Department of the Treasury Internal Revenue Service

Calendar Year — Due **04/18/2023**

2023 Form 1040-ES Payment Voucher 1

File only if you are making a payment of estimated tax by check or money order. Mail this voucher with your check or money order payable to the **'United States Treasury.'** Write your social security number and '2023 Form 1040-ES' on your check or money order. Do not send cash. Enclose, but do not staple or attach, your payment with this voucher.

Amount of estimated tax you are paying by check or money order.....

562.

REV 02/05/23 PRO

1555

ALO-AL-5162 DINESH KOMMURI

A720 ALDEBURGH DR HENRICO VA 23294

Department of the Treasury Internal Revenue Service

Calendar Year — Due **06/15/2023**

2023 Form 1040-ES Payment Voucher 2

File only if you are making a payment of estimated tax by check or money order. Mail this voucher with your check or money order payable to the **'United States Treasury.'** Write your social security number and '2023 Form 1040-ES' on your check or money order. Do not send cash. Enclose, but do not staple or attach, your payment with this voucher.

Amount of estimated tax you are paying by check or money order.....

562.

REV 02/05/23 PRO

1555

ALO-AL-5162 DINESH KOMMURI

A720 ALDEBURGH DR HENRICO VA 23294

Department of the Treasury Internal Revenue Service

Calendar Year — Due **09/15/2023**

2023 Form 1040-ES Payment Voucher 3

File only if you are making a payment of estimated tax by check or money order. Mail this voucher with your check or money order payable to the **'United States Treasury.'** Write your social security number and '2023 Form 1040-ES' on your check or money order. Do not send cash. Enclose, but do not staple or attach, your payment with this voucher.

Amount of estimated tax you are paying by check or money order.....

562.

REV 02/05/23 PRO

1555

ALO-AL-5162 DINESH KOMMURI

A720 ALDEBURGH DR HENRICO VA 23294

Department of the Treasury Internal Revenue Service

Calendar Year — Due **01/16/2024**

2023 Form 1040-ES Payment Voucher 4

File only if you are making a payment of estimated tax by check or money order. Mail this voucher with your check or money order payable to the **'United States Treasury.'** Write your social security number and '2023 Form 1040-ES' on your check or money order. Do not send cash. Enclose, but do not staple or attach, your payment with this voucher.

Amount of estimated tax you are paying by check or money order. ▶

562.

