#### **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 sec	urity number	r
NAITIK UTTAMCHANDRA BANKER		23-5247	
Spouse's name		social securi	ty number
TEJAL MAGANBHAI PARMAR		90-0396	
Part I Tax Return Information — Tax Year Ending December 31, 2022 (Ente	r year you	are auth	orizing.)
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	40 550
1 Adjusted gross income		1	1,468.
2 Total tax		2	
3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3	2,186.
4 Amount you want refunded to you		4	718.
5 Amount you owe	koon n o	5 on of vo	ur return)
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 amended under penalties of perjury, I declare that I have examined a copy of the income tax return (original or amended under the company to the amounts in Part Labor	кеер а с	opy or yo	and to the hest of
return (original or amended) I am now authorizing. I consent to allow my intermediate service protect, retains to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejector any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the Usagent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account ind payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation requisioness days prior to the payment (settlement) date. I also authorize the financial institutions involved in the 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) I a	icated in the on to debit I e the authouests must processing	e tax prepar the entry to rization. To be received of the elec- further acknowledge.	ration software for this account. This revoke (cancel) a d no later than 2 tronic payment of
Electronic Funds Withdrawal Consent.	Γ		
Taxpayer's PIN: check one box only  Taxpayer's PIN: check one box only  to enter or generate	my PIN	3 5 2	as my
X lauthorize GLOBAL TAXES LLC to enter or generate		Enter five dig don't enter a	
the income tay 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 n if you are entering your own PIN and your return is filed using the Practitioner PIN meth below.  Your signature ▶ Date ▶	100		complete Part III
	-		
Spouse's PIN: check one box only		0 0 3 Enter five dig don't enter a	ill zeros
signature on the income tax return (original or arriented) I arrive addictionally.  I will enter my PIN as my signature on the income tax return (original or amended) I am not if you are entering your own PIN and your return is filed using the Practitioner PIN methodology.			
Tesen Date >	MB	103	12023
		103	(000)
Practitioner PIN Method Returns Only Continue Service			
Part III Certification and Authentication — Practitioner PIN Method Only		TIT	
ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN. 2 2	2   4   9	enter all zero	1 9 8 9
I certify that the above numeric entry is my PIN, which is my signature for the electronic individual income to authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am submathorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am submathorized the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers of In	ax return (or nitting this r ndividual Ind	riginal or an eturn in acc come Tax R	nended) I am now cordance with the eturns.
Date ▶			
ERO's signature ► ERO Must Retain This Form — See Instructions			
Don't Submit This Form to the IRS Unless Requested To I	Do So		

#### 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. Filing Status Single Married filing jointly Married filing separately (MFS) Head of household (HOH) Qualifying surviving If you checked the MFS box, enter the name of your spouse, If you checked the HOH or QSS box, enter the child's name if the qualifying Check only one box. person is a child but not your dependent; Your social security number Last name Your first name and middle initial 178-23-5247 BANKER NAITIK UTTAMCHANDRA Spouse's social security number If joint return, spouse's first name and middle initial Last name 983-90-0396 PARMAR TEJAL MAGANBHAI Presidential Election Campaign Apt. no. Home address (number and street), If you have a P.O. box, see instructions, Check here if you, or your 304 spouse if filing jointly, want \$3 2168 EVANS CT 7IP code City, town, or post office, if you have a foreign address, also complete spaces below. to go to this fund. Checking a box below will not change 22043 VA FALLS CHURCH your tax or refund. Foreign postal code Foreign province/state/county Foreign country name Spouse You At any time during 2022, did you: (a) receive (as a reward, award, or payment for property or services); or (b) sell, Digital exchange, gift, or otherwise dispose of a digital asset (or a financial interest in a digital asset)? (See instructions.) X No Assets Your spouse as a dependent Standard Spouse itemizes on a separate return or you were a dual-status alien Deduction Spouse: Was born before January 2, 1958 ☐ Is blind Age/Blindness You: Were born before January 2, 1958 Are blind (4) Check the box if qualifies for (see instructions): (3) Relationship (2) Social security Dependents (see instructions): Credit for other dependents to you Child tax credit number (1) First name Last name If more than four dependents, see instructions and check here 45,900. Total amount from Form(s) W-2, box 1 (see instructions) . Income 1b Household employee wages not reported on Form(s) W-2. b 1c Tip income not reported on line 1a (see instructions) . . . . . . Attach Form(s) C 1d W-2 here, Also Medicaid waiver payments not reported on Form(s) W-2 (see instructions) d attach Forms 1e Taxable dependent care benefits from Form 2441, line 26 W-2G and 1f Employer-provided adoption benefits from Form 8839, line 29 1099-R if tax was withheld. 1g Wages from Form 8919, line 6 . . . If you did not 0. 1h Other earned income (see instructions) . get a Form h 1i Nontaxable combat pay election (see instructions) W-2 see 45,900. instructions. 1z Add lines 1a through 1h z 2b **b** Taxable interest 2a Tax-exempt interest . Attach Sch. B 2a 3b b Ordinary dividends . 3a Qualified dividends . . if required. 3a 4b b Taxable amount . . 4a IRA distributions . . . 4a 5b b Taxable amount. Pensions and annuities . 5a 5a Standard 6b

