E1040		Internal Revenue Servenue Serv		urn	202	2	OMB No. 1545	-0074	IRS Use Onl	y—Do not v	vrite or staple in th	nis space.
Filing Status Check only one box.		Single D Married filing jointly		0	eparately (N use. If you c	,			, ,	spo	lifying survivi use (QSS) s name if the c	0
	pers	on is a child but not your dependent	t:									
Your first name	and mi	ddle initial	Last nar								cial security n	umber
	REDI		GADD.								40-1410	
lf joint return, sp	ouse's	first name and middle initial	Last nar	me						Spouse	's social securi	ty number
Home address (	numbe	r and street). If you have a P.O. box, see	instructio	ons.				A	pt. no.	1	ntial Election (	
718 MING									1407		here if you, or if filing jointly,	,
		ce. If you have a foreign address, also co	omplete sp	paces bel	ow.	Sta	-	ZIP co		1 1	this fund. Ch	
CHARLOTT						NC	-	282	-	-	ow will not cha	ange
Foreign country	name			-oreign pr	ovince/state/	coun	ty	Foreig	n postal code	your ta	x or refund.	Spouse
Digital Assets		ny time during 2022, did you: (a) rec ange, gift, or otherwise dispose of a						-			Yes X	No
Standard		eone can claim:  You as a de	-				a dependent		. (000			
Deduction	_	Spouse itemizes on a separate retur	•		dual-status	alien	1					
Age/Blindness	You:	Were born before January 2, 1	958	Are bli	ind Spo	ouse	: 🗌 Was bor	n befo	ore January	2, 1958	Is blind	
Dependents	s (see i	instructions):		(2) S	ocial security	,	(3) Relationsh	ip (4	) Check the I	oox if qual	fies for (see ins	tructions):
If more (1) First name Last name				number		to you		Child tax	credit	Credit for other	dependents	
than four												
dependents, see instructions												
and check												
here 🗌												
Income	1a	Total amount from Form(s) W-2, b	•		,					. <b>1</b> a		,772.
Attach Form(s)	b	Household employee wages not re						• •		. 1k		
W-2 here. Also	c	Tip income not reported on line 1a						• •		. 10		
attach Forms	d	Medicaid waiver payments not rep						• •		. 10		
W-2G and 1099-R if tax	e	Taxable dependent care benefits t						• •		. 16		
was withheld.	f	Employer-provided adoption bene				•		• •		. 11		
If you did not get a Form	g L	Wages from Form 8919, line 6 .				• •		• •		· 10		0
W-2, see	h :	Other earned income (see instruct Nontaxable combat pay election (see instruct)	,			• •	· · · · ·	· ·		· _ II	1	0.
instructions.	i z			,		• •	11			. 1z	. 117	772
Attach Sch. B	2a	S I	2a		· · ·	 <b>ь</b> т	axable interest	• •		. 12		, , , , , , , , , , , , , , , , , , , ,
if required.	2a 3a		3a				Ordinary divider			. 2k		
	4a		4a				axable amount			. 4k		
Standard	5a		5a				axable amount			. 5k		
Deduction for –	6a		6a				axable amount			. 6k		
<ul> <li>Single or Married filing</li> </ul>	С	If you elect to use the lump-sum e		nethod,	check here							
separately,	7	Capital gain or (loss). Attach Sche								7		
<ul><li>\$12,950</li><li>Married filing</li></ul>	8	Other income from Schedule 1, lin					· · · ·			. 8	-10	,800.
jointly or Qualifying	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7								. 9		
surviving spouse, \$25,900	10	Adjustments to income from Sche		-						. 10		
Head of	11	Subtract line 10 from line 9. This is			gross incor	ne				. 11	106	,972.
household, \$19,400	12	Standard deduction or itemized	deducti	i <b>ons</b> (froi	m Schedule	A)				. 12		structions):
<ul> <li>If you checked</li> </ul>	13	Qualified business income deduct	ion from	Form 89	995 or Form	899	5-A			. 13		
any box under Standard	14	Add lines 12 and 13								. 14	12	ependents 772. 0. 772. 800. 972. 950.
Deduction, see instructions.	15	Subtract line 14 from line 11. If zer	ro or less	s, enter -	0 This is y	our	taxable incom	е.		. 15	94	,022.
)												

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

Form **1040** (2022)

