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 security	number
SUNDEEP PATLOLLA	281-15-	
Spouse's name		al security number
GOUTHAMI NAGEELY	690-69-	0671
Part I Tax Return Information — Tax Year Ending December 31, 2022 (Er	nter year you ar	e authorizing.)
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 Adjusted gross income		1 143,108
2 Total tax		2 15,017
3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099	+	3 18,820
4 Amount you want refunded to you	+	4 3,803
5 Amount you owe		5
Part II Taxpayer Declaration and Signature Authorization (Be sure you get an Under penalties of perjury, I declare that I have examined a copy of the income tax return (original or amendation).		
return (original or amended) I am now authorizing. I consent to allow my intermediate service provider, trait to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution action is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to termi 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 in taxes to receive confidential information necessary to answer inquiries and resolve issues related to the personal identification number (PIN) below is my signature for the income tax return (original or amended) Electronic Funds Withdrawal Consent.	rejection of the tra- te U.S. Treasury an indicated in the tax- tution to debit the contact the authorizat requests must be the processing of the payment. I furth	ansmission, (b) the reas dits designated Finance x preparation software entry to this account. The tion. To revoke (cancel) received no later than the electronic payment her acknowledge that the second software software second software s
Taxpayer's PIN: check one box only		
▼ I authorize GLOBAL TAXES LLC to enter or general to enter o	ate my PIN	0 2 5 7 as m
ERO firm name		er five digits, but 't enter all zeros
signature on the income tax return (original or amended) I am now authorizing.		
I will enter my PIN as my signature on the income tax return (original or amended) I are if you are entering your own PIN and your return is filed using the Practitioner PIN m below.		
Your signature ► Date ■	-	
Spouse's PIN: check one box only	. 5111	0 6 7 1
X I authorize GLOBAL TAXES LLC to enter or general ERO firm name		$0 \mid 6 \mid 7 \mid 1$ as mer five digits, but
signature on the income tax return (original or amended) I am now authorizing.		't enter all zeros
I will enter my PIN as my signature on the income tax return (original or amended) I are if you are entering your own PIN and your return is filed using the Practitioner PIN m below.		
Spouse's signature ▶ Date ▶	•	
Practitioner PIN Method Returns Only—continue bel	ow	
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 4 9 6 Don't enter	
I certify that the above numeric entry is my PIN, which is my signature for the electronic individual incomauthorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am surrequirements of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS <i>e-file</i> Providers	ubmitting this retur	n in accordance with t
ERO's signature ▶ Date ▶	•	
ERO Must Retain This Form — See Instructions		

Don't Submit This Form to the IRS Unless Requested To Do So

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

2022)
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OMB No. 1545-0074

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

Filing Status	s 🗌 S	Single X Married filing jointly	Marrie	ed filing separately	y (MFS)	Head of	household (HO	H) [fying survi	ving
Check only one box.	lf vo	u checked the MFS box, enter the	nama of v	our spouse. If you	ı ohook	rad tha UOU ar	OSS have ant	or tho		se (QSS)	o gualifying
one box.	-	on is a child but not your depender	-	our spouse. If you	u Cilecr	ted the HOH of	Q33 box, ent	ei tile	Ciliu S i	iaine ii tiit	s qualifying
Your first name			Last na	me				Τ,	Your soc	ial security	/ number
							Your social security number 281-15-0257				
SUNDEEP	nnuse's	s first name and middle initial	Last na					_			urity number
•		s instrume and middle initial							•	9-0671	-
GOUTHAM:		er and street). If you have a P.O. box, se	NAGE				Apt. no.				
	•		e iristructio	J115.			'			ere if you, o	n Campaign or vour
120 BOWI		5 TREET ce. If you have a foreign address, also c	omploto si	nacos holow	Sta	ato	415 ZIP code				ly, want \$3
			omplete s	paces below.					_		Checking a
VIRGINIZ Foreign countr		АСП		Foreign province/sta	VZ		23462 Foreign postal of			w will not on the contract of	hange
Foreign countr	упатте			-oreign province/sta	ite/couri	ity	Foreign postar c	oue	your tax	You	Spouse
.	A 1 -	- 15	: - (/	- X II		
Digital		ny time during 2022, did you: (a) rec ange, gift, or otherwise dispose of					-			Yes	⊠ No
Assets		eone can claim: You as a d				a dependent	asset)! (See II	istruc	110115.)		<u> </u>
Standard Deduction			•								
Deduction		Spouse itemizes on a separate retu	irri or you	were a duar-stati	us allei	<u> </u>					
Age/Blindnes	s You:	Were born before January 2,	1958	Are blind	Spouse	: Was bor	n before Janu	ary 2,	1958	☐ Is bli	nd
Dependent	s (see	instructions):		(2) Social secu	ırity	(3) Relationsh	ip (4) Check t	he box	cif qualific	es for (see i	nstructions):
If more	(1) Fi	irst name Last name		number		to you	Child t	ax cre	dit C	Credit for oth	er dependents
than four	EVA	ANSHI PATLOLLA		190-75-71	130	Daughter		X			
dependents, see instruction	e]
and check]
here]]
Income	1a	Total amount from Form(s) W-2, I	box 1 (see	e instructions) .					1a	15	6,434.
	b	Household employee wages not	reported	on Form(s) W-2 .					1b		
Attach Form(s)	С	Tip income not reported on line 1	a (see ins	structions)					1c		
W-2 here. Also attach Forms	d	Medicaid waiver payments not reported on Form(s) W-2 (see instructions)						1d			
W-2G and	е	Taxable dependent care benefits	from For	m 2441, line 26					1e		
1099-R if tax was withheld.	f	Employer-provided adoption ben	efits from	Form 8839, line	29 .				1f		
If you did not	g	Wages from Form 8919, line 6 .							1g		
get a Form	h	Other earned income (see instruc	tions) .						1h		0.
W-2, see instructions.	i	Nontaxable combat pay election	(see instr	ructions)		1i					
mistractions.	z	Add lines 1a through 1h							1z	15	6,434.
Attach Sch. B	2a	Tax-exempt interest	2a		b T	axable interest	t		2b		
if required.	3a	Qualified dividends	3a	50.	b 0	Ordinary divider	nds		3b		53.
	4a	IRA distributions	4a		b T	axable amoun	t		4b		
Standard	5a	Pensions and annuities	5a		b T	axable amoun	t		5b		
Deduction for—	6a	Social security benefits	6a		b T	axable amoun	t		6b		
Single or Married filing	С	If you elect to use the lump-sum	election r	nethod, check he	re (see	instructions)					
separately, \$12,950	7	Capital gain or (loss). Attach Scho	edule D if	required. If not re	equired	l, check here			7		-2.
Married filing	8	Other income from Schedule 1, li	ne 10 .						8	-1	3,377.
jointly or Qualifying	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7	7, and 8.	This is your total	incom	е			9	14	3,108.
surviving spouse, \$25,900	10	Adjustments to income from Sch							10		
Head of	11	Subtract line 10 from line 9. This	is your a c	djusted gross ind	come				11	14	3,108.
household, \$19,400	12	Standard deduction or itemized	-						12	1	5,900.
If you checked	13	Qualified business income deduc				95-A			13		1.
any box under Standard	14	Add lines 12 and 13							14	2	5,901.
Deduction,	15	Subtract line 14 from line 11. If ze							15		7,207.
see instructions.	J				•						

