Form **8879**

(Rev. January 2021)

Department of the Treasury Internal Revenue Service

IRS e-file Signature Authorization

▶ ERO must obtain and retain completed Form 8879.

► Go to www.irs.gov/Form8879 for the latest information.

OMB No. 1545-0074

Submission Identification Number (SID)				
Taxpayer's name	Social secur	ity numbe	r	
MYSURA REDDY BOKKA	649-19	-0151		
Spouse's name	Spouse's so		-	
VINEETHA REDDY VANGA	983-90			
	Enter year you a	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		
1 Adjusted gross income		1		320.
 Total tax		3		280.
4 Amount you want refunded to you		4		912.
5 Amount you want refunded to you		5		632.
Part II Taxpayer Declaration and Signature Authorization (Be sure you get a	and keep a cor		ur retur	n)
Under penalties of perjury, I declare that I have examined a copy of the income tax return (original or ame my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I return (original or amended) I am now authorizing. I consent to allow my intermediate service provider, tr to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason f for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution accour payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial ins authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terr payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation business days prior to the payment (settlement) date. I also authorize the financial institutions involved it taxes to receive confidential information necessary to answer inquiries and resolve issues related to personal identification number (PIN) below is my signature for the income tax return (original or amended Electronic Funds Withdrawal Consent. Taxpayer's PIN: check one box only I authorize GLOBAL TAXES LLC to enter or gene ERO firm name	ended) I am now au I above are the am ransmitter, or electror rejection of the of the U.S. Treasury and indicated in the stitution to debit the minate the authorizen requests must be in the processing of the payment. I fured) I am now authorizerate my PIN Erate my PIN Erate my PIN am now authorizerate mow authorizerate my PIN Erate	thorizing, nounts from the return transmiss and its detax prepare entry to return and the electric entry and the return and the return to return the return the return to return the	and to the om the income the income the income the income	e best of ome tax or (ERO) e reason Financial ware for unt. This cancel) a remember of that the able, my
Spouse's PIN: check one box only				
X I authorize GLOBAL TAXES LLC to enter or general ERO firm name			\square	as my
signature on the income tax return (original or amended) I am now authorizing.		nter five di on't enter a		
I will enter my PIN as my signature on the income tax return (original or amended) I if you are entering your own PIN and your return is filed using the Practitioner PIN below.				
Spouse's signature ▶ Date				
Practitioner PIN Method Returns Only—continue be	elow			
Part III Certification and Authentication — Practitioner PIN Method Only				
ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN.	2 2 2 4 9	6 6	1 9 8	9
	Don't en	ter all zero	os	
I certify that the above numeric entry is my PIN, which is my signature for the electronic individual inco- authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am requirements of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS <i>e-file</i> Provider	submitting this ret	urn in ac	cordance	
ERO's signature ▶ Date	.			
ERO Must Retain This Form — See Instruction				
Don't Submit This Form to the IRS Unless Requested	To Do So			