separately \$12,950 Married filing iointly or Qualifying surviving spou 10 \$25,900 · Head of

7 8

9

11

12

13

14

Deduction for-

Single or Married filing

household, \$19,400 If you checked any box under Standard Deduction see instructions

6a	Social security benefits 6a Braxas								-		
C	If you elect to use the lump-sum election method, check here (see instr	ruct	ion	s)					Ц		
7	Capital gain or (loss). Attach Schedule D if required. If not required, che	eck	her	е				,	$\Box$	7	
8	Other income from Schedule 1, line 10									8	-5,350.
_	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income.									9	40,550.
9	Adjustments to income from Schedule 1, line 26									10	
0	Subtract line 10 from line 9. This is your adjusted gross income									11	40,550.
1	Subtract line 10 from line 9. This is your adjusted gross income									12	25,900.
2	Standard deduction or itemized deductions (from Schedule A) .			٠	•	*			•	13	23/300.
3	Qualified business income deduction from Form 8995 or Form 8995-A					٠	٠			44	25 222

b Taxable amount . .

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

Carlel acquirity booglite

6a

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

Form 1040 (2022)

25,900.

14,650.

15

Form 1040 (2022	3			Page 2
Tax and	16	Tax (see instructions). Check if any from Form(s): 1 8814 2 4972 3	16	1,468.
Credits	17	Amount from Schedule 2, line 3	17	
Credits	18	Add lines 16 and 17	18	1,468.
	19	Child tax credit or credit for other dependents from Schedule 8812	19	
		Amount from Schedule 3, line 8	20	
	20	Add lines 19 and 20	21	
	21	Subtract line 21 from line 18. If zero or less, enter -0-	22	1,468.
	22	Other taxes, including self-employment tax, from Schedule 2, line 21	23	0.
	23	Add lines 22 and 23. This is your total tax	24	1,468.
	24	Federal income tax withheld from:		
Payments	25	2 186		
	a	Form(s) vv-2		
	b	Form(s) 1099		
	С	Other forms (see instructions)	25d	2,186.
	d	Add lines 25a through 25c	26	
If you have a	26	2022 estimated tax payments and amount applied from 2021 return	20	
qualifying child, attach Sch. EIC. [	27	Earned income credit (EIC)		
attach Sch. Elo.	28	Additional child tax credit from Schedule 6612		
	29	American opportunity credit from Form 8863, line 8		
	30	Reserved for future use		
	31	Amount from Schedule 3, line 15	32	
	32	Add lines 27, 28, 29, and 31. These are your total other payments and refundable credits	33	2,186.
	33	Add lines 25d, 26, and 32. These are your total payments	34	718.
Refund	34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid	35a	718.
riciana	35a	Amount of line 34 you want refunded to you. If Form 8888 is attached, check here	334	
Direct deposit?	b	Routing number 2 1 1 3 9 1 8 2 5 c Type: X Checking Savings		
See instructions.	d	Account number 4 6 6 4 9 1 0 9		
	36	Amount of line 34 you want applied to your 2023 estimated tax		
Amount	37	Subtract line 33 from line 24. This is the amount you owe.	37	
You Owe		For details on how to pay, go to www.irs.gov/Payments or see instructions	31	
	38	Estimated tax penalty (see instructions)		
Third Party	Do	you want to allow another person to discuss this return with the IRS? See	elow	X No
Designee	ins	tructions		
	Des	signee's number (PIN)	igation.	
	_	this are and accompaning schedules and statements and to	the best	of my knowledge and
Sign	Un	der penalties of perjury. I declare that I have examined this return and accompanying scriedules and statements lef, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which	preparer	has any knowledge.
Here		Date Your occupation If the	IRS sent	you an Identity
	(1)	10 LTU 12/2023	_	, enter it here
Joint return?	1	PROCORDINAT AND INVENTOR		your spouse an
See instructions.	Spo	ouse's signature if a joint return, both must sign.   Date   Spouse's occupation		tion PIN, enter it here
Keep a copy for your records.	_	63/03/7023 HOME MAKER (see	nst.)	
you ,		Email address PANKEDNAITIK928GMAIL.COM		,
	_	Date PTIN	(	Check if:
Paid	PTE	PREPARE'S NAME PREPARE'S SIGNATURE FRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA RAM SAGAR GUPTA TALLAM 02/26/2023 P02082	2703	Self-employed
Preparer		Phon	e no. (6	78) 965-9522
Use Only	-	Fim'	s EIN	84-3171965
220 21)	Firm	n's address 245 ROONEY CT E BRUNSWICK NO 00010 1040 for instructions and the latest information.  BAA REV 02/24/23 PRO		Form 1040 (2022)

