
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3		8,	666.				
4	Amount you want refunded to you		4		3,	925.				
5	Amount you owe		5							
Part I	Taxpayer Declaration and Signature Authorization (Be sure you get	and keep a co	py of y	our r	eturr	າ)				
return (o to send for any o Agent to paymen authoriz paymen business taxes to persona	wledge and belief, it is true, correct, and complete. I further declare that the amounts in Part original or amended) I am now authorizing. I consent to allow my intermediate service provider, the my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account of my federal taxes owed on this return and/or a payment of estimated tax, and the financial interaction is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to text, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellations adays prior to the payment (settlement) date. I also authorize the financial institutions involved to receive confidential information necessary to answer inquiries and resolve issues related to a identification number (PIN) below is my signature for the income tax return (original or amendatic Funds Withdrawal Consent.	ransmitter, or elect for rejection of the the U.S. Treasury int indicated in the stitution to debit the minate the authorion requests must I in the processing the payment. I fu	ronic ret transmis and its of tax prepare entry to zation. To be received the ele of the ele orther according	designation of the second of t	iginato (b) the ated Fi n softw account oke (ca o later ic payr edge t	or (ERO) reason inancial vare for nt. This ancel) a than 2 ment of hat the				
	yer's PIN: check one box only	Г								
×	l authorize GLOBAL TAXES LLC to enter or gen	erate my PIN	7 3	3 7	4	as my				
•	ERO firm name signature on the income tax return (original or amended) I am now authorizing.	· · · E	nter five on't ente		but	ao my				
	I will enter my PIN as my signature on the income tax return (original or amended) I if you are entering your own PIN and your return is filed using the Practitioner PIN below.									
Your si	gnature ▶ Dat	e▶								
Spous	e's PIN: check one box only	_								
	I authorize to enter or gen	erate my PINI				as my				
	ERO firm name		nter five	diaits.		as my				
	signature on the income tax return (original or amended) I am now authorizing.		on't ente	•						
	I will enter my PIN as my signature on the income tax return (original or amended) I if you are entering your own PIN and your return is filed using the Practitioner PIN below.									
Spouse	e's signature ▶ Dat	e▶								
	Practitioner PIN Method Returns Only—continue b	elow								
Part I	II Certification and Authentication — Practitioner PIN Method Only									
FRO'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 8	9				
	ET INVI INTERIOR YOUR OIX GIGHT ET INVIONOUS BY YOUR INVO GIGHT BOILDON'S ATTITUTE TO		nter all ze							
authoriz	that the above numeric entry is my PIN, which is my signature for the electronic individual included to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I amount of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS <i>e-file</i> Provide	submitting this re	turn in a	ccord	anće v					
ERO's	signature ► Dat	e ▶								
	ERO Must Retain This Form — See Instruction	ns								
	Don't Submit This Form to the IRS Unless Requested									

