Form <b>8879</b>
(Rev. January 2021)
Depertment of the Treesury

### Department of the Treasury Internal Revenue Service

# **IRS e-file Signature Authorization**

OMB No. 1545-0074

Social accurity number

ERO must obtain and retain completed Form 8879. ► Go to www.irs.gov/Form8879 for the latest information.

Submission Identification Number (SID)

Taxpayor'a pama

талрау		3001a	securit	y num.	
ANI	RUDH RAO PONUGOTI	H RAO PONUGOTI 752-70-2909			
Spouse	Spouse's name Spouse's social security numb				
Par	t I Tax Return Information – Tax Year Ending December 31, 2022 (Enter	er year	you a	re aut	thorizing.)
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	55,494.
2	Total tax			2	4,973.
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099			3	7,067.
4	Amount you want refunded to you			4	2,094.
5	Amount you owe			5	

#### Taxpayer Declaration and Signature Authorization (Be sure you get and keep a copy of your return) Part II

Under penalties of periury. 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 originator (ERO) to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) 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 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 to debit the entry to this 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 **1-888-353-4537**. Payment cancellation requests must be received no later than 2 business days prior to the payment (settlement) 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. I further acknowledge that the personal identification number (PIN) below is my signature for the income tax return (original or amended) I am now authorizing and, if applicable, my Electronic Funds Withdrawal Consent.

Taxpay	er's PIN: che	ck one box only					0 2	9 0 9	]		
X	I authorize	GLOBAL TAXES	LLC		to enter or generate my PIN				☐ as my		
	signature or	the income tax retu	ERO firm name Irrn (original or amended	d) I am now a	authorizing.	rizing.					
		ntering your own PIN	ure on the income tax N and your return is file								
Your sig	nature 🕨	Suint	A TA		Date 🕨	01	-25-202	3			
Spouse	's PIN: chec	k one box only							-		
	I authorize				to enter or generate	e my PIN			as my		
			ERO firm name					ive digits, bu			
	signature or	the income tax retu	Irn (original or amende	d) I am now a	authorizing.		don't e	enter all zeros	S		
		, , , ,	ure on the income tax I <b>and</b> your return is file	( 0	,		0				

Spouse's signature >	Da	te 🕨	•							
Practitioner PIN Method Returns 0	nly—continue	bel	w							
Part III Certification and Authentication – Practitioner PIN M	lethod Only									
<b>ERO's EFIN/PIN.</b> Enter your six-digit EFIN followed by your five-digit self-se	elected PIN.	2	2		6 nter a	 	9	8	9	

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 >	s signature Date Date						
	st Retain This Form — See s Form to the IRS Unless						
For Paparwork Poduction Act Notico, see your tax re	turn instructions	PEV 01/14/23 PPO	Form 8879 (Bev. 01-2021)				