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

OMB No. 1545-0074

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

	s 🗌 S	Single X Married filing jointly	Marrie	ed filing separate	ly (MFS)	Head of	househ	old (HOH	H) [fying survi	iving
Check only one box.	If vo	u checked the MFS box, enter the i	name of v	your spouse. If yo	u chack	red the HOH or	r 088 h	ov ente	r the		se (QSS) name if the	e aualifyina
ONE BOX.		on is a child but not your depender		your spouse. If ye	d Check		QUUL	ox, crite	1 1110	Cilia 3 i	iamo ii tin	c qualifying
Your first name			Last na	me						our soc	ial security	v number
MYSURA I			BOKK							649-19-0151		
		s first name and middle initial	Last na						_	Spouse's social security number		
VINEETHA			VANG							•	0-6092	-
		er and street). If you have a P.O. box, se					Ar	ot. no.				n Campaign
3504 COI	,		o il loti doti	one.			Ι.	25	- 1		ere if you, o	
		ce. If you have a foreign address, also c	omnlete s	naces helow	Sta	ate.	ZIP co					tly, want \$3
HENRICO	JOSE OIII	oc. II you have a loreign address, also o	ompicto 3	paces below.	V		2329			_		Checking a
Foreign countr	v name		- 1	Foreign province/st				postal co			w will not on the contract of	cnange
r oreign countr	y mame			oreign province/st	atc/court	· y	1 oreign	i postai oc	ac ,	ou. tur	You	Spouse
Distal	۸+ or	ny time during 2022, did you: (a) red	noivo (an	a roward award	or pov	mont for propo	rtv or o	on (iooo)	or (h			
Digital Assets		ange, gift, or otherwise dispose of									Yes	X No
Standard		eone can claim: You as a d				a dependent	uoocij.	(000 111	Straot	10110.)		
Standard Deduction	_	Spouse itemizes on a separate retu										
		_		_	tao anoi	·						
Age/Blindnes	s You:	Were born before January 2,	1958	_ Are blind	Spouse	: U Was bo			, ,		Is blir	
Dependent	s (see	instructions):		(2) Social sec	urity	(3) Relationsh	nip (4)	Check th	e box	if qualifie	es for (see i	instructions):
If more	(1) F	rst name Last name		number		to you		Child ta	x cred	dit C	redit for oth	er dependents
than four												<u> </u>
dependents, see instruction	s								<u></u>	\perp		<u></u>
and check _									<u></u>	\perp		<u></u>
here								L		$\dashv \perp$	<u>L</u>	
Income	1a	Total amount from Form(s) W-2, I	oox 1 (se	e instructions)						1a	8	2,720.
	b	Household employee wages not	reported	on Form(s) W-2						1b		
Attach Form(s) W-2 here. Also	С	Tip income not reported on line 1	`	,						1c		
attach Forms	d	Medicaid waiver payments not re	•	.,	ee instru	uctions)				1d		
W-2G and 1099-R if tax	е	Taxable dependent care benefits		· ·						1e		
was withheld.	f	Employer-provided adoption ben		•						1f		
If you did not	g	Wages from Form 8919, line 6 .								1g		
get a Form W-2, see	h	Other earned income (see instruc	tions)							1h		0.
instructions.	i	Nontaxable combat pay election	(see instr	ructions)		<u>1</u> i					4	
	z	Add lines 1a through 1h	· ;							1z	8	2,720.
Attach Sch. B	2 a	Tax-exempt interest	2a			axable interes				2b		
if required.	3a	Qualified dividends	3a			Ordinary divide				3b		
	4a	IRA distributions	4a			axable amoun				4b		
Standard Deduction for—	5a	Pensions and annuities	5a			axable amoun				5b		
Single or	6a	Social security benefits	6a		1	axable amoun	t			6b		
Married filing separately,	С	If you elect to use the lump-sum		•	`	,			. 📙		4	
\$12,950	7	Capital gain or (loss). Attach Sche		f required. If not i	required	, check here			. Ш	7		
Married filing jointly or	8	Other income from Schedule 1, li								8		9,400.
Qualifying	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7			lincom	e				9	7	3,320.
surviving spouse, \$25,900	10	Adjustments to income from Sch	•							10		
Head of household,	11	Subtract line 10 from line 9. This	-	-						11		3,320.
\$19,400	12	Standard deduction or itemized		•	,					12	2	25,900.
If you checked any box under	13	Qualified business income deduc								13		
Standard Deduction,	14	Add lines 12 and 13								14		5,900.
see instructions.	15	Subtract line 14 from line 11. If ze	ero or les	s, enter -0 This	is your	taxable incom	1е .			15	4	7,420.

