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

Socials security number Socials security number Socials security number 370-55-0489	Submis	ssion Identification Number (SID)		·			
Spouse's parelle Annusth B BATTILA 279 + 9 - 6 377 Part Tax Return Information — Tax Year Ending December 31, 20 22 (Enter year you are authorizing.) Enter whole dollars only on lines 1 through 5. Note: Form 1040-55 filters use line 4 only, Leave lines 1, 2, 3, and 5 blank. 1	Taxpaye	r's name	Social securi	y numb	er		_
Part I Tax Return Information — Tax Year Ending December 31, 2022 (Enter year you are authorizing.) Enter whole Gollars only on lines 1 through 5. Note: Form 1040-SS filters use line 4 only, Leave lines 1, 2, 3, and 5 blank. 1	DEEF	AK KURUMATHI	470-55	-0489	9		
Part II Tax Return Information — Tax Year Ending December 31, 2022 (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 Adjusted gross income	Spouse's	name	Spouse's soo	ial secu	ırity numb	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	ANUS	HA BATTULA	379-49	-637	2		
Note: Form 1040-SS filers use line 4 only, Leave lines 1, 2, 3, and 5 blank. 1 Adjusted gross income 2 Total tax 2 Total tax 3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099 3 3, 2, 717. 5 Amount you want refunded to you 4 4 4, 872. 5 Amount you want refunded to you 1 Adjusted gross income 1 Adjusted gross income 1 Adjusted gross income 2 Amount you want refunded to you 1 Adjusted gross income 2 Amount you want refunded to you 1 Adjusted gross income 2 Amount you want refunded to you 1 Adjusted gross income 2 Amount you want refunded to you 1 Adjusted gross income 2 Amount you want refunded to you 1 Adjusted gross income 2 Amount you want refunded to you 1 Adjusted gross income tax refund (refunded to group) 4 Adjusted gross income tax refund (refunded to grow gross) 4 Adjusted gross income tax refunded gross income tax r	Part	Tax Return Information — Tax Year Ending December 31, 2022 (Enter	year you a	re aut	thorizin	g.)	
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A mount you want refunded to you A would you want refunded to you B mount you owe Part II Taxpayer Declaration and Signature Authorization (Be sure you get and keep a copy of your return) Loder penalties of perjury, I declare that I have examined a copy of the income tax return (original or amended) I am now authorizing, and to the best of my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above are the amounts from the income tax return (original or amended) I am now authorizing. I consent to allow my intermediate service provider, transmitter, or electronic return original from the income tax return (original to receive form the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason or any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Tressury and its designated Financial Agent to receive down the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason or any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Tressury and the delay of the part of the IRS and to receive from the IRS (a) and the IRS and to receive from the IRS (a) and the IRS and to receive from the IRS (a) and the IRS and to receive from the IRS (a) and the IRS and to receive from the IRS (a) and the IRS and to receive from the IRS (a) and the IRS and to receive from the IRS (a) and the IRS and to receive from the IRS (a) and the IRS and to receive from the IRS (a) and the IRS and	1	Adjusted gross income		1	19	2,31	2.
Amount you want refunded to you 5 Amount you owe Taxpayer Declaration and Signature Authorization (Be sure you get and keep a copy of your return) Under penalties of perjun; I declare that I have examined a copy of the income tax return (original or amended) I am now authorizing, and to the best of my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above are the amounts from the income tax return (original or amended) I am now authorizing, and to the best of my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above are cash of rejection feature originator (FEN) to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection, 6b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to iteminate and Act electronic funds withdrawal (client debled) enty to the financial institution account indication software for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury financial institutions account indication software from authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate the authorization. To revoke (cancel) a payment, I must contact the U.S. Treasury Financial Agent to terminate the authorization. To revoke (cancel) a payment, I must contact the U.S. Treasury Financial Agent to terminate the authorization. To revoke (cancel) a payment, I must contact the U.S. Treasury Financial Agent to terminate the authorization. To revoke (cancel) a payment, I must contact the U.S. Treasury Financial Agent to terminate the authorization. To revoke (cancel) a payment, I must contact the U.S. Treasury Financial Agent to terminate the authorization. To revoke (cancel) a payment, I must be received to the payment of the elect	2	Total tax		2	2	7,84	5.
S Amount you owe	3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3	3	2,71	7.