E <b>1040</b>		artment of the Treasury—Internal Revenue Servi S. Individual Income Tax		urn 20	22	OMB No. 1545	-0074	IRS Use	Only-	–Do not v	vrite or staple	e in this space.
Filing Status Check only one box.	lf yo	Single Married filing jointly	ame of y	ed filing separate vour spouse. If ye	,			,	,	spo	lifying su use (QSS) s name if t	)
Your first name	and m	iddle initial	Last na	me						Your so	cial secur	ity number
ANIRUDH	RAO		PONU	GOTI						752-	70-290	19
		s first name and middle initial	Last na									ecurity number
Home address	(numbe	er and street). If you have a P.O. box, see	instructio	ons			4	pt. no.	_	Procido	ntial Elect	ion Campaign
1221 E A								5039			here if you	
	-	ce. If you have a foreign address, also co	molete s	paces below.	Sta	te	ZIP c			spouse	if filing joi	ntly, want \$3
Tempe			inipiete e		AZ		852			0		. Checking a
Foreign country	/ name		1	oreign province/s				n postal c	ode		low will no x or refunc	0
r oreigh oounti	, name			oreigin province/s	tate/ooun	.y		in postal of	ouc	jeur iu	You	Spouse
Digital Assets		ny time during 2022, did you: (a) rec nange, gift, or otherwise dispose of a									Yes	X No
Standard		eone can claim: You as a de	-			a dependent	40001)	. (000 11	onu	0110110.)		
Deduction		Spouse itemizes on a separate retur	•	— ·								
Age/Blindness	You	: 🗌 Were born before January 2, 1	958	Are blind	Spouse	: 🗌 Was bor	rn befo	ore Janua	ary 2	, 1958	🗌 ls b	olind
Dependents	s (see	instructions):		(2) Social sec	curity	(3) Relationsh	nip <b>(4</b>	) Check tl	he bo	ox if quali	ifies for (see	e instructions):
lf more	(1) F	irst name Last name		number		to you		Child ta	ax cr	edit	Credit for o	ther dependents
than four								[				
dependents,								[				
see instructions and check	5							[				
here	]							[				
Income	1a	Total amount from Form(s) W-2, b	ox 1 (se	e instructions)						1a	1	64,994.
moonio	b	Household employee wages not re	eported	on Form(s) W-2						15	<b>b</b>	
Attach Form(s) W-2 here. Also	С	Tip income not reported on line 1a	a (see ins	structions) .						10	;	
attach Forms	d	Medicaid waiver payments not rep	orted o	n Form(s) W-2 (s	see instru	ctions)				10	ł	
W-2G and	е	Taxable dependent care benefits f	rom For	m 2441, line 26						16	•	
1099-R if tax was withheld.	f	Employer-provided adoption bene	fits from	n Form 8839, line	e 29 .					1f	•	
If you did not	g	Wages from Form 8919, line 6 .								19	1	
get a Form	h	Other earned income (see instruct	ions)							1h	n	0.
W-2, see instructions.	i	Nontaxable combat pay election (s	see instr	ructions)		<b>1</b> i	i					
	z	Add lines 1a through 1h								1z	2	64,994.
Attach Sch. B	2a	Tax-exempt interest	2a		b Ta	axable interes	t.			2b	<b>)</b>	
if required.	3a	Qualified dividends	3a		<b>b</b> O	rdinary divide	nds .			3b	<b>b</b>	
	4a	IRA distributions	4a		b T	axable amoun	t			4b	<b>b</b>	
Standard	5a	Pensions and annuities	5a		b T	axable amoun	t			5b	<b>b</b>	
Deduction for –	6a	Social security benefits	6a		b T	axable amoun	t			6b	)	
<ul> <li>Single or Married filing</li> </ul>	с	If you elect to use the lump-sum e	lection r	nethod, check h	nere (see	instructions)			. [			
separately, \$12,950	7	Capital gain or (loss). Attach Sche	dule D if	required. If not	required	, check here			. [	] 7		
Married filing	8	Other income from Schedule 1, lin	e 10							8		-9,500.
jointly or Qualifying	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7	, and 8.	This is your <b>tota</b>	l income	<b>ə</b>				9		55,494.
surviving spouse, \$25,900	10	Adjustments to income from Sche	dule 1, l	ine 26						10	)	
Head of	11	Subtract line 10 from line 9. This is	s your <b>a</b>	djusted gross ir	ncome					11		55,494.
household, \$19,400	12	Standard deduction or itemized	deduct	ions (from Sche	dule A)					12		12,950.
<ul> <li>If you checked</li> </ul>	13	Qualified business income deduct	ion from	Form 8995 or F	orm 899	5-A				13	3	
any box under Standard	14	Add lines 12 and 13								14	<u>ا</u> ا	12,950.
Deduction, see instructions.	15	Subtract line 14 from line 11. If zer	ro or les	s, enter -0 This	s is your <b>t</b>	axable incom	ne.			15		42,544.

For Disclosure, Privacy Act, and Paperwork Reduction Act Notice, see separate instructions.