REV 02/05/23 PRO

1555

ALO-AL-5162 DINESH KOMMURI

A720 ALDEBURGH DR HENRICO VA 23294

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

Subm	ission Identification Number (SID)		•		
Taxpaye	er's name	Social securit	y number		
DIN	ESH KOMMURI	860-86-	-5162		
Spouse	's name	Spouse's soc	ial security	number	
Part	Tax Return Information — Tax Year Ending December 31, 2022 (Enter	year you a	re authoi	rizing.)	
Enter	whole dollars only on lines 1 through 5.				
Note:	Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.				
1	Adjusted gross income		1	74,15	
2	Total tax		2	9,08	87.
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3	6,84	<u>40.</u>
4	Amount you want refunded to you		4		
5	Amount you owe		5	2,30	00.
Part	Taxpayer Declaration and Signature Authorization (Be sure you get and keepenalties of perjury, I declare that I have examined a copy of the income tax return (original or amended)				
return to send for any Agent is payme authori payme busines taxes to person	oviledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above (original or amended) I am now authorizing. I consent to allow my intermediate service provider, transmit my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for reject delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U. to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indient of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution zation is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate ant, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation request days prior to the payment (settlement) date. I also authorize the financial institutions involved in the to receive confidential information necessary to answer inquiries and resolve issues related to the particle and identification number (PIN) below is my signature for the income tax return (original or amended) I arnic Funds Withdrawal Consent.	tter, or electroction of the tr S. Treasury are cated in the tan to debit the the authorizatests must be processing of ayment. I furt	onic return ansmission and its design and preparate entry to the ation. To re- received the electro her ackno-	originator (in, (b) the regnated Fination softwaris account.evoke (canono later thonic payme wledge tha	ERO) eason ancial re for . This cel) a nan 2 ent of at the
	yer's PIN: check one box only				
X		my DINI 6	5 1 6	5 2	my
	ERO firm name signature on the income tax return (original or amended) I am now authorizing.	ř Ent	er five digit n't enter all	s, but	s my
	I will enter my PIN as my signature on the income tax return (original or amended) I am no if you are entering your own PIN and your return is filed using the Practitioner PIN metholelow.				
Yours	signature ► <u>K. Dinesh Reddy</u> Date ► 2	/13/2023			
Spous	se's PIN: check one box only				
	I authorize to enter or generate	mv PIN		as	s my
	ERO firm name		er five digit		,y
	signature on the income tax return (original or amended) I am now authorizing.	dor	n't enter all	zeros	
	I will enter my PIN as my signature on the income tax return (original or amended) I am no if you are entering your own PIN and your return is filed using the Practitioner PIN method below.				
Spous	se's signature ▶ Date ▶				
	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. 2 2		6 6 1 er all zeros	9 8 9	
authori	that the above numeric entry is my PIN, which is my signature for the electronic individual income ta zed to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am submiments of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS e-file Providers of In	itting this retu	rn in acco	rdance with	
EDO:	a dignatura N				
EKU'S	ERO Must Retain This Form — See Instructions				

Don't Submit This Form to the IRS Unless Requested To Do So

Form 1040-V (2022) 2022 Page **2**

IF you live in	THEN use this address to send in your payment
Alabama, Florida, Georgia, Louisiana, Mississippi, North Carolina, South Carolina, Tennessee, Texas	Internal Revenue Service P.O. Box 1214 Charlotte, NC 28201-1214
Arkansas, Connecticut, Delaware, District of Columbia, Illinois, Indiana, Iowa, Kentucky, Maine, Maryland, Massachusetts, Minnesota, Missouri, New Hampshire, New Jersey, New York, Oklahoma, Rhode Island, Vermont, Virginia, West Virginia, Wisconsin	Internal Revenue Service P.O. Box 931000 Louisville, KY 40293-1000
Alaska, Arizona, California, Colorado, Hawaii, Idaho, Kansas, Michigan, Montana, Nebraska, Nevada, New Mexico, North Dakota, Ohio, Oregon, Pennsylvania, South Dakota, Utah, Washington, Wyoming	Internal Revenue Service P.O. Box 802501 Cincinnati, OH 45280-2501
A foreign country, American Samoa, or Puerto Rico (or are excluding income under Internal Revenue Code section 933), or use an APO or FPO address, or file Form 2555 or 4563, or are a dual-status alien or nonpermanent resident of Guam or the U.S. Virgin Islands	Internal Revenue Service P.O. Box 1303 Charlotte, NC 28201-1303

MAIL FORM 1040-V TO THE INTERNAL REVENUE SERVICE CENTER AT THE ADDRESS LISTED BELOW.

Form **1040-V 2022**

▼ Detach Here and Mail With Your Payment and Return ▼

Department of the Treasury Internal Revenue Service 2022

Form 1040-V Payment Voucher

▶ Use this voucher when making a payment with Form 1040.

► Do not staple this voucher or your payment to Form 1040.

► Make your check or money order payable to the 'United States Treasury.'

► Write your social security number (SSN) on your check or money order.