Taxpayer Declaration and Signature Authorization (Be sure you get and keep a copy of your return) Under penalties of perjury, I cleate that I have examined a copy of the income tax return (original or amendad) I am now authorizing, and to the best of your knowledge and belief, it is true, correct, and complete. Further declare that the amounts IP Part I above are the amounts from the income tax return (original or amendad) I am now authorizing. In the IRS and to receive from the IRS (8) an acknowledgement of receipt or reason for rejection of the transmission, (8) the reason for any delay in processing the return or refund, and (6) the date of any refund, I applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution is account. This authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate the authorization. To revoke (cancel) a payment, I must contact the U.S. Treasury Financial Agent at 1-888-383-487. Payment cancellation requests must be received no later than 2 business days prior to the payment (estitlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment of a travel payment (payment) and the personal identification number (PIN) below is my signature for the income tax return (original or amended) I am now authorizing. Taxpayer's PIN: check one box only I will enter my PIN as my signature on the income tax return (original or amended) I am now authorizing. Check this box only if you are entering your own PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part III below	4	Amount you want refunded to you		4		4,87	2.
Under penalties of perjuy, I declare that II have examined a copy of the income tax return (original or amended) I am now authorizing, and to the best of my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above en the amounts from the income tax return (original or amended) I am now authorizing. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for retiron of the transmission, (b) the reson for any delay in processing the return or refund, and (e) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminated in the tax preparation software for payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution account indicated in the tax preparation software for payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution account indicated in the tax preparation software for payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution account indicated in the tax preparation software for payment of my federal taxes owed on this return and/or a payment of the payment (estimated until 1 notify the U.S. Treasury Financial Agent to termination in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I further acknowledge that the present of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I further acknowledge that the payment of the payment o	5	Amount you owe		_			
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I authorize GLOBAL TAXES LLC ERO firm name signature on the income tax return (original or amended) I am now authorizing. I will enter my PIN as my signature on the income tax return (original or amended) I am now authorizing. Check this box only if you are entering your own PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part III below. Your signature ▶ Date ▶ Spouse's PIN: check one box only I authorize GLOBAL TAXES LLC to enter or generate my PIN 9 6 3 7 2 as my Enter five digits, but or enter all zeros I will enter my PIN as my signature on the income tax return (original or amended) I am now authorizing. I will enter my PIN as my signature on the income tax return (original or amended) I am now authorizing. Check this box only if you are entering your own PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part III below. Spouse's signature ▶ Date ▶ Practitioner PIN Method Returns Only—continue below Part III Certification and Authentication — Practitioner PIN Method Only ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN. 2 2 2 4 9 6 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 now authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am submitting this return in accordance with the requirements of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers of Individual Income Tax Returns.	return (control to send for any Agent to payment authorize payment business taxes to personal	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.S. initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indication in the financial institution account indication is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate to the financial institution account indication is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate at 1-888-353-4537. Payment cancellation requised days prior to the payment (settlement) date. I also authorize the financial institutions involved in the payment confidential information necessary to answer inquiries and resolve issues related to the payment (PIN) below is my signature for the income tax return (original or amended) I and	ter, or electro- ction of the transport of transport of the transport of the transport of the transport of transport of the transport of transp	onic reteansmise on its cax preparentry to attion. The receivent of the electric care acceptance of the electric care of the electric c	urn originate saion, (b) designate paration so this acromoved no la ectronic parational designation of the said of	nator (E the rea d Finar oftware count. (cance ter that paymer ge that	RO) ason acial a for This al an an the
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if you are entering your own PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part III below. Your signature ▶		ERO firm name	En				,
Spouse's PIN: check one box only X 1 authorize GLOBAL TAXES LLC		if you are entering your own PIN and your return is filed using the Practitioner PIN method					
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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. Don't enter all zeros I certify that the above numeric entry is my PIN, which is my signature for the electronic individual income tax return (original or amended) I am now authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am submitting this return in accordance with the requirements of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers of Individual Income Tax Returns. ERO's signature ▶ Date ▶	Spouse						
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	authoriz	ed to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am submi	tting this retu	ırn in a	ccordanc		
	EDO'a	cignatura N					
	LNU S	ERO Must Retain This Form — See Instructions					—