Form **1040** (2022)

Form 1040 (2022	2)								Pa	age <b>2</b>
Tax and	16	Tax (see instructions). Check	if any from Form	(s): <b>1</b> 🗌 881	4 <b>2</b> 4972	3		16	4,97	/3.
Credits	17	Amount from Schedule 2, lin	e3					17		
	18	Add lines 16 and 17						18	4,97	/3.
	19	Child tax credit or credit for	other dependen	ts from Sched	ule 8812			19		
	20	Amount from Schedule 3, lin	e8					20		
	21	Add lines 19 and 20						21		
	22	Subtract line 21 from line 18	. If zero or less,	enter -0				22	4,97	/3.
	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	4,97	/3.
Payments	25	Federal income tax withheld								
,	а	Form(s) W-2				25a 7	,067.			
	b	Form(s) 1099				25b				
	с	Other forms (see instructions				25c				
	d	Add lines 25a through 25c	,					25d	7,06	57.
	26	2022 estimated tax payment						26		-
If you have a qualifying child,	27	Earned income credit (EIC)				27				-
attach Sch. EIC.	28	Additional child tax credit fror				28				
	29	American opportunity credit				29		-		
	30	Reserved for future use .		-		30				
	31	Amount from Schedule 3, lin				31		-		
	32	Add lines 27, 28, 29, and 31						32		
	33	Add lines 25d, 26, and 32. T	,	•	-			33	7,06	57.
Defined	34	If line 33 is more than line 24						34	2,09	
Refund	35a	Amount of line 34 you want	-			, .		35a	2,09	
Direct deposit?	b	Routing number 0 4 4					Savings			
See instructions.		Account number 5 9 0					ournigo			
	36	Amount of line 34 you want a			ed tax	36				
Amount	37	Subtract line 33 from line 24								
You Owe	57	For details on how to pay, ge						37		
	38	Estimated tax penalty (see in	-			38		0.		
Third Party		you want to allow another								
Designee		structions	•				omplete l	below.	X No	
<b>J</b>	De	signee's		Phone			onal identi	fication		
	na	nē		no.		num	ber (PIN)			
Sign		der penalties of perjury, I declare t								
Here		ief, they are true, correct, and com	plete. Declaration of		1	ased on all informati		• •		•
	Yo	ur signature		Date	Your occupation				nt you an Identity PIN, enter it here	
Joint return?					SOFTWARE :	ENGINEER		inst.)		
See instructions.	Sp	ouse's signature. If a joint return, <b>k</b>	ooth must sign.	Date	Spouse's occupat		If the	e IRS se	nt your spouse an	ـــــــــــــــــــــــــــــــــــــ
Keep a copy for	- 1-	,	5				Iden	tity Prot	ection PIN, enter i	
your records.							(see	inst.)		
		one no. (216)703-001		Email address	PANIRUDHRAC	042@GMAIL.CO	DM			
Paid	Pre	eparer's name	Preparer's signat	ure		Date	PTIN		Check if:	
Preparer	SYAM	PRIYA RAM SAGAR GUPTA TALLAM	SYAM PRIYA	RAM SAGAR	GUPTA TALLAM	01/24/2023	P0208	2703	Self-employ	yed
Use Only	Fir	m's name GLOBAL TAX	XES LLC				Pho	ne no.	(678)965-95	522
	Fir	m's address 245 ROONE	Y CT E BRU	NSWICK N	J 08816		Firm	's EIN	88-21454	<u>187</u>
Go to www.irs.ge	ov/Form	n1040 for instructions and the late	st information.		BAA	REV 01/14/23 PRO			Form <b>1040</b>	(2022)

SCHEDUL	.E 1
(Form 1040	))

Department of the Treasury

# Additional Income and Adjustments to Income

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

OMB No. 1545-0074 2 2

Department of the Treasury Internal Revenue Service	Go to www.irs.gov/Form1040 for instructions and the latest information.		Attachment Sequence No. <b>01</b>
Name(s) shown on Fo	rm 1040, 1040-SR, or 1040-NR	Your soc	ial security number
ANIRUDH RAO PO	NUGOTI	752-70	-2909
Part   Additio	anal Incomo		

