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

Submis	ssion Identification Number (SID)						
Taxpaye	r's name		Social sec	urity numb	er		
NAGA	A RAMA SURYA BALA VOBILISETTY		899-4	13-963	0		
Spouse's	s name		Spouse's	social secu	ırity numb	oer	
Part	Tax Return Information — Tax Year Ending December	31, 2022 (Ente	 er year you	ı are au	thorizin	g.)	
Enter v	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.						
	Adjusted gross income						75.
	Total tax						42.
	Federal income tax withheld from Form(s) W-2 and Form(s) 1099						43.
	Amount you want refunded to you					5,1	01.
5 Part	Amount you owe		keen a c	ony of y	our ret	turn	١
	penalties of perjury, I declare that I have examined a copy of the income tax re						
to send for any Agent to payment authoriz payment busines taxes to personal	original or amended) I am now authorizing. I consent to allow my intermediate my return to the IRS and to receive from the IRS (a) an acknowledgement of delay in processing the return or refund, and (c) the date of any refund. If app in initiate an ACH electronic funds withdrawal (direct debit) entry to the financial of of my federal taxes owed on this return and/or a payment of estimated tax, station is to remain in full force and effect until I notify the U.S. Treasury Fination, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Pos days prior to the payment (settlement) date. I also authorize the financial in the receive confidential information necessary to answer inquiries and resolves a confidential information receives to answer inquiries and resolves to the payment (PIN) below is my signature for the income tax return in Europe Withdray (Consort).	receipt or reason for re olicable, I authorize the al institution account in and the financial institut ancial Agent to termina ayment cancellation re- istitutions involved in the issues related to the	ejection of the U.S. Treasured in the tion to debit the the author quests must be processing payment. I	e transmisy and its of e tax prepthe entry the entry the received of the electrication.	ssion, (b) designate paration s to this ac o revoke ved no la ectronic knowled	the red Finsoftwa count (care) ater to payments	reason ancial are for t. This ncel) a than 2 nent of the
	nic Funds Withdrawal Consent.		Γ			7	
Taxpa:	yer's PIN: check one box only I authorize GLOBAL TAXES LLC	to enter or generate	DINI DINI	3 9 6	5 3 0		
	ERO firm name	to enter or generate	e IIIy FIIN	Enter five don't ente		t	ıs my
	signature on the income tax return (original or amended) I am now a	authorizing.		don t ente	all Zeros	•	
	I will enter my PIN as my signature on the income tax return (origin if you are entering your own PIN and your return is filed using the below.						
Your si	gnature ►	Date ▶					
Spous	e's PIN: check one box only					_	
	I authorize	to enter or generate	e mv PIN			a	s my
	ERO firm name	•	, , [Enter five		t	,
	signature on the income tax return (original or amended) I am now a	authorizing.		don't ente	r all zeros	6	
	I will enter my PIN as my signature on the income tax return (origin if you are entering your own PIN and your return is filed using the below.						
Spouse	e's signature ►	Date ►					
	Practitioner PIN Method Returns Or	-	N				
Part I	Certification and Authentication — Practitioner PIN M	ethod Only					
ERO's	EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-se	elected PIN.					
	, , , , ,		Don't	enter all ze	ros		_
authoriz	that the above numeric entry is my PIN, which is my signature for the electriced to file for tax year indicated above for the taxpayer(s) indicated above. In the Practitioner PIN method and Pub. 1345 , Handbook for Authorized	confirm that I am sub	mitting this i	return in a	accordan	će wi	
ERO's	signature ▶	Date ►					
	ERO Must Retain This Form —						
	Don't Submit This Form to the IRS Unle		Do So				

E 1040 Department of the Treasury—Internal Revenue Service U.S. Individual Income Tax Return