Form 1040 (202)	2)								Page 2
Tax and	16	Tax (see instructions). Check	if any from Form	(s): 1 881	4 2 🗌 4972	3 🗌		. 16	5,280.
Credits	17	Amount from Schedule 2, lin	e3					. 17	
	18	Add lines 16 and 17						. 18	5,280.
	19	Child tax credit or credit for o	other dependent	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, e	enter -0				. 22	5,280.
	23	Other taxes, including self-en	nployment tax,	from Schedule	2, line 21 .			. 23	0.
	24	Add lines 22 and 23. This is	your total tax					. 24	5,280.
Payments	25	Federal income tax withheld							
	а	Form(s) W-2				25a	11,9	12.	
	b	Form(s) 1099				25b			
	С	Other forms (see instructions	;)			25c			
	d	Add lines 25a through 25c						. 25d	11,912.
If you have a	26	2022 estimated tax payment	s and amount a	pplied from 20	21 return			. 26	
qualifying child,	27	Earned income credit (EIC)				27			
attach Sch. EIC.	28	Additional child tax credit from	n Schedule 8812			28			
	29	American opportunity credit	from Form 8863	, line 8		29			
	30	Reserved for future use .				30			
	31	Amount from Schedule 3, lin	e 15			31			
	32	Add lines 27, 28, 29, and 31.	. 32						
	33	Add lines 25d, 26, and 32. Tl	nese are your to	tal payments				. 33	11,912.
Refund	34	If line 33 is more than line 24	, subtract line 24	4 from line 33.	This is the amou	nt you ove	rpaid .	. 34	6,632.
	35a	Amount of line 34 you want			is attached, che	ck here		35a	6,632.
Direct deposit?	b	Routing number 0 4 4			c Type:	Checking	Sav	ings	
See instructions.	d	Account number 9 2 5	9 1 7 7	1 3					
	36	Amount of line 34 you want a	pplied to your	2023 estimate	ed tax	36			
Amount You Owe	37	Subtract line 33 from line 24. For details on how to pay, go						. 37	
	38	Estimated tax penalty (see in	structions) .			38			
Third Party Designee		you want to allow another structions	•				Yes. Comp	olete below.	X No
		signee's		Phone				identification	
		me		no.			number (
Sign		der penalties of perjury, I declare the lief, they are true, correct, and complete.							
Here	Yo	ur signature		Date	Your occupation				ent you an Identity
								Protection P (see inst.)	PIN, enter it here
Joint return? See instructions.					SOFTWARE		PER	, ,	
Keep a copy for	Sp	ouse's signature. If a joint return, b	oth must sign.	Date	Spouse's occupat	tion			ent your spouse an ection PIN, enter it here
your records.					HOME MAKE	R		(see inst.)	
	Ph	one no. (804)988-6373	3	Email address	MYSURA243		.COM		
Doid	Pre	eparer's name	Preparer's signat	ure		Date	PT	ΊΝ	Check if:
Paid	SYAM	M PRIYA RAM SAGAR GUPTA TALLAM	SYAM PRIYA	RAM SAGAR	GUPTA TALLAM	03/01/	2023 P0	2082703	Self-employed
Preparer	Fir	m's name GLOBAL TAX	KES LLC					Phone no.	(678)965-9522
Use Only	Fir	m's address 245 ROONE	CT E BRU	NSWICK N	J 08816			Firm's EIN	84-3171965
Co to ununu ima m	/Far	n 10.40 for instructions and the leter	at information						F 1040 (2000)

SCHEDULE 1 (Form 1040)

Additional Income and Adjustments to Income

OMB No. 1545-0074

2022

Attachment

Department of the Treasury Internal Revenue Service

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

MYSURA REDDY BOKKA & VINEETHA REDDY VANGA

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

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

Attachment Sequence No. 01 Your social security number

649-19-0151

Par	t I 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. Atta	ach Schedule E .	5	-9,400.
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 ($\overline{)}$	
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		
- 1	Income from the rental of personal property if you engaged in the rental			
	for profit but were not in the business of renting such property	81		
m	Olympic and Paralympic medals and USOC prize money (see			
	instructions)	8m		
n	Section 951(a) inclusion (see instructions)	8n		
0	Section 951A(a) inclusion (see instructions)	80		
р	Section 461(I) excess business loss adjustment	8p		
q	Taxable distributions from an ABLE account (see instructions)	8q		
r	Scholarship and fellowship grants not reported on Form W-2	8r		
S	Nontaxable amount of Medicaid waiver payments included on Form			
	1040, line 1a or 1d	8s ()	
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		
9	Total other income. Add lines 8a through 8z		9	
10	Combine lines 1 through 7 and 9. Enter here and on Form 1040, 1040-SR	, or 1040-NR, line 8	10	-9,400.