Form 1040 (2022	2)								Page 2
Tax and	16	Tax (see instructions). Check	if any from Form	(s): 1 881	4 2 🗌 4972	3 🗌		16	17,017.
Credits	17	Amount from Schedule 2, lin	ne 3					17	
	18	Add lines 16 and 17						18	17,017.
	19	Child tax credit or credit for	other dependent	ts from Sched	ule 8812			19	2,000.
	20	Amount from Schedule 3, lin	ne 8					20	
	21	Add lines 19 and 20						21	2,000.
	22	Subtract line 21 from line 18	B. If zero or less,	enter -0				22	15,017.
	23	Other taxes, including self-e	employment tax,	from Schedule	e 2, line 21 .			23	0.
	24	Add lines 22 and 23. This is	your total tax					24	15,017.
Payments	25	Federal income tax withheld	from:						
	а	Form(s) W-2				25a 18	3,820.		
	b	Form(s) 1099				25b			
	С	Other forms (see instruction	s)			25c			
	d	Add lines 25a through 25c						25d	18,820.
If you have a	26	2022 estimated tax paymen	ts and amount a	pplied from 20)21 return			26	
qualifying child,	27	Earned income credit (EIC)			No .	27			
attach Sch. EIC.	28	Additional child tax credit fro	m Schedule 8812			28			
	29	American opportunity credit	from Form 8863	8, 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	•		-			32	
	33	Add lines 25d, 26, and 32. T	hese are your to	tal payments				33	18,820.
Refund	34	If line 33 is more than line 24	4, subtract line 2	4 from line 33.	This is the amou	nt you overpaid		34	3,803.
	35a	Amount of line 34 you want			3 is attached, che	ck here	🗌	35a	3,803.
Direct deposit?	b	Routing number 0 5 1				Checking	Savings		
See instructions.	d	Account number 4 3 5	0 4 5 9	5 1 6 7	7 9	 			
	36	Amount of line 34 you want	applied to your	2023 estimate	ed tax	36			
Amount You Owe	37	Subtract line 33 from line 24 For details on how to pay, g						37	
	38	Estimated tax penalty (see i	nstructions) .			38			
Third Party Designee		you want to allow another			rn with the IRS?		omploto l	oolow	X No
Designee		signee's		Phone			onal identi		NO NO
		me		no.			ber (PIN)	neation	
Sign		der penalties of perjury, I declare			1 , 0		,		, ,
Here	Yo	ur signature		Date	Your occupation				nt you an Identity IN, enter it here
Joint return?					IT CONSUL	ΓΑΝΤ		inst.)	IIV, enter it here
See instructions.	Sp	ouse's signature. If a joint return,	both must sian.	Date	Spouse's occupat		If the	RS ser	nt your spouse an
Keep a copy for your records.	-1-			IT CONSULTANT			Iden		ection PIN, enter it here
	Ph	one no. (330) 242-034	5	Email address		OLLA@GMAIL.C	OM		
Doid	Pre	eparer's name	Preparer's signat	ure		Date	PTIN		Check if:
Paid	SYAN	M PRIYA RAM SAGAR GUPTA TALLAM	SYAM PRIYA	RAM SAGAR	GUPTA TALLAM	03/03/2023	P0208	2703	Self-employed
Preparer	Fir	m's name GLOBAL TA	XES LLC			•			(678) 965-9522
Use Only	Fir							's EIN	84-3171965

