



**See instructions before completing line items.**

Enclose a complete copy of your federal tax return and all other required Virginia enclosures.

Dates of VA Residence (mm-dd-yyyy)	
You - From	You - To
01-01-2023	08-31-2023
Spouse - From	Spouse - To
01-01-2023	08-31-2023

<b>YOUR</b> First Name KRISHNA CHAITANYA	MI	Your Last Name BEJJIPURAM	Check if deceased <input type="checkbox"/>	Suffix	<b>A</b> Your Social Security Number 841-08-5937
<b>SPOUSE'S</b> First Name (filing status 2 or 4) NAGA SOWJANYA	MI	Spouse's Last Name EDUMUDI	Check if deceased <input type="checkbox"/>	Suffix	<b>B</b> Spouse's Social Security Number 679-66-4130

Present Home Address (Number and Street, or Rural Route) 300 LEGACY DRIVE APT 433			VA Driver's License Information Customer ID		
City, Town or Post Office PLANO			You _____ Spouse _____		
State TX	ZIP Code 75023	Locality Code 159	You _____ Spouse _____		
			Issue Date (mm-dd-yyyy)		

<b>Check Applicable Boxes</b>	<input type="checkbox"/> Amended Return Reason Code <input type="checkbox"/>	<input type="checkbox"/> Qualifying Farmer, Fisherman or Merchant Seaman	Combined Social Security for You and Spouse reported as taxable income on Federal Return
	<input type="checkbox"/> Dependent on Another's Return	Earned Income Credit Claimed on federal return	
	<input type="checkbox"/> Overseas on Due Date	\$ _____ .00	\$ _____ .00

I/we authorize the sharing of certain information from Form 760PY and Schedule HCI (as described in the instructions) with the Department of Medical Assistance Services (DMAS) and the Department of Social Services (DSS) for purposes of identifying persons who would like to newly enroll in medical assistance.

<b>Filing Status</b> Enter Filing Status Code in box below. <input type="checkbox"/> 1 = Single (Column A) - Federal head of household? YES <input type="checkbox"/> <input type="checkbox"/> 2 = Married, Filing Joint return (Column A) <input type="checkbox"/> 3 = Married, Filing Separate returns (Column A) <input type="checkbox"/> 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 box at top of form and, enter Spouse's Name _____	<b>Exemptions</b> Enter the number of exemptions being claimed. You/Spouse Dependents 65 or Over Blind <b>A - You</b> Enter the numbers for both You and Spouse if Filing Status 2 1 0 <b>B - Spouse</b> Filing Status 4 Only 1
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<b>DATE OF BIRTH</b> Your Birth Date (mm-dd-yyyy) 04 - 11 - 1994 Spouse's Birth Date (mm-dd-yyyy) 05 - 16 - 1994	<b>B</b> Spouse Filing Status 4 ONLY	<b>A</b> You Include Spouse if Filing Status 2
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**Complete the Schedule of Income first and submit it with your Form 760PY.**

1 FEDERAL ADJUSTED GROSS INCOME from Schedule of Income, Part 1, Line 7, Column 1.....	1	106364	00	127003	00
2 Additions from Schedule 760PY ADJ, Line 3.....	2		00		00
3 <b>Add Lines 1 and 2.....</b>	3	106364	00	127003	00
4a Qualifying Age Deduction. Enter Birth Dates above. Complete Age Deduction Worksheet in instructions. Enter Spouse's Age Deduction on Line 4b, Column B when using Filing Status 4 ONLY. Otherwise, claim Your Age Deduction on Line 4a, Column A and Spouse's on Line 4b, Column A.....	4a				00
4b	4b		00		00
5 Social Security Act and equivalent Tier 1 Railroad Retirement Act benefits reported as taxable income on federal return and attributable to your period of residence in Virginia.....	5		00		00
6 State income tax refund or overpayment credit reported as income on your federal return and received while a Virginia resident. Claim in the same column you reported adjusted gross income on Line 1.....	6		00		00
7 Income attributable to your period of residence outside Virginia from Schedule of Income, Part 1, Line 9, Column 3.....	7	35225	00	34057	00
8 Subtractions from Schedule 760PY ADJ, Line 7.....	8		00		00
9 <b>Add Lines 4a, 4b, 5, 6, 7, and 8.....</b>	9	35225	00	34057	00
10 <b>Virginia Adjusted Gross Income (VAGI). Subtract Line 9 from Line 3.....</b>	10	71139	00	92946	00
11 Itemized Deductions from Virginia Schedule A paid while a Virginia resident. See Instructions.....	11		00		00
12 If you do not claim itemized deductions on Line 11, enter standard deduction from Standard Deductions Worksheet in instructions.....	12	0	00	11248	00