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

Par	t II Adjustments to Income			
11	Educator expenses		11	
12	Certain business expenses of reservists, performing artists, and fee-basis governr			
	officials. Attach Form 2106	L	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	L	17	
18	Penalty on early withdrawal of savings	L	18	
19a	Alimony paid		I9a	
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	L	23	
24	Other adjustments:			
а	Jury duty pay (see instructions)			
b	Deductible expenses related to income reported on line 8l from the			
	rental of personal property engaged in for profit			
С	Nontaxable amount of the value of Olympic and Paralympic medals			
	and USOC prize money reported on line 8m			
d	Reforestation amortization and expenses			
е	Repayment of supplemental unemployment benefits under the Trade			
	Act of 1974			
f	Contributions to section 501(c)(18)(D) pension plans			
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)			
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	_		
J	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			
25	Total other adjustments. Add lines 24a through 24z		25	
25 26	,		23	
26	Add lines 11 through 23 and 25. These are your adjustments to income . Enter here and Form 1040 or 1040-SR, line 10, or Form 1040-NR, line 10a		26	
	1 01111 1040 01 1040-011, IIIIE 10, 01 1 01111 1040-1110, IIIIE 10a		2 0	

SCHEDULE E (Form 1040)

Supplemental Income and Loss

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

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

Your social security number

Department of the Treasury Internal Revenue Service Name(s) shown on return

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

Attachment Sequence No. **13**

OMB No. 1545-0074

MYSU	JRA REDDY BOKKA & VINEETHA REDDY VANG	SA.					649-1	9-0151	
Part	Income or Loss From Rental Real Estate Note: If you are in the business of renting personal pr rental income or loss from Form 4835 on page 2, line	roperty, us		e C . See	instruct	ions. If you a	are an indi	vidual, rep	ort farm
	Did you make any payments in 2022 that would require								s 🛛 No
В	f "Yes," did you or will you file required Form(s) 1099?							. 🗌 Y e	s 🗌 No
1a	Physical address of each property (street, city, state								
Α	RANGAREDDY HYDERABAD TELANGANA IN 5	01510							
В									
С									
1b	Type of Property (from list below) 2 For each rental real estate property above, report the number of	fair renta	al and			Rental Days		nal Use iys	QΊΛ
Α	g personal use days. Check th			Α		365		0	
В	if you meet the requirements qualified joint venture. See in			В					
С	quained joint venture. See ii	isti uctioi	15.	С					
1	of Property: Single Family Residence 3 Vacation/Short-Term Multi-Family Residence 4 Commercial	Rental	5 Land			Self-Rental Other (descr			
						Properti	es:		
Incon				Α		В			С
3	Rents received			5	00.				
4	Royalties received	4							
Expe									
5	Advertising								
6	Auto and travel (see instructions)			1,0	00				
7 8	Cleaning and maintenance			1,0	00.				
9	Insurance								
10	Legal and other professional fees		1						
11	Management fees			8	00.				
12	Mortgage interest paid to banks, etc. (see instruction				00.				
13	Other interest	· —							
14	Repairs			2,8	00.				
15	Supplies			1,5					
16	Taxes		;						
17	Utilities		,	3,8	00.				
18	Depreciation expense or depletion		3						
19	Other (list))						
20	Total expenses. Add lines 5 through 19	20)	9,9	00.				
21	Subtract line 20 from line 3 (rents) and/or 4 (royalties result is a (loss), see instructions to find out if you m file Form 6198	iust		-9,4	00.				
22	Deductible rental real estate loss after limitation, if a on Form 8582 (see instructions)	any,			0.)()	(
23a	Total of all amounts reported on line 3 for all rental pr	roperties			23a		500.		
b	Total of all amounts reported on line 4 for all royalty p	oropertie	s		23b				
С	Total of all amounts reported on line 12 for all proper	ties .			23c				
d	Total of all amounts reported on line 18 for all proper	ties .			23d				
е	Total of all amounts reported on line 20 for all proper				23e	9	,900.		
24	Income. Add positive amounts shown on line 21. Do		-				. 24		
25	Losses. Add royalty losses from line 21 and rental real							(9,400.
26	Total rental real estate and royalty income or (los here. If Parts II, III, IV, and line 40 on page 2 do Schodule 1 (Form 1040) line 5. Otherwise include the	not appl	y to you,	also er	iter this	amount o	n		0 400
	Schedule 1 (Form 1040), line 5. Otherwise, include th	แร สเทอนโ	it iii tile to	nai OΠ III	⊓ ୯ 410	⊓ page ∠	. 26	l	-9,400.