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

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

OMB No. 1545-0074

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

Check only			_	ed filing separately (M				,	_	spou	ise (QSS)	
one box.		u checked the MFS box, enter the na on is a child but not your dependent		our spouse. If you cr	песке	ed the HOH or	r QSS bo	x, ente	r the	child's	name if th	ne qualifying
Your first name		, ,	Last na	me					٠,	Your so	cial securit	ty number
DEEPAK				MATHI						470-55-0489		
	oouse's	first name and middle initial	Last na						-			curity number
								19-637				
	(numbe	r and street). If you have a P.O. box, see					Apt	no.	_			on Campaign
		MADISON CIR							- 1		ere if you,	
		ce. If you have a foreign address, also co	mplete s	paces below.	Stat	е	ZIP code)				ntly, want \$3
HERNDON					VA		2017	1		_	tnis funa. ow will not	Checking a change
Foreign country	name		F	Foreign province/state/o		1	Foreign p				or refund.	•
											You	Spouse
Digital	At an	y time during 2022, did you: (a) rece	eive (as	a reward, award, or	paym	ent for prope	rty or se	rvices):	or (l	o) sell,		
Assets	exch	ange, gift, or otherwise dispose of a	digital	asset (or a financial i	ntere	st in a digital	asset)? (See in	struc	tions.)	☐ Yes	⊠ No
Standard	Som	eone can claim:	pendent	t	e as a	a dependent						
Deduction		Spouse itemizes on a separate retur	n or you	were a dual-status	alien							
Age/Blindness	You:	☐ Were born before January 2, 1	958	Are blind Spo	use:	☐ Was bor	rn before	Janua	ry 2,	1958	☐ Is bl	lind
Dependents	s (see i	instructions):		(2) Social security		(3) Relationsh	nip (4) C	heck th	e box	if qualif	ies for (see	instructions):
If more	•	rst name Last name		number		to you	·	Child ta	x cre	dit	Credit for ot	her dependents
than four											[
dependents,												
see instructions and check	· —											
here												
Income	1a	Total amount from Form(s) W-2, be	ox 1 (see	e instructions)						1a	20	06,812.
	b	Household employee wages not re	ported	on Form(s) W-2						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 rep	orted or	n Form(s) W-2 (see ir	nstrud	ctions)				1d		
W-2G and 1099-R if tax	е	Taxable dependent care benefits f	rom For	m 2441, line 26 .						1e		
was withheld.	f	Employer-provided adoption bene	fits from	Form 8839, line 29						1f		
If you did not	g	Wages from Form 8919, line 6 .								1g		
get a Form	h	Other earned income (see instruction	ons) .				·			1h		0.
W-2, see instructions.	i	Nontaxable combat pay election (s	see instr	ructions)		<u>1</u> i						
	Z	Add lines 1a through 1h								1z	20	06,812.
Attach Sch. B	2a	Tax-exempt interest	2a		b Ta	xable interest	t			2b		
if required. ر	3a	Qualified dividends	3a		b Or	dinary divider	nds .			3b		
	4a	IRA distributions	4a		b Ta	xable amoun	t			4b		
Standard Deduction for—	5a		5а		b Ta	xable amoun	t			5b		
Single or	6a	,	6a			xable amoun	t		· .	6b	-	
Married filing separately,	С	If you elect to use the lump-sum e		,	`	,			. <u>U</u>			
\$12,950	7	Capital gain or (loss). Attach Scheo		required. If not requ	ired,	check here			. L	7		
Married filing jointly or	8	Other income from Schedule 1, lin								8	1	14,500.
Qualifying	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7,			ome					9	19	92,312.
surviving spouse, \$25,900	10	Adjustments to income from Sche	-							10		
Head of household,	11	Subtract line 10 from line 9. This is	-	-						11		92,312.
\$19,400	12	Standard deduction or itemized		,	-					12	:	25,900.
If you checked any box under	13	Qualified business income deducti								13		
Standard	14	Add lines 12 and 13								14		25,900.
Deduction, see instructions.	15	Subtract line 14 from line 11. If zer	o or less	s, enter -0 This is y	our t a	axable incom	ne .			15	1 10	66,412.

