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

Submission Identification Number (SID)		•
Taxpayer's name	Social securit	ty number
DEEPAK KURUMATHI	470-55	-0489
Spouse's name	Spouse's soc	ial security number
ANUSHA BATTULA	379-49	-6372
Part I Tax Return Information — Tax Year Ending December 31, 2022 (En	ter year you a	re 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 1
1 Adjusted gross income		1 192,312.
2 Total tax		2 27,845.
3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3 32,717.
4 Amount you want refunded to you		4 4,872.
5 Amount you owe		5
Part II Taxpayer Declaration and Signature Authorization (Be sure you get and Under penalties of perjury, I declare that I have examined a copy of the income tax return (original or amend		· · · · · · · · · · · · · · · · · · ·
return (original or amended) I am now authorizing. I consent to allow my intermediate service provider, tran to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account i payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial instit authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to termin payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation in business days prior to the payment (settlement) date. I also authorize the financial institutions involved in taxes to receive confidential information necessary to answer inquiries and resolve issues related to the personal identification number (PIN) below is my signature for the income tax return (original or amended) Electronic Funds Withdrawal Consent.	rejection of the tree U.S. Treasury as indicated in the taution to debit the nate the authorizate equests must be the processing of e payment. I furt	ransmission, (b) the reason and its designated Financial ax preparation software for entry to this account. This action. To revoke (cancel) a received no later than 2 the electronic payment of the racknowledge that the
Taxpayer's PIN: check one box only		
■ I authorize GLOBAL TAXES LLC to enter or general	to my DIN	
ERO firm name	Ent	ter five digits, but n't enter all zeros
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 an if you are entering your own PIN and your return is filed using the Practitioner PIN me below.	ethod. The ERC) must complete Part III
Your signature ▶ Date ▶		2020
Spouse's PIN: check one box only		
I authorize GLOBAL TAXES LLC to enter or genera 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 an if you are entering your own PIN and your return is filed using the Practitioner PIN me	Ent doi n now authorizii	
below.		
Spouse's signature ▶	04-0	4-2023
Practitioner PIN Method Returns Only—continue belo		
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.		6 6 1 9 8 9 er all zeros
I certify that the above numeric entry is my PIN, which is my signature for the electronic individual income authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am su requirements of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS <i>e-file</i> Providers of	bmitting this retu	ırn in accordance with the
FRO's signature ▶ Date ▶		

ERO Must Retain This Form — See Instructions
Don't Submit This Form to the IRS Unless Requested To Do So