2022

OMB No. 1545-007

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

Filing Status	X S	Single Married filing jointly	Marrie	ed filing separatel	y (MFS)	☐ Head of	household (HOH)		ifying su		j
Check only one box.	•	u checked the MFS box, enter the nonis a child but not your dependen	,	our spouse. If yo	u check	ed the HOH or	QSS box, enter th		ise (QSS name if	,	alifying
Your first name	and mi	ddle initial	Last na	me				Your so	cial secu	rity nur	nber
NAGA RAN	4A SU	JRYA BALA	VOBI	LISETTY				899-43-9630			
		first name and middle initial	Last nai						s social s		number
Home address	(numbe	er and street). If you have a P.O. box, see	 e instruction	ons.			Apt. no.	Preside	ntial Elec	tion Ca	 ımpaign
_5672 INI	TINIT	TY LN,					114	ı	ere if yo		
City, town, or p	ost offic	ce. If you have a foreign address, also co	omplete s _l	paces below.	Sta	te	ZIP code		if filing jo this fund		
VIRGINIA	A BEA	ACH			VA	A	23464	box belo	ow will no	ot chan	0
Foreign country	y name		F	Foreign province/sta	ate/coun	ty	Foreign postal code	your tax	or refun	_	Spouse
Digital	At ar	ny time during 2022, did you: (a) rec	eive (as	a reward, award,	or payr	nent for prope	rty or services); or	(b) sell,			Spouse
Assets	exch	ange, gift, or otherwise dispose of	a digital	asset (or a financ	ial inter	est in a digital	asset)? (See instru	ictions.)	☐ Yes	s X	No
Standard		eone can claim: You as a de	•	·		a dependent					
Deduction		Spouse itemizes on a separate retu	n or you	were a dual-stat	us alien	<u> </u>					
Age/Blindness	You:	☐ Were born before January 2, 1	958	Are blind	Spouse	: Was bor	n before January 2			blind	
Dependent				(2) Social secu	urity	(3) Relationsh			,		,
If more	(1) Fi	rst name Last name		number		to you	Child tax c	redit	Credit for	other de	pendents
than four dependents,										<u>Ш</u>	
see instruction	s ——									<u></u>	
and check	, —									ᆜ	
here									1		
Income	1a	Total amount from Form(s) W-2, b	,	,				. 1a		111,	<u>/25.</u>
Attach Form(s)	b	Household employee wages not r	•	. ,				. 1b			
W-2 here. Also	С.	Tip income not reported on line 1a (see instructions)									
attach Forms	d	Medicaid waiver payments not reported on Form(s) W-2 (see instructions)									
W-2G and 1099-R if tax	е	Taxable dependent care benefits from Form 2441, line 26									
was withheld.	f	Employer-provided adoption benefits from Form 8839, line 29									
If you did not	9	Wages from Form 8919, line 6.						. 1g			
get a Form W-2, see	h	Other earned income (see instruct	,					. 1h			0.
instructions.	i	Nontaxable combat pay election (see instr	ructions)		<u>1</u> i			١.	111 '	705
	<u>z</u>	Add lines 1a through 1h		i				. 1z		111,	125.
Attach Sch. B if required.	2a	Tax-exempt interest	2a			axable interes		. 2b			
ii required.	3a	Qualified dividends	3a			ordinary divide		. 3b	_		
	4a	IRA distributions	4a			axable amoun					
Standard Deduction for—	5a		5a			axable amoun		. 5b			
Single or	6a	,	6a			axable amoun	t	. 6b			
Married filing separately,	C 7	If you elect to use the lump-sum e		*	`	,		╡ ├_			
\$12,950	7	Capital gain or (loss). Attach Sche						-7 -8	+		
Married filing jointly or	8	Other income from Schedule 1, lir		This is your total				. 8	 		750.
Qualifying surviving spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7 Adjustments to income from Sche		•				. 9		LUZ, S	<u>975.</u>
\$25,900	10	•	-					. 10		102	075
 Head of household, 	11	Subtract line 10 from line 9. This is Standard deduction or itemized						. 11			975.
\$19,400 If you checked	12 13	Qualified business income deduction		•	,	 5_Δ		. 12		<u> </u>	950.
any box under	14									10 (<u></u>
Standard Deduction,	15	Subtract line 14 from line 11. If ze					 ne				<u>950.</u> 025.
see instructions.	.5	Castact into 14 Hom line 11. H 26	. 5 6. 163	o, onto 0 . 11115	.o your	andoio illooli		. 13		JU, (J _ J .

