### 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

Subm	ission Identification Number (SID)		·		
Taxpaye	er's name	Social securit	y numl	oer	
MAN	EESH REDDY MUNUKUNTLA	690-92-	-873	0	
Spouse	's name	Spouse's soc	ial sec	urity num	ber
Part	Tax Return Information — Tax Year Ending December 31, 2022 (Enter	⊥ ∵year you a	re au	thorizin	ıg.)
	whole dollars only on lines 1 through 5.	, ,			<u> </u>
Note:	Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.				
1	Adjusted gross income		1		36 <b>,</b> 500.
2	Total tax		2		11,804.
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3	] 1	19,458.
4 5	Amount you want refunded to you		5		7,654.
Part		eep a cop	_	our re	turn)
my know return of to send for any Agent of payme authoric payme business taxes to person	penalties of perjury, I declare that I have examined a copy of the income tax return (original or amended) owledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above (original or amended) I am now authorizing. I consent to allow my intermediate service provider, transmading return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for reject delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indinated in to find for my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminated in, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation request days prior to the payment (settlement) date. I also authorize the financial institutions involved in the to receive confidential information necessary to answer inquiries and resolve issues related to the payment (PIN) below is my signature for the income tax return (original or amended) I authorice Funds Withdrawal Consent.	e are the amounter, or electro- action of the tr S. Treasury and cated in the train to debit the the authorizations must be processing of ayment. I furt	ounts for its of an arministration. The receive the elements of the elements o	from the turn original ssion, (b) designate oration stothis action for the control of the contro	income tax nator (ERO) the reason ed Financial software for count. This e (cancel) a ater than 2 payment of lge that the
	ayer's PIN: check one box only				
Тахра		my PINI 2	8 '	7 3 0	as my
	ERO firm name signature on the income tax return (original or amended) I am now authorizing.	ř Ent		digits, bu er all zero:	ıt -
	I will enter my PIN as my signature on the income tax return (original or amended) I am n if you are entering your own PIN <b>and</b> your return is filed using the Practitioner PIN meth below.				
Your s	signature ▶ Date ▶				
Snous	se's PIN: check one box only				_
Ороца	I authorize to enter or generate	my PINI			as my
	ERO firm name	-	er five	digits, bu	
	signature on the income tax return (original or amended) I am now authorizing.	do	n't ente	er all zeros	S
	I will enter my PIN as my signature on the income tax return (original or amended) I am n if you are entering your own PIN <b>and</b> your return is filed using the Practitioner PIN meth below.				
Spous	se's signature ▶ Date ▶				
	Practitioner PIN Method Returns Only—continue below				
Part	III Certification and Authentication — Practitioner PIN Method Only				
ERO's	s <b>EFIN/PIN.</b> Enter your six-digit EFIN followed by your five-digit self-selected PIN. 5 1		2 3	1 9	8 9
		Don't ent	er all <b>Z</b> e	#10S	
authori	y that the above numeric entry is my PIN, which is my signature for the electronic individual income to ized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am submements of the Practitioner PIN method and <b>Pub. 1345</b> , Handbook for Authorized IRS e-file Providers of Ir	itting this retu	rn in a	accordan	ice with the