#### SCHEDULE 1 (Form 1040)

Department of the Treasury

Internal Revenue Service

Additional Income and Adjustments to Income

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

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

OMB No. 1545-0074

2022

Attachment Sequence No. 01

Name(s) shown on Form 1040, 1040-SR, or 1040-NR N BANKER & T PARMAR Your social security number

178-23-5247

Part I Additional Income Taxable refunds, credits, or offsets of state and local income taxes . . . 1 Date of original divorce or separation agreement (see instructions): 3 Business income or (loss). Attach Schedule C . . . . . . . . . . . . . . . 4 -5,350. Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E . 5 Farm income or (loss). Attach Schedule F. . . . . . . 7 8 Other income: 8a a Net operating loss . . 8b b Gambling 8c d Foreign earned income exclusion from Form 2555 . . 80 8f 89 g Alaska Permanent Fund dividends . . . . . . . . . 8h 8i I Income from the rental of personal property if you engaged in the rental 81 for profit but were not in the business of renting such property . . . m Olympic and Paralympic medals and USOC prize money (see 8m 8n n Section 951(a) inclusion (see instructions) 80 o Section 951A(a) inclusion (see instructions) . . . . . . . . . . . p Section 461(I) excess business loss adjustment . . . . . . . . q Taxable distributions from an ABLE account (see instructions) . . . Scholarship and fellowship grants not reported on Form W-2 . . . 8r s Nontaxable amount of Medicaid waiver payments included on Form 88 t Pension or annuity from a nonqualifed deferred compensation plan or 8t 8u Other income. List type and amount: Total other income. Add lines 8a through 8z . . . . . Combine lines 1 through 7 and 9. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 8 -5,350.