Form 1040 (2022	2)								Page 2
Tax and	16	Tax (see instructions). Check	if any from Form	n(s): 1 881	4 2 🗌 4972	3 🗌		. 16	15,442.
Credits	17	Amount from Schedule 2, lin	e3					. 17	
	18	Add lines 16 and 17						. 18	15,442.
	19	Child tax credit or credit for	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,	enter -0				. 22	15,442.
	23	Other taxes, including self-en	mployment tax,	from Schedule	e 2, line 21 .			. 23	0.
	24	Add lines 22 and 23. This is	your total tax					. 24	15,442.
Payments	25	Federal income tax withheld							
-	а	Form(s) W-2				25a	20,54	3.	
	b	Form(s) 1099				25b			
	С	Other forms (see instructions	3)			25c			
	d	Add lines 25a through 25c						. 25d	20,543.
If	26	2022 estimated tax payment	s and amount a	pplied from 20	21 return			. 26	
If you have a qualifying child,	27	Earned income credit (EIC)				27			
attach Sch. EIC.	28	Additional child tax credit from							
	29	American opportunity credit				29			
	30	Reserved for future use .				30			
	31	Amount from Schedule 3, lin				31			
	32	Add lines 27, 28, 29, and 31.	. These are your	total other pa	ayments and re	fundable cred	its .	. 32	
	33	Add lines 25d, 26, and 32. T	hese are your to	tal payments				. 33	20,543.
Refund	34	If line 33 is more than line 24	-					. 34	5,101.
neiulia	35a	Amount of line 34 you want i	refunded to you	u. If Form 8888	s is attached, ch	eck here .	[35a	5,101.
Direct deposit?	b	Routing number 0 2 1				X Checking	Savin		
See instructions.	d	Account number 4 8 3	0 6 4 4	7 2 9 9			_		
	36	Amount of line 34 you want a	applied to your	2023 estimate	ed tax	36			
Amount	37	Subtract line 33 from line 24	This is the amo	ount vou owe					
You Owe	0.	For details on how to pay, go		•		S		. 37	
	38	Estimated tax penalty (see in	nstructions) .			38			
Third Party	Do	you want to allow another				S? See			
Designee		structions	•				s. Comple	ete below.	⋉ No
•		signee's		Phone				lentification	
	nai			no.			number (PI		
Sign		der penalties of perjury, I declare to ief, they are true, correct, and com-							
Here			piete. Deciaration (,
	YO	ur signature		Date	Your occupation				nt you an Identity IN, enter it here
Joint return?					SOFTWARE	EMPLOYEE		(see inst.)	
See instructions.	Sp	ouse's signature. If a joint return, b	oth must sign.	Date	Spouse's occup	ation			nt your spouse an
Keep a copy for your records.							I	•	ection PIN, enter it here
your records.								(see inst.)	
		one no. (518) 389-576		Email address	VNRSBALA	JI@GMAIL.			
Paid	Pre	eparer's name	Preparer's signat	ture		Date	PTIN	1	Check if:
Preparer									Self-employed
Use Only	Fin	m's name GLOBAL TAX						Phone no.	
	Fin	m's address 245 ROONE	Y CT E BRU	NSWICK N	J 08816			Firm's EIN	
Go to www.irs.g	ov/Forn	n1040 for instructions and the late	st information.		BAA	REV 01/28/23 F	RO		Form 1040 (2022)

SCHEDULE 1 (Form 1040)

Additional Income and Adjustments to Income

OMB No. 1545-0074

2022
Attachment Sequence No. 01

Your social security number

Department of the Treasury Internal Revenue Service

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

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

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

IAGA	RAMA SURYA BALA VOBILISETTY	899-4	3-96	30	
Par	Additional Income				
1	Taxable refunds, credits, or offsets of state and local income taxes			1	
2 a	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. Attac	h Schedule	Ε.	5	-8,750.
6	Farm income or (loss). Attach Schedule F		[6	
7	Unemployment compensation		[7	
8	Other income:				
а	Net operating loss	Ba ()		
b	Gambling	Bb			
С	Cancellation of debt	Вс			
d		Bd ()		
е		Be			
f		3f			
g	Alaska Permanent Fund dividends	3g			
h	, , , ,	Bh			
i		Bi			
j		Вј			
k		3k			
I	Income from the rental of personal property if you engaged in the rental				
	· · · · · · · · · · · · · · · · · · ·	BI			
m	Olympic and Paralympic medals and USOC prize money (see				
	,	m			
n		Bn			
0	·	Во			
р		Вр			
-	` '	3q			
r	1 1 5 1	3r			
S	Nontaxable amount of Medicaid waiver payments included on Form)- (
	· · · · · · · · · · · · · · · · · · ·	Bs (
t	Pension or annuity from a nonqualifed deferred compensation plan or	.			
	•	3t			
		Bu			
Z	Other income. List type and amount:	_			
		3z			

Combine lines 1 through 7 and 9. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 8

-8**,**750.