REV 02/05/23 PRO 1555

DINESH KOMMURI

8720 ALDEBURGH DR HENRICO VA 23294

E 1040 Department of the Treasury—Internal Revenue Service U.S. Individual Income Tax Return

2022

OMB No. 1545-007

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

Filing Status	s 🔀 S	Single Married filing jointly	Marrie	ed filing separately	(MFS)	☐ Head of	household (HOH)		lifying s		ng
Check only one box.	-	u checked the MFS box, enter the nonis a child but not your dependen		our spouse. If you	u check	ed the HOH or	QSS box, enter t		use (QS name i	,	_l ualifying
Your first name			Last na	me				Your so	cial sec	urity n	umber
DINESH			KOMM	URI				860-	36-51	62	
	pouse's	first name and middle initial	Last nai								ty number
Home address	(numbe	er and street). If you have a P.O. box, see	 e instruction	ons.			Apt. no.	Preside	ntial Ele	ction (Campaign
8720 ALI	DEBUI	RGH DR							nere if yo		•
City, town, or p	ost offic	ce. If you have a foreign address, also co	omplete s	paces below.	Sta	te	ZIP code				want \$3 ecking a
HENRICO					V	A	23294		ow will r		0
Foreign country	y name		F	oreign province/sta	te/coun	ty	Foreign postal code	T .			9-
									Yo	u [Spouse
Digital Assets		ny time during 2022, did you: (a) rec ange, gift, or otherwise dispose of a	,				, ,	. ,	□Ye	s D	☑ No
Standard		eone can claim: You as a de		<u>_</u>		a dependent	40001). (000 111011	401101101			
Deduction Deduction		Spouse itemizes on a separate return	•	•		•					
Age/Blindness	you:	☐ Were born before January 2, 1	958	Are blind	Spouse	: Was bor	n before January			blind	
Dependent	s (see	instructions):		(2) Social secu	ırity	(3) Relationsh			fies for (s	ee inst	ructions):
If more	(1) Fi	rst name Last name		number		to you	Child tax	credit	Credit for	other o	dependents
than four											
dependents, see instruction	s ——										
and check	, —										
here											
Income	1a	Total amount from Form(s) W-2, b	ox 1 (see	e instructions) .				. 1a		85,	,100.
A44(-)	b	Household employee wages not r		, ,				. 1b	_		
Attach Form(s) W-2 here. Also	С	Tip income not reported on line 1a (see instructions)									
attach Forms	d	Medicaid waiver payments not reported on Form(s) W-2 (see instructions)									
W-2G and 1099-R if tax	е	Taxable dependent care benefits		•				. 1e	_		
was withheld.	f	Employer-provided adoption benefits from Form 8839, line 29									
If you did not	g	Wages from Form 8919, line 6.						. 1g			
get a Form W-2, see	h	Other earned income (see instruct	,					. 1h			0.
instructions.	i	Nontaxable combat pay election (see instr	ructions)		<u>1</u> i				0.5	1.00
	<u>z</u>	Add lines 1a through 1h	. i .					. 1z	_	85,	<u>,100.</u>
Attach Sch. B if required.	2a	· -	2a			axable interes		. 2b			
ii required.	3a		3a			ordinary divide		. 3b	_		
	4a	_	4a			axable amoun		. 4b	_		
Standard Deduction for—	5a	_	5a			axable amoun		. 5b	_		
Single or	6a	, _	6a			axable amoun	t	. 6b			
Married filing separately,	c	If you elect to use the lump-sum e		•	`	,					
\$12,950	7	Capital gain or (loss). Attach Sche								1.0	050
 Married filing jointly or 	8	Other income from Schedule 1, lin						. 8			<u>,950.</u>
Qualifying surviving spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7						. 9			<u>,150.</u>
\$25,900	10	Adjustments to income from Sche	-					. 10		7.4	1 5 0
 Head of household, 	11	Subtract line 10 from line 9. This is	-					. 11			,150.
\$19,400	12	Standard deduction or itemized Qualified business income deduct		•	,			. 12			<u>,950.</u>
If you checked any box under	13							. 13		1.0	050
Standard Deduction,	14 15	Add lines 12 and 13 Subtract line 14 from line 11. If ze									<u>,950.</u>
see instructions.	15	Subtract line 14 from line 11. If Ze	io or lest	o, enter -U IIIIS I	s your	axable IIICOII		. 15		- σΙ,	,200.