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

2022

OMB No. 1545-0074

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

Check only				ed filing separately		_		·		spou	se (QSS)		
one box.		u checked the MFS box, enter the r on is a child but not your dependen		our spouse. If you	u check	ed the HOH or	r QSS box	, ente	r the o	child's	name if t	ne qu	ıalifying
Your first name			Last na	me					V	nur soc	ial securi	ity nu	mher
DEEPAK	and m	date ilitial		MATHI						Your social security number 470-55-0489			illoci
	nouse's	first name and middle initial	Last na								social se		number
ANUSHA	,роцоо с	The man and made initial	BATT								9-637		Hamboi
	(numbe	r and street). If you have a P.O. box, see					Apt.	no.			tial Electi		amnaign
		MADISON CIR					1 1				ere if you		
		ce. If you have a foreign address, also co	omplete si	paces below.	Sta	te	ZIP code				f filing joir		
HERNDON				•	VA		20171			_	this fund. w will not		_
Foreign countr	y name		F	oreign province/sta	_		Foreign po	stal co			or refund		190
											You		Spouse
Digital	At ar	ny time during 2022, did you: (a) rec	eive (as	a reward, award,	or payn	nent for prope	rty or serv	/ices)	or (b)	sell,			
Assets	exch	ange, gift, or otherwise dispose of	a digital a	asset (or a financ	ial intere	est in a digital	asset)? (S	ee in	structi	ons.)	☐ Yes	X	No
Standard		eone can claim:	ependent	t Your spo	ouse as	a dependent							
Deduction		Spouse itemizes on a separate retu	n or you	were a dual-stat	us alien								
Age/Blindnes	s You:	Were born before January 2, 1	958	Are blind	Spouse	: Was bo	rn before .	Janua	ry 2, 1	958	☐ Is b	lind	
Dependent	s (see	instructions):		(2) Social secu	ırity	(3) Relationsh	nip (4) Ch	eck th	e box i	f qualifi	es for (see	instru	uctions):
If more	(1) Fi	rst name Last name		number		to you	C	hild ta	x cred	it (Credit for of	ther de	ependents
than four													
dependents, see instruction	s												
and check	. —												
here													
Income	1a	Total amount from Form(s) W-2, b	,	,						1a	2	<u>06,</u>	812.
Attach Form(s)	b	Household employee wages not r		. ,						1b			
W-2 here. Also	С.	Tip income not reported on line 1a	•	,						1c			
attach Forms W-2G and	d	Medicaid waiver payments not rep		` ,	e instru	ctions)		•		1d			
1099-R if tax	e	Taxable dependent care benefits								1e			
was withheld.	f	Employer-provided adoption bene						•		1f			
If you did not get a Form	g	Wages from Form 8919, line 6 .						•		1g			0.
W-2, see	h :	Other earned income (see instruct Nontaxable combat pay election (,				· · ·	•		1h			0.
instructions.	i z	Add lines 1a through 1h	see msu	uctions)		!!				1z	2	06	812.
Attach Sch. B	2 2a		2a	_. .	 h Т	axable interes	+	•		2b		00,	012.
if required.	3a	Qualified dividends	3a			rdinary divide		•		3b			
	4a	IRA distributions	4a			axable amoun				4b			
Standard	5a		5a			axable amoun				5b			
Deduction for—	6a	_	6a			axable amoun				6b			
Single or Married filing	С	If you elect to use the lump-sum e	_	method, check he	ere (see	instructions)			. 🗆				
separately, \$12,950	7	Capital gain or (loss). Attach Sche		•	`	,			. 🗆	7	1		
Married filing	8	Other income from Schedule 1, lir								8	_	14,	500.
jointly or Qualifying	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7	, and 8.	This is your total	income					9	1	92,	312.
surviving spouse, \$25,900	10	Adjustments to income from Sche								10			
Head of	11	Subtract line 10 from line 9. This is	s your ac							11	1	92,	312.
household, \$19,400	12	Standard deduction or itemized	deducti	ions (from Sched	ule A)					12		25,	900.
If you checked	13	Qualified business income deduct	tion from	Form 8995 or Fo	rm 899	5-A				13			
any box under Standard	14	Add lines 12 and 13								14		25,	900.
Deduction, see instructions.	15	Subtract line 14 from line 11. If ze	ro or less	s, enter -0 This i	is your t	axable incom	ne			15	1	66,	412.
	'												

Form 1040 (2022	2)							Page 2
Tax and	16	Tax (see instructions). Check if any from F	orm(s): 1 881	4 2 🗌 4972	3 🗌		16	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 depen	dents from Sched	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 le	ess, enter -0				22	27,845.
	23	Other taxes, including self-employment	tax, from Schedule	e 2, line 21			23	0.
	24	Add lines 22 and 23. This is your total ta	ax				24	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					25d	32,717.
If you have a	26	2022 estimated tax payments and amou	ınt applied from 20	21 return			26	
qualifying child,	27	Earned income credit (EIC)		No .	27			
attach Sch. EIC.	28	Additional child tax credit from Schedule 8	8812		28			
	29	American opportunity credit from Form 8	8863, 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 total other p a	ayments and refu	ndable credits		32	
	33	Add lines 25d, 26, and 32. These are you	ur total payments				33	32,717.
Refund	34	If line 33 is more than line 24, subtract line	ne 24 from line 33.	This is the amour	t you overpaid		34	4,872.
riciana	35a	Amount of line 34 you want refunded to		is attached, chec	k here		35a	4,872.
Direct deposit?	b	Routing number 0 5 1 0 0 0		c Type: 🛛	Checking :	Savings		
See instructions.	d	Account number 4 3 5 0 2 7	2 3 8 0 8	3 0				
	36	Amount of line 34 you want applied to y	our 2023 estimate	ed tax	36			
Amount	37	Subtract line 33 from line 24. This is the						
You Owe		For details on how to pay, go to www.irs	,				37	
	38	Estimated tax penalty (see instructions)			38			
Third Party		you want to allow another person to						
Designee	ins	tructions				•		X No
	De na	signee's ne	Phone no.			onal identif oer (PIN)	ication	
0:				l accompanying coh		,	the bee	t of my knowledge and
Sign		der penalties of perjury, I declare that I have exa ef, they are true, correct, and complete. Declara						
Here	Yo	ur signature	Date	Your occupation		If the	IRS ser	nt vou an Identity
		d. J	04-04-2023					IN, enter it here
Joint return?		Wes	04-04-2023	SOFTWARE E	NGINEER	(see	inst.)	
See instructions. Keep a copy for	Sp	ouse's signature. If a joint return, both must sig	n. Date	Spouse's occupation	on			nt your spouse an
your records.		Arau I	04-04-2023	DOCTOR		(see	-	ection PIN, enter it here
		one no. (774)262-8739	Email address		7ecmati co		,	
		parer's name Preparer's s		DEEPAK.WS0	Date	PTIN		Check if:
Paid		·	•	דוועטדעווע מע			1833	Self-employed
Preparer VENKATA SAI PAVAN KUMAR DUDIPALLI 04/03/2023 P024708						678)965-9522		
Use Only		n's name GLOBAL TAXES LLC	DDIIMOMTAV NI	T 00016				
	FIR	n's address 245 ROONEY CT E I	DVONDMICK NO	J 08816		Firm	s EIN	88-2145487