Form 1040 (2022	2)						Page 2
Tax and	16	Tax (see instructions). Check if any from Form	n(s): 1 881	4 2 🗌 4972	3 🗌		27,845.
Credits	17	Amount from Schedule 2, line 3					17
	18	Add lines 16 and 17					18 27,845.
	19	Child tax credit or credit for other dependen	its from Schedi	ule 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				27,845.
	23	Other taxes, including self-employment tax,	from Schedule	e 2, line 21		2	23 0.
	24	Add lines 22 and 23. This is your total tax				2	27,845.
Payments	25	Federal income tax withheld from:					
-	а	Form(s) W-2			25a 32	,717.	
	b	Form(s) 1099			25b		
	С	Other forms (see instructions)			25c		
	d	Add lines 25a through 25c				2	25d 32,717.
If	26	2022 estimated tax payments and amount a	applied from 20	21 return			26
If you have a qualifying child,	27	Earned income credit (EIC)		No .	27		
attach Sch. EIC.	28	Additional child tax credit from Schedule 8812			28		
	29	American opportunity credit from Form 8863	3, line 8		29		
	30	Reserved for future use			30		
	31	Amount from Schedule 3, line 15			31		
	32	Add lines 27, 28, 29, and 31. These are your				;	32
	33	Add lines 25d, 26, and 32. These are your to	-	-		;	32,717.
Defined	34	If line 33 is more than line 24, subtract line 2					4,872.
Refund	35a	Amount of line 34 you want refunded to yo				. 🗆 🖪	35a 4,872.
Direct deposit?	b	Routing number 0 5 1 0 0 0				Savings	
See instructions.	d	Account number 4 3 5 0 2 7 2				3	
	36	Amount of line 34 you want applied to your			36		
Amount	37	Subtract line 33 from line 24. This is the am					
You Owe	•	For details on how to pay, go to www.irs.go	•				37
	38	Estimated tax penalty (see instructions) .			38		
Third Party	Do	you want to allow another person to dis-	cuss this retur	n with the IRS?	See		
Designee	ins	tructions			. 🗌 Yes. Co	mplete belo	ow. 🔀 No
		signee's	Phone			nal identifica	tion
	naı		no.			er (PIN)	
Sign		der penalties of perjury, I declare that I have examine ef, they are true, correct, and complete. Declaration					
Here			1 ' '	Your occupation	ised on an imormation		S sent you an Identity
	10	ır signature	Date	rour occupation			on PIN, enter it here
Joint return?				SOFTWARE E	ENGINEER	(see inst	
See instructions.	Sp	ouse's signature. If a joint return, both must sign.	Date	Spouse's occupati	on		S sent your spouse an
Keep a copy for your records.							Protection PIN, enter it here
your records.				DOCTOR		(see inst	.)
		one no. (774)262-8739	Email address	DEEPAK.WS(7@GMAIL.COM		
Paid		parer's name Preparer's signa			Date	PTIN	Check if:
Preparer	VENK		I PAVAN KUM	AR DUDIPALLI	04/03/2023	P024708	
Use Only	Fir	n's name GLOBAL TAXES LLC				Phone n	io. (678)965-9522
	Fir	n's address 245 ROONEY CT E BRU	JNSWICK N	J 08816		Firm's E	
Go to www.irs.go	ov/Forn	1040 for instructions and the latest information.		BAA	REV 03/22/23 PRO		Form 1040 (2022)

SCHEDULE 1 (Form 1040)

Additional Income and Adjustments to Income

OMB No. 1545-0074

2022

Attachment Sequence No. 01

Department of the Treasury Internal Revenue Service

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

DEEPAK KURUMATHI & ANUSHA BATTULA

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 social security number
470-55-0489

Par	t I Additional Income			
1	Taxable refunds, credits, or offsets of state and local income taxes		1	0.
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	-14,500.
6	Farm income or (loss). Attach Schedule F		6	
7	Unemployment compensation		7	
8	Other income:			
а	Net operating loss	8a ())	
b	Gambling	8b		
С	Cancellation of debt	8c		
d	Foreign earned income exclusion from Form 2555	8d ())	
е	Income from Form 8853	8e		
f	Income from Form 8889	8f		
g	Alaska Permanent Fund dividends	8g		
h	Jury duty pay	8h		
i	Prizes and awards	8i		
j	Activity not engaged in for profit income	8j	_	
k	Stock options	8k	-	
ı	Income from the rental of personal property if you engaged in the rental			
	for profit but were not in the business of renting such property	81	-	
m	Olympic and Paralympic medals and USOC prize money (see			
	instructions)	8m	-	
n	Section 951(a) inclusion (see instructions)	8n	-	
0	Section 951A(a) inclusion (see instructions)	80	-	
р	Section 461(I) excess business loss adjustment	8p	-	
q	Taxable distributions from an ABLE account (see instructions)	8q	-	
r	Scholarship and fellowship grants not reported on Form W-2	8r	-	
S	Nontaxable amount of Medicaid waiver payments included on Form			
	1040, line 1a or 1d	8s ()	4	
t	Pension or annuity from a nonqualifed deferred compensation plan or			
	a nongovernmental section 457 plan	8t	-	
u	Wages earned while incarcerated	8u		
Z	Other income. List type and amount:	0-		
•	Total ather income Add lines On through On	8z		
9	Total other income. Add lines 8a through 8z		9	14 500
10	Combine lines 1 through 7 and 9. Enter here and on Form 1040, 1040-SR	, or 1040-NH, line 8	10	-14,500.