9

10

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 gov		
	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)		
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	-	
h	Attorney fees and court costs for actions involving certain unlawful		
	discrimination claims (see instructions)	-	
- 1	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		
	tax law violations		
J	Excess deductions of section 67(e) expenses from Schedule K-1 (Form		
k	1041)		
-	Other adjustments. List type and amount:		
Z	04-		
25	Total other adjustments. Add lines 24a through 24z	25	
25 26	Add lines 11 through 23 and 25. These are your adjustments to income . Enter here	23	
20	Form 1040 or 1040-SR, line 10, or Form 1040-NR, line 10a	26	

SCHEDULE E (Form 1040)

Supplemental Income and Loss

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

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

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

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

Sequence No. 13

Your social security number

OMB No. 1545-0074

899-43-9630 NAGA RAMA SURYA BALA VOBILISETTY Part I Income or Loss From Rental Real Estate and Royalties **Note:** If you are in the business of renting personal property, use **Schedule C**. See instructions. If you are an individual, report farm rental income or loss from **Form 4835** on page 2, line 40. Did you make any payments in 2022 that would require you to file Form(s) 1099? See instructions . 1a Physical address of each property (street, city, state, ZIP code) VYSYA STREET, KHANDAVALLI PERAVALI MANDAL, W.G.D ANDHRA PRADESH Α В C 1b Type of Property For each rental real estate property listed **Fair Rental Personal Use** QJV (from list below) above, report the number of fair rental and **Davs Davs** personal use days. Check the QJV box only Α Α 365 0 if you meet the requirements to file as a В В qualified joint venture. See instructions. C C Type of Property: 3 Vacation/Short-Term Rental 1 Single Family Residence 5 Land 7 Self-Rental 8 Other (describe) 2 Multi-Family Residence 4 Commercial 6 Royalties **Properties:** Α В C Income: 3 550. 4 Royalties received 4 **Expenses:** 5 5 Advertising 6 Auto and travel (see instructions) 6 900. 7 Cleaning and maintenance. 7 8 Commissions 8 9 9 Insurance . . 10 10 Legal and other professional fees 1,500. 11 Management fees 11 12 Mortgage interest paid to banks, etc. (see instructions) 12 13 13 2,800. 14 14 Repairs . . . 2,300. 15 Supplies 15 16 16 Taxes 17 Utilities 17 1,800. 18 18 Depreciation expense or depletion Other (list) 19 19 20 20 Total expenses. Add lines 5 through 19 9,300. 21 Subtract line 20 from line 3 (rents) and/or 4 (royalties). If result is a (loss), see instructions to find out if you must file Form 6198 21 -8,750.22 Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions) 8,750.) 550. Total of all amounts reported on line 3 for all rental properties Total of all amounts reported on line 4 for all royalty properties 23b Total of all amounts reported on line 12 for all properties 23c 23d Total of all amounts reported on line 18 for all properties 9,300. Total of all amounts reported on line 20 for all properties 23e 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 8,750. Total rental real estate and royalty income or (loss). Combine lines 24 and 25. Enter the result 26 here. If Parts II, III, IV, and line 40 on page 2 do not apply to you, also enter this amount on Schedule 1 (Form 1040), line 5. Otherwise, include this amount in the total on line 41 on page 2 -8,750. 26

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 Attachment Sequence No. **858**