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 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 24 Jeli 25 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.

Department of the Treasury Internal Revenue Service

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

Attachment Sequence No. **13**

OMB No. 1545-0074

Name(s)	shown on return						Y	our socia	I security	number
DEEP	PAK KURUMATHI & ANUSHA B	ATTULA					4	470-5	5-0489	
Part	Income or Loss From Re Note: If you are in the business or rental income or loss from Form	of renting personal property.			C . See	instru	ctions. If you are	an indiv	idual, rep	ort farm
Α	Did you make any payments in 2022	that would require you to	file	Form(s) 1	099? 5	ee ins	tructions		. 🗌 Ye	es 🛛 No
B I	f "Yes," did you or will you file requi	ired Form(s) 1099?							. 🗌 Ye	es 🗌 No
1a	Physical address of each propert	v (street, citv. state, ZIP o	code)						
A	11-23-1852/1 LB NAGAR V	<u> </u>		,	102					
B	11-23-1032/1 LB NAGAR V	WARANGAL IELANGAN	IA I	N 3000	102					
C										
1b	Type of Property 2 For each r	rental real estate property	v lieta	ad		Fa	ir Rental	Person	al Hea	
10		oort the number of fair re				га	Days	Da		QJV
A		use days. Check the QJV			Α		365		0	
В	if you mee	et the requirements to file			В		303			
C	qualified j	oint venture. See instruct	tions.	.	C					
	of Property:									
	• •	cation/Short-Term Rental	ı	5 Land		7	Self-Rental			
		mmercial		6 Roya			Other (describ	ne)		
			-				Properties	s:		
Incom			_		Α	2.0	В			С
3	Rents received		3		5	30.				
4	Royalties received		4							
Exper			_					ŀ		
5			5							
6	Auto and travel (see instructions)	_	7		1 /	0.0				
7	Cleaning and maintenance				1,4	00.				
8	Commissions		8							
9 10	Insurance		9							
10	Legal and other professional fees		11		1 0	2.0				
12	Management fees		12		1,2	30.				
13	Mortgage interest paid to banks, e	` / 	13							
14	Other interest	_	14		4,3	20				
15	Repairs		15		$\frac{4,3}{4,1}$					
16	Taxes	_	16		7,1	20.				
17	Utilities	<u> </u>	17		3,9	60				
18	Depreciation expense or depletion	⊢	18		3,7	00.				
19	Other (list)		19							
20	Total expenses. Add lines 5 through		20		15,0	30.				
21	Subtract line 20 from line 3 (rents)	· -								
	result is a (loss), see instructions t									
	file Form 6198	,	21	-	-14,5	00.				
22	Deductible rental real estate loss									
	on Form 8582 (see instructions) .		22	(14,50	0.)	()(()
23a	Total of all amounts reported on lin	ne 3 for all rental properti	ies			23a	•	530.	`	
b	Total of all amounts reported on lin	ne 4 for all royalty proper	ties			23b				
С	Total of all amounts reported on lin					23c				
d	Total of all amounts reported on lin	ne 18 for all properties				23d				
е	Total of all amounts reported on lin	ne 20 for all properties				23e	15,	030.		
24	Income. Add positive amounts sh	nown on line 21. Do not i	inclu	de any lo	sses			24		
25	Losses. Add royalty losses from line	e 21 and rental real estate	losse	es from lir	ne 22. E	nter to	otal losses here	25		14,500.)
26	Total rental real estate and roya	alty income or (loss). Co	ombi	ne lines :	24 and	25. E	nter the result			
	here. If Parts II, III, IV, and line	40 on page 2 do not ap	oply	to you,	also er	iter th	is amount on			
	Schedule 1 (Form 1040), line 5. Ot	herwise, include this amo	ount	in the tot	tal on li	ne 41	on page 2 .	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	470550489	Vendor ID 1555		xxxxx ¬
SSN - Spouse	BATT	379496372			
Fed Adj Gross Income (FA	GI) 1.	192312.	Withholding (VA) - You	19A.	8523.
Additions	2.		Withholding (VA) - Spouse	19B.	2341.
Subtotal	3.	192312.	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 Overpay	ment 6.		Credit - Schedule OSC	24.	
Subtractions	7.		Credits - Schedule CR	25.	
Subtotal Subtractions	8.		Total Payments / Credits	26.	10864.
Total VA Adj Gross Income	(VAGI) 9.	192312.	Tax You Owe	27.	
Itemized Deductions - VAS	Sch A 10.		Tax Overpayment	28.	1350.
Standard Deduction	11.	16000.	Overpayment Credited to Next Year	29.	
Exemptions	12.	1860.	VAC - Virginia 529 / ABLE	30.	
Deductions	13.		VAC - Other Contributions	31.	
Subtotal (Deductions & Ex	emptions) 14.	17860.	Addition to Tax, Penalty & Interest	32.	
VA Taxable Income	15.	174452.	Sales and Use Tax	33.	
Amount of Tax	16.	9773.	Amount You Owe		
Spouse Tax Adjustment (S	TA) 17.	259.	Will Pay by Credit/Debit Card N Your Refund	1	1350.
VAGI - Spouse	17A.	48452.	Bank Routing #	–	051000017
Net Amount of Tax	18.	9514.	Bank Account #		27238080