E 1040 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 but checked the MFS box, enter the notes on is a child but not your dependent	ame of		,	_		, ,	_	, ,	` , ` ,	
Your first name			Last na						Your so	ocial securi	ity number	
MOUNIKA			NAG:	INENI					737-79-7374			
If joint return, s	If joint return, spouse's first name and middle initial Last na								Spouse	's social se	curity number	
									640-	85-124	.0	
Home address	(numb	er and street). If you have a P.O. box, see	instruct	ons.				Apt. no.	Preside	ential Electi	ion Campaign	
13175 F	н хс	UNT LANE						151	1	here if you,		
City, town, or p	ost off	ice. If you have a foreign address, also co	mplete s	spaces below.	Sta	te	ZIP	code			ntly, want \$3 Checking a	
HERNDON					V	A	20	171	-	low will not	•	
Foreign country	y name			Foreign province/state/	coun	ty	Fore	eign postal code	_	x or refund	•	
At any time du	ıring 2	021, did you receive, sell, exchange,	or othe	erwise dispose of an	y fina	ancial interest	in an	y virtual curre	ency?	Yes	⊠ No	
Standard Deduction		neone can claim: You as a de Spouse itemizes on a separate retur		•								
Age/Blindness	s You	: Were born before January 2, 1	957 [Are blind Spe	ouse	: Was bo	orn be	efore January	2, 1957	☐ Is b	lind	
Dependents	s (see	instructions):		(2) Social security	/	(3) Relations	hip	(4) ✓ if c	qualifies fo	or (see instru	uctions):	
If more	(1) F	First name Last name		number to you			Child tax cred		credit	Credit for ot	ther dependents	
than four												
dependents, see instruction	s ——											
and check												
here ▶ □												
	1	Wages, salaries, tips, etc. Attach F	orm(s)	W-2					. 1		58,682.	
Attach	2a	Tax-exempt interest	2a		b T	axable interes	st		. 2h)		
Sch. B if required.	3a	Qualified dividends	3a		b C	ordinary divide	ends		. 3t)		
	4a	IRA distributions	4a		b T	axable amoui	nt .		. 4t)		
	5a	Pensions and annuities	5a		b T	axable amoui	nt .		. 5k)		
Standard	6a	Social security benefits	6a		b T	axable amoui	nt .		. 6k)		
• Single or	7	Capital gain or (loss). Attach Schee	dule D i	f required. If not req	uired	, check here		🕨	□			
Married filing	8	Other income from Schedule 1, lin	e 10						. 8		-4,990.	
separately, \$12,550	9	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7,	and 8. ⁻	Γhis is your total inc	ome				▶ 9		53,692.	
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	your a	djusted gross inco	me				▶ 11	ı	53,692.	
widow(er), \$25,100	12a	Standard deduction or itemized	deduct	ions (from Schedule	A)	12	2a	12,55	0.			
Head of	b	Charitable contributions if you take	the sta	ndard deduction (see	instr	ructions) 12	2b	28	0.			
household, \$18,800	С	Add lines 12a and 12b							. 12	С	12,830.	
If you checked	13	Qualified business income deduct	ion fron	n Form 8995 or Form	า 899	5-A			. 13	3		
any box under Standard	14	Add lines 12c and 13							. 14	1	12,830.	
Deduction, see instructions.	15	Taxable income. Subtract line 14	from lir	Taxable income. Subtract line 14 from line 11. If zero or less, enter -0								

	16	Tax (see instructions). Check if any from Form(s): 1 🗌 8814 2 🔲 4972 3 🔲		16	4,741.
	17	Amount from Schedule 2, line 3		17	
	18	Add lines 16 and 17		18	4,741.
	19	Nonrefundable child tax credit or credit for other dependents from Schedule 8812		19	
	20	Amount from Schedule 3, line 8		20	
	21	Add lines 19 and 20		21	
	22	Subtract line 21 from line 18. If zero or less, enter -0		22	4,741.
	23	Other taxes, including self-employment tax, from Schedule 2, line 21		23	0.
	24	Add lines 22 and 23. This is your total tax	. ▶	24	4,741.
	25	Federal income tax withheld from:			
	а	Form(s) W-2	,666.		
	b	Form(s) 1099		1	
	С	Other forms (see instructions)		1	
	d	Add lines 25a through 25c		25d	8,666.
	26	2021 estimated tax payments and amount applied from 2020 return		26	· · · · · · · · · · · · · · · · · · ·
If you have a L qualifying child,	27a	Earned income credit (EIC)			
attach Sch. EIC.		Check here if you were born after January 1, 1998, and before		1	
		January 2, 2004, and you satisfy all the other requirements for			
		taxpayers who are at least age 18, to claim the EIC. See instructions ▶ ☐			
	b	Nontaxable combat pay election			
	С	Prior year (2019) earned income			
	28	Refundable child tax credit or additional child tax credit from Schedule 8812 28		-	
	29	American opportunity credit from Form 8863, line 8		-	
	30	Recovery rebate credit. See instructions		-	
	31	Amount from Schedule 3, line 15			
	32	Add lines 27a and 28 through 31. These are your total other payments and refundable cred		32	0.666
	33	Add lines 25d, 26, and 32. These are your total payments	. •	33	8,666.
Refund	34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid	 ▶ □	34	3,925.
D: 1 1 '10	35a	Amount of line 34 you want refunded to you. If Form 8888 is attached, check here	35a	3,925.	
Direct deposit? See instructions.	▶b	Routing number 0 6 2 0 0 0 0 8 0 ► c Type: ★ Checking 5			
	► d	Account number 8 5 4 9 5 5 1 7 8 9			
A	36	Amount of line 34 you want applied to your 2022 estimated tax > 36		07	
Amount You Owe	37	Amount you owe. Subtract line 33 from line 24. For details on how to pay, see instructions	. ▶	37	
	38	Estimated tax penalty (see instructions)			
Third Party Designee		byou want to allow another person to discuss this return with the IRS? See structions	omolete k	nelow	X No
Designee			onal identif		
		9	oer (PIN)		
Sign		der penalties of perjury, I declare that I have examined this return and accompanying schedules and statement			
Here	beli	ief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information			
11010	You	ur signature Date Your occupation	I .		nt you an Identity N, enter it here
Joint return?		IT ENGINEER		inst.) ▶ [N, enter it here
See instructions.	Spo	ouse's signature. If a joint return, both must sign. Date Spouse's occupation	If the	IRS ser	nt vour spouse an
Keep a copy for				, ,	ection PIN, enter it here
your records.			(see i	inst.) 🖊	
		one no. (901)930-9014 Email address NAGINENIMOUNIKA93@GMAIL.CC			
Paid		eparer's name Preparer's signature Date	PTIN		Check if:
Preparer	SYAM	I PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA RAM SAGAR GUPTA TALLAM 03/18/2022	P02082	2703	Self-employed
Use Only		m's name ► GLOBAL TAXES LLC	Phon	e no. (678)965-9522
	Firr	m's address ▶ 2530 Pebble Creek Ln Cumming GA 30041	Firm'	's EIN ▶	30-1017196
Go to www.irs.go	ov/Form	n1040 for instructions and the latest information. BAA REV 03/12/22 PRO			Form 1040 (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 ► Attach to Form 1040, 1040-SR, or 1040-NR.
 Go to www.irs.gov/Form1040 for instructions and the latest information.