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 SUNDEEP PATLOLLA & GOUTHAMI NAGEELY

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

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

	Sequence No. 01
Your soci	ial security number
201 15	0257

Par	t I Additional Income			
1	Taxable refunds, credits, or offsets of state and local income taxes		1	0.
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	ch Schedule E .	5	-13,377.
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		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		
ı	Income from the rental of personal property if you engaged in the rental			
	for profit but were not in the business of renting such property	81		
m	Olympic and Paralympic medals and USOC prize money (see			
	,	8m		
n	·	8n		
0		80		
р		8p		
q		8q		
r	Scholarship and fellowship grants not reported on Form W-2	8r		
S	Nontaxable amount of Medicaid waiver payments included on Form			
	· · · · · · · · · · · · · · · · · · ·	8s ()	
t	Pension or annuity from a nonqualifed deferred compensation plan or			
	a nongovernmental section 457 plan	8t		
u		8u		
Z	Other income. List type and amount:			
_		8z		
9	Total other income. Add lines 8a through 8z		9	40.5
10	Combine lines 1 through 7 and 9. Enter here and on Form 1040, 1040-SR	or 1040-NR line 8	10	-13.377

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 adjustments to income . E		26	
	Form 1040 or 1040-SR, line 10, or Form 1040-NR, line 10a	<u> </u>		

SCHEDULE D (Form 1040)

Capital Gains and Losses

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

Go to www.irs.gov/ScheduleD for instructions and the latest information.
Use Form 8949 to list your transactions for lines 1b, 2, 3, 8b, 9, and 10.

OMB No. 1545-0074

2022

Attachment Sequence No. **12**

Department of the Treasury Internal Revenue Service

Name(s) shown on return
SUNDEEP PATLOLLA & GOUTHAMI NAGEELY

Did you dispose of any investment(s) in a qualified opportunity fund during the tax year?

If "Yes," attach Form 8949 and see its instructions for additional requirements for reporting your gain or loss.

Your social security number 281-15-0257

Pai	Short-Term Capital Gains and Losses—Ge	enerally Assets I	Held One Year	or Less (se	e ins	tructions)
lines This	nstructions for how to figure the amounts to enter on the below. form may be easier to complete if you round off cents to e dollars.	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustmen to gain or loss Form(s) 8949, line 2, column	from Part I,	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
1a	Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b.					
1b	Totals for all transactions reported on Form(s) 8949 with Box A checked					
2	Totals for all transactions reported on Form(s) 8949 with Box B checked					
3	Totals for all transactions reported on Form(s) 8949 with Box C checked					
4	Short-term gain from Form 6252 and short-term gain or (loss) from Forms 4	684, 6781, and 88	24	4	
	Net short-term gain or (loss) from partnerships, Schedule(s) K-1	S corporations,	estates, and tr		5	
6	Short-term capital loss carryover. Enter the amount, if an Worksheet in the instructions	-	-	-	6	()
7	Net short-term capital gain or (loss). Combine lines 1sterm capital gains or losses, go to Part II below. Otherwis				7	
Par	<u>_</u>	-			(see i	nstructions)
lines This	nstructions for how to figure the amounts to enter on the below. form may be easier to complete if you round off cents to e dollars.	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustmen to gain or loss Form(s) 8949, I line 2, colum	from Part II,	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
	Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b. Totals for all transactions reported on Form(s) 8949 with					
9	Box D checked	21.	23.			-2.
10	Totals for all transactions reported on Form(s) 8949 with Box F checked					
	Gain from Form 4797, Part I; long-term gain from Form from Forms 4684, 6781, and 8824				11 12	
	Capital gain distributions. See the instructions				13	
	Long-term capital loss carryover. Enter the amount, if an Worksheet in the instructions				14	()
15	Net long-term capital gain or (loss). Combine lines 8: on the back	a through 14 in co	olumn (h). Then, go	to Part III	15	_2