ERO's	s signature ► Date ►				
	ERO Must Retain This Form — See Instructions				
	Don't Submit This Form to the IRS Unless Requested To I	o 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	s 🔀 S	Single Married filing jointly	Marrie	ed filing separatel	y (MFS)	☐ Head of	household (HOH)			fying sun	viving		
Check only one box.	•	u checked the MFS box, enter the roon is a child but not your dependen	,	our spouse. If yo	u check	ed the HOH or	QSS box, enter		•	se (QSS) name if th	ne qualifying		
Your first name	and mi	ddle initial	Last nar	ne				You	r soc	ial securi	ty number		
MANEESH	REDI	YC	MUNU	KUNTLA				69	690-92-8730				
		first name and middle initial	Last nar					-	Spouse's social security number				
Home address	(numbe	er and street). If you have a P.O. box, see	 e instruction	ons.			Apt. no.	Pre	siden	tial Election	on Campaign		
_22446 NO	DRWAI	LK SQUARE						- 1	Check here if you, or your spouse if filing jointly, want \$3				
City, town, or p	ost offic	ce. If you have a foreign address, also co	omplete sp	paces below.	Sta	ite	ZIP code				Checking a		
ASHBURN					VA	A	20148	box	belo	w will not	change		
Foreign countr	y name		F	Foreign province/sta	ate/coun	ty	Foreign postal cod	le you	r tax	or refund.	. Spouse		
 Digital	At ar	ny time during 2022, did you: (a) rec	eive (as	a reward, award,	or payr	ment for prope	rty or services);	or (b) s	ell,				
Assets	exch	ange, gift, or otherwise dispose of	a digital a	asset (or a financ	ial inter	est in a digital	asset)? (See ins	truction	າຣ.)	Yes	⊠ No		
Standard Deduction		eone can claim:		•		a dependent							
Age/Blindnes	s You:	Were born before January 2, 1	1958	Are blind	Spouse	: Was bo	rn before Januar	y 2, 19	58	☐ Is bl	lind		
Dependent	s (see	instructions):		(2) Social secu	urity	(3) Relationsh	ip (4) Check the	box if o	γualifi	es for (see	instructions):		
If more	<b>(1)</b> Fi	rst name Last name		number		to you	Child tax	credit	(	Credit for ot	her dependents		
than four								]		[			
dependents, see instruction	s ——							]					
and check	·							]		[			
here								]		[			
Income	1a	Total amount from Form(s) W-2, b	oox 1 (see	e instructions) .					1a		96,996.		
	b	Household employee wages not r		, ,				.	1b				
Attach Form(s) W-2 here. Also	С	Tip income not reported on line 1:		1c									
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 bene		1f									
If you did not	g	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	uctions)		<u>1</u> i				4 .	06 006		
	<u>z</u>	Add lines 1a through 1h		· · · · ·					1z	+	96,996.		
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			4b	+			
Standard Deduction for—	5a	Pensions and annuities	5a			axable amoun axable amoun			5b				
Single or	6a	Social security benefits If you elect to use the lump-sum e	6a	nothed shook he				$\dot{\Box}$	6b	_			
Married filing separately,	С 7	Capital gain or (loss). Attach Sche		,	,	,		H	7	1			
\$12,950 Married filing	8	Other income from Schedule 1, lir		· · · · ·				<u> </u>	8		10,496.		
jointly or	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7						.	9		86,500.		
Qualifying surviving spouse,	10	Adjustments to income from Sche		•					10	+ '	<u> </u>		
\$25,900 • Head of	11	Subtract line 10 from line 9. This is	•					.	11	+ ,	86 <b>,</b> 500.		
household,	12	Standard deduction or itemized							12		12 <b>,</b> 950.		
\$19,400 If you checked	13	Qualified business income deduction		`	,				13	+ -	<u>,</u> ,,,,,,		
any box under Standard	14							[	14	<del>  .</del>	12,950.		
Deduction,	15	Subtract line 14 from line 11. If ze						_	15		73,550.		
see instructions.	1			.,	J J J J J J					_	. 5 , 5 5 6 .		