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

MOUNIKA NAGINENI

Your social security number
737-79-7374

Par	Additional income			
1	Taxable refunds, credits, or offsets of state and local income taxes	S	1	
2 a	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, tru Schedule E		5	-4,990.
6	Farm income or (loss). Attach Schedule F \ldots		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 10 1040-NR, line 8		10	-4,990.

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		_	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)	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	24j			
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 adjustments here and on Form 1040 or 1040-SR, line 10, or Form 1040-NR, lin			26	

SCHEDULE E (Form 1040)

Department of the Treasury

Internal Revenue Service (99)

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.

Attachment

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

Sequence No. 13

OMB No. 1545-0074

Name(s) shown on return Your social security number 737-79-7374 MOUNIKA NAGINENI Income or Loss From Rental Real Estate and Royalties Note: If you are in the business of renting personal property, use Part I 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? See instructions Physical address of each property (street, city, state, ZIP code) Α TADEPALLI MDL GUNTUR ANDHRA PRADESH IN 522501 В C Personal Use 1b Fair Rental Type of Property For each rental real estate property listed QJV above, report the number of fair rental and (from list below) **Days Days** personal use days. Check the **QJV** box only if you meet the requirements to file as a Α 365 0 Α qualified joint venture. See instructions. В В С С Type of Property: Single Family Residence 3 Vacation/Short-Term Rental 5 Land 7 Self-Rental 2 Multi-Family Residence 4 Commercial 6 Royalties 8 Other (describe) Income: **Properties:** Α 3 Rents received . 3 400. 4 Royalties received 4 Expenses: Advertising 5 5 6 Auto and travel (see instructions) . . . 6 7 Cleaning and maintenance . . . 7 910. 8 8 Commissions. 9 Insurance 9 10 Legal and other professional fees . . . 10 11 11 1,100. 12 Mortgage interest paid to banks, etc. (see instructions) 12 13 13 Other interest. 14 Repairs. 14 1,360. 15 930. 15 Supplies . Taxes 16 16 17 17 1,090. 18 Depreciation expense or depletion . . 18 19 19 Total expenses. Add lines 5 through 19 20 20 5,390. 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 -4,990.22 Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions) 4,990.) 400 23a Total of all amounts reported on line 3 for all rental properties 23a **b** Total of all amounts reported on line 4 for all royalty properties 23b 23c **c** Total of all amounts reported on line 12 for all properties d Total of all amounts reported on line 18 for all properties 23d 23e Total of all amounts reported on line 20 for all properties 5,390. Income. Add positive amounts shown on line 21. Do not include any losses 24 24 25 Losses. Add royalty losses from line 21 and rental real estate losses from line 22. Enter total losses here. 25 4,990. 26 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

-4,990.

