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.lrs.gov/Form8879 for the latest information.

OMB No. 1545-0074

PRASHANTH BANDLAMUDI Spoure's name CHENNUPATI HINDUJA Tax Return Information — Tax Year Ending December 31, 2022 (Enter year 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. Adjusted gross income Total tax Federal income tax withheld from Form(s) W-2 and Form(s) 1099 Amount you want refunded to you Amount you want refunded to you Amount you owe Part II Taxpayer Declaration and Signature Authorization (Be sure you get and keep Under penalties of perjury, I declare that I have examined a copy of the income tax return (original or amended) I am my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above are return (original or amended) I am now authorizing, I consent to allow my intermediate service provider, transmitter, to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treagent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indicated payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate the apayment. I must contact the U.S. Treasury Financial Agent to terminate the apayment. I must contact the U.S. Treasury Financial Agent to terminate the apayment of the payment is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate the apayment of the payment is payment of the payment is the financial institutions involved in the processor to receive confidential information necessary to answer inquiries and resolve issues related to the payment of the processor of the payment is the processor of the payment of the income tax return (original	ow authorizing, and to the best of the amounts from the income tall electronic return originator (ERC) of the transmission, (b) the reason issury and its designated Financian the tax preparation software for bit the entry to this account. This rithorization. To revoke (cancel) and the received no later than a sing of the electronic payment of the control of the received no later than a sing of the electronic payment of the control of the received no later than a sing of the electronic payment of the control of the control of the payment of the control of the payment of the control of
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ERO Must Retain This Form — See Instructions	n (original or amended) I am nov

Decembered of the Treasury-Internal Revenue Service 2022 U.S. Individual Income Tax Return OMB No. 1545-0074 IPS Use Only-Do not write or staple in this space. Filling Status Single Married filing jointly Married filing separately (MFS) Head of household (HOH) Qualifying surviving spouse (QSS) Check only If you checked the MFS box, enter the name of your spouse. If you checked the HOH or QSS box, enter the child's name if the qualifying one box. person is a child but not your dependent Your first name and middle initial Last name Your social security number BANDLAMUDI 630-79-3359 PRASHANTH Last name Spouse's social security number If joint return, spouse's first name and middle initial 894-70-5719 HINDUJA CHENNUPATI Home address (number and street). If you have a P.O. box, see instructions. Ant no Presidential Election Campaign Check here if you, or your 7810 FITZGERALD CT spouse if filing jointly, want \$3 City, town, or post office. If you have a foreign address, also complete spaces below. State ZIP code to go to this fund. Checking a VA 23228 box below will not change RICHMOND your tax or refund. Foreign province/state/county Foreign postal code Foreign country name You Spouse At any time during 2022, did you: (a) receive (as a reward, award, or payment for property or services); or (b) sell, Digital X No exchange, gift, or otherwise dispose of a digital asset (or a financial interest in a digital asset)? (See instructions.) Yes Assets Someone can claim: You as a dependent Your spouse as a dependent Standard Spouse itemizes on a separate return or you were a dual-status alien Deduction Spouse: Was born before January 2, 1958 Age/Blindness You: Were born before January 2, 1958 Are blind (4) Check the box if qualifies for (see instructions): (3) Relationship (2) Social security Dependents (see instructions) Credit for other dependents Child tax credit number Last name (1) First name H more than four dependents see instructions and check herp 111,86 1a Total amount from Form(s) W-2, box 1 (see instructions) Income 1b Household employee wages not reported on Form(s) W-2 b 10 Attach Formis) Tip income not reported on line 1a (see instructions) . . c 1d W-2 here. Also Medicaid waiver payments not reported on Form(s) W-2 (see instructions) d attach Forms 1e Taxable dependent care benefits from Form 2441, line 26 W-2G and 11 1099-R if tax Employer-provided adoption benefits from Form 8839, line 29 f was withheld. 19 If you did not 0. 1h Other earned income (see instructions) get a Form ħ 11 W-2 see . . Nontaxable combat pay election (see instructions) . 111,867. instructions. 1z Add lines 1a through 1h 7 2b b Taxable interest Tax-exempt interest . . 2a Attach Sch. B 28 3b b Ordinary dividends Qualified dividends . . 3a if required. 3n 4b b Taxable amount. IRA distributions . 48 40 5b b Taxable amount. Pensions and annuities . 5a 50 6b b Taxable amount. Deduction 9 Social security benefits . 6a 6a + Single or If you elect to use the lump-sum election method, check here (see instructions) c