Your Name K BEJJIPURAM & N EDUMUDI	Your SSN 841-08-5937
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	<b>B</b> Spouse Filing Status 4 ONLY	<b>A</b> You Include Spouse if Filing Status 2
13 Prorated exemption amount from Schedule of Income, Part 2, Line 11. See instructions.....	619 00	619 00
14 Deductions from Schedule 760PY ADJ, Line 9.....	00	00
15 <b>Add Lines 11, 12, 13 and 14.</b> .....	619 00	11867 00
16 <b>Virginia Taxable Income. Subtract Line 15 from Line 10.</b> .....	70520 00	81079 00
17 Tax amount from Tax Table or Tax Rate Schedule.....	3797 00	4405 00
18 <b>Total Tax. Add Line 17, Column A and Line 17, Column B.</b> .....		8202 00
19a Your Virginia income tax withheld. Enclose copies of Forms W-2, W-2G, 1099 and VK-1.....		4806 00
19b Spouse's Virginia income tax withheld. Enclose copies of Forms W-2, W-2G, 1099 and VK-1.....		3582 00
20 Combined 2023 Estimated Tax Payments.....		00
21 2022 overpayment credited to 2023 estimated taxes.....		00
22 Extension Payment - Enter amount paid on Form 760IP.....		00
23 Tax Credit for Low-Income Individuals or Virginia Earned Income Credit from Schedule 760PY ADJ, Line 17...		00
24 Total credit for taxes paid to another state from Schedule OSC.....		00
25 Credits from Schedule CR, Section 5, Line 1A.....		00
26 <b>Total payments and credits. Add Lines 19a through 25.</b> .....		8388 00
27 If Line 18 is larger than Line 26, enter the difference. This is the <b>INCOME TAX YOU OWE.</b> .....		00
28 If Line 26 is larger than Line 18, enter the difference. This is the <b>OVERPAYMENT AMOUNT.</b> .....		186 00
29 Amount of overpayment on Line 28 to be <b>CREDITED TO 2024 ESTIMATED INCOME TAX.</b> .....		00
30 Virginia529 and ABLE Contributions from Schedule VAC, Section I, Line 6.....		00
31 Other Voluntary Contributions from Schedule VAC, Section II, Line 14.....		00
32 Addition to Tax, Penalty and Interest from <b>enclosed</b> Schedule 760PY ADJ, Line 21. See instructions..... Enclose 760C or 760F and check here. <input type="checkbox"/>		00
33 Sales and Use Tax is due on Internet, mail order, and out-of-state purchases (Consumer's Use Tax). See instructions..... Check here if no sales and use tax is due..... <input checked="" type="checkbox"/>		00
34 <b>Add Lines 29 through 33.</b> .....		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 than Line 28, enter the difference. Enclose payment or pay at <a href="http://www.tax.virginia.gov">www.tax.virginia.gov</a> ..... <b>AMOUNT YOU OWE</b> ... Check here if paying by credit or debit card - See instructions. <input type="checkbox"/>		00
36 If Line 28 is larger than Line 34, subtract Line 34 from Line 28..... <b>YOUR REFUND.</b> .....		186 00

If the Direct Deposit section below is not completed, your refund will be issued by check.

**DIRECT BANK DEPOSIT**  
Domestic Accounts Only.  
No International Deposits.

<b>Your Bank Routing Transit Number</b>	<b>Your Bank Account Number</b>	Checking <input checked="" type="checkbox"/>	Savings <input type="checkbox"/>
1 2 2 1 0 0 0 2 4	1 9 6 2 7 7 3 0 2		

I (We) authorize the Department of Taxation to discuss this return with my (our) preparer.  I agree to obtain my Form 1099-G at [www.tax.virginia.gov](http://www.tax.virginia.gov).  
I (We), the undersigned, declare under penalty of law that I (we) have examined this return and to the best of my (our) knowledge, it is a true, correct and complete return.

Your Signature	Your Phone Number (480) 565-0457	Date
Spouse's Signature (If a joint return, <b>both</b> must sign)	Spouse's Phone Number	Date
Preparer's Name SYAM PRIYA RAM SAGAR GUPTA TALLAM	Preparer's Phone Number (678) 965-9522	Date 03-14-2024
Firm's Name (or Yours if Self-Employed) GLOBAL TAXES LLC 245 ROONEY CT E BRUNSWICK NJ 08816	Preparer's PTIN P02082703	Vendor Code 1555
	Filing Election Code 7	ID Theft PIN

**2023 VIRGINIA SCHEDULE OF INCOME  
Form 760PY**

Page 1



Your Name K BEJJIPURAM & N EDUMUDI	Your SSN 841-08-5937
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**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 SCHEDULE OF INCOME Form 760PY, Column A — All Filers Must Complete Section A —		You (Include Spouse if Filing Status 2)						
		Column A1 Federal Return		Column A2 While VA Resident		Column A3 While NOT VA Resident		
1.	Wages, salaries, tips, etc.....	1	129255	.00	92946	.00	36309	.00
2.	Interest and dividends .....	2	748	.00	0	.00	748	.00
3.	Pension and other income.....	3	-3000	.00	0	.00	-3000	.00
4.	Gross income (add Lines 1, 2 and 3) .....	4	127003	.00	92946	.00	34057	.00
5.	Adjustments to income: moving expenses .....	5		.00		.00		.00
6.	Other income adjustments (enclose explanation)	6	0	.00	0	.00	0	.00
7.	Federal adjusted gross income (Line 4 less Lines 5 and 6)* .....	7	127003	.00	92946	.00	34057	.00
8.	Net conformity modifications .....	8		.00		.00		.00
9.	Conformity Federal Adjusted Gross Income (add Lines 7 and 8).....	9	127003	.00	92946	.00	34057	.00