Form 1040 (2022	2)							Page <b>2</b>
Tax and	16	Tax (see instructions). Check if any from For	rm(s): <b>1</b> 🗌 881	4 <b>2</b> 4972	3 🗌		16	16,402.
Credits	17	Amount from Schedule 2, line 3					17	
	18	Add lines 16 and 17					18	16,402.
	19	Child tax credit or credit for other depende	ents from Sched	lule 8812			19	
	20	Amount from Schedule 3, line 8					20	
	21	Add lines 19 and 20					21	
	22	Subtract line 21 from line 18. If zero or less	s, enter -0				22	16,402.
	23	Other taxes, including self-employment ta	x, from Schedul	e 2, line 21 .			23	0.
	24	Add lines 22 and 23. This is your total tax					24	16,402.
Payments	25	Federal income tax withheld from:						
	а	Form(s) W-2			<b>25a</b> 18	,318.		
	b	Form(s) 1099			25b			
	с	Other forms (see instructions)			25c			
	d	Add lines 25a through 25c					25d	18,318.
If	26	2022 estimated tax payments and amount	applied from 20	021 return			26	
If you have a l qualifying child,	27	Earned income credit (EIC)		No	27			
attach Sch. EIC.	28	Additional child tax credit from Schedule 88	12		28			
	29	American opportunity credit from Form 88	63, 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 yo	ur total other p	ayments and refu	undable credits		32	
	33	Add lines 25d, 26, and 32. These are your		-			33	18,318.
Refund	34	If line 33 is more than line 24, subtract line	24 from line 33	. This is the amou	nt you <b>overpaid</b>		34	1,916.
neiuliu	35a	Amount of line 34 you want refunded to y	ou. If Form 888	8 is attached, che	ck here		35a	1,916.
Direct deposit?	b	Routing number 0 8 1 9 0 4	8 0 8			Savings		
See instructions.	d	Account number 2 9 1 0 2 8	8 6 1 9	6 2		-		
	36	Amount of line 34 you want applied to you	ur 2023 estimat	ed tax	36			
Amount	37	Subtract line 33 from line 24. This is the a	mount you owe					
You Owe		For details on how to pay, go to www.irs.g	ov/Payments or	see instructions			37	
	38	Estimated tax penalty (see instructions)			38			
Third Party	Do	you want to allow another person to d	iscuss this retu	rn with the IRS?	See			
Designee	ins	tructions			<b>Yes.</b> C	omplete b	elow.	X No
		signee's	Phone	•		onal identif oer (PIN)	ication	
	na		no.			. ,		
Sign		der penalties of perjury, I declare that I have exam ef, they are true, correct, and complete. Declaratic		1 2 0		,		, ,
Here		ur signature	Date	Your occupation		1	· ·	nt you an Identity
	10	a oignataro	Buio					IN, enter it here
Joint return?				SOFTWARE H	ENGINEER	(see i	nst.)	
See instructions. Keep a copy for	Sp	ouse's signature. If a joint return, <b>both</b> must sign.	Date	Spouse's occupat	ion			nt your spouse an action PIN, enter it here
your records.						(see i		
	Ph	one no. (618) 954-8971	Email address		MO20CMATE CO		- /	
		pne no. (618) 954-8971 parer's name Preparer's sign		MIKUITGADDA	M02@GMAIL.CC			Check if:
Paid		PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA		GIIPTA TALLAM		P02082	703	Self-employed
Preparer		n's name GLOBAL TAXES LLC		201 111 111111UL	52/21/2025			678)965-9522
Use Only		n's address 245 ROONEY CT E BE	RUNSWICK N	J 08816		Firm'		84-3171965
Go to wave in a		1040 for instructions and the latest information		<u>0 00010</u>		1		Earm <b>1040</b> (2022)

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

BAA REV 02/17/23 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

Attachment Sequence No. 01 social security number

NIKHIL	REDDY GADDAM	834-40-1410
Dout	Additional Income	•

Par	t Additional Income			
1	Taxable refunds, credits, or offsets of state and local income taxes		1	
2a	Alimony received		2a	
b	Date of original divorce or separation agreement (see instructions):			
3	Business income or (loss). Attach Schedule C		3	
4	Other gains or (losses). Attach Form 4797		4	
5	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Att	ach Schedule E .	5	-10,800.
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 (	4	
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:	8z		
0	Tatal ather income. Add lince to through the			
9	Total other income. Add lines 8a through 8z		9	10 000
10	Combine lines 1 through 7 and 9. Enter here and on Form 1040, 1040-SF	, or 1040-INR, line 8	10	-10,800.

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

Schedule 1 (Form 1040) 2022

Par	t II Adjustments to Income					
11	Educator expenses				11	
12	Certain business expenses of reservists, performing artists, and fee	e-basi	s gov	ernment		
	officials. Attach Form 2106				12	
13	Health savings account deduction. Attach Form 8889				13	
14	Moving expenses for members of the Armed Forces. Attach Form 3903				14	
15	Deductible part of self-employment tax. Attach Schedule SE				15	
16	Self-employed SEP, SIMPLE, and qualified plans				16	
17	Self-employed health insurance deduction				17	
18	Penalty on early withdrawal of savings				18	
19a	Alimony paid				19a	
b	Recipient's SSN	·				
С	Date of original divorce or separation agreement (see instructions):					
20	IRA deduction				20	
21	Student loan interest deduction				21	
22	Reserved for future use				22	
23	Archer MSA deduction				23	
24	Other adjustments:					
а	Jury duty pay (see instructions)	24a				
b	Deductible expenses related to income reported on line 8I from the					
	rental of personal property engaged in for profit	24b				
С	Nontaxable amount of the value of Olympic and Paralympic medals					
	and USOC prize money reported on line 8m	24c				
d	Reforestation amortization and expenses	24d				
е	Repayment of supplemental unemployment benefits under the Trade					
	Act of 1974	24e				
f	Contributions to section 501(c)(18)(D) pension plans	24f				
g	Contributions by certain chaplains to section 403(b) plans	24g				
h	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				
j	Housing deduction from Form 2555	24j				
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form					
	1041)	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 adjustments to income	e. Ent	er here	and on		
	Form 1040 or 1040-SR, line 10, or Form 1040-NR, line 10a				26	
	BAA	REV	02/17/23 P	RO	Schedu	le 1 (Form 1040) 2022