Schedule D (Form 1040) 2022 Page 2

Part III Summary 16 Combine lines 7 and 15 and enter the result 16 -2. • If line 16 is a gain, enter the amount from line 16 on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 17 below. • If line 16 is a loss, skip lines 17 through 20 below. Then, go to line 21. Also be sure to complete • If line 16 is zero, skip lines 17 through 21 below and enter -0- on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 22. 17 Are lines 15 and 16 both gains? ☐ **Yes.** Go to line 18. ■ No. Skip lines 18 through 21, and go to line 22. 18 If you are required to complete the 28% Rate Gain Worksheet (see instructions), enter the 18 19 If you are required to complete the Unrecaptured Section 1250 Gain Worksheet (see instructions), enter the amount, if any, from line 18 of that worksheet . 19 20 Are lines 18 and 19 both zero or blank and you are not filing Form 4952? ☐ Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 16. Don't complete lines 21 and 22 below. □ No. Complete the Schedule D Tax Worksheet in the instructions. Don't complete lines 21 and 22 below. If line 16 is a loss, enter here and on Form 1040, 1040-SR, or 1040-NR, line 7, the smaller of: 21 • The loss on line 16; or 2. _) 21 • (\$3,000), or if married filing separately, (\$1,500) **Note:** When figuring which amount is smaller, treat both amounts as positive numbers. Do you have gualified dividends on Form 1040, 1040-SR, or 1040-NR, line 3a? 22 X Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 16. No. Complete the rest of Form 1040, 1040-SR, or 1040-NR.

Form 8949 (2022) Attachment Sequence No. 12A Page 2

Name(s) shown on return. Name and SSN or taxpayer identification no. not required if shown on other side SUNDEEP PATLOLLA & GOUTHAMI NAGEELY

Social security number or taxpayer identification number 281-15-0257

Before you check Box D, E, or F below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your broker and may even tell you which box to check.

Part II

Long-Term. Transactions involving capital assets you held more than 1 year are generally long-term (see instructions). For short-term transactions, see page 1.

Note: You may aggregate all long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 8a; you aren't required to report these transactions on Form 8949 (see instructions).

You *must* check Box D, E, *or* F below. Check only one box. If more than one box applies for your long-term transactions, complete a separate Form 8949, page 2, for each applicable box. If you have more long-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

	(D)	Long-term transactions reported	on Form(s) 1099-E	3 showing basis was	reported to the IRS	(see Note above)
X	(E)	Long-term transactions reported	on Form(s) 1099-E	showing basis was	n't reported to the If	RS

(F) Long-term transactions not reported to you on Form 1099-B

(a) Description of property (Example: 100 sh. XYZ Co.)	(b) Date acquired (Mo., day, yr.)	(c) Date sold or disposed of (Mo., day, yr.)	(d) Proceeds (sales price) (see instructions)	(e) Cost or other basis See the Note below and see <i>Column</i> (e) in the separate instructions.			(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g).
ROBINHOOD SECURITIES LLC	01/01/22	12/31/22	21.	23.			-2.
2 Totals. Add the amounts in columns negative amounts). Enter each tota Schedule D, line 8b (if Box D above above is checked), or line 10 (if Box	I here and inclining is checked), lir	lude on your ne 9 (if Box E	21.	23.			-2.

Note: If you checked Box D above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See *Column* (g) in the separate instructions for how to figure the amount of the adjustment.

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

OMB No. 1545-0074

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

SUNDEEP PATLOLLA & GOUTHAMI NAGEELY 281-15-0257 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) 166/27 166/28, FLAT#101 A.S.RAJU NAGAR, KP HYDERABAD, TELANGANA IN 500072 Α В C 1b Type of Property **Fair Rental Personal Use** For each rental real estate property listed 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: 731. 3 4 Royalties received . 4 **Expenses:** 5 5 Advertising 6 Auto and travel (see instructions) 6 7 Cleaning and maintenance. 7 2,974. 8 Commissions 8 9 9 Insurance . . 10 10 Legal and other professional fees 11 Management fees 11 2,845. 12 Mortgage interest paid to banks, etc. (see instructions) 12 13 13 2,698. 14 14 Repairs 2,704. 15 Supplies 15 16 16 Taxes 17 Utilities 17 2,887. 18 18 Depreciation expense or depletion Other (list) 19 19 20 20 Total expenses. Add lines 5 through 19 14,108. 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 -13,377.22 Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions) 13,377.) 731. 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 14,108. 24 **Income.** Add positive amounts shown on line 21. **Do not** include any losses 25 Losses. Add royalty losses from line 21 and rental real estate losses from line 22. Enter total losses here 25 13,377. 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 .

-13,377.

SCHEDULE 8812 (Form 1040)

Credits for Qualifying Children and Other Dependents

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

2022

OMB No. 1545-0074

Attachment Sequence No. 47

Department of the Treasury Internal Revenue Service

Go to www.irs.gov/Schedule8812 for instructions and the latest information.