Form 1040 (2022	2)								Page 2
Tax and	16	Tax (see instructions). Check	if any from Form	(s): <b>1</b> 881	4 <b>2</b> 🗌 4972	3 🗌		16	11,804.
Credits	17	Amount from Schedule 2, lin	ie 3					17	
	18	Add lines 16 and 17						18	11,804.
	19	Child tax credit or credit for	other dependent	ts from Sched	ule 8812			19	
	20	Amount from Schedule 3, lin	ie 8					20	
	21	Add lines 19 and 20						21	
	22	Subtract line 21 from line 18	. If zero or less,	enter -0				22	11,804.
	23	Other taxes, including self-e	mployment tax,	from Schedule	e 2, line 21			23	0.
	24	Add lines 22 and 23. This is	your <b>total tax</b>					24	11,804.
Payments	25	Federal income tax withheld							
	а	Form(s) W-2				<b>25a</b> 19	,458.		
	b	Form(s) 1099				25b			
	С	Other forms (see instructions	s)			25c			
	d	Add lines 25a through 25c					2	5d	19,458.
.,	26	2022 estimated tax payment						26	•
If you have a qualifying child,	27	Earned income credit (EIC)				27			
attach Sch. EIC.	28	Additional child tax credit from				28			
	29	American opportunity credit	from Form 8863	3, line 8		29			
	30	Reserved for future use .				30			
	31	Amount from Schedule 3, lin	ne 15			31			
	32	Add lines 27, 28, 29, and 31				ndable credits	;	32	
	33	Add lines 25d, 26, and 32. T					;	33	19,458.
Refund	34	If line 33 is more than line 24						34	7,654.
neiulia	35a	Amount of line 34 you want				•	. 🗆 🖪	5a	7,654.
Direct deposit?	b	Routing number 0 7 1				_	Savings		
See instructions.	d	Account number 6 9 5	2 3 2 6	2 6		_			
	36	Amount of line 34 you want a			ed tax	36			
Amount	37	Subtract line 33 from line 24				'			
You Owe	38	For details on how to pay, g Estimated tax penalty (see in	_	-		38	[	37	
Third Dowler									
Third Party Designee		you want to allow another			n with the IRS?		mplete belo	)W	X No
Designee		signee's		Phone			nal identificat		
		me		no.			er (PIN)		
Sign		der penalties of perjury, I declare t							
Here		lief, they are true, correct, and com	piete. Declaration (		,	sed on all information		•	, ,
	Yo	ur signature		Date	Your occupation		I		t you an Identity N, enter it here
Joint return?					SOFTWARE DEV	ELOPMENT ENG	/!		1, 6.116.11
See instructions.	Sp	ouse's signature. If a joint return, I	ooth must sign.	Date	Spouse's occupation	on	If the IRS	S sent	t your spouse an
Keep a copy for your records.							,		ction PIN, enter it her
your records.							(see inst	.)	
		one no. (301) 795-874		Email address	MANEESHREDDYN	11026@GMAIL.CO			
Paid		eparer's name	Preparer's signat			Date	PTIN		Check if:
Preparer		M PRIYA RAM SAGAR GUPTA TALLAM		RAM SAGAR	GUPTA TALLAM	03/26/2023	P020827	_	Self-employed
Use Only		m's name GLOBAL TAX							678) 965-9522
	Fir	m's address 245 ROONE	Y CT E BRU	NSWICK N	J 08816		Firm's E	IN	84-3171965
Go to www.irs.go	ov/Forr	n1040 for instructions and the late	st information.		BAA	REV 03/18/23 PRO			Form <b>1040</b> (2022