(Form	1040)	(Fror	n re	ental real estate, royalties, partners	hips, S	6 corporat	ions, es	tates,	trusts, REM	Cs, etc.)	ଇ	199	-
	nent of the Treasury Revenue Service			Attach to Form 1040, Go to <i>www.irs.gov/ScheduleE</i> for					nformation.		Attachment Sequence No. 13		
	) shown on return									Your soci	al security		-
NIKH		GAD	DAI	М						834-4	0-1410		
Part	I Income	or Lo	oss	From Rental Real Estate an	d Ro	valties				1			-
	Note: If yo	ou are i	n th	ne business of renting personal proper s from <b>Form 4835</b> on page 2, line 40.			e C. See	instru	ctions. If you	are an indi	vidual, rep	ort farm	
Α [				nts in 2022 that would require you	to file	Form(s)	1099? S	see in	structions .		. 🗌 Ye	s 🛛 No	,
				ou file required Form(s) 1099?									
<b>1</b> a				ach property (street, city, state, ZIF									_
Α	11-11-202	/1,K	OTI	HAPET SAROORNAGAR, RR DI	IST 7	TELANGA	ANA II	N 50	0035				-
В				· · · ·									-
С													-
1b	Type of Prope	rty	2	For each rental real estate prope	ertv lis <sup>.</sup>	ted		Fa	ir Rental	Persor	nal Use		-
	(from list below			above, report the number of fair	rental	and Days					ays	QJV	
Α	3			personal use days. Check the Q					0				
В				if you meet the requirements to f qualified joint venture. See instru									
C													
•••	of Property:												
	Single Family R			3 Vacation/Short-Term Ren	tal	5 Lanc	-		Self-Rental				
2	Multi-Family Re	siden	се	4 Commercial		6 Roya	alties	8	Other (desc	ribe)			
									Propert	ies:			-
Incom	ne:						Α		B			С	-
3		±			3			50.					-
4					4								-
Exper													-
5	Advertising				5								
6	Auto and trave	l (see	ins	tructions)	6								
7				nce	7		9	50.					
8	Commissions				8								
9	Insurance .				9								
10	•			sional fees	10								
11	-				11		1,5	50.					
12	00			to banks, etc. (see instructions)	12								
13	Other interest		•		13								_
14		• •	•		14		3,6						_
15					15		2,8	50.					
16					16			<b>F</b> 0					
17					17		2,3	50.					
18	•	xpens	se o	or depletion	18								_
19 20	Other (list)			and 5 through 10	19		11 2	ΕO					
20	•			les 5 through 19	20		11,3	50.					
21				ne 3 (rents) and/or 4 (royalties). If structions to find out if you must									
					21		-10,8	00					
22				estate loss after limitation, if any,									-
				ructions)	22	(	10,80	0.)	(	)	(		
23a		-		ported on line 3 for all rental prope				23a	N	550.			
b				ported on line 4 for all royalty prop				23b					
c			-	ported on line 12 for all properties				23c					
d				ported on line 18 for all properties				23d					
е				ported on line 20 for all properties				23e	1	1,350.			

Supplemental Income and Loss

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 26 Total rental real estate and royalty income or (loss). Combine lines 24 and 25. Enter the result here. If Parts II, III, IV, and line 40 on page 2 do not apply to you, also enter this amount on Schedule 1 (Form 1040), line 5. Otherwise, include this amount in the total on line 41 on page 2 26 .

SCHEDULE E

Schedule E (Form 1040) 2022

10,800.

-10,800.

OMB No. 1545-0074

Form <b>8582</b>	
Department of the Treasury	

GADDAM

Internal Revenue Service

Name(s) shown on return

NIKHIL REDDY

## **Passive Activity Loss Limitations**

See separate instructions.

Attach to Form 1040, 1040-SR, or 1041.

Go to www.irs.gov/Form8582 for instructions and the latest information.

OMB No. 1545-1008

Identifying number 834-40-1410

Par	rt I 2022 Passive Activity Loss Caution: Complete Parts IV and V before completing Part I.		
	al Real Estate Activities With Active Participation (For the definition of active participation, see Special ance for Rental Real Estate Activities in the instructions.)		
1a b c d	Activities with net income (enter the amount from Part IV, column (a))1a0.Activities with net loss (enter the amount from Part IV, column (b))1b( 10,800.)Prior years' unallowed losses (enter the amount from Part IV, column (c))1c( )Combine lines 1a, 1b, and 1c	1d	-10,800.
All Ot	ther Passive Activities		
2a b c d	Activities with net income (enter the amount from Part V, column (a))       2a         Activities with net loss (enter the amount from Part V, column (b))       2b         Prior years' unallowed losses (enter the amount from Part V, column (c))       2c         Combine lines 2a, 2b, and 2c	2d	
3	Combine lines 1d and 2d. If this line is zero or more, stop here and include this form with your return; all losses are allowed, including any prior year unallowed losses entered on line 1c or 2c. Report the losses on the forms and schedules normally used	3	-10,800.

If line 3 is a loss and: • Line 1d is a loss, go to Part II.

• Line 2d is a loss (and line 1d is zero or more), skip Part II and go to line 10.

Caution: If your filing status is married filing separately and you lived with your spouse at any time during the year, do not complete Part II. Instead, go to line 10.