Name(s) shown on return Your social security number 281-15-0257 SUNDEEP PATLOLLA & GOUTHAMI NAGEELY **Child Tax Credit and Credit for Other Dependents** 1 Enter the amount from line 11 of your Form 1040, 1040-SR, or 1040-NR . 1 143,108. Enter income from Puerto Rico that you excluded 2a Enter the amounts from lines 45 and 50 of your Form 2555 . . . b 2b 0. c Enter the amount from line 15 of your Form 4563 2c Add lines 2a through 2c 2d3 3 143,108. 4 Number of qualifying children under age 17 with the required social security number 5 5 2,000. Number of other dependents, including any qualifying children who are not under age 6 Caution: Do not include yourself, your spouse, or anyone who is not a U.S. citizen, U.S. national, or U.S. resident alien. Also, do not include anyone you included on line 4. 7 7 8 Add lines 5 and 7 8 2,000. Enter the amount shown below for your filing status. • Married filing jointly—\$400,000 • All other filing statuses—\$200,000 9 400,000. 10 Subtract line 9 from line 3. • If zero or less, enter -0-. • If more than zero and not a multiple of \$1,000, enter the next multiple of \$1,000. For example, if the result is \$425, enter \$1,000; if the result is \$1,025, enter \$2,000, etc. 10 0. 11 11 0. Is the amount on line 8 more than the amount on line 11? . . . 12 2,000. No. STOP. You cannot take the child tax credit, credit for other dependents, or additional child tax credit. Skip Parts II-A and II-B. Enter -0- on lines 14 and 27. **Yes.** Subtract line 11 from line 8. Enter the result. 13 Enter the amount from the Credit Limit Worksheet A 13 17,017. Enter the smaller of line 12 or 13. This is your child tax credit and credit for other dependents . . . 2,000. Enter this amount on Form 1040, 1040-SR, or 1040-NR, line 19. If the amount on line 12 is more than the amount on line 14, you may be able to take the additional child tax credit on Form 1040, 1040-SR, or 1040-NR, line 28. Complete your Form 1040, 1040-SR, or 1040-NR through line 27

(also complete Schedule 3, line 11) before completing Part II-A.

BAA

Schedule 8812 (Form 1040) 2022

Part	II-A Additional Child Tax Credit for All Filers		
Cautio	on: If you file Form 2555, you cannot claim the additional child tax credit.		
15	Check this box if you do not want to claim the additional child tax credit. Skip Parts II-A and II-B. Enter -0- on line	27 .	
16a	Subtract line 14 from line 12. If zero, stop here; you cannot take the additional child tax credit. Skip Parts II-A		
	and II-B. Enter -0- on line 27	16a	0.
b	Number of qualifying children under 17 with the required social security number: x \$1,500.		
	Enter the result. If zero, stop here; you cannot claim the additional child tax credit. Skip Parts II-A and II-B.		
	Enter -0- on line 27	16b	
	TIP: The number of children you use for this line is the same as the number of children you used for line 4.		
17	Enter the smaller of line 16a or line 16b	17	
18a	Earned income (see instructions)		
b	Nontaxable combat pay (see instructions)		
19	Is the amount on line 18a more than \$2,500?		
	No. Leave line 19 blank and enter -0- on line 20.		
	Yes. Subtract \$2,500 from the amount on line 18a. Enter the result 19		
20	Multiply the amount on line 19 by 15% (0.15) and enter the result $\dots \dots \dots \dots \dots \dots \dots \dots$	20	
	Next. On line 16b, is the amount \$4,500 or more?		
	No. If you are a bona fide resident of Puerto Rico, go to line 21. Otherwise, skip Part II-B and enter the		
	smaller of line 17 or line 20 on line 27.		
	☐ Yes. If line 20 is equal to or more than line 17, skip Part II-B and enter the amount from line 17 on line 27.		
	Otherwise, go to line 21.		
Part	II-B Certain Filers Who Have Three or More Qualifying Children and Bona Fide Resident	s of P	uerto Rico
21	Withheld social security, Medicare, and Additional Medicare taxes from Form(s) W-2,		
	boxes 4 and 6. If married filing jointly, include your spouse's amounts with yours. If		
	your employer withheld or you paid Additional Medicare Tax or tier 1 RRTA taxes, see		
	instructions		
22	Enter the total of the amounts from Schedule 1 (Form 1040), line 15; Schedule 2 (Form		
	1040), line 5; Schedule 2 (Form 1040), line 6; and Schedule 2 (Form 1040), line 13 . 22		
23	Add lines 21 and 22		
24	1040 and		
	1040-SR filers: Enter the total of the amounts from Form 1040 or 1040-SR, line 27,		
	and Schedule 3 (Form 1040), line 11.		
	1040-NR filers: Enter the amount from Schedule 3 (Form 1040), line 11.		
25	Subtract line 24 from line 23. If zero or less, enter -0	25	
26	Enter the larger of line 20 or line 25	26	
	Next, enter the smaller of line 17 or line 26 on line 27.		
Part	II-C Additional Child Tax Credit	, ,	
27	This is your additional child tax credit. Enter this amount on Form 1040, 1040-SR, or 1040-NR, line 28	27	

Form **8995**

Department of the Treasury

Internal Revenue Service

Qualified Business Income Deduction Simplified Computation

Attach to your tax return.

Go to www.irs.gov/Form8995 for instructions and the latest information.

OMB No. 1545-2294

2022

Attachment Sequence No. **55**

Name(s) shown on return

SUNDEEP PATLOLLA & GOUTHAMI NAGEELY

Your taxpayer identification number 281-15-0257

Note. You can claim the qualified business income deduction **only** if you have qualified business income from a qualified trade or business, real estate investment trust dividends, publicly traded partnership income, or a domestic production activities deduction passed through from an agricultural or horticultural cooperative. See instructions.