Par	T Additional income			
1	Taxable refunds, credits, or offsets of state and local income taxes		. 1	
2a	Alimony received			
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			-9,500.
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	_	
I	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			
		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 (		
t	Pension or annuity from a nonqualifed deferred compensation plan or			
	a nongovernmental section 457 plan	8t	_	
	Wages earned while incarcerated	8u	_	
Z	Other income. List type and amount:			
•	Tatal attanting and Add lines On thus use On	8z		
9	Total other income. Add lines 8a through 8z			0 500
10	Combine lines 1 through 7 and 9. Enter here and on Form 1040, 1040-SR	k, or 1040-NR, line	8 10	-9,500.

For Paperwork Reduction Act Notice, see your tax return instructions.

Schedule 1 (Form 1040) 2022

Parl	II Adjustments to Income					
11	Educator expenses				11	
12	Certain business expenses of reservists, performing artists, and fee			vernmer	nt 🗌	
	officials. Attach Form 2106				12	
13	Health savings account deduction. Attach Form 8889					
14	Moving expenses for members of the Armed Forces. Attach Form 3903				14	
15	Deductible part of self-employment tax. Attach Schedule SE					
16	Self-employed SEP, SIMPLE, and qualified plans					
17	Self-employed health insurance deduction				17	
18	Penalty on early withdrawal of savings					
19a	Alimony paid					
b	Recipient's SSN					
	Date of original divorce or separation agreement (see instructions):				-	
20	IRA deduction					1
21	Student loan interest deduction					
22	Reserved for future use					
23	Archer MSA deduction				23	
24	Other adjustments:					
		24a				
	Deductible expenses related to income reported on line 8l from the				_	
		24b				
С	Nontaxable amount of the value of Olympic and Paralympic medals				_	
•	and USOC prize money reported on line 8m	24c				
d		24d				
	Repayment of supplemental unemployment benefits under the Trade				_	
Ū	Act of 1974	24e				
f	Contributions to section 501(c)(18)(D) pension plans	24f			_	
	Contributions by certain chaplains to section 403(b) plans	24g				
	Attorney fees and court costs for actions involving certain unlawful				_	
	discrimination claims (see instructions)	24h				
i	Attorney fees and court costs you paid in connection with an award				_	
•	from the IRS for information you provided that helped the IRS detect					
	tax law violations	24i				
i	Housing deduction from Form 2555	24j				
	Excess deductions of section 67(e) expenses from Schedule K-1 (Form					
		24k				
z	Other adjustments. List type and amount:				_	
_		24z				
25	Total other adjustments. Add lines 24a through 24z				25	
26	Add lines 11 through 23 and 25. These are your <b>adjustments to income</b>					
	Form 1040 or 1040-SR, line 10, or Form 1040-NR, line 10a					
	BAA		01/14/23			ule 1 (Form 1040) 202

SCHEDULE	Ε
(Form 1040)	

Department of the Treasury Internal Revenue Service

## **Supplemental Income and Loss**

OMB No. 1545-0074

(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.