## SCHEDULE 1 (Form 1040)

### **Additional Income and Adjustments to Income**

OMB No. 1545-0074

2022

Attachment
Sequence No. 01

Department of the Treasury Internal Revenue Service

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

MANEESH REDDY MUNUKUNTLA

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

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

	Sequence No. <b>01</b>
Your soc	ial security number
690-92	-8730

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. Att	ach Schedule E .	5	-10,496.
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	·	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	-	
u	Wages earned while incarcerated	8u		
Z	Other income. List type and amount:			
	T. I. II. II. II. II. II. II. II. II. II	8z		
9	Total other income. Add lines 8a through 8z		9	10.10.
10	Combine lines 1 through 7 and 9. Enter here and on Form 1040, 1040-SF	k, or 1040-NH, line 8	10	-10,496.

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

Par	II Adjustments to Income			
11	Educator expenses		11	
12	Certain business expenses of reservists, performing artists, and fee-b			
	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	, ,, ,, , , , , , , , , , , , , , , ,	4a		
b	Deductible expenses related to income reported on line 8l from the			
		4b		
С	Nontaxable amount of the value of Olympic and Paralympic medals			
	·	4c		
d		4d		
е	Repayment of supplemental unemployment benefits under the Trade			
		4e		
f		24f		
g	, , , , , , , , , , , , , , , , , , , ,	4g		
h	Attorney fees and court costs for actions involving certain unlawful			
	,	4h		
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			
		24i	_	
J		24j		
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form	41-		
_	,	4k	_	
Z	Other adjustments. List type and amount:	4z		
25			05	
25 26	Total other adjustments. Add lines 24a through 24z		25	
26	Add lines 11 through 23 and 25. These are your <b>adjustments to income</b> . E		26	
	Form 1040 or 1040-SR, line 10, or Form 1040-NR, line 10a	<u> </u>		

#### **SCHEDULE E** (Form 1040)

#### Supplemental Income and Loss

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

Department of the Treasury Internal Revenue Service

Attach to Form 1040, 1040-SR, 1040-NR, or 1041, Go to www.irs.gov/ScheduleE for instructions and the latest information. Attachment Sequence No. 13

OMB No. 1545-0074

Name(s) shown on return Your social security number MANEESH REDDY MUNUKUNTLA 690-92-8730 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) 23-70/6, NETHAJI NAGAR KOTHAPET HYDERABAD, TELANGANA IN 500060 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. С 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: 3 659. 4 Royalties received 4 **Expenses:** 5 5 Advertising 6 Auto and travel (see instructions) 6 7 Cleaning and maintenance. 7 2,632. 8 Commissions 8 9 9 Insurance . . 10 10 Legal and other professional fees 11 Management fees . . . . . . . . . 11 1,984. 12 Mortgage interest paid to banks, etc. (see instructions) 12 13 13 2,501. 14 14 Repairs . . . . 1,954. 15 Supplies 15 16 16 Taxes 17 Utilities . . . . . . . 17 2,084. 18 18 Depreciation expense or depletion . . . . . . . . Other (list) 19 19 20 20 Total expenses. Add lines 5 through 19 . . . . . . 11,155. 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 -10,496.22 Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions) . . . . . . . . . 10,496.) 659. 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 Total of all amounts reported on line 20 for all properties 23e 11,155. 24 **Income.** Add positive amounts shown on line 21. **Do not** include any losses 24

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 .

25

10,496.

-10,496.