Form 1040 (2022	2)										Page 2
Tax and	16	Tax (see instructions). Check	if any from Form	(s): 1 881	4 2 🗌 4972	3 🗌		16)87.
Credits	17	Amount from Schedule 2, lin	ne 3					17			
	18	Add lines 16 and 17						18		9,0)87.
	19	Child tax credit or credit for	other dependent	ts from Sched	ule 8812			19			
	20	Amount from Schedule 3, lin	ne 8					20			
	21	Add lines 19 and 20						21			
	22	Subtract line 21 from line 18	. If zero or less,	enter -0				22		9,0)87.
	23	Other taxes, including self-e	mployment tax,	from Schedule	e 2, line 21			23			0.
	24	Add lines 22 and 23. This is	your total tax					24		9,0)87.
Payments	25	Federal income tax withheld									
•	а	Form(s) W-2				25a	5,840.				
	b	Form(s) 1099				25b					
	С	Other forms (see instructions	s)			25c					
	d	Add lines 25a through 25c						25d		6,8	340.
If you have a	26	2022 estimated tax paymen	ts and amount a	pplied from 20	21 return			26			
qualifying child,	27	Earned income credit (EIC)				27					
attach Sch. EIC.	28	Additional child tax credit from				28					
	29	American opportunity credit	from Form 8863	3, line 8		29					
	30	Reserved for future use .				30					
	31	Amount from Schedule 3, lin				31					
	32	Add lines 27, 28, 29, and 31	. These are your	total other pa	ayments and refu	ındable credits		32			
	33	Add lines 25d, 26, and 32. T	hese are your to	tal payments				33		6,8	340.
Refund	34	If line 33 is more than line 24	-					34			
neiulia	35a	Amount of line 34 you want	refunded to you	ı. If Form 8888	is attached, ched	ck here	🗆	35a			
Direct deposit?	b	Routing number X X X				_	Savings				
See instructions.	d	Account number X X X					J				
	36	Amount of line 34 you want	applied to your	2023 estimate	ed tax	36					
Amount You Owe	37	Subtract line 33 from line 24 For details on how to pay, g		•				37		2,3	300.
	38	Estimated tax penalty (see in	_	-		38	53.				
Third Party	Do	you want to allow another	,			See					
Designee		,	•				omplete	below.	× No)	
Ū		signee's		Phone no.				fication			
Cian		me der penalties of perjury, I declare t	hat I have examine		d accompanying sch		, ,	the hes	t of my k	nowle	dge and
Sign		lief, they are true, correct, and com			, , ,		,		,		0
Here	Yo	ur signature		Date	Your occupation				nt you an		
									N, enter	it here	;
Joint return?					SOFTWARE E			inst.)	oxdot		Ш
See instructions. Keep a copy for	Sp	ouse's signature. If a joint return, I	both must sign.	Date	Spouse's occupati	on			nt your spection PII		
your records.								inst.)		1, 61110	T II HOTO
	——Ph	one no. (510) 598-997	8	Email address	DINESH BDV		M				
		eparer's name	Preparer's signat	l	DIMEDII. NDI	Date	PTIN		Check i	if:	
Paid		I PRIYA RAM SAGAR GUPTA TALLAM			GUPTA TALLAM	02/10/2023	P0208	2703	_	lf-empl	loyed
Preparer		m's name GLOBAL TA				1 22/ 13/ 2023			678)9		
Use Only			A CM E DDII	NOWITOW N	T 00016		F:			2171	

245 ROONEY CT E BRUNSWICK NJ 08816

Firm's address

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

REV 02/05/23 PRO

BAA

Firm's EIN

84-3171965

Form **1040** (2022)

SCHEDULE 1 (Form 1040)

Additional Income and Adjustments to Income

OMB No. 1545-0074

2022

Attachment
Seguence No. 01

Department of the Treasury Internal Revenue Service

DINESH KOMMURI

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.