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

Name(s)	shown on return				Ident	ifying r	umber
NAGA	RAMA SURYA BALA VOBILISE	TTY			899	-43-	-9630
Par	2022 Passive Activity Los	S					
	Caution: Complete Parts IV a	nd V before compl	eting Part I.				
	I Real Estate Activities With Active Pance for Rental Real Estate Activities			ive participation, s	ee Special		
1a	Activities with net income (enter the a	mount from Part I	/, column (a)) .	1a	0.		
b	Activities with net loss (enter the amo				8,750.)		
С	Prior years' unallowed losses (enter t Combine lines 1a, 1b, and 1c)					
d		1d	-8,750.				
All Ot	ner Passive Activities						
2a	Activities with net income (enter the a	amount from Part V	'. column (a)) .	2a			
	Activities with net loss (enter the amo)		
С	Prior years' unallowed losses (enter t)		
d			,			2d	
3	Combine lines 1d and 2d. If this line all losses are allowed, including any losses on the forms and schedules no	is zero or more, st prior year unallow	op here and includ	de this form with y	our return;	3	-8,750.
	losses on the forms and schedules in	Jimally used .				3	0,730.
	If line 3 is a loss and: • Line 1d is a						
	• Line 2d is a	loss (and line 1d is	zero or more), ski	ip Part II and go to	line 10.		
Cautio	on: If your filing status is married filing	separately and vo	ou lived with your	spouse at any tim	e during the	vear.	do not complete
	Instead, go to line 10.	, coparatory arra y		opened at any time		<i>y</i> ca.,	
Par	Special Allowance for Re	ntal Real Estate	Activities With	Active Participa	ation		
	Note: Enter all numbers in Pa	rt 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	ne 3			4	8 , 750.
5	Enter \$150,000. If married filing sepa	rately, see instructi	ons	5 1	50,000.		
6	Enter modified adjusted gross incom	e, but not less thar	zero. See instruc	tions 6 1	11,725.		
	Note: If line 6 is greater than or equa	I to line 5, skip line	s 7 and 8 and ent	er -0-			
	on line 9. Otherwise, go to line 7.						
7	Subtract line 6 from line 5			7	38,275.		
8	Multiply line 7 by 50% (0.50). Do not e					8	19,138.
9	Enter the smaller of line 4 or line 8					9	8 , 750.
Part							
10	Add the income, if any, on lines 1a ar					10	0.
11	Total losses allowed from all passiv	ve activities for 20	22. Add lines 9 an	id 10. See instructi	ons to find		0.750
Dowl	out how to report the losses on your	ax return				11	8,750.
Part	V Complete This Part Before	e Part I, Lines I	a, ib, and ic. 5	ee instructions.			
	Name of activity	Currer	nt year	Prior years	Ove	rall ga	in or loss
		(a) Net income	(b) Net loss	(c) Unallowed	(al) Cain		(a) aaa
		(line 1a)	` (line 1b)	loss (line 1c)	(d) Gair	1	(e) Loss
VYSY	YA STREET,KHANDAVALLI				(a) Gair	1	8,750.

8,750.

0.

Total. Enter on Part I, lines 1a, 1b, and 1c

Form 8582 (2022) Page **2**

									. 490 🗕	
Part V Complete This Part Before	re P	art I, Lines 2	a, 2b,	and 2c. S	ee instru	ctions.				
Name of authority		Currer	nt year		Prior y	ears	Overa	ll ga	ain or loss	
Name of activity	(a	Net income (line 2a)	(b) (li	Net loss ne 2b)	(c) Unal loss (lin		(d) Gain		(e) Loss	
Total. Enter on Part I, lines 2a, 2b, and 2c				1: 0						
Part VI Use This Part if an Amou	T		art II,	, Line 9. S	ee instrud	ctions.				
Name of activity	an to	rm or schedule ad line number be reported on se instructions)	(a) Loss			(c) Special allowance		(d) Subtract column (c) from column (a).	
VYSYA STREET,KHANDAVALLI		E Ln 22		8,750.	1.0000	0000	8,75	0.	0.	
Total			uction	8 , 750.	1.0	0	8 , 75	0.	0.	
Allocation of Ghallowed	_03	Form or sche		J.						
Name of activity		and line nun to be reporte (see instruct	nber ed on	(a) l	_oss		(b) Ratio	Ratio (c) Unallow		
Total							1.00			
Part VIII Allowed Losses. See instr	ucti	ons.								
Name of activity		Form or sche and line nun to be reporte (see instruct	nber ed on	(a) l	Loss (b) Unallowed los		nallowed loss	(c) Allowed loss		
Total		<u></u>	. <u>.</u>							