25

26

### **Form 760PY**

### 2022 Virginia Part-Year Resident Income Tax Return



Page 1

Due May 1, 2023

See instructions before con Enclose a complete copy of y	S.	Dates of VA Residence (mm-dd-yyyy)											
YOUR First Name	MI	Your Last Name		Check if decease		Suffix		cial Security			You - From	You - T	
MANEESH REDDY		MUNUKUNT	LA				690-92	2-8730	)	10-	-01-202	2 12-31-2 	2022
SPOUSE'S First Name (filing status 2 or	) MI	Spouse's Last Na		Check if decease	d	Suffix			curity Number	Sp	ouse - From	Spouse -	То
Present Home Address (Number and Stree	or Rural	Route)							VA Dri	ver's Lic	ense Informa	tion	
Customer ID 22446 NORWALK SQUARE													
City, Town or Post Office								You	I	36536	61919		_
ASHBURN								Spouse		agua Dat	e (mm-dd-yyy	۸	_
State								You			8-2023		_
VA		20148				107		Spouse					_
Amended				Qualifyir	ng Fai	mer, Fishe	erman or M	lerchant S				curity for You	
Applicable	son Code			Earned Inco	ome (	Credit Clai	med on fed	leral return		Spouse Federal		axable income	e on
Boxes Depender Overseas		ther's Return Date		\$				ici ai i ciai i		\$		.00	
// I/we authorize the sharing of cert			760F					ne instruction			ent of Medic	 al	
Assistance Services (DMAS) and													€.
Filing Status Enter Filing S					7		Exem	otions Er	nter the num	ber of e	exemptions	being claim	ned.
1 = Single (Column A 2 = Married, Filing Jo			useh	old? YES _				A - You	Spo		Dependents	65 or Over I	Blind
2 = Married, Filing Jo 3 = Married, Filing Se			n A)				Enter the	numbers fo	or both You	1	0		
4 = Married, Filing Se	4 = Married, Filing Separately on this combined return (Columns A and B)												
If Filing Status 3, enter spouse's SSN in the Spouse's Social Security Number  B - Spouse  Filing Status 4 Only													
DATE OF BIRTH	DOX at top of form and, enter Spouse's Name												
Your Birth Date	-		1	0 <b>-</b> 2	6 .	<u> </u>	9 8	BF	Spouse iling Status 4 ONLY			<b>You</b> ude Spouse if ing Status 2	F
Spouse's Birth											1	mig otatao z	
Complete the Schedule of													
1 FEDERAL ADJUSTED Line 7, Column 1							· · · · · · · · · · · · · · · · · · ·			00		86500	00
2 Additions from Schedule	760PY	ADJ, Line 3					2			00			00
3 Add Lines 1 and 2										00		86500	00
4 Qualifying Age Deducti	n. Ente	er Birth Dates	abov	/e. Complet	e Ag	e Deduct	tion 4a						00
Worksheet in instruction B when using Filing St										Т			"
Line 4a, Column A and	Spouse'	s on Line 4b, C	olur	nn A			4b			00			00
5 Social Security Act an reported as taxable inc residence in Virginia	me on	federal return	and	attributable	to yo	our period	d of			00			00
6 State income tax refur													
federal return and recei you reported adjusted g	ed whi	le a Virginia re:	sider	nt. Claim in t	he s	ame colu	ımn			00			00
7 Income attributable to your Income, Part 1, Line 9,										00		75955	5 00
8 Subtractions from Sche	8 Subtractions from Schedule 760PY ADJ, Line 7									00			
9 Add Lines 4a, 4b, 5, 6,	9 Add Lines 4a, 4b, 5, 6, 7, and 8									00		75955	5 00
10 Virginia Adjusted Gro	s Incoi	me (VAGI). Sul	btra	ct Line 9 fro	m L	ine 3	10			00		10545	5 00
11 Itemized Deductions from See Instructions	m Virgi	nia Schedule A	pai	d while a V	irgin	ia reside	ent. <sub>11</sub>			00			00
12 If you do not claim iter from Standard Deduction	ized de	eductions on L	ine 1	11, enter sta	ndar	d deduct	tion 12			00		976	6 00
Va. Dept. of Taxation For Local 2601039 Rev. 07/22	Jse	LTD	1	φ		Γ					V	/YYY	