Par	Adjustments to Income	
11	Educator expanses	11
12	Octain business expenses of reservists, performing artists, and tee-basis government	10
12	co. 1 August Form 2106	12
13	Use the sovings account deduction Attach Form 8889	13
14	Maying expenses for members of the Armed Forces, Attach Form 3903	14
15	Deductible part of self-employment tax. Attach Schedule SE	15
16	Solf amplayed SEP SIMPLE and qualified plans	16
17	Salf-employed health insurance deduction	17
18	Penalty on early withdrawal of savings	18
19a	Alimony paid	19a
b	Recipient's SSN	
C	Date of original divorce or separation agreement (see instructions):	00
20	IRA deduction	20
21	Student loan interest deduction	21
22	Reserved for future use	22
23	Archer MSA deduction	23
24	Other adjustments:	
а	Jury duty pay (see instructions)	
b	Deductible expenses related to income reported on line 8I from the	
D	rental of personal property engaged in for profit	
С	Nontavable amount of the value of Olympic and Paralympic medals	
	and USOC prize money reported on line 8m	-
d	Referestation amortization and expenses	
9	Repayment of supplemental unemployment benefits under the Trade	
	Act of 1974	
f	Contributions to section 501(c)(18)(D) pension plans	
	Contributions by certain chaplains to section 403(b) plans	
h	Attorney fees and court costs for actions involving certain unlawful	
	discrimination claims (see instructions)	
i	Attorney fees and court costs you paid in connection with an award	
	from the IRS for information you provided that helped the IRS detect	
	tax law violations	
i	Housing deduction from Form 2555	
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form	
	1041)	
z	Other adjustments. List type and amount:24z	
	242	25
25	Total other adjustments. Add lines 24a through 24z	
26	Those are vour adjustments to income, cities like and on	26
	Form 1040 or 1040-SR, line 10, or Form 1040-NR, line 10a	Schedule 1 (Form 1040) 2022
	BAA REV 02/24/23 PRO	Scriedale i (Form 10-10) 2022

#### SCHEDULE E (Form 1040)

#### **Supplemental Income and Loss**

(From rental real estate, royalties, partnerships, S corporations, estates, trusts, REMICs, etc.)

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service

Attach to Form 1040, 1040-SR, 1040-NR, or 1041. Go to www.irs.gov/ScheduleE for instructions and the latest information.