2022 VA760CG Page 1





MYSURA REDDY BOKKA VINEETHA RED VANGA 3504 CORUM DRIVE APT 925

HENRICO	7.77	23294
HENRICO	VA	2329 4

_							_
SSN - You	BOKK		649190151	Vendor ID	1555		XXXXX
SSN - Spouse	VANG		983906092				
Fed Adj Gross Income (FA	AGI)	1.	73320.	Withholding (VA) - Yo	DU	19A.	4136.
Additions		2.		Withholding (VA) - Sp	oouse	19B.	
Subtotal		3.	73320.	Estimated Payments		20.	
Age Deduction - You	4	4A.		2021 Overpayment		21.	
Age Deduction - Spouse	4	4B.		Extension Payments		22.	
Soc Sec & Tier 1 Railroad	I	5.		Credit - Low-Income	or EIC	23.	
State Income Tax Overpa	yment	6.		Credit - Schedule OS	С	24.	
Subtractions		7.		Credits - Schedule CF	3	25.	
Subtotal Subtractions		8.		Total Payments / Cre	dits	26.	4136.
Total VA Adj Gross Income	e (VAGI)	9.	73320.	Tax You Owe		27.	
Itemized Deductions - VA	Sch A	10.		Tax Overpayment		28.	1205.
Standard Deduction		11.	16000.	Overpayment Credited	d to Next Year	29.	
Exemptions		12.	1860.	VAC - Virginia 529 / A	ABLE	30.	
Deductions		13.		VAC - Other Contribu	itions	31.	
Subtotal (Deductions & Ex	xemptions)	14.	17860.	Addition to Tax, Penal	Ity & Interest	32.	
VA Taxable Income		15.	55460.	Sales and Use Tax		33.	
Amount of Tax		16.	2931.	Amount You Owe			
Spouse Tax Adjustment (S	STA)	17.		Will Pay by Credit/Debit Your Refund	Card N	- 1	1205.
VAGI - Spouse	1	17A.		Deals Deather #			044000037
Net Amount of Tax		18.	2931.	Bank Routing #		C 02501	044000037
	L			Bank Account #		92591	L / / L 3





I						
Filing Status, Age 8	& License I	nformation			Additional Filing Information	
Filing Status				2	Locality	087
Federal Head of H	lousehold				Uninsured & Authorize DMAS	
DOB - You		05	20199	0	Name or Filing Status Change	
VA Driver's Licens	se ID - You	В64	20410	8	Address Change	
VA Driver's Licens	se - Iss. Date	- You 0 9	06202	2	VA Return Not Filed Last Year	
Spouse Name (Fil	ing Status 3 (Only)			Dependent on Another's Return	
DOD Coouse		10	01199	7	Farmer / Fisherman / Merchant Seaman	
DOB - Spouse VA Driver's Licens	e ID - Spous		64425		Amended	
VA Driver's Licens	·		21202		Reason Code	
	e - 155. Date	·	21202	. 2	Overseas on Due Date	
Exemptions (A) You	1	Exemptions (B) 65 & Over - You			Federal EIC & Amount	
Spouse	1	65 & Over - Spou	se		Deceased Indicator	
Dependents		Blind - You			Form 760C or 760F	
Total (A)	2	Blind - Spouse			No Sales & Use Tax Due Indicator	X
		Total (B)			Obtain Electronic 1099G	
		Contact Information	,		ID Theft PIN	
		penalty of law that I (we) have	e examined t		of my (our) knowledge, it is a true, correct & complete return. If you are	he United States.
Signature - You			_ Date		Phone - You	386373
Signature - Spouse			_ Date	000100	Phone - Spouse	
Signature - Preparer S	YAM PRIYA R	RAM SAGAR GUPTA TALL <i>I</i>	<u>M</u> Date	030123	Phone - Preparer	559522

File by May 1, 2023

The Tax Department may discuss my/our return with my/our preparer.