### **2022 Form 760PY** Page 2

Your Name
MANEESH REDDY MUNUKUNTLA 690-92-8730



	B Spous		A		g Status 2	
13	Prorated exemption amount from Schedule of Income, Part 2, Line 11. See instructions	00			234	00
14	Deductions from Schedule 760PY ADJ, Line 9	00				00
15	Add Lines 11, 12, 13 and 14	00			1210	00
16	Virginia Taxable Income. Subtract Line 15 from Line 10	00			9335	00
17	Tax amount from Tax Table or Tax Rate Schedule	00			0	00
18	Total Tax. Add Line 17, Column A and Line 17, Column B.	18			0	00
19a	Your Virginia income tax withheld. Enclose copies of Forms W-2, W-2G, 1099 and VK-1	19a			546	00
19b	Spouse's Virginia income tax withheld. Enclose copies of Forms W-2, W-2G, 1099 and VK-1	19b				00
20	Combined 2022 Estimated Tax Payments	20				00
21	2021 overpayment credited to 2022 estimated taxes	21				00
22	Extension Payment - Enter amount paid on Form 760IP	22				00
23	Tax Credit for Low-Income Individuals or Virginia Earned Income Credit from Schedule 760PY ADJ, Line 17.	23				00
24	Total credit for taxes paid to another state 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.				546	00
27	If Line 18 is larger than Line 26, enter the difference. This is the INCOME TAX YOU OWE	07				00
28	If Line 26 is larger than Line 18, enter the difference. This is the <b>OVERPAYMENT AMOUNT.</b>	28			546	00
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, Section I, Line 6	30				00
31	Other Voluntary Contributions from Schedule VAC, Section II, Line 14	31				00
32	Addition to Tay, Penalty and Interest from <b>anclosed</b> Schedule 760PV AD L Line 21	32				00
33	See instructions					
	See instructions	₹ 33				00
34	Add Lines 29 through 33	34				00
35	If you owe tax on Line 27, add Lines 27 and 34 - <b>OR</b> - If Line 28 is an overpayment and Line 34 is larger tha Line 28, enter the difference. Enclose payment or pay at www.tax.virginia.govAMOUNT YOU OWE	n 35				
26	Check here if paying by credit or debit card - See instructions					00
36	If the Direct Deposit section below is not completed, your refund will be issued by check.	. 36			546	00
	T BANK DEPOSIT Your Bank Routing Transit Number Your Bank Account Number Ch	ecking	X	Saving	s [	
	emational Deposits. 0 7 1 0 0 0 0 1 3 6 9 5 2 3 2 6 2 6	$\overline{\top}$				
	We) authorize the Department of Taxation to discuss this return with my (our) preparer.		 9-G at <b>w</b> v	vw.tax.v	/irginia	.aov.
I (We	e), the undersigned, declare under penalty of law that I (we) have examined this return and to the best of my (complete return.				•	•
	ignature Your Phone Number	Date				
Spaulo	(301) 795-8748 e's Signature (If a joint return, <b>both</b> must sign) Spouse's Phone Number	Date				
Spouse	e's Signature (If a joint return, <b>both</b> must sign)  Spouse's Phone Number	Date				
1 .	er's Name Preparer's Phone Number	Date				
	M PRIYA RAM SAGAR GUPTA TALLAM (678) 965-9522  Name (or Yours if Self-Employed) GT.ORAT. TAYES T.T.C Preparer's PTIN Vendor Code	03-26-2023  Filing Election Code   ID Theft PIN				
	Name (or Yours if Self-Employed) GLOBAL TAXES LLC  ROONEY CT E BRUNSWICK NJ 08816  Preparer's PTIN Vendor Code  P02082703 1555	7			OIL F IIN	

# 2022 VIRGINIA SCHEDULE OF INCOME Form 760PY







#### PART 1

#### **Income Distribution**

Complete the Schedule of Income prior to beginning Form 760PY. Everyone should complete Section A. If you are claiming filing status 4, also complete Section B. Refer to your federal return when completing Part 1.

	SECTION A	Υ	ou (In	clude Spouse if Fi	ling S	tatus 2)			
SCHEDULE OF INCOME Form 760PY, Column A — All Filers Must Complete Section A —			<b>Column A1</b> Federal Retur	'n	Column A2 While VA Resid		Column A3 While NOT VA Resident		
1.	Wages, salaries, tips, etc	1	96996	.00	10545	.00	86451	.00	
2.	Interest and dividends	2		.00		.00		.00	
3.	Pension and other income	3	-10496	.00	0	.00	-10496	.00	
4.	Gross income (add Lines 1, 2 and 3)	4	86500	.00	10545	.00	75955	.00	
5.	Adjustments to income: moving expenses	5		.00		.00		.00	
6.	Other income adjustments (enclose explanation)	6		.00		.00		.00	
7.	Federal adjusted gross income (Line 4 less Lines 5 and 6)*	7	86500	.00	10545	.00	75955	.00	
8.	Net fixed date conformity modifications	8		.00		.00		.00	
9.	Fixed date conformity Federal Adjusted Gross Income (add Lines 7 and 8)	9	86500	.00	10545	.00	75955	.00	