Pai	rt Special Allowance for Rei	ntal Real Estate	Activities With	Active Pa	rticip	ation		
	Note: Enter all numbers in Par	t II as positive amo	ounts. See instruct	tions for an	examp	ole.		
4	Enter the smaller of the loss on line 1	d or the loss on lir	ne3				4	10,800.
5	Enter \$150,000. If married filing separ	rately, see instructi	ions	5	1	50,000.		
6	Enter modified adjusted gross income	e, but not less thar	n zero. See instruc	tions 6	1	17,772.		
	<b>Note:</b> If line 6 is greater than or equa on line 9. Otherwise, go to line 7.	l to line 5, skip line	es 7 and 8 and ent	er -0-				
7	Subtract line 6 from line 5			7		32,228.		
8	Multiply line 7 by 50% (0.50). Do not e	nter more than \$25	,000. If married filir	ng separate	y, see	instructions	8	16,114.
9	Enter the <b>smaller</b> of line 4 or line 8						9	10,800.
Par	t III Total Losses Allowed							
10	Add the income, if any, on lines 1a ar	d 2a and enter the	etotal				10	0.
11	Total losses allowed from all passiv out how to report the losses on your t						11	10,800.
Par	t IV Complete This Part Befor	e Part I, Lines 1	a, 1b, and 1c. S	ee instruc	tions.			
	Name of activity	Currei	nt year	Prior ye	ars	Ove	rall ga	ain or loss
	manie of activity	(a) Net income	(b) Net loss	(c)   Inall	wed			

-	(a) Net income (line 1a)	(b) Net loss (line 1b)	(c) Unallowed loss (line 1c)	<b>(d)</b> Gain	(e) Loss
11-11-202/1, KOTHAPET	0.	10,800.			10,800.
Total. Enter on Part I, lines 1a, 1b, and 1c	0.	10,800.			
EXCEPTION AND A REPORT OF A					- 0500

For Paperwork Reduction Act Notice, see instructions. BAA

REV 02/17/23 PRO

Form 8582 (2022)

### Part V Complete This Part Before Part I, Lines 2a, 2b, and 2c. See instructions.

	Curre	Current year			ars	Overall	gain or loss	
Name of activity	(a) Net income			Net loss (c) Unallo ine 2b) loss (line		<b>(d)</b> Gain	(e) Loss	
	(inte za)	(111)	ie 20)	1055 (1116	20)			
otal. Enter on Part I, lines 2a, 2b, and 2	20							
Part VI Use This Part if an Am		Part II,	Line 9. S	ee instruct	ions.			
Name of activity	Form or schedule and line number to be reported on (see instructions)	(a)	Loss	<b>(b)</b> Rati	io	(c) Special allowance	(d) Subtract column (c) fror column (a).	
11-11-202/1, KOTHAPET	E Ln 22	1	10,800.	1.00000	000	10,800	. 0	
otal		1	10,800.	1.00		10,800	. 0	
Part VII Allocation of Unallow	Form or sch		6.					
Name of activity	and line nu to be report (see instruc	mber ted on	<b>(a)</b> L	LOSS	(	<b>b)</b> Ratio	( <b>c)</b> Unallowed loss	
otal	nstructions.					1.00		
	nstructions.					1.00		
		nedule mber ted on	(a) L	_OSS	<b>(b)</b> Ur	1.00	(c) Allowed loss	
Part VIII Allowed Losses. See in	nstructions. Form or sch and line nu to be report	nedule mber ted on	(a) L	LOSS	<b>(b)</b> Ur		(c) Allowed loss	
Part VIII Allowed Losses. See in	nstructions. Form or sch and line nu to be report	nedule mber ted on	(a) L	LOSS	<b>(b)</b> Ur		(c) Allowed loss	
Part VIII Allowed Losses. See in	nstructions. Form or sch and line nu to be report	nedule mber ted on	(a) L	_OSS	<b>(b)</b> Ur		(c) Allowed loss	

REV 02/17/23 PRO

Form **8582** (2022)