Name(s) shown on return

Your social security number

Note:   Note	NB	ANKER & T PARMAR						178-2	23-5247	
Note: If you are in the business of relating personal property, use Schedule C. See instructions. If you are an individual, report in related income or loss from Form 483s or page 2, time 40.  A Did you make any payments in 2002 that would require you to file Form(s) 1099? See instructions.		Income or Loss From Rental Real Estat	e and R	oyalties						
A   Did you make amp payments in 2022 that would require you to file Form(s) 10997   See instructions   Yes   No   No   Yes   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes   No   Yes		Note: If you are in the business of renting personal n	toperty us	se Schedu	le C. Se	e instr	uctions. If you	are an ind	ividual, rep	ort farm
Type of Property   Type of T		rental income or loss from Form 4835 on page 2, line	e 40.	= (-)	10000	Capir	etrictions		□ Ve	s X No
Physical address of each property (street, city, state, ZIP code)	A	Did you make any payments in 2022 that would require	you to file	e Form(s)	10997	266 11	istructions .		□ Y6	s No
A B/2 VALLABHANAGER SOCIETY WAGHODIYA ROAD  B    C   C	В	If "Yes," did you or will you file required Form(s) 10997								
B C D Type of Property (from list below) A 3 B	1a	Physical address of each property (street, city, state	e, ZIP cod							
B C   Type of Property   Type of Property   Type of Property   Standard Book, export the number of fair rental and above, report the number of fair rental rental estate and report to fair rental rental estate properties and a fair rental rent	Α	B/2 VALLABHANAGER SOCIETY WAGHODIYA	ROAD	VADO	DARA,	GUJI	ARAT IN 3	90019		
C   1b Type of Property (from list below)   2   For each rental real estate property listed above, report the number of fair rental and personal use days. Check the QJV box only if you meet the requirements to file as a qualified joint venture. See instructions.  Type of Property: 1   Single Family Residence 2   Multi-Family Residence 3   A   Commercial 5   Land 6   Royalties 7   Self-Rental 8   Other (describe)    Income: 3   Rents received 4   Commercial 5   Land 6   Royalties 7   Self-Rental 8   Other (describe)    September   A   B   C   C   C   C   C   C   C   C   C	_									
Type of Property   2										
trom list below) above, report the number of fair rental and personal use days. Check the QJV box only if you meet the requirements to file as a qualified joint venture. See instructions.    C		Type of Property 2 For each rental real estate p	roperty lis	sted		F				QJV
A   3	110	(from list below) above, report the number of	fair renta	land				Da		
R	Α						365		U	
C   C   C   C   C   C   C   C   C   C	В				_	-				
1 Single Family Residence 2 Multi-Family Residence 4 Commercial 5 Land 7 Seff-Hental 8 Other (describe)	С	qualified joint veriture. See it	ISU de l'Or		С					
1 Single Family Residence 2 Multi-Family Residence 3 Vacation/Short-Term Rental 6 Royalties 8 Other (describe)    Nulti-Family Residence 4 Commercial 6 Royalties 8 Other (describe)	Type	of Property:								
Multi-Family Residence	1	Single Family Residence 3 Vacation/Short-Term	Rental							
Rents received	2	Multi-Family Residence 4 Commercial		6 Roya	alties	8	Other (descr	ibe)		
Rents received				T			Propertie	es:		
Rents received   3   652					Δ		В			C
Rents received			2			52.				
Advertising 5 Advertising 6 Auto and travel (see instructions) 6 9 Insurance 7 Cleaning and maintenance 8 Commissions 8 9 Insurance 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9										
Advertising Auto and travel (see instructions) Cleaning and maintenance Commissions Insurance ILegal and other professional fees ILegal and maintenal estate and professional fees ILegal and other professional fees ILegal and o			4							
Auto and travel (see instructions)			5							
7 Cleaning and maintenance 7 924.  8 Commissions 8 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9		Advertising	6							
10		Auto and travel (see instructions)	7		9:	24.				
Nortgage Interest paid to banks, etc. (see instructions)   10										
Management fees										
11   Management fees		Insurance								
Mortgage Interest paid to banks, etc. (see instructions)  12		Legal and other professional fees	11		1.03	33.				
13 Other interest		Management tees	c) 12							
14 1, 265.  15 Supplies										
15 Supplies					1.26	55.				
15 Supplies		Repairs				_				
17 Utilities					-					
Depreciation expense or depletion		laxes	-		1,53	36.				
19 Other (list)  Total expenses. Add lines 5 through 19		Utilities	_							
Total expenses. Add lines 5 through 19										
Subtract line 20 from line 3 (rents) and/or 4 (royalties). If result is a (loss), see instructions to find out if you must file Form 6198		Other (list)	. 20		6,00	2.				
result is a (loss), see instructions to find out if you must file Form 6198		Total expenses. Add lines 3 through to	. If							
file Form 6198	21	Subtract line 20 from line 3 (rents) and of 4 (royaltes)	ust							
Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions)		file Form 6198	. 21		-5,35	0.				
on Form 8582 (see instructions)	00	Deductible rental real estate loss after limitation, if ar	ny,							
Total of all amounts reported on line 3 for all rental properties	22	on Form 8582 (see instructions)	. 22	(	5,350	0.)(		)(		)
to Total of all amounts reported on line 4 for all royalty properties	000	Total of all amounts reported on line 3 for all rental pro	operties			23a		652.		
total of all amounts reported on line 12 for all properties		Total of all amounts reported on line 4 for all royalty p	roperties		[	23b				
total of all amounts reported on line 18 for all properties		Total of all amounts reported on line 12 for all properti	ies			23c				
Total of all amounts reported on line 20 for all properties		Total of all amounts reported on line 18 for all properti	ies		[	23d				
Income. Add positive amounts shown on line 21. Do not include any losses		Total of all amounts reported on line 20 for all properti	ies			23e	6,	002.		
Losses. Add royalty losses from line 21 and rental real estate losses from line 22. Enter total losses from line 25. Enter the result  Total rental real estate and royalty income or (loss). Combine lines 24 and 25. Enter the result  Total rental real estate and royalty income or (loss). Combine lines 24 and 25. Enter the result  and rental real estate and royalty income or (loss). Combine lines 24 and 25. Enter the result		Add a siting amounts shown on line 21. Do	not inclu	de any los	ses .			24		
Total rental real estate and royalty income or (loss). Combine lines 24 and 25. Enter the result		Add royalty losses from line 21 and rental real e	state losse	es trom line	8 22. En	ter to	tal losses here	-	5	350.)
II III IV I III O AN ON DOME Y NO HOLI ADDIV 10 VOIL ADDI CITICI UID ALTOUR ON			s). Combi	ne lines 2	4 and 2	25. Er	iter the result			
-5, 350	20	II III IV I Ima 40 on page 7 00 0	OL SDDIV	io vou, a	ISO CITE	CI LIII	3 dillouit on			
Schedule 1 (Form 1040), line 5. Otherwise, include this amount in the total of this of the second of		Schedule 1 (Form 1040), line 5. Otherwise, include this	s amount	in the tota	al on lin	e 41 d	on page 2 .	26		5,350.