\*Enter the amount from Line 7, Column A1 on Form 760PY, Page 1, Line 1, Column A.

	SECTION B	Enter Spouse's Income When Filing Status 4 Is Claimed								
_	SCHEDULE OF INCOME Form 760PY, Column B - Spouse Must Complete Section B if claiming Filing Status 4	Column B1 Federal Return		Column B2 While VA Resident	Column B3 While NOT VA Res	ident				
1.	Wages, salaries, tips, etc	1		.00	.00		.00			
2.	Interest and dividends	2		.00	.00		.00			
3.	Pension and other income	3		.00	.00		.00			
4.	Gross income (add Lines 1, 2 and 3)	4		.00	.00		.00			
5.	Adjustments to income: moving expenses	5		.00	.00		.00			
6.	Other income adjustments (enclose explanation)	6		.00	.00		.00			
7.	Federal Adjusted gross income (Line 4 less Lines 5 and 6)**	7		.00	.00		.00			
8.	Net fixed date conformity modifications	8		.00	.00		.00			
9.	Fixed date conformity Federal Adjusted Gross Income (add Lines 7 and 8)	9		.00	.00		.00			

<sup>\*\*</sup>Enter the amount from Line 7, Column B1 on Form 760PY, Page 1, Line 1, Column B. Submit completed Schedule of Income with Form 760PY to avoid delays.

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### 2022 VIRGINIA SCHEDULE OF INCOME

#### Form 760PY

Page 2





#### PART 2

#### **Prorated Exemptions Worksheet**

If claiming Filing Status 4, complete both the "A" and "B" sections of the schedule. For all other filing statuses, complete only the "A" section.

Complete the Prorated Exemption Worksheet to compute your allowable personal and dependent exemptions. The worksheet below is used to reduce your personal and dependent exemptions to an amount that is proportional to the number of days you resided in Virginia during the taxable year. The total exemption amount is the number of exemptions claimed, prorated based on the portion of the year you resided in Virginia (see Ratio Schedule in Form 760PY Instructions).

Each spouse must compute his or her own prorated personal exemptions based on the number of exemptions claimed in the Exemption Section of Form 760PY. Use the separate exemption amounts for "you" and your "spouse" when completing Lines 1 - 11 of the worksheet. Enter the total prorated exemption in the appropriate column on Form 760PY, Line 13. If claiming Filing Status 2, the combined exemption amount for you and spouse should be entered on Form 760PY, Line 13, Column A.

For example, if you are single, claim no dependents and moved to Virginia on July 1, your prorated Virginia personal exemption is computed as follows:

\$930 (One personal exemption)

X.504 (Ratio Schedule factor for July 1 move to Virginia)

\$468.72 (Be sure to round to the nearest whole number, \$469.00 in this example)

#### **Prorated Virginia Personal Exemptions**

		_		
			Column B Spouse	Column A You
1.	Your exemption	1		1
2.	Dependents	2		0
3.	Add Lines 1 and 2	3		1
4.	Multiply Line 3 by \$930	4		930
5.	65 or over	5		
6.	Blind	6		
7.	Add Lines 5 and 6	7		
8.	Multiply Line 7 by \$800	8		
9.	Add Lines 4 and 8	9		930
10.	Enter the ratio amount from the Personal Exemption Ratio Schedule in the Form 760PY Instructions	10		0.252
11.	Multiply Line 9 by Line 10 and enter the result in the appropriate column on Form 760PY, Line 13	11		234