Use this form if your taxable income, before your qualified business income deduction, is at or below \$170,050 (\$340,100 if married filing jointly), and you aren't a patron of an agricultural or horticultural cooperative.

	T			
1	(a) Trade, business, or aggregation name		Qualified business income or (loss)	
i				
ii				
iii				
iv				
V				
2	Total qualified business income or (loss). Combine lines 1i through 1v,			
	column (c)	2		
3	Qualified business net (loss) carryforward from the prior year	3 (
4	Total qualified business income. Combine lines 2 and 3. If zero or less, enter -0-	4		
5	Qualified business income component. Multiply line 4 by 20% (0.20)	-	5	
6	Qualified REIT dividends and publicly traded partnership (PTP) income or (loss)			
0	(see instructions)	6 3.		
7	Qualified REIT dividends and qualified PTP (loss) carryforward from the prior		-	
•	year	7 (
8	Total qualified REIT dividends and PTP income. Combine lines 6 and 7. If zero			
	or less, enter -0	8 3.		
9			9	1.
10	Qualified business income deduction before the income limitation. Add lines 5 and	19	10	1.
11		11 117,208.		<u> </u>
12	· · · · · · · · · · · · · · · · · · ·	12 50.	1	
13		13 117,158.	-	
14	Income limitation. Multiply line 13 by 20% (0.20)		14	23,432.
15	Qualified business income deduction. Enter the smaller of line 10 or line 14. Also	enter this amount on		
	the applicable line of your return (see instructions)		15	1.
16	Total qualified business (loss) carryforward. Combine lines 2 and 3. If greater than		16	(0.
17	Total qualified REIT dividends and PTP (loss) carryforward. Combine lines 6 ar			
••	zero, enter -0		17	0.

(Rev. November 2022)

Department of the Treasury Internal Revenue Service

Taxpayer name(s) shown on return

Paid Preparer's Due Diligence Checklist

Earned Income Credit (EIC), American Opportunity Tax Credit (AOTC),
Child Tax Credit (CTC) (including the Additional Child Tax Credit (ACTC) and
Credit for Other Dependents (ODC)), and Head of Household (HOH) Filing Status

To be completed by preparer and filed with Form 1040, 1040-SR, 1040-NR, 1040-PR, or 1040-SS. Go to www.irs.gov/Form8867 for instructions and the latest information.

OMB No. 1545-0074 For tax year 20 Attachment Sequence No. 70

Taxpayer identification number

SUNI	DEEP PATLOLLA & GOUTHAMI NAGEELY	281-15-025	7		
repare	's name	Preparer tax identifica	ition numb	oer	
	M PRIYA RAM SAGAR GUPTA TALLAM	P02082703			
Part					
	check the appropriate box for the credit(s) and/or HOH filing status claimed on the retubenefit(s) claimed (check all that apply). \square EIC $\boxed{\mathbf{x}}$ CTC/AC		the rela		arts I-V HOH
1	Did you complete the return based on information for the applicable tax year provided to reasonably obtained by you? (See instructions if relying on prior year earned income.)		Yes	No	N/A
2	If credits are claimed on the return, did you complete the applicable EIC and/or C worksheets found in the Form 1040, 1040-SR, 1040-NR, 1040-PR, 1040-SS, or Sched 1040) instructions, and/or the AOTC worksheet found in the Form 8863 instructions worksheet(s) that provides the same information, and all related forms and schedules claimed?	ule 8812 (Form s, or your own			
3	Did you satisfy the knowledge requirement? To meet the knowledge requirement, you nathe following. • Interview the taxpayer, ask questions, and contemporaneously document the taxpayer		X		
	determine that the taxpayer is eligible to claim the credit(s) and/or HOH filing status.	·			
	• Review information to determine that the taxpayer is eligible to claim the credit(s) an status and to figure the amount(s) of any credit(s)		X		
4	Did any information provided by the taxpayer or a third party for use in preparing information reasonably known to you, appear to be incorrect, incomplete, or inconsis answer questions 4a and 4b. If "No," go to question 5.)	tent? (If "Yes,"		X	
а	Did you make reasonable inquiries to determine the correct, complete, and consistent inf	formation? .			
b	Did you contemporaneously document your inquiries? (Documentation should include you asked, whom you asked, when you asked, the information that was provided, and information had on your preparation of the return.)	the impact the			
5	Did you satisfy the record retention requirement? To meet the record retention requirer keep a copy of your documentation referenced in question 4b, a copy of this Form 8867 applicable worksheet(s), a record of how, when, and from whom the information used to 8867 and any applicable worksheet(s) was obtained, and a copy of any document(s) processes that you relied on to determine eligibility for the credit(s) and/or HOH filing state the amount(s) of the credit(s)	7, a copy of any or prepare Form provided by the atus or to figure	×		
	List those documents provided by the taxpayer, if any, that you relied on:				
6	Did you ask the taxpayer whether he/she could provide documentation to substantiate credit(s) and/or HOH filing status and the amount(s) of any credit(s) claimed on the return is selected for audit?	return if his/her	×		
7	Did you ask the taxpayer if any of these credits were disallowed or reduced in a previous (If credits were disallowed or reduced, go to question 7a; if not, go to question 8.)	year?	X		
а 8	Did you complete the required recertification Form 8862?	a complete and			