Add lines 12 and 13

Other income from Schedule 1, line 10

Adjustments to income from Schedule 1, line 26

7

8

9

10

11

12

13

545

15

\$12,960

sorthy or

\$25,000

* Heard of

510,400

any box unde

see instructions

+ Married Sinc

Clustitutes

Capital gain or (loss), Attach Schedule D if required. If not required, check here

Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income

Subtract line 10 from line 9. This is your adjusted gross income

Standard deduction or itemized deductions (from Schedule A)

Qualified business income deduction from Form 8995 or Form 8995-A

Subtract line 14 from line 11. If zero or less, enter -0-. This is your taxable income

7

8

9

10

11

12

13

14

15

-13,026.

98,841.

98,841.

25,900.

25,900.

, 941

Form 1040 (2022)

Form 1040 (2022							Page Z
Tax and	16	Tax (see instructions). Check if any from Form	n(s): 1 🔲 8814	2 4972 3		. 16	8,340.
Credits	17	A control of the cont				. 17	
	18					. 18	8,340.
	19	Child tax credit or credit for other depender	its from Schedu	le 8812		. 19	
	20					. 20	
	21	Add lines 19 and 20				. 21	
	22	Subtract line 21 from line 18. If zero or less.	enter -0			. 22	8,340.
	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	8,340.
Payments	25	Federal income tax withheld from:					
		Form(s) W-2			250 16,5	88.	
	b	Form(s) 1099		,	25b		
	c	Other forms (see instructions)			25c		
	d	Add lines 25a through 25c		7.		. 25d	16,588.
	26	2022 estimated tax payments and amount				26	
ff you have a L qualifying child.	27	Earned income credit (EIC)			27		
attach Sch. ElC.	28	Additional child tax credit from Schedule 881			28	900	
	29	American opportunity credit from Form 886			29		
	30				30		
	31	Reserved for future use			31		
	100	Amount from Schedule 3, line 15				. 32	
	32	Add lines 27, 28, 29, and 31. These are you	Control of the Contro				16,588.
	33	Add lines 25d, 26, and 32. These are your					8,248.
Refund	34	If line 33 is more than line 24, subtract line				. 34	8,248.
	35a	Amount of line 34 you want refunded to yo					0,240.
Direct deposit? See Instructions.	ь	Routing number 0 8 1 0 0 0 0			Checking	ings	
	d	Account number 3 5 5 0 0 6 8					
	36	Amount of line 34 you want applied to you	r 2023 estimate	d tax	36		
Amount	37	Subtract line 33 from line 24. This is the an					
You Owe	12.21	For details on how to pay, go to www.irs.go				. 37	
	38	Estimated tax penalty (see instructions) .			38	(100)	
Third Party		you want to allow another person to di				alata balaur	⊠ No
Designee		tructions					⊠ NO
	De na	signee's ne	Phone no.		number	identification (PIN)	
<u></u>		der penalties of perjury, I declare that I have exami	ned this return and	accompanying sche	dules and statements.	and to the bes	st of my knowledge and
Sign	be	ief, they are true, correct, and complete. Declaration	n of preparer (other	than taxpayer) is bas	sed on all information o	f which prepar	er has any knowledge.
Here	Y	ur signature	Date	Your occupation		If the IRS se	nt you an Identity
		D. Doy all the	as lackness			and the second second	N, enter it here
Joint return?		B. Bestaine	02 26 2023			(see inst.)	
See instructions.	Sp	ouse's signature. If a joint return, both must sign.	Date	Spouse's occupation	on		int your spouse an ' lection PIN, enter it here
Keep a copy for your records.		ch. Harlina	02/26/2023	SOFTWARE E	NCINEED	(see inst.)	lection Pilv, enter it gere
,	_		Email address		ANUDI26@GMAIL.COM	1	
		one no. (816) 726-0871 Preparer's name Preparer's sign		PRASHATITI . DANUL		TIN	Check if:
Paid		par		CHDWA WATTAM		02082703	Self-employed
Preparer		PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA	A KAM SAGAK	GUTTA TALLAM	02/13/2023 P	T	
Use Only	Fi	m's name GLOBAL TAXES LLC	Intelligence in	7 00016		Phone no.	(678) 965-9522
_		m's address 245 ROONEY CT E BR	CONSWICK N	e e ger exe	**************************************	Firm's EIN	84-3171965
Go to www.irs.g	ov/For	1040 for instructions and the latest information.		BAA	REV 02/05/23 PRO		Form 1040 (2022