2021 VA760CG Page 1



MOUNIKA

NAGINENI

13175 FOX HUNT LANE APT 151

HERNDON VA 20171

SSN-You NAGI		737797374	Vendor ID	1555		xxxxx 7
SSN - Spouse		640851240				
Fed Adj Gross Income (FAGI)	1.	53692.	Withholding (VA) - Yo	ou	19A.	3056.
Additions	2.		Withholding (VA) - Sp	oouse	19B.	
Subtotal	3.	53692.	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 EIC	23.	
State Income Tax Overpayment	6.		Credit - Schedule OS	С	24.	
Subtractions	7.		Credits - Schedule CF	२	25.	
Subtotal Subtractions	8.		Total Payments / Cre	dits	26.	3056.
Total VA Adj Gross Income (VAGI)	9.	53692.	Tax You Owe		27.	
Itemized Deductions - VA Sch A	10.		Tax Overpayment		28.	538.
Standard Deduction	11.	4500.	Overpayment Credited	d to Next Year	29.	
Exemptions	12.	930.	VAC - Virginia 529 / A	ABLE	30.	
Deductions	13.		VAC - Other Contribu	tions	31.	
Subtotal (Deductions & Exemptions)) 14.	5430.	Addition to Tax, Penal	Ity & Interest	32.	
VA Taxable Income	15.	48262.	Sales and Use Tax		33.	
Amount of Tax	16.	2518.	Amount You Owe Will Pay by Credit/Debit	Card N		
Spouse Tax Adjustment (STA)	17.		Your Refund	Calu IV	- 1	538.
VAGI - Spouse	17A.		Bank Routing #		C	062000080
Net Amount of Tax	18.	2518.	Bank Account #			551789
L			Daily Account #			,5 ± 7 0 7

__LAR __DLAR __DTD __LTD \$____

Page 1 of 2





•									
Filing Status, Age &	License Infor	mation				Additional Fil	ing Inforn	nation	
Filing Status			3	3		Locality		059	
Federal Head of Ho	ousehold					Uninsured & Authorize DMAS			
DOB - You		0606	51993	3		Name or Filing Status Change			
VA Driver's License	ID - You	В6082	20228	3		Address Change			
VA Driver's License	- Iss. Date - You	1124	12020)		VA Return Not Filed Last Year			
Spouse Name (Filir)				Dependent on Another's Return			
SETHAN AR	IJΑ					Farmer / Fisherman / Merchant	Seaman		
DOB - Spouse	ID 0					Amended			
VA Driver's License	·					Reason Code			
VA Driver's License					Overseas on Due Date				
You (A)	1 1	cemptions (B) 65 & Over - You				Federal EIC & Amount			
Spouse		65 & Over - Spouse				Deceased Indicator			
Dependents		Blind - You				No Sales & Use Tax Due Indicat	tor	X	
Total (A)	1	Blind - Spouse				Obtain Electronic 1099G			
		Total (B)				ID Theft PIN			
	Co	ntact Information							
	declare under penal	ty of law that I (we) have exa				(our) knowledge, it is a true, correct & vided is for a domestic account within the			
Signature - You			Date		Pho	ne - You		9019309014	
Signature - Spouse			Date		Pho	ne - Spouse			
Signature - Preparer _S	YAM PRIYA RAM	SAGAR GUPTA TALLAM	Date	031822	Pho	ne - Preparer		6789659522	
The Tax Department ma	ay discuss my/ou	ır return with my/our pre	eparer.		Pre	parer Information	7	P02082703	

GLOBAL TAXES LLC

CUMMING

2530 PEBBLE CREEK LN

GA 30041

Page 2 of 2

supporting 760CG documents.
1555 REV 03/10/22 PRO

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

2021 Schedule INC/CG

737797374

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

MOUNIKA

NAGINENI



Your/ Spouse SSN	Withholding Type	VA Employer Withholding FEIN		VA Account Number	VA Wages, tips, other comp.		
Г					コ		
737797374	W	3056.	364844587	30364844587F001	58682.		