<u>2</u> 0 <b>22</b>
Attachment Sequence No. <b>13</b>

Name(s) shown on return Your social security number ANIRUDH RAO PONUGOTI 752-70-2909 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 . X No Α . . . . Yes В If "Yes," did you or will you file required Form(s) 1099? Yes No . . . . . . . . . . . . . . 1a Physical address of each property (street, city, state, ZIP code) Α В С 1b Type of Property **Fair Rental** Personal Use 2 For each rental real estate property listed QJV (from list below) above, report the number of fair rental and Davs Davs personal use days. Check the QJV box only Α 3 Α 365 0 if you meet the requirements to file as a В В qualified joint venture. See instructions. С С Type of Property: 1 Single Family Residence 3 Vacation/Short-Term Rental 7 Self-Rental 5 Land 8 Other (describe) 2 Multi-Family Residence 4 Commercial 6 Royalties **Properties:** Α В С Income: 3 3 500. Rents received . 4 Royalties received 4 **Expenses:** 5 5 Advertising 6 Auto and travel (see instructions) 6 800. 7 Cleaning and maintenance . 7 8 Commissions 8 9 9 Insurance . . 10 10 Legal and other professional fees Management fees . . . . . . . . 11 11 500. 12 Mortgage interest paid to banks, etc. (see instructions) 12 13 13 Other interest . . . . . 2,800. 14 14 Repairs . . . 2,500. 15 Supplies 15 . . . . 16 16 Taxes 17 Utilities . . . . . . . 17 3,400. 18 18 Depreciation expense or depletion . . . . . . . . 19 19 Other (list) 20 20 10,000. Total expenses. Add lines 5 through 19 . . . . . 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 21 -9,500. 22 Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions) . . . . . . . . . . 9,500.) 22 500. 23a Total of all amounts reported on line 3 for all rental properties 23a Total of all amounts reported on line 4 for all royalty properties 23b b Total of all amounts reported on line 12 for all properties 23c С Total of all amounts reported on line 18 for all properties 23d d 10,000. Total of all amounts reported on line 20 for all properties 23e е 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 9,500. 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

For Paperwork Reduction Act Notice, see the separate instructions.

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

26

-9,500.





ANIRUDH	RAO	PONUGOTI

AZ 85281

1221	Е	APACHE	BLVD	APT	5039
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TEMPE

SSN - You PONT	J	752702909	Vendor ID 1555	Х	xxxx <b>ヿ</b>
SSN - Spouse					
Fed Adj Gross Income (FAGI)	1.	55494.	Withholding (VA) - You	19A.	3171.
Additions	2.		Withholding (VA) - Spouse	19B.	
Subtotal	3.	55494.	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.	3171.
Total VA Adj Gross Income (VAGI)	9.	55494.	Tax You Owe	27.	
Itemized Deductions - VA Sch A	10.		Tax Overpayment	28.	751.
Standard Deduction	11.	8000.	Overpayment Credited to Next N	fear 29.	
Exemptions	12.	930.	VAC - Virginia 529 / ABLE	30.	
Deductions	13.		VAC - Other Contributions	31.	
Subtotal (Deductions & Exemption	is) 14.	8930.	Addition to Tax, Penalty & Intere	est 32.	
VA Taxable Income	15.	46564.	Sales and Use Tax	33.	
Amount of Tax	16.	2420.	Amount You Owe Will Pay by Credit/Debit Card	N	
Spouse Tax Adjustment (STA)	17.		Your Refund		751.
VAGI - Spouse	17A.		Bank Routing #	 c	044000037
Net Amount of Tax	18.	2420.	Bank Account #	590388	

Г

752702909





Filing Status, Age	& License	e Information			Additio	onal Filing Info	ormation
Filing Status				1	Locality		810
Federal Head of I	Household				Uninsured & Authorize DI	MAS	
DOB - You		010	5199	7	Name or Filing Status Ch	lange	
VA Driver's Licen	se ID - You				Address Change		
VA Driver's Licen	se - Iss. Da	te - You			VA Return Not Filed Last	Year	
Spouse Name (F	iling Status	3 Only)			Dependent on Another's	Return	
					Farmer / Fisherman / Me	erchant Seaman	
DOB - Spouse					Amended		
VA Driver's Licen					Reason Code		
VA Driver's Licen	se - Iss. Da	te - Spouse			Overseas on Due Date		
<b>xemptions (A)</b> You	1	Exemptions (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	e Indicator	Х
		Total (B)			Obtain Electronic 10990	3	
		Contact Information			ID Theft PIN		
. , .		er penalty of law that I (we) have e			t of my (our) knowledge, it is a true, c on provided is for a domestic accoun	-	al jurisdiction of the United States.
lignature - You			Date		Phone - You		2167030012
ignature - Spouse _			Date		Phone - Spouse		
ignature - Preparer _	SYAM PRIY	<u>A RAM SAGAR GUPTA TALLAM</u>	Date	012423	Phone - Preparer		6789659522
·	•	s my/our return with my/our p	eparer.	GLOBA	Preparer Information L TAXES LLC	7	P02082703
	by May 1	, 2023		245 0	OONEY CT		