## 2022 VA760CG Page 1



NAITIK UTTAM BANKER TEJAL MAGANB PARMAR 2168 EVANS CT APT 304





FALLS CHURCH	VA 22043			
SSN-You BANK	178235247	Vendor ID 1555	XXX	xxx 7
SSN-Spouse PARM	983900396			
Fed Adj Gross Income (FAGI)	40550.	Withholding (VA) - You	19A.	2036.
Additions	2.	Withholding (VA) - Spouse	19B.	
Subtotal	3. 40550.	Estimated Payments	20.	
Age Deduction - You 4	Α.	2021 Overpayment	21.	
Age Deduction - Spouse 4	В.	Extension Payments	22.	
Soc Sec & Tier 1 Railroad	5.	Credit - Low-Income or EIC	23.	
State Income Tax Overpayment	3.	Credit - Schedule OSC	24.	
Subtractions	7.	Credits - Schedule CR	25.	
Subtotal Subtractions	В.	Total Payments / Credits	26.	2036.
Total VA Adj Gross Income (VAGI)	9. 40550.	Tax You Owe	27.	
Itemized Deductions - VA Sch A	10.	Tax Overpayment	28.	989.
Standard Deduction	16000.	Overpayment Credited to Next Year	29.	
Exemptions	1860.	VAC - Virginia 529 / ABLE	30.	
Deductions	13.	VAC - Other Contributions	31.	
Subtotal (Deductions & Exemptions)	17860.	Addition to Tax, Penalty & Interest	32.	
VA Taxable Income	22690.	Sales and Use Tax	33.	
Amount of Tax	6. 1047.	Amount You Owe		
Spouse Tax Adjustment (STA)	7.	Will Pay by Credit/Debit Card N Your Refund	1	989.
VAGI - Spouse 17	Α.			211201005
Net Amount of Tax 1	8. 1047.	Bank Routing #	C	211391825
1		Bank Account #	46649109	

\_LAR \_\_DLAR \_\_DTD \_\_LTD \$\_

Page 1 of 2

File by May 1, 2023

Include Page 1, Page 2 and all

supporting 760CG documents.

1555 REV 02/17/23 PRO





1					
Filing Status, Age &	License Information	1		Additional Filing Information	
Filing Status			2	Locality	059
Federal Head of Ho	ousehold			Uninsured & Authorize DMAS	
DOB - You		012919	92	Name or Filling Status Change	
VA Driver's License	e ID - You	E624453	302	Address Change	
VA Driver's License	e - Iss. Date - You	011020	122	VA Return Not Filed Last Year	
Spouse Name (Filin	ng Status 3 Only)			Dependent on Another's Return	
		111210	0.2	Farmer / Fisherman / Merchant Seaman	
DOB - Spouse		111319	193	Amended	
VA Driver's License				Reason Code	
VA Driver's License	e - Iss. Date - Spouse			Overseas on Due Date	
Exemptions (A) You	1 65 &	ons (B) Over - You		Federal EIC & Amount	
Spouse	1 65 &	Over - Spouse		Deceased Indicator	
Dependents	Blind	- You		Form 760C or 760F	
Total (A)	2 Blind	- Spouse		No Sales & Use Tax Due Indicator	Х
	Total	(B)		Obtain Electronic 1099G	
				ID Theft PIN	
t (We), the undersigned, of deposit of your refund by	te dare under nenally of law t	nformation hat I (we) have examined in your return, you are ce	d this return & to the be rtifying that the informa	st of my (our) knowledge, it is a true, correct & complete return. If you a ion provided is for a domestic account within the territorial jurisdiction	are requesting direct of the United States.
Signature - You		Date		Phone - You	1000111
Signature - Spouse		Date	022623	Phone - Spouse 67.8	9659522
Signature - Preparer SY	AM PRIYA RAM SAGAR G	UPTA TALLAM Date		Phone - Preparer	2082703
The Tax Department ma	y discuss my/our return	with my/our prepare	r.	Preparer Information	