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

Educator expenses 11	Par	Adjustments to Income			
officials. Attach Form 2106 1 Health savings account deduction. Attach Form 8889 1 Health savings account deduction. Attach Form 8889 1 Deductible part of self-employment tax. Attach Schedule SE 1 Self-employed SEP, SIMPLE, and qualified plans 1 Self-employed SEP, SIMPLE, and qualified plans 1 Self-employed health insurance deduction 1 The Penalty on early withdrawal of savings 1 Ba Alimony paid 1 Ba Pecipient's SSN 1 C Date of original divorce or separation agreement (see instructions): 2 IFA deduction 2 IFA deduction 2 IFA deduction 2 IFA deduction 2 IFA desclustion 3 IFA desclustion 3 IFA desclustion 4 IFA descl	11			11	
officials. Attach Form 2106 1 Health savings account deduction. Attach Form 8889 1 Health savings account deduction. Attach Form 8889 1 Deductible part of self-employment tax. Attach Schedule SE 1 Self-employed SEP, SIMPLE, and qualified plans 1 Self-employed SEP, SIMPLE, and qualified plans 1 Self-employed health insurance deduction 1 The Penalty on early withdrawal of savings 1 Ba Alimony paid 1 Ba Pecipient's SSN 1 C Date of original divorce or separation agreement (see instructions): 2 IFA deduction 2 IFA deduction 2 IFA deduction 2 IFA deduction 2 IFA desclustion 3 IFA desclustion 3 IFA desclustion 4 IFA descl	12	Certain business expenses of reservists, performing artists, and fee-	basis government		
13 Health savings account deduction. Attach Form 8889		officials. Attach Form 2106		12	
15 Deductible part of self-employment tax. Attach Schedule SE 16 Self-employed SEP, SIMPLE, and qualified plans 17 Self-employed death insurance deduction 17 Penalty on early withdrawal of savings 18 Penalty on early withdrawal of savings 19a Alimony paid 19a Alimony paid 19a Recipient's SSN 19a Becipient's SSN 19a Becipient	13	Health savings account deduction. Attach Form 8889		13	
16 Self-employed SEP, SIMPLE, and qualified plans	14			14	
17 Self-employed health insurance deduction 18 Penalty on early withdrawal of savings 18 18 19 Alimony paid 19 Recipient's SSN 10 Date of original divorce or separation agreement (see instructions): 20 IRA deduction 21 Student loan interest deduction 22 Archer MSA deduction 23 Archer MSA deduction 24 Other adjustments: 25 Jury duty pay (see instructions) 26 Deductible expenses related to income reported on line 8l from the rental of personal property engaged in for profit 24 Contributions of the value of Olympic and Paralympic medals and USOC prize money reported on line 8m 24 Reforestation amortization and expenses 24 Repayment of supplemental unemployment benefits under the Trade Act of 1974 24 Contributions to section 501(c)(18)(D) pension plans 24 Contributions by certain chaplains to section 403(b) plans 24 Attorney fees and court costs for actions involving certain unlawful discrimination claims (see instructions) 24 Indicate the property of the provided of the lRS detect tax law violations 25 Industry and amount: 26 Total other adjustments. Add lines 24a through 24z 26 Add lines 11 through 23 and 25. These are your adjustments to income. Enter here and on	15			_	
18	16			-	
19a Alimony paid b Recipient's SSN c Date of original divorce or separation agreement (see instructions): 20 IRA deduction		Self-employed health insurance deduction		-	
b Recipient's SSN c Date of original divorce or separation agreement (see instructions): 20 1RA deduction	18			-	
c Date of original divorce or separation agreement (see instructions): IRA deduction	19a			19a	
20 Student loan interest deduction 21 22 23 24 22 24 24 24 24	b	Recipient's SSN			
Student loan interest deduction Reserved for future use Archer MSA deduction Other adjustments: Jury duty pay (see instructions) Deductible expenses related to income reported on line 8l from the rental of personal property engaged in for profit Nontaxable amount of the value of Olympic and Paralympic medals and USOC prize money reported on line 8m. Reforestation amortization and expenses Repayment of supplemental unemployment benefits under the Trade Act of 1974. Contributions to section 501(c)(18)(D) pension plans Attorney fees and court costs for actions involving certain unlawful discrimination claims (see instructions). 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 Housing deduction from Form 2555. Excess deductions of section 67(e) expenses from Schedule K-1 (Form 1041). Total other adjustments. List type and amount: 25 Total other adjustments. Add lines 24a through 24z Add lines 11 through 23 and 25. These are your adjustments to income. Enter here and on	С	Date of original divorce or separation agreement (see instructions):			
22 Archer MSA deduction				-	
Archer MSA deduction Other adjustments: Jury duty pay (see instructions) Deductible expenses related to income reported on line 8l from the rental of personal property engaged in for profit Nontaxable amount of the value of Olympic and Paralympic medals and USOC prize money reported on line 8m Reforestation amortization and expenses Repayment of supplemental unemployment benefits under the Trade Act of 1974 Contributions to section 501(c)(18)(D) pension plans Contributions by certain chaplains to section 403(b) plans Attorney fees and court costs for actions involving certain unlawful discrimination claims (see instructions) 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 Jeuseph Housing deduction from Form 2555 Let Excess deductions of section 67(e) expenses from Schedule K-1 (Form 1041) Cother adjustments. List type and amount: Total other adjustments. Add lines 24a through 24z Add lines 11 through 23 and 25. These are your adjustments to income. Enter here and on				$\overline{}$	
24 Other adjustments: a 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				-	
a 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 c Nontaxable amount of the value of Olympic and Paralympic medals and USOC prize money reported on line 8m				23	
b Deductible expenses related to income reported on line 8l from the rental of personal property engaged in for profit	24				
rental of personal property engaged in for profit			24a		
c Nontaxable amount of the value of Olympic and Paralympic medals and USOC prize money reported on line 8m	b				
and USOC prize money reported on line 8m			24b	-	
d Reforestation amortization and expenses	С				
e Repayment of supplemental unemployment benefits under the Trade Act of 1974					
Act of 1974			24d		
f Contributions to section 501(c)(18)(D) pension plans	е		040		
g Contributions by certain chaplains to section 403(b) plans					
h Attorney fees and court costs for actions involving certain unlawful discrimination claims (see instructions)				-	
discrimination claims (see instructions)	_		249		
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	"		24h		
from the IRS for information you provided that helped the IRS detect tax law violations	i	` <i>'</i>	2-711		
tax law violations	٠				
j Housing deduction from Form 2555			24i		
k Excess deductions of section 67(e) expenses from Schedule K-1 (Form 1041)	i				
1041)	k		,		
z Other adjustments. List type and amount:	•••		24k		
Total other adjustments. Add lines 24a through 24z	z				
Total other adjustments. Add lines 24a through 24z	_		24z		
26 Add lines 11 through 23 and 25. These are your adjustments to income. Enter here and on	25			25	
	26	•			
				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.