# Virginia Individual Income Tax Declaration for Electronic Filing

## DO NOT SEND THIS VA-8453 TO THE VIRGINIA DEPARTMENT OF TAXATION OR THE IRS. IT MUST BE MAINTAINED IN YOUR FILES!

Virginia Submission Identification Number (SID)	_							
First Name & Middle Initial (if joint or combined return, enter both) Last Name	B Your Social Securi	ty Number						
		0						
NIKHIL REDDY GADDAM Present Home Address	834-40-141 A Spouse's Social Se							
718 MINGLEWOOD DR APT # 11407								
City, State and Zip Code	Online Fil	ed Return						
CHARLOTTE NC 28262								
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)		106,972.						
2. Virginia Adjusted Gross Income (Form 760CG, Line 9; 760PY, Line 10, columns A & B; Form 763, Line 9)		106,972.						
3. Taxable Income (Form 760CG, Line 15; 760PY, Line 16, columns A & B; Form 763, Line 17)		15,000.						
4. Virginia Income Tax (Form 760CG, Line 18; 760PY, Line 17, columns A & B; Form 763 Line 18)		620.						
5. Withholding (Form 760CG, Line 19a &19b; 760PY, Lines 19a & 19b; Form 763, Lines 19a & 19b)		854.						
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)		234.						
Part II Declaration of Taxpayer								
8a. I consent that my refund be directly deposited as designated on my 2022 Virginia income tax return. If I have filed a joint return, this is an irrevocable appointment of the other spouse as an agent to receive the refund. 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.								
8b. I do not want direct deposit of my refund or I am not receiving a refund. I choose to have a check mailed to		withdrawal entry to						
the financial institution account indicated on my 2022 Virginia income tax return for payment of my state taxe estimated tax. I also authorize the financial institutions involved in the processing of the electronic payment	8c. I authorize the Virginia Department of Taxation (Virginia Tax) and it's designated Financial Agent to initiate an ACH electronic funds withdrawal entry to the financial institution account indicated on my 2022 Virginia income tax return for payment of my state taxes owed on this return and/or a payment of estimated tax. 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 certify that the transaction does not directly involve a financial institution authorize at any point in the process.							
I declare under penalties of perjury that I have compared the information on my return with the information I have provided to my electronic return originator and that the amounts described in Part I above agree with the amounts shown on the corresponding lines of my 2022 Virginia individual income tax return. To the best of my knowledge and belief, my return is true, correct and complete. I consent that my return including this declaration and accompanying schedules and statements be sent to the Internal Revenue Service (IRS) by my electronic return originator (ERO) and by the IRS to Virginia Tax. This declaration is to be retained by the ERO or transmitter as validation of my electronically filed Virginia income tax return. Taxpayers may sign the form using a rubber stamp, mechanical device, such as a signature pen, or computer software program.								
Your Signature Date Spouse's Signature (If Filing Status 2 or 4, E	BOTH must sign)	Date						
Part III Declaration of Electronic Return Originator (ERO) and Paid Preparer								
I declare that I have reviewed the above taxpayer's return and that the entries on this form are complete and correct to the best of my knowledge. I have obtained the taxpayer's signature on Form VA-8453 before submitting this return to the Internal Revenue Service (IRS) and Virginia Tax. I have provided the taxpayer with a copy of all forms and information to be filed with the IRS and Virginia Tax and have followed all other requirements as described in Handbook for Electronic Filers of Individual Income Tax Returns (Tax Year 2022) and any requirements specified by Virginia Tax. If I am also the Paid Preparer, under penalties of perjury, I declare that I have examined the above taxpayer's return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer is based on all information of which preparer has any knowledge. EROs and paid preparer can sign the form using a rubber stamp, mechanical device, such as a signature pen, or computer software program. $02-24-23$								
ERO's Signature     Date       GLOBAL TAXES LLC     Date	SSN/PTIN							
GLOBAL TAXES LLC       Firm's name (or yours if self-employed)       Paid Preparer?         245 ROONEY CT       E BRUNSWICK       NJ 08816	□ <b>Y</b> □ N   Self-em 882145487	ployed? 🗌 Y 🔲 N						
Address, City, State and Zip	EIN							
Paid Preparer's Signature Date	P02082703 SSN/PTIN							
SYAM PRIYA RAM SAGAR GUPTA TALLAM     Self-employed)								
245 ROONEY CT E BRUNSWICK NJ 08816	843171965							
Address, City, State and Zip	EIN							
1555 REV 02/17/23 PRO								

# 763 Page 1

# 2022 Virginia Nonresident Income Tax Return Due May 1, 2023



Enclose a complete conv of your federal tax return and all other required Virginia en

	Eliciose a comp	lete copy o	i your reuer	arta		i otilei iequilei	a virginia	enciosui	63.					
First N				MI	Last Name		Suffix		cial Secu		ber		Check	
NIKH	HIL REDDY e's First Name (Filing	Status 2 Only		MI	GADDAM Last Name		Suffix		40–14 s Social S		lumbor		Check	
Spous	es riist Name (riiing	Status 2 Oni	y)		Last Name		Sullix	Spouse	s Social C	becunty i	Number		decea	
Prese	nt Home Address (Nu	mber and Stre	eet or Rural Ro	oute)	1			Birth Date		2 -	2 8	- 1 9 9		
	MINGLEWOOD	DR APT	11407		04-4-	ZID O de	-	m-dd-yyyy						
	own or Post Office				State NC	ZIP Code 28262		Birth Date m-dd-yyyy		-		-		
	of Residence		Important -	Name	-	r County in which	principal pla	ce of busir	ness, emp	loyment	, or inco	me source	Locality Co	de
NC			is located. MECKLEI	JRII	RC					Ci	tv OR	X County	117	
		Amer	nded Return	Г		Name(s) or	Address D	ifferent th	nan			eas on Due		-
Ch	eck Applicable		Reason Cod	e		Shown on 2					01010		Duto	
	Boxes	Depe	ndent on An	othe	r's Return	Qualifying F	armer, Fis	herman, o	or	EIC	C Clain	ned on fede	ral return	
						Merchant S				\$			.00	
	Filing Status Ente	-					Exen	•		ions 1 a	and 2. I	Enter the su	ım on Line	12.
			ead of house		? YES  └─ must have Virgi	nia incomo	Yo	u Filing	use if Status Do or 3	ependents	6		Total Section	ion 1
1					From Any Sourc				+			1 X \$930	= 93	0
			parate Retu					65 Spouse	 e 65 You	Spous	e			
lf Filin	g Status 3 or 4, en	ter spouse's	SSN in the	Spoι	use's Social Sec	curity Number	oro			Blind		_	Total Sect	tion 2
box at	top of form and er	nter Spouse'	s Name					+	+	+	=	X \$800	=	
1	Adjusted Gross In	come from	federal retur	n - N	ot federal taxab	ole income					1		106972	00
2	Additions from Sc	hedule 763	ADJ, Line 3.								2			00
3	Add Lines 1 and	2									3		106972	00
4	Age Deduction (S	ee instructio	ons and the A	Age [	Deduction Work	sheet)				You	4a			00
	Enter Birth Dates and Your Spouse'	above. Ente s Age Dedu	er Your Age E ction on Line	Dedu e 4b	ction on Line 4a	а			Spc	ouse	4b			00
5	Social Security Ac	-									5			00
6	State income tax						-				6			00
7	Subtractions from	Schedule 7	63 ADJ, Line	э 7							7			00
8	Add Lines 4a, 4b	o, 5, 6, and 7	7								8			00
9	Virginia Adjusted	d Gross Inc	ome (VAGI)	. Sul	otract Line 8 fr	om Line 3					9		106972	00
10	Itemized Deduction	ons from Virg	ginia Schedu	le A,	if applicable. S	ee instructions.					10			00
11	If you do not claim	n itemized de	eductions on	Line	e 10, enter stan	dard deduction.	See instru	uctions			11		8000	00
12	Exemption amour	nt. Enter the	total amoun	t fror	n the Exemption	n Sections 1 and	d 2 above.				12		930	00
13	Deductions from S	Schedule 76	3 ADJ, Line	9							13			00
14	Add Lines 10, 11	, 12 and 13									14		8930	00
15	Virginia Taxable Ir	ncome comp	outed as a re	side	nt. Subtract Line	e 14 from Line 9					15		98042	00
16	Percentage from I	Nonresident	Allocation S	ectio	on on Page 2 (E	inter to one deci	mal place	only)			16		15.3	%
17	Nonresident Taxa	ble Income.	(Multiply Lin	e 15	by percentage	on Line 16)					17		15000	00
18	Income Tax from	Tax Table or	Tax Rate So	hedu	ule						18		620	00
19a	Your Virginia inco	me tax with	neld. Enclose	e For	ms W-2, W-2G	, 1099, and VK-	1				19a		854	00
	Dept. of Taxation F 1044 Rev. 07/22	or Local Use	LTD		\$						-			
1555	REV 02/17/23 P	RO			Ψ							XX2	XXX	