	Sequence No. 01
Your soc	ial security number
860-86	-5162

Par	t I Additional Income			
1	Taxable refunds, credits, or offsets of state and local income taxes		1	
2a	Alimony received		2a	
b	Date of original divorce or separation agreement (see instructions):			
3	Business income or (loss). Attach Schedule C		3	
4	Other gains or (losses). Attach Form 4797		4	
5	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Atta		5	-10,950.
6	Farm income or (loss). Attach Schedule F		6	
7	Unemployment compensation		7	
8	Other income:			
а	Net operating loss	8a ()		
b	Gambling	8b		
С	Cancellation of debt	8c	-	
d	Foreign earned income exclusion from Form 2555	8d ()		
е	Income from Form 8853	8e		
f	Income from Form 8889	8f	.	
g	Alaska Permanent Fund dividends	8g	-	
h	Jury duty pay	8h		
!	Prizes and awards	8i		
j	Activity not engaged in for profit income	8j	-	
k	Stock options	8k	-	
ı	Income from the rental of personal property if you engaged in the rental	01		
	for profit but were not in the business of renting such property	81		
m	Olympic and Paralympic medals and USOC prize money (see	0		
-	instructions)	8m 8n	-	
n o	Section 951A(a) inclusion (see instructions)	80	-	
g	Section 461(I) excess business loss adjustment	8p	-	
q	Taxable distributions from an ABLE account (see instructions)	8g	-	
r	Scholarship and fellowship grants not reported on Form W-2	8r	-	
s	Nontaxable amount of Medicaid waiver payments included on Form	OI .	-	
3	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		
z				
_	7, 7, 7, 7, 7, 7, 7, 7, 7, 7, 7, 7, 7, 7	8z		
9	Total other income. Add lines 8a through 8z		9	
10	Combine lines 1 through 7 and 9. Enter here and on Form 1040, 1040-SR.		10	-10,950.

Schedule 1 (Form 1040) 2022 Page **2**

Par	t II Adjustments to Income			
11	Educator expenses		11	
12	Certain business expenses of reservists, performing artists, and fee-basis	government		
	officials. Attach Form 2106		12	
13	Health savings account deduction. Attach Form 8889		13	
14	Moving expenses for members of the Armed Forces. Attach Form 3903		14	
15	Deductible part of self-employment tax. Attach Schedule SE		15	
16	Self-employed SEP, SIMPLE, and qualified plans		16	
17	Self-employed health insurance deduction		17	
18	Penalty on early withdrawal of savings		18	
19a	Alimony paid		19a	
b	Recipient's SSN			
С	Date of original divorce or separation agreement (see instructions):			
20	IRA deduction		20	
21	Student loan interest deduction		21	
22	Reserved for future use		22	
23	Archer MSA deduction		23	
24	Other adjustments:			
а	Jury duty pay (see instructions)		-	
b	Deductible expenses related to income reported on line 8l from the			
	rental of personal property engaged in for profit			
С	Nontaxable amount of the value of Olympic and Paralympic medals			
	and USOC prize money reported on line 8m		-	
d	Reforestation amortization and expenses		-	
е	Repayment of supplemental unemployment benefits under the Trade Act of 1974			
f	Contributions to section 501(c)(18)(D) pension plans			
g	Contributions by certain chaplains to section 403(b) plans 24g			
_	Attorney fees and court costs for actions involving certain unlawful			
	discrimination claims (see instructions)			
i	Attorney fees and court costs you paid in connection with an award			
	from the IRS for information you provided that helped the IRS detect			
	tax law violations			
j	Housing deduction from Form 2555			
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form			
	1041)			
Z	Other adjustments. List type and amount:			
	0.4_			
25	Total other adjustments. Add lines 24a through 24z		25	
26	Add lines 11 through 23 and 25. These are your adjustments to income . Enter			
	Form 1040 or 1040-SR, line 10, or Form 1040-NR, line 10a		26	