VA-8453 Virginia Department of Taxation

Virginia Individual Income Tax Declaration for Electronic Filing

Tax Year 2022

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 Security Number							
NAGA RAMA SURYA BALA VOBILISETTY	899-43-9630							
Present Home Address	A Spouse's Social Security Number							
5672 INFINITY LN, APT 114								
City, State and Zip Code VIRGINIA BEACH VA 23464	Online Filed Return							
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) 102, 975.							
2. Virginia Adjusted Gross Income (Form 760CG, Line 9; 760PY, Line 10, columns A & B; Form	763, Line 9) 102, 975.							
3. Taxable Income (Form 760CG, Line 15; 760PY, Line 16, columns A & B; Form 763, Line 17)	94,045.							
4. Virginia Income Tax (Form 760CG, Line 18; 760PY, Line 17, columns A & B; Form 763 Line	5,150.							
5. Withholding (Form 760CG, Line 19a &19b; 760PY, Lines 19a & 19b; Form 763, Lines 19a &	19b) 5,858.							
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)	708.							
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 ha								
8c.								
Your Signature Date Spouse's Signature	(If Filing Status 2 or 4, BOTH must sign) Date							
Part III Declaration of Electronic Return Originator (ERO) and Paid Preparer	in ming diatable of 4, Botti made sign)							
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.								
ERO's Signature Date GLOBAL TAXES LLC	SSN/PTIN							
Firm's name (or yours if self-employed) 245 ROONEY CT E BRUNSWICK NJ 08816	Paid Preparer? ☐ Y ☐ N Self-employed? ☐ Y ☐ N 882145487							
Address, City, State and Zip								
Paid Preparer's Signature Date	SSN/PTIN							
Firm's name (or yours if self-employed)	Self-employed? ☐ Y ☐ N							
245 ROONEY CT E BRUNSWICK NJ 08816 Address, City, State and Zip	EIN							
1555 REV 01/31/23 PRO								

2022 VA760CG Page 1





NAGA RAMA SU VOBILISETTY

5672 INFINITY LN, APT 114

VIRGINIA BEACH VA 23464

VIIIOIIVIII BEIIOII	v	11 20101				
SSN-You VOBI		899439630	Vendor ID	1555		XXXXXX
SSN - Spouse						
Fed Adj Gross Income (FAGI)	1.	102975.	Withholding (VA) - You	I	19A.	5858.
Additions	2.		Withholding (VA) - Spo	ouse	19B.	
Subtotal	3.	102975.	Estimated Payments		20.	
Age Deduction - You	4A.		2021 Overpayment		21.	
Age Deduction - Spouse	4B.		Extension Payments		22.	
Soc Sec & Tier 1 Railroad	5.		Credit - Low-Income o	r EIC	23.	
State Income Tax Overpayment	6.		Credit - Schedule OSC		24.	
Subtractions	7.		Credits - Schedule CR		25.	
Subtotal Subtractions	8.		Total Payments / Cred	its	26.	5858.
Total VA Adj Gross Income (VAGI)	9.	102975.	Tax You Owe		27.	
Itemized Deductions - VA Sch A	10.		Tax Overpayment		28.	708.
Standard Deduction	11.	8000.	Overpayment Credited	to Next Year	29.	
Exemptions	12.	930.	VAC - Virginia 529 / AE	BLE	30.	
Deductions	13.		VAC - Other Contributi	ons	31.	
Subtotal (Deductions & Exemptions)) 14.	8930.	Addition to Tax, Penalty	y & Interest	32.	
VA Taxable Income	15.	94045.	Sales and Use Tax		33.	
Amount of Tax	16.	5150.	Amount You Owe Will Pay by Credit/Debit 0	Card N		
Spouse Tax Adjustment (STA)	17.		Your Refund	Jaiu IV	- 1	708.
VAGI - Spouse	17A.		Bank Routing #		—	021000322
Net Amount of Tax	18.	5150.	Bank Account #			64472990
L			Saint toodait #		1000	011,2330