#### 2022 FORM 763 Page 2 Your Name Your SSN GADDAM 834-40-1410 NIKHIL REDDY 19b Spouse's Virginia income tax withheld. Enclose Forms W-2, W-2G, 1099, and VK-1. ..... 19h 00 20 2022 Estimated Tax Payments. 20 00 2021 overpayment credited to 2022 estimated tax..... 00 21 21 22 Extension Payment - submitted using Form 760IP..... 22 00 23 Credit for Low-Income Individuals or Virginia Earned Income Credit from Schedule 763 ADJ, Line 17. ..... 23 00 24 Total credits from Schedule OSC. 24 00 25 Credits from Schedule CR, Section 5, Line 1A..... 25 00 26 Total payments and credits. Add Lines 19a through 25. 26 854 00 27 If Line 18 is larger than Line 26, enter the difference. This is the INCOME TAX YOU OWE. 27 00 If Line 26 is larger than Line 18, enter the difference. This is the **OVERPAYMENT AMOUNT.**..... 28 234 00 28 29 Amount of overpayment on Line 28 to be CREDITED TO 2023 ESTIMATED INCOME TAX. 29 00 30 Virginia529 and ABLE Contributions from Schedule VAC, Part I, Line 6..... 30 00 Other Voluntary Contributions from Schedule VAC, Section II, Line 14 ..... 00 31 31 32 Addition to Tax, Penalty, and Interest from enclosed Schedule 763 ADJ, Line 21. 32 00 See instructions. ..... Enclose 760C or 760F and check here. ..... Sales and Use Tax is due on Internet, mail order, and out-of-state purchases (Consumer's Use Tax). 33 Х 33 00 See instructions...... Check here if no sales and use tax is due..... 34 Add Lines 29 through 33..... 34 00 If you owe tax on Line 27, add Lines 27 and 34 - OR - If you have an overpayment on Line 28 and 35 Line 34 is larger than Line 28, enter the difference. AMOUNT YOU OWE. Enclose payment or pay at 35 00 www.tax.virginia.gov. ......Check here if paying by credit or debit card - See instructions. ..... 36 If Line 28 is larger than Line 34, subtract Line 34 from Line 28. This is the amount to be **REFUNDED TO YOU.** 36 234 00 If the Direct Deposit section below is not completed, your refund will be issued by check. DIRECT BANK DEPOSIT Checking X Your Bank Routing Transit Number Your Bank Account Number Savings

	estic Accounts Only ternational Deposits 0 8 1 9 0 4 8 0 8 2 9				•		0 1							
INO III	ternational Deposits 0 8 1 9 0 4 8 0 8 2 9	9   1	0	2	8	8	6   1	9	6	2				
Nor	resident Allocation Percentage			Α	- AI	Ι Sοι	irces		В	- Vir	ginia	Source	es	
1.	Wages, salaries, tips, etc	. 1				11	7772	00				1634(	) 0	00
2.	Interest income	. 2						00					0	00
3.	Dividends	. 3						00					0	00
4.	Alimony received	. 4						00					0	00
5.	Business income or loss	. 5						00					0	00
6.	Capital gain or loss/capital gain distributions	. 6						00					0	00
7.	Other gains or losses	. 7						00					0	00
8.	Taxable pensions, annuities and IRA distributions.	. 8						00						
9.	Rents, royalties, partnerships, estates, trusts, S corporations, etc	. 9				-1	0800	00				(	0 0	00
10.	Farm income or loss	. 10						00					0	00
11.	Other income	. 11						00					0	00
12.	Interest on obligations of other states from Schedule 763 ADJ, Line 1	. 12						00						
13.	Lump-sum and accumulation distributions included on Sch. 763 ADJ, Line 3.	. 13						00					0	00
14.	TOTAL - Add Lines 1 through 13 and enter each column total here	. 14				10	6972	00				16340	) 0	00
15.	Nonresident allocation percentage - Divide Line 14 B, by Line 14 A. Compute percentage to one decimal place (e.g., 5.4%). Enter on Page 1, Line 16											15.3	%	
	(We) authorize the Dept. of Taxation to discuss this return with my (our) preparer.		] ];	agree t	o obt	ain m	y Form	1099-	G at w	ww.ta	x.virg	inia.go	<b>v</b> .	