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, Attachment

Department of the Treasury Internal Revenue Service

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 860-86-5162 DINESH KOMMURI Part I Income or Loss From Rental Real Estate and Royalties Note: If you are in the business of renting personal property, use Schedule C. See instructions. If you are an individual, report farm rental income or loss from Form 4835 on page 2, line 40. Did you make any payments in 2022 that would require you to file Form(s) 1099? See instructions . Physical address of each property (street, city, state, ZIP code) 1a VANASTHALIPURAM HYDERABAD TELANGANA IN 500070 Α В C 1b Type of Property For each rental real estate property listed **Fair Rental Personal Use** QJV (from list below) above, report the number of fair rental and **Davs Davs** personal use days. Check the QJV box only Α Α 365 0 if you meet the requirements to file as a В В qualified joint venture. See instructions. С C Type of Property: 3 Vacation/Short-Term Rental 1 Single Family Residence 5 Land 7 Self-Rental 8 Other (describe) 2 Multi-Family Residence 4 Commercial 6 Royalties **Properties:** Α В C Income: 3 450. 4 Royalties received 4 **Expenses:** 5 5 Advertising 6 Auto and travel (see instructions) 6 1,200. 7 Cleaning and maintenance. 7 8 Commissions 8 9 9 Insurance . . 10 10 Legal and other professional fees 11 Management fees 11 1,800. 12 Mortgage interest paid to banks, etc. (see instructions) 12 13 13 3,700. 14 14 Repairs 2,500. 15 Supplies 15 16 16 Taxes 17 17 2,200. 18 18 Depreciation expense or depletion 19 19 20 20 Total expenses. Add lines 5 through 19 11,400. 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 -10,950.22 Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions) 10,950.) 450. Total of all amounts reported on line 3 for all rental properties Total of all amounts reported on line 4 for all royalty properties 23b Total of all amounts reported on line 12 for all properties 23c 23d Total of all amounts reported on line 18 for all properties 11,400. Total of all amounts reported on line 20 for all properties 23e 24 **Income.** Add positive amounts shown on line 21. **Do not** include any losses 24 25 Losses. Add royalty losses from line 21 and rental real estate losses from line 22. Enter total losses here 25 10,950. Total rental real estate and royalty income or (loss). Combine lines 24 and 25. Enter the result 26 here. If Parts II, III, IV, and line 40 on page 2 do not apply to you, also enter this amount on

26

-10,950.

Schedule 1 (Form 1040), line 5. Otherwise, include this amount in the total on line 41 on page 2





Page 1 of 2

DINESH

KOMMURI

8720 ALDEBURGH DR

HENRICO	VA	23294

HENRICO	· ·	VA 23294			
SSN - You KOMM		860865162	Vendor ID 1555		XXXXXX
SSN - Spouse					
Fed Adj Gross Income (FAGI)	1.	74150.	Withholding (VA) - You	19A.	4357.
Additions	2.		Withholding (VA) - Spouse	19B.	
Subtotal	3.	74150.	Estimated Payments	20.	
Age Deduction - You	4A.		2021 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 OSC	24.	
Subtractions	7.		Credits - Schedule CR	25.	
Subtotal Subtractions	8.		Total Payments / Credits	26.	4357.
Total VA Adj Gross Income (VAGI)	9.	74150.	Tax You Owe	27.	
Itemized Deductions - VA Sch A	10.		Tax Overpayment	28.	864.
Standard Deduction	11.	8000.	Overpayment Credited to Next Ye	ar 29.	
Exemptions	12.	930.	VAC - Virginia 529 / ABLE	30.	
Deductions	13.		VAC - Other Contributions	31.	
Subtotal (Deductions & Exemptions) 14.	8930.	Addition to Tax, Penalty & Interest	t 32.	
VA Taxable Income	15.	65220.	Sales and Use Tax	33.	
Amount of Tax	16.	3493.	Amount You Owe Will Pay by Credit/Debit Card N		
Spouse Tax Adjustment (STA)	17.		Your Refund	1	864.
VAGI - Spouse	17A.		Bank Routing #	C	121000358
Net Amount of Tax	18.	3493.	Bank Account #		36512967
L			Bank Account #	52500	50512501