SCHEDULE 1 (Form 1040)

Department of the Treasury

Internal Revenue Service

Additional Income and Adjustments to Income

Attach to Form 1040, 1040-SR, or 1040-NR, Go to www.irs.gov/Form1040 for instructions and the latest information. OMB No. 1545-0074
2022
Attachment Sequence No. 01

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

PRASHANTH BANDLAMUDI & CHENNUPATI HINDUJA

Your social security number 630-79-3359

Par	Additional Income	•		
1	Taxable refunds, credits, or offsets of state and local income taxes		11	
2a	Alimony received		22	
ь	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. Att	ach Schedule E .	5	-13,026.
6	Farm income or (loss). Attach Schedule F		6	
7	Unemployment compensation		7	
8	Other income:		1000	
a	Net operating loss	8a (
b	Gambling	8b	100	
C	Cancellation of debt	8c		
d	Foreign earned income exclusion from Form 2555	8d (4	
е	Income from Form 8853	8e		
f	Income from Form 8889	8f		
9	Alaska Permanent Fund dividends	8g	1000	
h	Jury duty pay	8h		
	Prizes and awards	8i	-	
į	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	THE R. P.	
m	Olympic and Paralympic medals and USOC prize money (see	_		
_	instructions)	8m		
	Section 951(a) inclusion (see instructions)	8n 8o	-	
	Section 951A(a) inclusion (see instructions)	8p	-	
	Taxable distributions from an ABLE account (see instructions)	8g		
,	Scholarship and fellowship grants not reported on Form W-2	8r	ALC: N	
-	Nontaxable amount of Medicaid waiver payments included on Form			
	1040, line 1a or 1d	8s (
t	Pension or annuity from a nonqualifed deferred compensation plan or			
	a nongovernmental section 457 plan	8t		
u	Wages earned while incarcerated	8u	retain)	
Z	Other income. List type and amount:		-	
_		8z		
9	Total other income. Add lines 8a through 8z		9	-13,026.
	I AMBINE UNES I INFOURN / SACIU ENTER NERE SACION PORMI 1040. 1040.555	. UL LUMUTION, IMPRO		-13.070.

Part	Adjustments to Income			
11	Educator expenses		11	
12	Certain business expenses of reservists, performing artists, and fee-basis government			
	officials, Attach Form 2106		12	
13	Health savings account deduction, Attach Form 8889		13	
14	Moving expenses for members of the Armed Forces. Attach Form 3903		14	
15	Deductible part of self-employment tax. Attach Schedule SE		15	
16	Self-employed SEP, SIMPLE, and qualified plans		16	
17	Self-employed health insurance deduction		17	
18	Penalty on early withdrawal of savings		18	
19a	Alimony paid		19a	
b	Recipient's SSN		1000	
c	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:			
2	Jury duty pay (see instructions)			
ь	Deductible expenses related to income reported on line 8I from the		and the second	
	rental of personal property engaged in for profit		100	
C	Nontavable amount of the value of Olympic and Paralympic medals		100	
	and USOC prize money reported on line 8m			
d	Performance amortization and expenses			
e	Recomment of supplemental unemployment benefits under the Trade		100	
_	Act of 1974			
f	Contributions to section 501(c)(18)(D) pension plans	_		
q	Contributions by certain chaplains to section 403(b) plans			
ĥ	Attempty foos and court costs for actions involving certain unlawful		100	
	discrimination claims (see instructions)		100	
i	and court costs you paid in connection with an award		93	
	from the IRS for information you provided that helped the into a second			
	Any low violations		The same of the sa	
i	the reine deduction from Form 2000			
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form 24k			
	1011)	30,0400		
z	Other adjustments. List type and amount:24z			
	04 thurseh 047		25	
25	Total other adjustments. Add lines 24a through 24z	on		
26	Add lines 11 through 23 and 25. These are your adjustments to income. Enter the Form 1040 or 1040-SR, line 10, or Form 1040-NR, line 10a		26	
	Form 1040 or 1040-SR, line 10, or Form 1040-N1, into 102		Schedule 1 (Form 1040)	2022

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.