I (We), the undersigned, declare under penalty provided by law that I (we) have examined this return and to the best of my (our) knowledge, it is a true, correct, and complete return.

Your Signature		Your Phone Number (618) 954-8971	Date 03/08/202	3
Spouse's Signature (If a joint return, both must sign	)	Spouse's Phone Number	Preparer's PTIN	Vendor Code
			P02082703	1555
Preparer's Name	Firm's Name (or Yours if Self-Employed)	Preparer's Phone Number	Filing Election Code	ID Theft PIN
SYAM PRIYA RAM SAGAR GUPTA TALLAM	GLOBAL TAXES LLC	(678) 965-9522	7	

## **2022 Schedule INC/CG** 834401410

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

NIKHIL REDD GADDAM

|--|--|--|

Your/ Spouse SSN	Withholding Type	VA Withholding	Employer FEIN	VA Account Number	VA Wages, tips, other comp.
Г					
834401410	W	854.	861564085	30861564085F001	16340.

Total VA Withholding	SSN	VA Withholding
You	834401410	854.
Spouse		
Total # of W-2s,1099s & VK-1s	01	_

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

	ole All	<b>(50)</b> Pages nd W-2s	of Yo		2022	-	-	<u>oli</u> na E	ncome Departmen ended Return			DOR Use Only				
		-			/ear beginnir	Ig		22	and ending			ire you a ve		Yes		
		REDDY IGLEWO			ADDAM			1140	7 Your S	<b>SN</b> : 83440			<u>ise a veteran</u> anted an auto	<u>? Yes</u>	NO LINO	
CHAI	RLOI	NC 2	<u>8262</u>	2 MECKI	<u>.</u>				Spouse's S	SN:	20	, ,	income tax	return, <u>e.g</u> ., l		-
Filing	Statu		1. Sino 4. Hea	gle ad of Hous	sehold			ng Jointly Vidow(er)	3. Marr	ied Filing Sepa		Year spou		No X		
	•				entire year?			X No		eturn for dea	ceased tax	payer.	Date of o			
					<u>e entire year</u> · You may c		Yes		ucation Endov	eturn for dee			Date of o		me or a	ll of
your	overpa	ayment to	o the I	Fund. To	make a cont	tribution,	enclos	se Form I	NC-EDU and y	our paymen	tof \$	0.	To desigi	nate your ov		
									. (See instruc of the country					dent.		
		•			••••••	•			or Court-Appo	•						
FS	1	PP	Y		DT	'N	OC	N	TPRES	Y S	PRES	Ν	VT	N S'	VT	N
GADD	)	718		2826	52 DS	S N	ΕA	Ν	TD		SI	D		FI	DEXT	Ν
NIKH	IL	REDD	γ		GADD	MA				83440	1410		MECK	L		
												NC	2826	2		
718	MIN	IGLEW	100I	) DR					11407	CHAR	LOTTE					
06		1	069	972		16			620		26C			0		
07				0		18	Y		0		26E			0		70201
09				0		20A			4544		EU					5002
10A				0		20B			0		27			0		
10B				0		21A			0		29			0		
11	S	Y	I	Ν		21B			0		30			0		
11			127	750		21C			0		31			0		
13			000	000		21D			0		32			0		
14			942	222		26A			0		34		46	2		
15			47	702		26B			0							
TN	6	51895	489	971		PN		6789	659522		PP	P02	08270	3		
I declare	and cer	turn Be tify that I ha nowledge ar	ave exa	mined this r	Refund C	npanying sc I complete.		462 and statem		Check her to discuss	e if you auth	norize the N and attachr	0 North Carolir ments with th	a Departme le paid prepa	nt of Reve arer below	enue v.
Your Sig	1 nature				03/0	08/202	_	oouse's Siai	nature <i>(If filing joir</i>	nt return. both mu	ıst sian.)	Date		) 5 4 8 9 7 1 Phone No. (Inc	lude area	code)
		R USE ONI	Y If	prepared b	y a person other	than taxpay	-		is based on all info			has any kno				
QVAN	סס ו	TVN D7	7.1.1	SAGAR		)2 24	23	6789	659522				Þ۵	2082703		
		Signature	<u>, 141 c</u>	JAGAR	GOEI (	DZ Z4 Date			ntact Phone Numb	er (Include area	code)			's FEIN, SSN,		
	lf y	ou ARE N	VOT d						F REVENUE, P. <b>0V to:</b> N.C. DE					NC 27640-0	640	