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

SECTION B SCHEDULE OF INCOME Form 760PY, Column B — Spouse Must Complete Section B if claiming Filing Status 4 —		Enter Spouse's Income When Filing Status 4 Is Claimed						
		Column B1 Federal Return		Column B2 While VA Resident		Column B3 While NOT VA Resident		
1.	Wages, salaries, tips, etc.....	1	106233	.00	71139	.00	35094	.00
2.	Interest and dividends .....	2	131	.00	0	.00	131	.00
3.	Pension and other income.....	3	0	.00	0	.00	0	.00
4.	Gross income (add Lines 1, 2 and 3) .....	4	106364	.00	71139	.00	35225	.00
5.	Adjustments to income: moving expenses .....	5		.00		.00		.00
6.	Other income adjustments (enclose explanation)	6	0	.00	0	.00	0	.00
7.	Federal Adjusted gross income (Line 4 less Lines 5 and 6)** .....	7	106364	.00	71139	.00	35225	.00
8.	Net conformity modifications .....	8		.00		.00		.00
9.	Conformity Federal Adjusted Gross Income (add Lines 7 and 8).....	9	106364	.00	71139	.00	35225	.00

\*\*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.

**2023 VIRGINIA SCHEDULE OF INCOME**

**Form 760PY**

Page 2



Your Name K BEJJIPURAM & N EDUMUDI	Your SSN 841-08-5937
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**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**

		<b>Column B Spouse</b>	<b>Column A You</b>
1. Your exemption .....	1	1	1
2. Dependents .....	2		0
3. Add Lines 1 and 2 .....	3	1	1
4. Multiply Line 3 by \$930 .....	4	930	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	930
10. Enter the ratio amount from the Personal Exemption Ratio Schedule in the Form 760PY Instructions .....	10	0.666	0.666
11. Multiply Line 9 by Line 10 and enter the result in the appropriate column on Form 760PY, Line 13.....	11	619	619

**PART 3**

**Moving Information**

- 1a. If YOU moved into Virginia in 2023, prior state of residence \_\_\_\_\_
- 1b. If YOU moved out of Virginia in 2023, state moved to TX \_\_\_\_\_
- 2a. If SPOUSE moved into Virginia in 2023, prior state of residence \_\_\_\_\_
- 2b. If SPOUSE moved out of Virginia in 2023, state moved to TX \_\_\_\_\_

**2023 Schedule INC/CG**

841085937

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



KRISHNA CHAI BEJJI PURAM

NAGA SOWJANY EDUMUDI

Your/ Spouse SSN	Withholding Type	VA Withholding	Employer FEIN	VA Account Number	VA Wages, tips, other comp.
841085937	W	4806.	541736036	30541736036F	92946.
679664130	W	3582.	043730124	30043730124F001	71139.

Total VA Withholding	SSN	VA Withholding
You	841085937	4806.
Spouse	679664130	3582.

Total # of W-2s, 1099s & VK-1s 02

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

# 2023 Schedule FED/CG

KRISHNA CHAI BEJJIPURAM  
NAGA SOWJANY EDUMUDI  
300 LEGACY DRIVE APT 433



PLANO

TX 75023

841085937

679664130

159

## SCHEDULE C and/or SCHEDULE F INFORMATION

1. Schedule Name	First Schedule Info.	C	Second Schedule Info.
2. Gross Receipts or Sales			
3. Depreciation/Expense Deduction			
4. Business Activity Code	541990		
5. Business Locality Code	159		
6. Car & truck expenses	11004.		
7. Inventory at end of year			
8. # of miles you used your vehicle for: <b>Business</b>	16800		
9. # of miles you used your vehicle for: <b>Commuting</b>			
10. # of miles you used your vehicle for: <b>Other</b>	10320		

## SCHEDULE 2106 INFORMATION

- 11. # of miles you used your vehicle for: **Business**
- 12. # of miles you used your vehicle for: **Commuting**
- 13. # of miles you used your vehicle for: **Other**
- 14. % of business use of vehicle: **Vehicle 1**
- 15. % of business use of vehicle: **Vehicle 2**

## SCHEDULE 4562 INFORMATION

- 16. Property Used more than 50% in qualified business  
Type of Property
- 17. Date placed in service
- 18. Business/Investment Use %
- 19. Cost or other basis
- 20. Depreciation Deduction
- 21. Elected Section 179 Cost
- 22. Business Locality Code