#### PART 3

#### **Moving Information**

a.	If YOU moved into Virginia in 2022, prior state of residence	WA
b.	If YOU moved out of Virginia in 2022, state moved to	
2a.	If SPOUSE moved into Virginia in 2022, prior state of residence	
2b.	If SPOUSE moved out of Virginia in 2022, state moved to	

1555 REV 02/17/23 PRO

#### 2022 Schedule INC/CG

690928730

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

MANEESH REDD

MUNUKUNTLA



Your/ Spouse SSN	Withholding Type	VA Withholding	Employer FEIN	VA Account Number	VA Wages, tips, other comp.
Г					٦
690928730	W	546.	208424306	30208424306F001	10545.

Total VA Withholding

You

690928730

546.

Spouse

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!

Virgi	nia Submission Identification Number (SID)						
Your	Name	B Your Social Security Number					
MANI	ESH REDDY MUNUKUNTLA	690-92-8730					
Spot	ise's Name	A Spouse's Social Security Number					
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)		86500.				
2.	Virginia Adjusted Gross Income (Form 760CG, Line 9; 760PY, Line 10, columns A & B; Form 763, Line 9)		10545.				
3.	Taxable Income (Form 760CG, Line 15; 760PY, Line 16, columns A & B; Form 763, Line 17)		9335.				
4.	Virginia Income Tax (Form 760CG, Line 18; 760PY, Line 17, columns A & B; Form 763 Line 18)		0.				
5.	Withholding (Form 760CG, Line 19a & 19b; 760PY, Lines 19a & 19b; Form 763, Lines 19a & 19b)		546.				
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)		546.				
Part	Il 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						
December 31, 2022, and to the best of my knowledge and belief, it is true, correct and complete. I further declare that the information I provided to my Electronic Return Originator (ERO), Transmitter, or Intermediate Service Provider (including my name, address and social security number or individual tax identification number) and the amount shown in Part I above agree with the information and amounts shown on the corresponding lines of my electronic income tax return. If I am filing a balance due return, I understand that if the Virginia Department of Taxation (Virginia Tax) does not receive full and timely payment of my tax liability, I remain liable for the tax liability and all applicable interest and penalties. I authorize my ERO, Transmitter or Intermediate Service Provider to transmit my complete return to Virginia Tax. I have selected a personal identification number (PIN) as my signature for my electronic income tax return and, if applicable, the direct deposit of my refund or direct debit of my tax due. In choosing either direct deposit or direct debit, I certify that the transaction does not directly involve a financial institution outside of the territorial jurisdiction of the United States at any point in the process. Taxpayers may sign the form using a rubber stamp, mechanical device, such as a signature pen, or computer software program.							
	ayer's e-File PIN: check one box only						
I authorize the ERO named below to enter my e-File PIN 2 8 7 3 0 as my signature on my 2022 e-filed Virginia individual income tax return.							
Do not enter all zeros							
	GLOBAL TAXES LLC  ERO Firm Name						
Your	Signature Date						
Spot	se's e-File PIN: check one box only						
I authorize the ERO named below to enter my e-File PIN as my signature on my 2022 e-filed Virginia individual income tax return.  Do not enter all zeros							
	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 only if you are entering your own e-File PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part III below.							
	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. 5 1 8 9 5 2 3 1 9 8 9							
Do not enter all zeros  I certify that the above numeric entry is my ERO EFIN/PIN, which is my signature for the 2022 Virginia individual income tax return for the taxpayer(s) indicated above. I confirm that I am submitting this return in accordance with the requirements of the Practitioner PIN method and Virginia's publication Handbook for Electronic Filers of Individual Income Tax Returns (Tax Year 2022). EROs may sign the form using a rubber stamp, mechanical device, such as a signature pen, or computer software program.							
ERO's Signature							