_								
Filing Status, Age 8	License	Information		Additional Filing Information				
Filing Status			1		Locality	810		
Federal Head of Ho	ousehold				Uninsured & Authorize DMAS			
DOB - You		020	41983		Name or Filing Status Change			
VA Driver's License	e ID - You				Address Change			
VA Driver's License	e - Iss. Dat	e - You			VA Return Not Filed Last Year			
Spouse Name (Fili	ing Status 3	3 Only)			Dependent on Another's Return			
					Farmer / Fisherman / Merchant Seaman			
DOB - Spouse	10.0				Amended			
VA Driver's License	•				Reason Code			
VA Driver's License	e - Iss. Dat	•			Overseas on Due Date			
You You	1	Exemptions (B) 65 & Over - You			Federal EIC & Amount			
Spouse		65 & Over - Spouse			Deceased Indicator			
Dependents		Blind - You			Form 760C or 760F			
Total (A)	1	Blind - Spouse			No Sales & Use Tax Due Indicator	X		
		Total (B)			Obtain Electronic 1099G			
					ID Theft PIN ny (our) knowledge, it is a true, correct & complete return ovided is for a domestic account within the territorial juris			
Signature - You			Date	Pł	none - You	5183895760		
Signature - Spouse			Date	Pł	none - Spouse			
Signature - Preparer			Date	Pł	none - Preparer			
The Tax Department ma	ay discuss	my/our return with my/our p	reparer.	Pr	7 reparer Information			

GLOBAL TAXES LLC

245 ROONEY CT

E BRUNSWICK

supporting 760CG documents. 1555 REV 01/31/23 PRO

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

2022 Schedule INC/CG

899439630

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

NAGA RAMA SU

VOBILISETTY



Your/ Spouse SSN	Withholding Type	VA Withholding	Employer FEIN	VA Account Number	VA Wages, tips, other comp.
Г					コ
899439630	M	5858.	043512883	30043512883F001	111725.

Total VA Withholding

You

899439630

5858.

Spouse

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

01

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, Attachment

Department of the Treasury Internal Revenue Service

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

Sequence No. 13

OMB No. 1545-0074

Name(s) shown on return Your social security number 899-43-9630 NAGA RAMA SURYA BALA VOBILISETTY Part I Income or Loss From Rental Real Estate and Royalties **Note:** If you are in the business of renting personal property, use **Schedule C**. See instructions. If you are an individual, report farm rental income or loss from **Form 4835** on page 2, line 40. Did you make any payments in 2022 that would require you to file Form(s) 1099? See instructions . 1a Physical address of each property (street, city, state, ZIP code) VYSYA STREET, KHANDAVALLI PERAVALI MANDAL, W.G.D ANDHRA PRADESH Α В C 1b Type of Property For each rental real estate property listed **Fair Rental Personal Use** QJV (from list below) above, report the number of fair rental and **Davs Davs** personal use days. Check the QJV box only Α Α 365 0 if you meet the requirements to file as a В В qualified joint venture. See instructions. C C Type of Property: 3 Vacation/Short-Term Rental 1 Single Family Residence 5 Land 7 Self-Rental 8 Other (describe) 2 Multi-Family Residence 4 Commercial 6 Royalties **Properties:** Α В C Income: 3 550. 4 Royalties received 4 **Expenses:** 5 5 Advertising 6 Auto and travel (see instructions) 6 900. 7 Cleaning and maintenance. 7 8 Commissions 8 9 9 Insurance . . 10 10 Legal and other professional fees 1,500. 11 Management fees 11 12 Mortgage interest paid to banks, etc. (see instructions) 12 13 13 2,800. 14 14 Repairs . . . 2,300. 15 Supplies 15 16 16 Taxes 17 Utilities 17 1,800. 18 18 Depreciation expense or depletion Other (list) 19 19 20 20 Total expenses. Add lines 5 through 19 9,300. 21 Subtract line 20 from line 3 (rents) and/or 4 (royalties). If result is a (loss), see instructions to find out if you must file Form 6198 21 -8,750.22 Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions) 8,750.) 550. Total of all amounts reported on line 3 for all rental properties Total of all amounts reported on line 4 for all royalty properties 23b Total of all amounts reported on line 12 for all properties 23c

24

25

26

Total of all amounts reported on line 18 for all properties

Total of all amounts reported on line 20 for all properties

Income. Add positive amounts shown on line 21. **Do not** include any losses

Losses. Add royalty losses from line 21 and rental real estate losses from line 22. Enter total losses here

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

8,750.

-8,750.

9,300.

24

25

26

23d

23e