GLOBAL TAXES LLC

NJ 08816

Page 2 of 2

245 ROONEY CT

E BRUNSWICK

#### 2022 Schedule INC/CG

178235247

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



NAITIK UTTAM

BANKER

TEJAL MAGANB

PARMAR

	Your/ Spouse SSN	Withholding Type	VA Withholding	Employer FEIN	VA Account Number	VA Wages, tlps, other comp.
	•					
1	78235247	W	2036.	043790533	30043790533F001	45900.

**Total VA Withholding** 

SSN

**VA Withholding** 

You

178235247

2036.

Spouse

Total # of W-2s,1099s & VK-1s

01

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

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	curity Number					
NAITIK UTTAMCHANDRA BANKER	178-23-52	47					
Spouse's Name	A Spouse's Social	Security Number					
TEJAL MAGANBHAI PARMAR	983-90-03						
Part I Tax Return Information	A Spouse	B Yourself					
<ol> <li>Federal Adjusted Gross Income (Form 760CG, Line 1; 760PY, Line 1, columns A &amp; B; Form 763, Line 1)</li> </ol>		40550.					
<ol><li>Virginia Adjusted Gross Income (Form 760CG, Line 9; 760PY, Line 10, columns A &amp; B; Form 763, Line 9)</li></ol>		40550.					
<ol> <li>Taxable Income (Form 760CG, Line 15; 760PY, Line 16, columns A &amp; B; Form 763, Line 17)</li> </ol>		22690.					
4. Virginia Income Tax (Form 760CG, Line 18; 760PY, Line 17, columns A & B; Form 763 Line 18)		1047.					
5. Withholding (Form 760CG, Line 19a & 19b; 760PY, Lines 19a & 19b; Form 763, Lines 19a & 19b)		2036.					
<ol><li>Amount you Owe (Form 760CG, Line 35; Form 760PY, Line 35; Form 763, Line 35)</li></ol>							
7. Refund (Form 760CG, Line 36; 760PY, Line 36; Form 763, Line 36)		989.					
Part II Declaration of Taxpayer and Signature Authorization							
December 31, 2022, and to the best of my knowledge and belief, it is true, correct and complete. I further declare that the Return Originator (ERO), Transmitter, or Intermediate Service Provider (including my name, address and social security in number) and the amount shown in Part I above agree with the information and amounts shown on the corresponding line filing a balance due return, I understand that if the Virginia Department of Taxation (Virginia Tax) does not receive full and liable for the tax liability and all applicable interest and penalties. I authorize my ERO, Transmitter or Intermediate Servic Virginia Tax. I have selected a personal identification number (PIN) as my signature for my electronic income tax return a refund or direct debit of my tax due. In choosing either direct deposit or direct debit, I certify that the transaction does not of the territorial jurisdiction of the United States at any point in the process. Taxpayers may sign the form using a rubber signature pen, or computer software program.	number or individual tax is of my electronic incomed timely payment of my to be Provider to transmit me and, if applicable, the directly involve a finance	identification ne tax return. If I am tax liability, I remain ny complete return to rect deposit of my tial institution outside					
Taxpayer's e-File PIN: check one box only							
I authorize the ERO named below to enter my e-File PIN 3 5 2 4 7 as my signature on my 2022 e-file Do not enter all zeros	d Virginia individual inco	ome tax return.					
GLOBAL TAXES LLC							
ERO Firm Name		F1 - 201					
I will enter my e-File PIN as my signature on my 2022 e-filed Virginia individual income tax return. Check this box and your return is filed using the Practitioner PIN method. The ERO must complete Part III below.	only if you are entering y	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 0 0 3 9 6 as my signature on my 2022 e-file  Do not enter all zeros	d Virginia individual înco	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 PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part III below.	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	5-23						