 Total VA Withholding
 SSN
 VA Withholding

 You
 737797374
 3056.

 Spouse
 Total # of W-2s,1099s & VK-1s
 01

VA-8879 Virginia Department of Taxation

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!

Virgir	nia Submission Identification Number (SID)							
Your	Name	B Your Social Sec	curity Number					
MOUN	IIKA NAGINENI	737-79-73	74					
	se's Name	A Spouse's Socia						
			-					
Part	I 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)		53692.					
2.	Virginia Adjusted Gross Income (Form 760CG, Line 9; 760PY, Line 10, columns A & B; Form 763, Line 9)		53692.					
3.	Taxable Income (Form 760CG, Line 15; 760PY, Line 16, columns A & B; Form 763, Line 17)		48262.					
4.	Virginia Income Tax (Form 760CG, Line 18; 760PY, Line 17, columns A & B; Form 763 Line 18)		2518.					
5.	Withholding (Form 760CG, Line 19a & 19b; 760PY, Lines 19a & 19b; Form 763, Lines 19a & 19b)		3056.					
6.	Amount you Owe (Form 760CG, Line 35; Form 760PY, Line 35; Form 763, Line 35)							
7.	Refund (Form 760CG, Line 36; 760PY, Line 36; Form 763, Line 36)		538.					
Part	II Declaration of Taxpayer and Signature Authorization							
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 filling 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.								
	ayer's e-File PIN: check one box only							
X	I authorize the ERO named below to enter my e-File PIN 9 7 3 7 4 as my signature on my 2021 e-file	d Virginia individual inc	come 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 and your return is filed using the Practitioner PIN method. The ERO must complete Part III below.	only if you are entering	your own e-File PIN					
Vour	Signature Date							
Spou	se'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-file Do not enter all zeros	d Virginia individual inc	ome tax return.					
	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 Date03-18	3-22						

SCHEDULE E (Form 1040)

Department of the Treasury

Internal Revenue Service (99)

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.

Attachment

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

Sequence No. 13

OMB No. 1545-0074

Name(s) shown on return Your social security number 737-79-7374 MOUNIKA NAGINENI Income or Loss From Rental Real Estate and Royalties Note: If you are in the business of renting personal property, use Part I 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? See instructions Physical address of each property (street, city, state, ZIP code) Α TADEPALLI MDL GUNTUR ANDHRA PRADESH IN 522501 В C Personal Use 1b Fair Rental Type of Property For each rental real estate property listed QJV above, report the number of fair rental and (from list below) **Days Days** personal use days. Check the **QJV** box only if you meet the requirements to file as a Α 365 0 Α qualified joint venture. See instructions. В В С С Type of Property: Single Family Residence 3 Vacation/Short-Term Rental 5 Land 7 Self-Rental 2 Multi-Family Residence 4 Commercial 6 Royalties 8 Other (describe) Income: **Properties:** Α 3 Rents received . 3 400. 4 Royalties received 4 Expenses: Advertising 5 5 6 Auto and travel (see instructions) . . . 6 7 Cleaning and maintenance . . . 7 910. 8 8 Commissions. 9 Insurance 9 10 Legal and other professional fees . . . 10 11 11 1,100. 12 Mortgage interest paid to banks, etc. (see instructions) 12 13 13 Other interest. 14 Repairs. 14 1,360. 15 930. 15 Supplies . Taxes 16 16 17 17 1,090. 18 Depreciation expense or depletion . . 18 19 19 Total expenses. Add lines 5 through 19 20 20 5,390. 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 -4,990.22 Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions) 4,990.) 400 23a Total of all amounts reported on line 3 for all rental properties 23a **b** Total of all amounts reported on line 4 for all royalty properties 23b 23c **c** Total of all amounts reported on line 12 for all properties d Total of all amounts reported on line 18 for all properties 23d 23e Total of all amounts reported on line 20 for all properties 5,390. Income. Add positive amounts shown on line 21. Do not include any losses 24 24 25 Losses. Add royalty losses from line 21 and rental real estate losses from line 22. Enter total losses here. 25 4,990. 26 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

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-4,990.