__LAR __DLAR __DTD __LTD \$____



7

NJ 08816

Preparer Information

GLOBAL TAXES LLC

245 ROONEY CT

E BRUNSWICK

P02082703

Page 2 of 2



1					
Filing Status, Age & Lie	cense Infor	mation		Additional Filing Information	
Filing Status			1	Locality	87
Federal Head of House	ehold			Uninsured & Authorize DMAS	
DOB - You		0127198	8	Name or Filing Status Change	
VA Driver's License ID	- You	В6363588	8	Address Change	
VA Driver's License - Is	ss. Date - You	0110202	3	VA Return Not Filed Last Year	
Spouse Name (Filing S	Status 3 Only)			Dependent on Another's Return	
DOD Chausa				Farmer / Fisherman / Merchant Seaman	
DOB - Spouse VA Driver's License ID	Spouse			Amended	
VA Driver's License - Is	·	2000		Reason Code	
	·			Overseas on Due Date	
You You	1	cemptions (B) 65 & Over - You		Federal EIC & Amount	
Spouse		65 & Over - Spouse		Deceased Indicator	
Dependents		Blind - You		Form 760C or 760F	
Total (A)	1	Blind - Spouse		No Sales & Use Tax Due Indicator	Х
		Total (B)		Obtain Electronic 1099G	
	are under penalt			ID Theft PIN st of my (our) knowledge, it is a true, correct & complete return. If you are requestir ion provided is for a domestic account within the territorial jurisdiction of the United	
Signature - You			iying that the informati	51059899 Phone - You	
Signature - Spouse				Phone - Spouse	
Signature - Preparer <u>SYAM</u>			021023	67896595 Phone - Preparer	22
. —				Thomas Toparol	0.0

1555 REV 02/01/23 PRO

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

File by May 1, 2023 Include Page 1, Page 2 and all

supporting 760CG documents.

2022 Schedule INC/CG

860865162

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

DINESH

KOMMURI



Your/ Spouse SSN	Withholding Type	VA Withholding	Employer FEIN	VA Account Number	VA Wages, tips, other comp.
Г					٦
860865162	M	4357.	202293651	30202293651F001	85100.

Total VA Withholding
You 860865162 4357.
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 2022

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					
DINE	SH KOMMURI	860-86-51	62					
Spou	se's Name	A Spouse's Socia	I Security Number					
D	L. Tare Determinations of the	A C::	D.Varmask					
Part		A Spouse	B Yourself					
1.	Federal Adjusted Gross Income (Form 760CG, Line 1; 760PY, Line 1, columns A & B; Form 763, Line 1)		74150.					
2.	Virginia Adjusted Gross Income (Form 760CG, Line 9; 760PY, Line 10, columns A & B; Form 763, Line 9)		74150.					
3.	Taxable Income (Form 760CG, Line 15; 760PY, Line 16, columns A & B; Form 763, Line 17)		65220.					
4.	Virginia Income Tax (Form 760CG, Line 18; 760PY, Line 17, columns A & B; Form 763 Line 18)		3493.					
5.	Withholding (Form 760CG, Line 19a & 19b; 760PY, Lines 19a & 19b; Form 763, Lines 19a & 19b)		4357.					
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)		864.					
Part	Il Declaration of Taxpayer and Signature Authorization penalties of perjury, I declare that I have examined a copy of my individual income tax return and accompanying so	shedules and statemen	ts for the year ending					
Retur numb filing liable Virgir refund of the	December 31, 2022, 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							
	ture 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 6 5 1 6 2 as my signature on my 2022 e-file	ed 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 2022 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					
Your	Signature Date							
1	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 2022 e-file Do not enter all zeros	ed Virginia individual inc	come tax return.					
	ERO Firm Name							
	I will enter my e-File PIN as my signature on my 2022 e-filed Virginia individual income tax return. Check this box PIN 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					
	se's Signature Date							
Part	III Certification and Authentication – Practitioner PIN Method Only							
ERO'		1 9 8 9						
indica Hand	Do not enter all zeros I certify that the above numeric entry is my ERO EFIN/PIN, which is my signature for the 2022 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 2022). EROs may sign the form using a rubber stamp, mechanical device, such as a signature pen, or computer software program.							
ERO'	Signature Date02-1	0-23						