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

245 ROONEY CT E BRUNSWICK

# **2022 Schedule INC/CG** 752702909

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

ANIRUDH RAO PONUGOTI



Your/ Spouse SSN	Withholding Type	VA Withholding	Employer FEIN	VA Account Number	VA Wages, tips, other comp.
Г					Г
752702909	W	3171.	851964610	30851964610F001	64994.

Total VA Withholding	SSN	VA Withholding
You	752702909	3171.
Spouse		
Total # of W-2s,1099s & VK-1s	01	

To avoid delays - be sure to enter all information, including the Employer's FEIN.

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# Virginia Individual Income Tax e-File Signature Authorization

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

Virginia Submission Identificat	tion Number (SID)					
Your Name		B Your Social Sec				
ANIRUDH RAO PONUGO: Spouse's Name	TI	752–70–29 A Spouse's Socia				
Spouse s Name						
Part I Tax Return Infor		A Spouse	B Yourself			
,	ncome (Form 760CG, Line 1; 760PY, Line 1, columns A & B; Form 763, Line 1)		55494.			
<ol><li>Virginia Adjusted Gross In</li></ol>	ncome (Form 760CG, Line 9; 760PY, Line 10, columns A & B; Form 763, Line 9)		55494.			
3. Taxable Income (Form 76	60CG, Line 15; 760PY, Line 16, columns A & B; Form 763, Line 17)		46564.			
4. Virginia Income Tax (Forn	m 760CG, Line 18; 760PY, Line 17, columns A & B; Form 763 Line 18)		2420.			
5. Withholding (Form 760CG	G, Line 19a & 19b; 760PY, Lines 19a & 19b; Form 763, Lines 19a & 19b)		3171.			
6. Amount you Owe (Form 7	760CG, Line 35; Form 760PY, Line 35; Form 763, Line 35)					
7. Refund (Form 760CG, Lin	ne 36; 760PY, Line 36; Form 763, Line 36)		751.			
	axpayer and Signature Authorization lare that I have examined a copy of my individual income tax return and accompanying					
Return Originator (ERO), Transm number) and the amount shown filing a balance due return, I under liable for the tax liability and all a Virginia Tax. I have selected a p refund or direct debit of my tax du	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					
Taxpayer's e-File PIN: check o						
I authorize the ERO name	ed below to enter my e-File PIN 0 2 9 0 9 as my signature on my 2022 e Do not enter all zeros	-filed Virginia individual inc	ome tax return.			
GLOBAL TAXES						
<b>—</b>	ERO Firm Name					
	as my signature on my 2022 e-filed Virginia individual income tax return. Check this b sing the Practitioner PIN method. The ERO must complete Part III below.	box only if you are entering	your own e-File PIN			
Your Signature	Date					
Spouse's e-File PIN: check one	e box only					
I authorize the ERO name	ed below to enter my e-File PIN as my signature on my 2022 e Do not enter all zeros	-filed Virginia individual inc	ome tax return.			
	ERO Firm Name					
I will enter my e-File PIN a PIN and your return is file	as my signature on my 2022 e-filed Virginia individual income tax return. Check this b ed using the Practitioner PIN method. The ERO must complete Part III below.	box only if you are entering	your own e-File			
Spouse's Signature	Date					
Part III Certification and	d 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	Date01-	-24-23				
1555	REV 01/10/23 PRO	[	/A 9970 (DE\/ 0/22)			