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

OMB No. 1545-0074 Attachment Sequence No. 13

Department of the Treasury Internal Revenue Service

` '	PAK KURUMATHI	C- 7\ 1\TT	וכטא האיייווו א							-55-048	•
Part			rom Rental Real Estate an	d Do	valtics				470-	33-040.	9
Ган			ousiness of renting personal proper			e C. See	instruc	tions. If you	are an in	dividual, re	nort farm
	rental income	or loss fi	om Form 4835 on page 2, line 40.	rty, acc	Conodan	.	motrac		210 011 111	arriadai, ro	portraini
			s in 2022 that would require you								'es 🗵 No
B I	f "Yes," did you or	will you	file required Form(s) 1099? .							🗌 Y	es 🗌 No
1a	Physical address	of each	property (street, city, state, ZI	P code	e)						
A	11-23-1852/	1 I.B N	IAGAR WARANGAL TELANGA	ANA T	IN 5060	102					
B	11 23 1032/	יו עם זי	TIGHT WHITHOUTH THEFING		111 3000	J U Z					
1b	Type of Property	2 F	or each rental real estate prope	arty liet	ted		Fai	r Rental	Pers	onal Use	
	(from list below)		bove, report the number of fair				-	Days		Days	QJV
A	3		ersonal use days. Check the Q			Α		365		0	
В			you meet the requirements to			В					
С		1 9	ualified joint venture. See instru	uctions	5.	С					
Туре	of Property:								l		
	Single Family Resid	dence	3 Vacation/Short-Term Ren	ntal	5 Lanc	t	7	Self-Rental			
2	Multi-Family Resid	ence	4 Commercial		6 Roya	alties	8	Other (desc	ribe)		
lnaam						Α		Propert B	ies.		С
Incom 3				3			30.				
4				_			30.				
Exper		<i>.</i>		-							
5				5							
6	_		uctions)	6							
7	,		e	7		1,4	00.				
8				8							
9				9							
10			nal fees	10							
11				11		1,2	30.				
12			banks, etc. (see instructions)	12							
13		-		13							
14				14		4,3	20.				
15				15		4,1	20.				
16				16							
17	Utilities			17		3,9	60.				
18			depletion	18							
19	Other (list)			19							
20	Total expenses. A	dd lines	5 through 19	20		15,0	30.				
21	Subtract line 20 fr	rom line	3 (rents) and/or 4 (royalties). If								
		see instr	uctions to find out if you must								
	file Form 6198 .			21		-14,5	00.				
22			ate loss after limitation, if any,								
			ctions)	22	(14,50)()
23a			ted on line 3 for all rental prope				23a		530	•	
b		-	ted on line 4 for all royalty prop				23b				
С			ted on line 12 for all properties				23c				
d		-	ted on line 18 for all properties				23d	4 -	. 020		
e			ted on line 20 for all properties				23e	15	,030		
24	•		nounts shown on line 21. Do no		-		· ·	 tallagess !- :	. 24	_	14 500 \
25		-	s from line 21 and rental real esta) (14,500.)
26			and royalty income or (loss). nd line 40 on page 2 do not								

26

-14,500.