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

Attachment Sequence No. 13

OMB No. 1545-0074

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

Your social security number

	ESH KOMMURI							860-86-5162		
Par										
	Note: If you are in the business of renting personal proper	ty, use	Schedule	C . See	instru	ctions. If you a	re an indi	vidual, rep	ort farm	
_	rental income or loss from Form 4835 on page 2, line 40. Did you make any payments in 2022 that would require you to file Form(s) 1099? See instructions								- V N-	
<u>B</u>	If "Yes," did you or will you file required Form(s) 1099?									
1a	Physical address of each property (street, city, state, ZIP code)									
Α	VANASTHALIPURAM HYDERABAD TELANGANA IN 500070									
В										
С										
1b		2 For each rental real estate property listed above, report the number of fair rental and personal use days. Check the QJV box or if you meet the requirements to file as a qualified joint venture. See instructions.			nd Days			Personal Use QJV		
								Days		
A					′ <u>А</u> В		0			
B										
C				С						
	of Property:									
	Single Family Residence 3 Vacation/Short-Term Ren	tal	5 Land			Self-Rental				
2	Multi-Family Residence 4 Commercial 6 F			Royalties 8 Other (describe)						
						Properti	es:			
Income:			A E			В	С			
3	Rents received	3		4	50.					
4	Royalties received	4								
Expe	nses:									
5	Advertising	5								
6	Auto and travel (see instructions)	6								
7	Cleaning and maintenance	7		1,2	00.					
8	Commissions	8								
9	Insurance	9								
10	Legal and other professional fees	10								
11	Management fees	11		1,8	00.					
12	Mortgage interest paid to banks, etc. (see instructions)	12								
13	Other interest	13								
14	Repairs	14			00.					
15	Supplies	15		2,5	00.					
16	Taxes	16			0.0					
17	Utilities	17		2,2	00.					
18	Depreciation expense or depletion	18								
19 20	Other (list) Total expenses. Add lines 5 through 19	19		11 /	00					
	Subtract line 20 from line 3 (rents) and/or 4 (royalties). If	20		11,400.						
21	result is a (loss), see instructions to find out if you must									
	file Form 6198	21		- 10 , 9	50.					
22	Deductible rental real estate loss after limitation, if any,			-, -	•					
	on Form 8582 (see instructions)	22	(10,95	50. N	()	()	
23a	Total of all amounts reported on line 3 for all rental prope				23a	·	450.		,	
b	Total of all amounts reported on line 4 for all royalty prop				23b					
C	Total of all amounts reported on line 12 for all properties				23c					
d	Total of all amounts reported on line 18 for all properties				23d					
е	Total of all amounts reported on line 20 for all properties				23e	11	,400.			
24	Income. Add positive amounts shown on line 21. Do not include any losses									
25	Losses. Add royalty losses from line 21 and rental real estat		•		nter to	otal losses her	e 25	(10,950.)	
26	Total rental real estate and royalty income or (loss).	Comb	ine lines	24 and	25. E	nter the resu	lt			
	here. If Parts II, III, IV, and line 40 on page 2 do not	apply	to you,	also er	nter th	is amount o				
	Schedule 1 (Form 10/10) line 5. Otherwise include this ar	mount	in the tot	tal on li	no /11	on nage 2	06	1	_10 050	