Form 88	867 (Rev. 11-2022)			Page 2
Part	Due Diligence Questions for Returns Claiming EIC (If the return does not claim EIC, go	to Part	III.)	
9a	Have you determined that the taxpayer is eligible to claim the EIC for the number of qualifying children	Yes	No	N/A
	claimed, or is eligible to claim the EIC without a qualifying child? (If the taxpayer is claiming the EIC			
h	and does not have a qualifying child, go to question 10.)			
b	has supported the child the entire year?			
С	Did you explain to the taxpayer the rules about claiming the EIC when a child is the qualifying child of			
	more than one person (tiebreaker rules)?			
Part	Due Diligence Questions for Returns Claiming CTC/ACTC/ODC (If the return does not or ODC, go to Part IV.)	claim C	CTC, A	CTC,
10	Have you determined that each qualifying person for the CTC/ACTC/ODC is the taxpayer's dependent who is a citizen, national, or resident of the United States?	Yes	No	N/A
11	Did you explain to the taxpayer that he/she may not claim the CTC/ACTC if the child has not lived with			
	the taxpayer for over half of the year, even if the taxpayer has supported the child, unless the child's			
	custodial parent has released a claim to exemption for the child?	X		
12	Did you explain to the taxpayer the rules about claiming the CTC/ACTC/ODC for a child of divorced or separated parents (or parents who live apart), including any requirement to attach a Form 8332 or similar			
	statement to the return?	×		
Part			Part \	/.)
13	Did the taxpayer provide substantiation for the credit, such as a Form 1098-T and/or receipts for the qua	alified	Yes	No
	tuition and related expenses for the claimed AOTC?			
Part	• (
14	Have you determined that the taxpayer was unmarried or considered unmarried on the last day of the tax and provided more than half of the cost of keeping up a home for the year for a qualifying person?	k year	Yes	No
Part				
	You will have complied with all due diligence requirements for claiming the applicable credit(s) and on the return of the taxpayer identified above if you:	or HOI	l filing	status
	A. Interview the taxpayer, ask adequate questions, contemporaneously document the taxpayer's respo in your notes, review adequate information to determine if the taxpayer is eligible to claim the credit(status and to figure the amount(s) of the credit(s);	nses on s) and/o	the retor HOH	turn or filing
	 B. Complete this Form 8867 truthfully and accurately and complete the actions described in this checkled credit(s) claimed and HOH filing status, if claimed; 	ist for a	ny app	licable
	C. Submit Form 8867 in the manner required; and			
	D. Keep all five of the following records for 3 years from the latest of the dates specified in the Form 880 Document Retention.	67 instr	uctions	under
	1. A copy of this Form 8867.			
	2. The applicable worksheet(s) or your own worksheet(s) for any credit(s) claimed.			
	Copies of any documents provided by the taxpayer on which you relied to determine the taxpayer credit(s) and/or HOH filing status and to figure the amount(s) of the credit(s).	's eligib	ility for	the
	A record of how, when, and from whom the information used to prepare this form and the application obtained.	ble worl	ksheet(s) was
	A record of any additional information you relied upon, including questions you asked and the taxpetermine the taxpayer's eligibility for the credit(s) and/or HOH filing status and to figure the amount of the control of the	oayer's int(s) of	respon the cre	ses, to edit(s).
	If you have not complied with all due diligence requirements, you may have to pay a penalty for each related to a claim of an applicable credit or HOH filing status (see instructions for more information).	h failur).	e to co	mply
15	Do you certify that all of the answers on this Form 8867 are, to the best of your knowledge, true, correct complete?		Yes	No

2022 VA760CG Page 1





SUNDEEP PATLOLLA GOUTHAMI NAGEELY 120 BOWERY STREET APT 415

VIRGINIA	BEACH	7.7.2	23462
ATKGTNTA	ргиси	VA	23402

SSN-You PAT	L	281150257	Vendor ID 1555	X	XXXXX 7
SSN - Spouse NAG	E	690690671			
Fed Adj Gross Income (FAGI)	1.	143108.	Withholding (VA) - You	19A.	4641.
Additions	2.		Withholding (VA) - Spouse	19B.	3263.
Subtotal	3.	143108.	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 or EIC	23.	
State Income Tax Overpayment	6.		Credit - Schedule OSC	24.	
Subtractions	7.		Credits - Schedule CR	25.	
Subtotal Subtractions	8.		Total Payments / Credits	26.	7904.
Total VA Adj Gross Income (VAGI)	9.	143108.	Tax You Owe	27.	
Itemized Deductions - VA Sch A	10.		Tax Overpayment	28.	1272.
Standard Deduction	11.	16000.	Overpayment Credited to Next Year	29.	
Exemptions	12.	2790.	VAC - Virginia 529 / ABLE	30.	
Deductions	13.		VAC - Other Contributions	31.	
Subtotal (Deductions & Exemption	ns) 14.	18790.	Addition to Tax, Penalty & Interest	32.	
VA Taxable Income	15.	124318.	Sales and Use Tax	33.	
Amount of Tax	16.	6891.	Amount You Owe		
Spouse Tax Adjustment (STA)	17.	259.	Will Pay by Credit/Debit Card N Your Refund	- 1	1272.
VAGI - Spouse	17A.	65860.	Bank Routing #	C	051000017
Net Amount of Tax	18.	6632.	Bank Account #		951679
L			Dank Account #	400040	9010/9