2022 VA760CG Individual Income Tax Return Page 1





DEEPAK KURUMATHI ANUSHA BATTULA 2517 JAMES MADISON CIR

HERNDON	VΑ	20171
IILIUDON	A T T	201/1

SSN - You	KURU	470550	489	Vendor ID	1555		XXXXX	П
SSN - Spouse	BATT	379496	372					
Fed Adj Gross Income (FA	AGI) 1	. 1923	12.	Withholding (VA) - Yo	ou	19A.	8523	3.
Additions	2			Withholding (VA) - Sp	oouse	19B.	2341	L.
Subtotal	3	. 1923	12.	Estimated Payments		20.		
Age Deduction - You	4,4			2021 Overpayment		21.		
Age Deduction - Spouse	4E			Extension Payments		22.		
Soc Sec & Tier 1 Railroad	5			Credit - Low-Income	or EIC	23.		
State Income Tax Overpay	yment 6			Credit - Schedule OS	С	24.		
Subtractions	7			Credits - Schedule CF	3	25.		
Subtotal Subtractions	8			Total Payments / Cre	dits	26.	10864	1.
Total VA Adj Gross Income	e (VAGI) 9	. 1923	12.	Tax You Owe		27.		
Itemized Deductions - VA	Sch A 1	0.		Tax Overpayment		28.	1350).
Standard Deduction	1	1. 160	00.	Overpayment Credited	d to Next Year	29.		
Exemptions	1	2. 18	60.	VAC - Virginia 529 / A	ABLE	30.		
Deductions	1	3.		VAC - Other Contribu	tions	31.		
Subtotal (Deductions & Ex	cemptions) 1	4. 178	60.	Addition to Tax, Penal	Ity & Interest	32.		
VA Taxable Income	1	5. 1744	52.	Sales and Use Tax		33.		
Amount of Tax	1	6. 97	73.	Amount You Owe	Orad N			
Spouse Tax Adjustment (S	STA) 1	7. 2	59.	Will Pay by Credit/Debit Your Refund	Card N	ı	1350).
VAGI - Spouse	17	A. 484	52.	Bank Routing #		_	0510000	117
Net Amount of Tax	1 L	3. 95	14.	Bank Account #			27238080	,





l										
Filing Status, Age &	License Infor	mation	Addition	nal Filing Infor	mation					
Filing Status			2		Locality		600			
Federal Head of Ho	usehold				Uninsured & Authorize DN	MAS				
DOB - You		072	11984	:	Name or Filing Status Cha	ange				
VA Driver's License	ID - You	C6242	25980	1	Address Change					
VA Driver's License	- Iss. Date - You	0623	32022	}	VA Return Not Filed Last	Year				
Spouse Name (Filin	g Status 3 Only))			Dependent on Another's F	Return				
DOB - Spouse		0308	31989	ı	Farmer / Fisherman / Mei	rchant Seaman				
VA Driver's License ID - Spouse VA Driver's License - Iss. Date - Spouse		в6080			Amended	Amended				
			12022		Reason Code					
					Overseas on Due Date					
You You	1 Ex	t emptions (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	X			
		Total (B)			Obtain Electronic 1099G	ı				
	eclare under penal				ID Theft PIN of my (our) knowledge, it is a true, con provided is for a domestic account		urisdiction of the United States.			
Signature - You			Date		Phone - You		7742628739			
Signature - Spouse			Date		Phone - Spouse					
Signature - Preparer VE	NKATA SAI PAVA	AN KUMAR DUDIPALLI	Date	040323	Phone - Preparer		6789659522			
The Tax Department ma	y discuss my/ou	r return with my/our pr	eparer.	CI ODA	Preparer Information	7	P02470833			

GLOBAL TAXES LLC

NJ 08816

Page 2 of 2

245 ROONEY CT

E BRUNSWICK

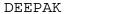
File by May 1, 2023 Include Page 1, Page 2 and all

supporting 760CG documents.

2022 Schedule INC/CG

470550489

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



KURUMATHI

ANUSHA

BATTULA



Your/ Spouse SSN	Withholding Type	VA Withholding	Employer FEIN	VA Account Number	VA Wages, tips, other comp.
470550489	W	8523.	412166961	30412166961F001	158360.
379496372	W	2341.	521289729	30521289729F001	48452.