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

supporting 760CG documents.

1555 REV 02/17/23 PRO

470550489





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1		
Filing Status, Age & License Info	rmation	Additional Filing Information
Filing Status	2	Locality 600
Federal Head of Household		Uninsured & Authorize DMAS
DOB - You	07211984	Name or Filing Status Change
VA Driver's License ID - You	C62425980	Address Change
VA Driver's License - Iss. Date - Yo	ou 06232022	VA Return Not Filed Last Year
Spouse Name (Filing Status 3 Only	y)	Dependent on Another's Return
	02001000	Farmer / Fisherman / Merchant Seaman
DOB - Spouse	03081989	Amended
VA Driver's License ID - Spouse	в60809537	Reason Code
VA Driver's License - Iss. Date - Sp		Overseas on Due Date
Exemptions (A) E You 1	Exemptions (B) 65 & Over - You	Federal EIC & Amount
Spouse 1	65 & Over - Spouse	Deceased Indicator
Dependents	Blind - You	Form 760C or 760F
Total (A)	Blind - Spouse	No Sales & Use Tax Due Indicator X
	Total (B)	Obtain Electronic 1099G
Co	ontact Information	ID Theft PIN
•	•	est of my (our) knowledge, it is a true, correct & complete return. If you are requesting direct ation provided is for a domestic account within the territorial jurisdiction of the United States.
Signature - You	Date 04-04-2023	7742628739 Phone - You
Signature - SpouseAvul	Date 04-04-2023	Phone - Spouse
Signature - Preparer <u>VENKATA SAI PAN</u>	040323 VAN KUMAR DUDIPALLI Date	6789659522 Phone - Preparer
The Tax Department may discuss my/o	ur return with my/our preparer.	7 P02470833 Preparer Information

GLOBAL TAXES LLC

NJ 08816

Page 2 of 2

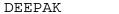
245 ROONEY CT

E BRUNSWICK

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 o 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	l 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 MIDIIMATUT C AMIICUA DATTII A								470-55-0489			
Part I Income or Loss From Rental Real Estate and Royalties									470-33-0489			
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 F	or each rental real estate prope		Fai	r Rental	Personal Use					
	(from list below)	rental and			-	Days		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)			
					<u> </u>							
lnaam						Properties: A B C					С	
Incom 3				3		A	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.