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

245 ROONEY CT E BRUNSWICK

GLOBAL TAXES LLC

Preparer Information

NJ 08816

7

Page 2 of 2

P02082703

2022 Schedule INC/CG

649190151

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

MYSURA REDDY

BOKKA

VINEETHA RED

VANGA



Your/ Spouse SSN	Withholding Type	VA Withholding	Employer FEIN	VA Account Number	VA Wages, tips, other comp.
Γ					٦
649190151	W	4136.	474582145	30474582145F001	82720.

Total VA Withholding SSN VA Withholding 649190151 4136.

Spouse

You

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

01

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!

Virgii	nia Submission Identification Number (SID)						
Your	Name	B Your Social Sec	curity Number				
MYST	JRA REDDY BOKKA	649-19-01	51				
	se's Name	A Spouse's Socia					
VINE	EETHA REDDY VANGA	983-90-60	92				
Part		A Spouse	B Yourself				
1.	Federal Adjusted Gross Income (Form 760CG, Line 1; 760PY, Line 1, columns A & B; Form 763, Line 1)	-	73320.				
2.	Virginia Adjusted Gross Income (Form 760CG, Line 9; 760PY, Line 10, columns A & B; Form 763, Line 9)		73320.				
3.	Taxable Income (Form 760CG, Line 15; 760PY, Line 16, columns A & B; Form 763, Line 17)		55460.				
4.	Virginia Income Tax (Form 760CG, Line 18; 760PY, Line 17, columns A & B; Form 763 Line 18)		2931.				
5.	Withholding (Form 760CG, Line 19a & 19b; 760PY, Lines 19a & 19b; Form 763, Lines 19a & 19b)		4136.				
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)		1205.				
Part	II Declaration of Taxpayer and Signature Authorization r penalties of perjury, I declare that I have examined a copy of my individual income tax return and accompanying so						
Returnumb filling liable Virgir refund of the	mber 31, 2022, and to the best of my knowledge and belief, it is true, correct and complete. I further declare that the n Originator (ERO), Transmitter, or Intermediate Service Provider (including my name, address and social security er) and the amount shown in Part I above agree with the information and amounts shown on the corresponding line a balance due return, I understand that if the Virginia Department of Taxation (Virginia Tax) does not receive full and for the tax liability and all applicable interest and penalties. I authorize my ERO, Transmitter or Intermediate Servicia Tax. I have selected a personal identification number (PIN) as my signature for my electronic income tax return and or direct debit of my tax due. In choosing either direct deposit or direct debit, I certify that the transaction does not territorial jurisdiction of the United States at any point in the process. Taxpayers may sign the form using a rubber sture pen, or computer software program.	number or individual tax as of my electronic incord timely payment of my be Provider to transmit r and, if applicable, the did directly involve a finance	tidentification me tax return. If I am tax liability, I remain my complete return to frect deposit of my cial institution outside				
-	ayer's e-File PIN: check one box only	al Vincinia in dividual in					
X	I authorize the ERO named below to enter my e-File PIN 9 0 1 5 1 as my signature on my 2022 e-file Do not enter all zeros	ed virginia individuai inc	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 and your return is filed using the Practitioner PIN method. The ERO must complete Part III below.	only if you are entering	your own e-File PIN				
Your	Signature Date						
Spou	se's e-File PIN: check one box only						
X	I authorize the ERO named below to enter my e-File PIN 0 6 0 9 2 as my signature on my 2022 e-file Do not enter all zeros	ed Virginia individual inc	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.	only if you are entering	your own e-File				
	se'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					
indica Hand a sigr	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.						
EKO,	s Signature Date03-03	1-25					