Total VA Withholding	SSN	VA Withholding
You	470550489	8523.
Spouse	379496372	2341.
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!

Virginia Submission Identification Number (SID)										
Your Name	B Your Social Sec	urity Number								
DEEPAK KURUMATHI	470-55-0489									
Spouse's Name	A Spouse's Social Security Number									
ANUSHA BATTULA	379-49-6372									
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)		192312.								
2. Virginia Adjusted Gross Income (Form 760CG, Line 9; 760PY, Line 10, columns A & B; Form 763, Line 9)		192312.								
3. Taxable Income (Form 760CG, Line 15; 760PY, Line 16, columns A & B; Form 763, Line 17)	174452.									
4. Virginia Income Tax (Form 760CG, Line 18; 760PY, Line 17, columns A & B; Form 763 Line 18)	9514.									
5. Withholding (Form 760CG, Line 19a & 19b; 760PY, Lines 19a & 19b; Form 763, Lines 19a & 19b)	10864.									
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)		1350.								
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 sch										
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 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 5 0 4 8 9 as my signature on my 2022 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 2022 e-filed Virginia individual income tax return. Check this box or and your return is filed using the Practitioner PIN method. The ERO must complete Part III below.	nly if you are entering	your own e-File PIN								
Your Signature Date										
Spouse's e-File PIN: check one box only										
I authorize the ERO named below to enter my e-File PIN 9 6 3 7 2 as my signature on my 2022 e-filed Do not enter all zeros	Virginia individual inco	ome tax return.								
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 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. 2 2 2 4 9 6 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 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's Signature Date Date	-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.

OMB No. 1545-0074 Attachment Sequence No. 13

Department of the Treasury Internal Revenue Service

` '	EDAN NIDIIMATUT C AMIICUA DATTII A								470-55-0489			
Part I Income or Loss From Rental Real Estate and Royalties								470-35-0489				
Ган			ousiness of renting personal proper			e C. See	instruc	tions. If you	are an in	dividual, re	nort farm	
	rental income	or loss fi	om Form 4835 on page 2, line 40.	rty, acc	Conodan	.	motrac		210 011 111	arriadai, ro	portraini	
			s in 2022 that would require you								'es 🗵 No	
B I	f "Yes," did you or	will you	file required Form(s) 1099? .							🗌 Y	es 🗌 No	
1a	Physical address	of each	property (street, city, state, ZI	P code	e)							
A	11-23-1852/	1 T.B N	IAGAR WARANGAL TELANGA	ANA T	IN 5060	102						
B	11 23 1032/	יו עם זי	TIGHT WHITHOUTH THEFING		111 3000	J U Z						
1b	Type of Property	2 For each rental real estate property listed						Fair Rental		onal Use		
	(from list below) above, report the number of fair						-	Days			QJV	
A	3		ersonal use days. Check the Q		e as a		365		0			
В			you meet the requirements to									
С		1 9	ualified joint venture. See instru	uctions	5.	С						
Туре	of Property:								l			
	Single Family Resid	dence	3 Vacation/Short-Term Ren	ntal	5 Lanc	t	7	Self-Rental				
2	Multi-Family Resid	ence	4 Commercial		6 Roya	alties	8	Other (desc	ribe)			
lnaam						Properties:					С	
Incom 3				3		A	30.	В				
4				_			30.					
Exper		<i>.</i>		-								
5				5								
6	_		uctions)	6								
7	,		e	7		1,4	00.					
8				8								
9				9								
10			nal fees	10								
11				11		1,2	30.					
12			banks, etc. (see instructions)	12								
13		-		13								
14				14		4,3	20.					
15				15		4,1	20.					
16				16								
17	Utilities			17		3,9	60.					
18			depletion	18								
19	Other (list)			19								
20	Total expenses. A	dd lines	5 through 19	20		15,0	30.					
21	Subtract line 20 fr	rom line	3 (rents) and/or 4 (royalties). If									
		see instr	uctions to find out if you must									
	file Form 6198 .			21		-14,5	00.					
22			ate loss after limitation, if any,									
			ctions)	22	(14,50)()	
23a			ted on line 3 for all rental prope				23a		530	•		
b		-	ted on line 4 for all royalty prop				23b					
С			ted on line 12 for all properties				23c					
d		-	ted on line 18 for all properties				23d	4 -	. 020			
e			ted on line 20 for all properties				23e	15	,030			
24	•		nounts shown on line 21. Do no		-		· ·	 tallagess !- :	. 24	_	14 500 \	
25		-	s from line 21 and rental real esta) (14,500.)	
26			and royalty income or (loss). nd line 40 on page 2 do not									

26

-14,500.