## D-400 2022 Page 2 (50)

Last Name (First 10 Characters)	GADDAM

834401410

	*		
6.	Federal Adjusted Gross Income	6.	106972
7.	Additions to Federal Adjusted Gross Income	7.	0
8.	Add Lines 6 and 7	8.	106972
9.	Deductions From Federal Adjusted Gross Income	9.	0
10.	Child Deduction		
	a. Enter the number of qualifying children for whom you were allowed a federal child tax credit	10a.	0
	b. Enter the amount of the child deduction	10b.	0
11.	N.C. Standard Deduction	11.	Y
11.	N.C. Itemized Deduction	11.	Ν
11.	Deduction amount	11.	12750
12.	a. Add Lines 9, 10b, and 11	12a.	12750
	b. Subtract Line 12a from Line 8	12b.	94222
13.	Part-year Residents and Nonresidents Taxable Percentage	13.	0.0000
14.	N.C. Taxable Income	14.	94222
15.	N.C. Income Tax	15.	4702
16.	Tax Credits	16.	620
17.	Subtract Line 16 from Line 15	17.	4082
18.	Consumer Use Tax	18.	0
	You certify that no Consumer Use Tax is due		Y
19.	Add Lines 17 and 18	19.	4082
<u>North</u>	Carolina Income Tax Withheld		
200	Your toy withhold	20.5	
20a.	Your tax withheld	20a.	4544
20b.	Spouse's tax withheld	20b.	0
Other	Tax Payments		
<u></u>			
21a.	2022 estimated tax	21a.	0
21b.	Paid with extension	21b.	0
21c.	Partnership	21c.	0
21d.	S Corporation	21d.	0
22.	Additional Payments	22.	0
23.	Add Lines 20a through 22	23.	4544
24.	Previous Refunds	24.	0
25.	Subtract Line 24 from Line 23	25.	4544
26a.	Tax Due	26a.	0
26b.	Penalties	26b.	0
26c.	Interest	26c.	0
26d.	Add Lines 26b and 26c and enter the total on 26d	26d.	0
EU	Exception to Underpayment of Estimated Tax	EU	-
26e.	Interest on the Underpayment of Estimated Income Tax	26e.	0
27.	Pay this Amount	27.	0
28.	Overpayment	28.	462
Αποι	int of Refund to Apply to:		
29.	Amount of Line 28 to be applied to 2023 Estimated Income Tax	29.	0
30.	N.C. Nongame and Endangered Wildlife Fund	29. 30.	0
31.	N.C. Education Endowment Fund	31.	0
31.	N.C. Breast and Cervical Cancer Control Program	32.	0
33.	Add Lines 29 through 32	33.	0
34.	Amount to be Refunded	34.	462
54.		07.	102

D-400 Line-by-Line Information

# D-400TC (50)

8-8-22

# 2022 Individual Income Tax Credits

North Carolina Department of Revenue

DOR Use Only

If you claim a tax credit on Form D-400, Line 16, you must attach this form to the return. Otherwise, the tax credit may be disallowed. Important: Refer to the instructions before completing this form.

Last Na	ame (First 10 Characters)	GADDAM		Your S	ocial Security Number	8344014	10
01	106972	07B	1	10A	0	13	0
02	16367	08A	0	10B	0	14	0
04	4702	08B	0	11A	0	15	0
06	620	09A	0	11B	0	19	0
07A	620	09B	0	12	0		

Part 1	. Credit for Income Tax Paid to Another State or Country - N.C. Residents Only							
1.								
	federal gross income	1.	106972					
2.	Portion of Line 1 that was taxed by another state or country	2.	16367					
3.	Divide Line 2 by Line 1	3.	0.1530					
4.	Total North Carolina income tax (From Form D-400, Line 15)	4.	4702					
5.	Multiply Line 4 by Line 3	5.	719					
6.	Amount of net tax paid to the other state or country on the income shown on Line 2	6.	620					
7a.	Credit for Income Tax Paid to Another State or Country	7a.	620					
7b.	Number of states or countries for which a credit is claimed	7b.	1					

### Part 2. Credits for Rehabilitating Historic Structures

On Lines 8a, 9a, 10a, and 11a, enter the amount of expenditures or expenses only if tax year 2022 is the first year the credit is taken. Note: For Lines 8a and 9a, the expenditures and expenses must have been incurred prior to January 1, 2015.

On Lines 8b, 9b, 10b, 11b, 12, and 13, enter the amount of the tax credit taken.

8a.	An income-producing historic structure (Article 3D)	8a.	0	
8b.	Enter installment amount of credit	8b.	0	
9a.	A nonincome-producing historic structure (Article 3D)	9a.	0	
9b.	Enter installment amount of credit	9b.	0	
10a.	An income-producing historic mill facility (Article 3H)	10a.	0	
10b.	Enter amount of credit	10b.	0	
11a.	A nonincome-producing historic mill facility (Article 3H)	11a.	0	
11b.	Enter installment amount of credit	11b.	0	
12.	An income-producing historic structure (Article 3L)	12.	0	
13.	A nonincome-producing historic structure (Article 3L)	13.	0	
	(If you take a credit on Lines 12 or 13, attach Form NC-Rehab to the front of Form D-400.)			

Part 3	. Computation of Total Tax Credits to be Taken for Tax Year 2022		
14.	Tax credits carried over from previous year	14.	0
15.	Reserved for Future Use	15.	0
16.	Add Lines 7a, 8b, 9b, 10b, 11b, 12, 13, 14, and 15	16.	620
17.	North Carolina income tax (From Form D-400, Line 15)	17.	4702
18.	Enter the lesser of Line 16 or Line 17	18.	620
19.	Business incentive and energy tax credits	19.	0
	(Attach Form NC-478 and any required supporting schedules to the front of Form D-400.)		
20.	Total Tax Credits to be Taken for Tax Year 2022	20.	620