2022

OMB No. 1545-0074

Internal Revenue Service

Attachment Sequence No. 13 Department of the Treasury Go to www.irs.gov/ScheduleE for instructions and the latest information. Your social security number Namete shown on return 630-79-3359 PRASHANTH BANDLAMUDI & CHENNUPATI HINDUJA

Income or Loss From Rental Real Estate and Note: If you are in the business of renting personal propert rental income or loss from Form 4835 on page 2, line 40.	y, use	Schedule						
any payments in 2022 that would require you t	to file	Form(s) 1	0997 5	iee ins	tructions.		. Ц уе	a MINO
It "Yes," did you or will you file required Form(s) 1099?							Ye	a 🗆 NO
 Physical address of each property (street, city, state, ZIP) 	code)						
A 2-2-182, NAIM NAGAR, HANUMAKONDA, WARAN	GAL	TELANG	ANA	IN 5	06009			
B								
C				-			nal Use	
Turn of Property 2 For each rental real estate proper	ty list	ed		Fa	ir Rental Days		181 USS	OW
(from list below) above, report the number of fair r	ental V bo-	and r		_	365		0	
A 3 personal use days. Check the Cu if you meet the requirements to fi	ile as	a	<u>^</u>	_	363			
B qualified joint venture. See instru	ctions		B C	_		-		
C								
pe of Property: 1 Single Family Residence 3 Vacation/Short-Term Rent	al	5 Land	1 11		Self-Rental Other (desc	ribe)		
2 Multi-Family Residence 4 Commercial		6 Royal	ties	•				
					Propert	ies:		С
			A		8			
come: 3 Rents received .	3		6	74.				
4 Royalties received	4							
penses								
5 Advertising	5							
6 Auto and travel (see instructions)	6			20				
7 Cleaning and maintenance	7		2,8	32.				
8 Commissions	8							
9 Insurance .	9							
10 Legal and other professional fees	10			62				
14 Management lees	11		2,6	62.				
12 Mortgage interest paid to banks, etc. (see instructions)	12			_				
12 Other interest	13		2 7	09.				
14 Repairs	14			94.				
15 Supplies	15		213	,,,,				
16 Taxes	16		2.5	03.				
17 Utilities	17		210					
18 Depreciation expense or depletion	18	-						
19 Other (list)	20		13,7	00.				
20 Total expenses. Add lines 5 through 19	20							
21 Subtract line 20 from line 3 (rents) and/or 4 (royalties). If		1						
result is a floss), see instructions to find out if you must	21	.	-13,0	26.			-	
file Form 6198							J.	
22 Deductible rental real estate loss after limitation, if any,	22	k	13,0	26.)	(67.1		
on Form 8582 (see instructions)				23a		674.	10000	
23a Total of all amounts reported on line 3 for all rental proper b. Total of all amounts reported on line 4 for all royalty prop	erties			23b				
and at all amounts reported on line 12 for all properties				23c				
and the second color to the 18 for all properties				23d		2 700		
and at a second on the 20 for all properties				230	1	3,700.	-	
		ude any lo	5565			-		13,026
				Enter t	otal losses h	20	1	
25 Losses. Add royalty losses from line 21 and rental real estate and royalty income or (loss). 26 Total rental real estate and royalty income or (loss).	Comt	pine lines	24 and	1 25. l	nter the res	on		
26 Total rental real estate and royalty income or (loss). here. If Parts II. III, IV, and line 40 on page 2 do not	apply	to you.	also e	nter t	his amount	on 26		-13,02
tions. If Parts II. III, IV, and line 40 on page 2 on not Schedule 1 (Form 1940), line 5. Otherwise, include this a	moun	t in the to	tal on	line 4	-13,02		chackde E (F	

... 8889

Health Savings Accounts (HSAs)

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

On to wave its port/Formsisse for instructions and the latest information.