Filing Status, Age & License Information

Additional Filing Information

Filing Status	2	Locality	810
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Federal Head of Household Uninsured & Authorize DMAS

09241983 DOB - You Name or Filing Status Change

VA Driver's License ID - You A62694150 Address Change

VA Driver's License - Iss. Date - You 07082021 VA Return Not Filed Last Year

Spouse Name (Filing Status 3 Only) Dependent on Another's Return

Farmer / Fisherman / Merchant Seaman 04121991

Amended

VA Driver's License - Iss. Date - Spouse

VA Driver's License ID - Spouse

DOB - Spouse

Exemptions (A) You	1	Exemptions (B) 65 & Over - You	Federal EIC & Amount	
Spouse	1	65 & Over - Spouse	Deceased Indicator	
Dependents	1	Blind - You	Form 760C or 760F	
Total (A)	3	Blind - Spouse	No Sales & Use Tax Due Indicator	ζ.
		Total (B)	Obtain Electronic 1099G	

Reason Code

ID Theft PIN

Phone - Preparer

Overseas on Due Date

Contact Information

I (We), the undersigned, declare under penalty of law that I (we) have examined this return & to the best of my (our) knowledge, it is a true, correct & complete return. If you are requesting direct deposit of your refund by providing bank information on your return, you are certifying that the information provided is for a domestic account within the territorial jurisdiction of the United States.

Signature - You Date Phone - You

Signature - Spouse _____ Date Phone - Spouse

030323 6789659522 Signature - Preparer SYAM PRIYA RAM SAGAR GUPTA TALLAM Date

7 P02082703

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

Preparer Information GLOBAL TAXES LLC

File by May 1, 2023 Include Page 1, Page 2 and all 245 ROONEY CT supporting 760CG documents. E BRUNSWICK

3302420345

2022 Schedule INC/CG

281150257

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



SUNDEEP PATLOLLA

GOUTHAMI NAGEELY

Your/ Spouse SSN	Withholding Type	VA Withholding	Employer FEIN	VA Account Number	VA Wages, tips, other comp.
Г					コ
281150257	M	4641.	263914448	30263914448F000	90574.
690690671	W	3263.	202850866	30202850866F001	65860.

Total VA Withholding	SSN	VA Withholding
You	281150257	4641.
Spouse	690690671	3263.
Total # of W-2s,1099s & VK-1s	02	

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			
SUNI	DEEP PATLOLLA	281-15-02	57			
	se's Name	A Spouse's Socia	Security Number			
GOU	THAMI NAGEELY	690-69-06	71			
Part		A Spouse	B Yourself			
1.	Federal Adjusted Gross Income (Form 760CG, Line 1; 760PY, Line 1, columns A & B; Form 763, Line 1)		143108.			
2.	Virginia Adjusted Gross Income (Form 760CG, Line 9; 760PY, Line 10, columns A & B; Form 763, Line 9)		143108.			
3.	Taxable Income (Form 760CG, Line 15; 760PY, Line 16, columns A & B; Form 763, Line 17)		124318.			
4.	Virginia Income Tax (Form 760CG, Line 18; 760PY, Line 17, columns A & B; Form 763 Line 18)		6632.			
5.	Withholding (Form 760CG, Line 19a & 19b; 760PY, Lines 19a & 19b; Form 763, Lines 19a & 19b)		7904.			
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)		1272.			
Part	II Declaration of Taxpayer and Signature Authorization					
Returnumb filing liable Virgir refun 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 rer) 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 di directly involve a finance	tidentification me tax return. If I am tax liability, I remain my complete return to rect deposit of my cial institution outside			
X	ayer's e-File PIN: check one box only I authorize the ERO named below to enter my e-File PIN 5 0 2 5 7 as my signature on my 2022 e-file Do not enter all zeros GLOBAL TAXES LLC ERO Firm Name	ed Virginia individual inc	ome tax return.			
	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					
Spot	se's e-File PIN: check one box only					
X	I authorize the ERO named below to enter my e-File PIN 9 0 6 7 1 as my signature on my 2022 e-file Do not enter all zeros GLOBAL TAXES LLC	ed Virginia individual inc	ome tax return.			
	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 ³	s EFIN/PIN: Enter your six-digit EFIN followed by your five digit self-selected PIN. 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	3-23				