OMB No. 1545-0074 2,022 Affactorient Sequence No. 52

durantes whomers on Fourte thich thick fift or thick-M

Social security number of HSA beneficiary if both spouses have HSAs, see instructions 630-79-1359

195A.S	HANTH HAMITIMOTOR		
Befor	e you begin: Complete Form 8853, Archer MSAs and Long-Term Care Insurance Contracts, it	required.	
Part	HSA Contributions and Deduction. See the instructions before completing this part. If and both you and your spouse each have separate HSAs, complete a separate Part I for	you are filing each spous	j jointly e.
•	Check the box to indicate your coverage under a high-deductible health plan (HDHP) during 2022. See instructions	Self-only	☑ Family
2	HSA contributions you made for 2022 (or those made on your behalf), including those made by the unextended due date of your tax return that were for 2022. Do not include employer contributions, contributions through a cafeteria plan, or rollovers. See instructions	2	o.
3	If you were under age 55 at the end of 2022 and, on the first day of every month during 2022, you were, or were considered, an eligible individual with the same coverage, enter \$3,650 (\$7,300 for family coverage). All others, see the instructions for the amount to enter	3	7,300.
4	Enter the amount you and your employer contributed to your Archer MSAs for 2022 from Form 8853, lines 1 and 2. If you or your spouse had family coverage under an HDHP at any time during 2022, also include any amount contributed to your spouse's Archer MSAs.	4	0.
	Subtract line 4 from line 3. If zero or less, enter -0-	5	7,300.
6	Enter the amount from line 5. But if you and your spouse each have separate HSAs and had family coverage under an HDHP at any time during 2022, see the instructions for the amount to enter	6	7,300.
7	If you were age 55 or older at the end of 2022, married, and you or your spouse had family coverage under an HDHP at any time during 2022, enter your additional contribution amount. See instructions.	7	
	Add lines 6 and 7	8	7,300.
	Employer contributions made to your HSAs for 2022	0.00	
	Qualified HSA funding distributions 10		
10		11	300.
11	Add lines 9 and 10	12	7,000.
12	HSA deduction. Enter the smaller of line 2 or line 12 here and on Schedule 1 (Form 1040), Part II, line 13	13	0.
13	Caution: If line 2 is more than line 13, you may have to pay an additional tax. See instructions.	The same	
Part		rate HSAs.	complete
	a separate Part II for each spouse.		
14a	Total distributions you received in 2022 from all HSAs (see instructions)	14a	
b	Distributions included on line 14a that you rolled over to another HSA. Also include any excess contributions (and the earnings on those excess contributions) included on line 14a that were		
	withdrawn by the due date of your return. See instructions	14b	
	Subtract line 14b from line 14a	14c	
٠,٠	Qualified medical expenses paid using HSA distributions (see instructions)	15	
16	Texable HSA distributions. Subtract line 15 from line 14c. If zero or less, enter -0 Also, include this	16	
	amount in the total on scriedule i (roini 1040), raint, inte or		
17 a	If any of the distributions included on line 16 meet any of the Exceptions to the Additional 20% Tax (see instructions), check here		
b	Additional 20% tax (see instructions). Enter 20% (0.20) of the distributions included on line 16 that are subject to the additional 20% tax. Also, include this amount in the total on Schedule 2 (Form		
	1040), Part II, line 17c	17b	
Part		ons before arate HSAs	
18	Last-month rule	18	
19	Qualified HSA funding distribution	19	
20	Total income. Add lines 18 and 19. Include this amount on Schedule 1 (Form 1040), Part I, line 8f	20	
21	Additional tax. Multiply line 20 by 10% (0.10). Include this amount in the total on Schedule 2 (Form	24	

2022 VA760CG Page 1



PRASHANTH CHENNUPATI 7810 FITZGERALD CT

BANDLAMUDI HINDUJA

RICHMOND

HE VIGENOS PRO

VA 23228

SSN - You	BAND	630793359	Vendor ID 1555		хххххх ¬
		894705719			
SSN - Spouse	HIND			104	5756.
Fed Adj Gross Income (FAGI) 1.	98841.	Withholding (VA) - You	19A.	3730.
Additions	2.		Withholding (VA) - Spouse	19B.	
Subtotal	3.	98841.	Estimated Payments	20.	
Age Deduction - You	4A .		2021 Overpayment	21.	
Age Deduction - Spouse	4B.		Extension Payments	22.	
Soc Sec & Tier 1 Railro	ad 5.		Credit - Low-Income or EIC	23.	
State Income Tax Overp	ayment 6.		Credit - Schedule OSC	24.	
Subtractions	7.		Credits - Schedule CR	25 .	
Subtotal Subtractions	8.		Total Payments / Credits	26.	5756.
Total VA Adj Gross Incor	me (VAGI) 9.	98841.	Tax You Owe	27.	
Itemized Deductions - V	A Sch A 10.		Tax Overpayment	28.	1357.
Standard Deduction	11.	16000.	Overpayment Credited to Next Yea	ar 29.	
Exemptions	12.	1860.	VAC - Virginia 529 / ABLE	30.	
Deductions	13.		VAC - Other Contributions	31.	
Subtotal (Deductions & I	Exemptions) 14.	17860.	Addition to Tax, Penalty & Interest	32.	
VA Taxable Income	15.	80981.	Sales and Use Tax	33.	
Amount of Tax	16.	4399.	Amount You Owe Will Pay by Credit/Debit Card N		
Spouse Tax Adjustment	(STA) 17.		W≣ Pay by Credit/Debit Card N Your Refund	١	1357.
VACI - Spouse	17A.		Bank Routing #	С	081000032
her Amount of Tax	18.	4399.			
	L		Bank Account #	3550	006869699

__LAR __DLAR __DTD __LTD \$____

Page 1 of 2

630793359





Fil	ing Status, Age & L	License Infor	mation		Additional Filing Information	_
	Filing Status		2	2	Locality	159
	Federal Head of Hou	blodes			Uninsured & Authorize DMAS	
	DOB - You		09261992	2	Name or Filing Status Change	
	VA Driver's License I	ID - You	B67254108	3	Address Change	
	VA Driver's License	Iss. Date - Yo	06222021	1	VA Return Not Filed Last Year	
	Spouse Name (Filing	g Status 3 Only)		Dependent on Another's Return	
			1112100	_	Farmer / Fisherman / Merchant Seaman	
	DOB - Spouse	ID 6	11131995	0	Amended	
	VA Driver's License				Reason Code	
_	VA Driver's License				Overseas on Due Date	
E	You	1	kemptions (B) 65 & Over - You		Federal EIC & Amount	
	Spouse	1	65 & Over - Spouse		Deceased Indicator	
	Dependents		Blind - You		Form 760C or 760F	
	Total (A)	2	Blind - Spouse		No Sales & Use Tax Due Indicator	х

Contact Information

Total (B)

I (We), the undersigned, disclare 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.

Obtain Electronic 1099G

ID Theft PIN

Preparer Information

8167260871

Signature - You	Date		Phone - You		010/2000/1
Signature - Spouse	Date		Phone - Spouse		
Signature - Preparer SYNI PRIYA RAM SAGAR GIPTA TALLAM	Date	021323	Phone - Preparer		6789659522
The Tax Department may discuss my/our return with my/our pri	eparer.		December 1	7	P02082703

File by May 1, 2023

include Page 1, Page 2 and all supporting 760CG documents.

245 ROONEY CT E BRUNSWICK

GLOBAL TAXES LLC

NJ 08816

Page 2 of 2

1555 REV (0/09/29 PRO

2022 Schedule INC/CG

630793359

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



BANDLAMUDI

CHENNUPATI

HINDUJA



Your/ Spouse SSN	Withholding Type	VA Withholding	Employer FEIN	VA Account Number	VA Wages, tips, other comp.
630793359	W	4139.	134309337	30134309337F001	80520.
630793359	W	1617.	351835818	30351835818F001	31347.

T. 4-13/4 1854b olding	SSN	VA Withholding
Total VA Withholding		5756.
You	630793359	
Spouse		
Total # of W-2s,1099s & VK-1s	02	

VA-8879 Virginia Department of Taxation

Virginia Individual Income Tax e-File Signature Authorization

Tax Year 2022

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

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