



ANIL KRISHNA KONDA  
DEEPTHI SREE TOLETY  
22525 NORWALK SQUARE

ASHBURN VA 20148

SSN - You **KOND** 193025298

Vendor ID 1555 XXXXX

SSN - Spouse **TOLE** 760101172

Fed Adj Gross Income (FAGI) 1. 168177.

Withholding (VA) - You 19A. 7684.

Additions 2.

Withholding (VA) - Spouse 19B. 664.

Subtotal 3. 168177.

Estimated Payments 20.

Age Deduction - You 4A.

2022 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. 8348.

Total VA Adj Gross Income (VAGI) 9. 168177.

Tax You Owe 27.

Itemized Deductions - VA Sch A 10.

Tax Overpayment 28. 248.

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 & Exemptions) 14. 18790.

Addition to Tax, Penalty & Interest 32.

VA Taxable Income 15. 149387.

Sales and Use Tax 33.

Amount of Tax 16. 8332.

**Amount You Owe**  
Will Pay by Credit/Debit Card  N  
**Your Refund** 248.

Spouse Tax Adjustment (STA) 17. 232.

VAGI - Spouse 17A. 14664.

Bank Routing # C 111000614

Net Amount of Tax 18. 8100.

Bank Account # 000000681796053





Filing Status, Age & License Information

Additional Filing Information

Filing Status 2

Federal Head of Household

DOB - You 07051984

VA Driver's License ID - You

VA Driver's License - Iss. Date - You

Spouse Name (Filing Status 3 Only)

DOB - Spouse 08151984

VA Driver's License ID - Spouse

VA Driver's License - Iss. Date - Spouse

Locality 107

Uninsured & Authorize DMAS

Name or Filing Status Change

Address Change

VA Return Not Filed Last Year

Dependent on Another's Return

Farmer / Fisherman / Merchant Seaman

Amended

Reason Code

Overseas on Due Date

Federal EIC & Amount

Deceased Indicator

Form 760C or 760F

No Sales & Use Tax Due Indicator X

Obtain Electronic 1099G

ID Theft PIN

Exemptions (A)

Exemptions (B)

You	1	65 & Over - You
Spouse	1	65 & Over - Spouse
Dependents	1	Blind - You
Total (A)	3	Blind - Spouse
		Total (B)

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 5107096359

Signature - Spouse \_\_\_\_\_ Date \_\_\_\_\_ Phone - Spouse \_\_\_\_\_

Signature - Preparer SYAM PRIYA RAM SAGAR GUPTA TALLAM Date 030624 Phone - Preparer 6789659522

The Tax Department may discuss my/our return with my/our preparer. Preparer Information 7 P02082703

GLOBAL TAXES LLC

**File by May 1, 2024**  
 Include Page 1, Page 2 and all supporting 760CG documents.

245 ROONEY CT  
 E BRUNSWICK NJ 08816 Page 2 of 2

**2023 Schedule INC/CG**

193025298

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



ANIL KRISHNA      KONDA

DEEPTHI SREE      TOLETY

Your/ Spouse SSN	Withholding Type	VA Withholding	Employer FEIN	VA Account Number	VA Wages, tips, other comp.
193025298	W	7684.	541966544	30541966544F001	145670.
760101172	W	664.	850658167	30850658167F001	14664.

Total VA Withholding	SSN	VA Withholding
You	193025298	7684.
Spouse	760101172	664.
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

ANIL KRISHNA KONDA  
DEEPTHI SREE TOLETY  
22525 NORWALK SQUARE



ASHBURN

VA 20148

193025298

760101172

107

## SCHEDULE C and/or SCHEDULE F INFORMATION

1. Schedule Name	First Schedule Info.	C	Second Schedule Info.
2. Gross Receipts or Sales	7950.		
3. Depreciation/Expense Deduction			
4. Business Activity Code	519200		
5. Business Locality Code	107		
6. Car & truck expenses			
7. Inventory at end of year			
8. # of miles you used your vehicle for: <b>Business</b>	647		
9. # of miles you used your vehicle for: <b>Commuting</b>			
10. # of miles you used your vehicle for: <b>Other</b>	379		

## 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



**Part V Complete This Part Before Part I, Lines 2a, 2b, and 2c.** See instructions.

Name of activity	Current year		Prior years	Overall gain or loss	
	(a) Net income (line 2a)	(b) Net loss (line 2b)	(c) Unallowed loss (line 2c)	(d) Gain	(e) Loss
LAXMI NAGAR, COLONY	0.	15,682.	3,113.		18,795.
<b>Total.</b> Enter on Part I, lines 2a, 2b, and 2c					

**Part VI Use This Part if an Amount Is Shown on Part II, Line 9.** See instructions.

Name of activity	Form or schedule and line number to be reported on (see instructions)	(a) Loss	(b) Ratio	(c) Special allowance	(d) Subtract column (c) from column (a).
<b>Total</b>			1.00		

**Part VII Allocation of Unallowed Losses.** See instructions.

Name of activity	Form or schedule and line number to be reported on (see instructions)	(a) Loss	(b) Ratio	(c) Unallowed loss
LAXMI NAGAR, COLONY	E Ln 22	18,795.	1.00000000	18,795.
<b>Total</b>			1.00	

**Part VIII Allowed Losses.** See instructions.

Name of activity	Form or schedule and line number to be reported on (see instructions)	(a) Loss	(b) Unallowed loss	(c) Allowed loss
LAXMI NAGAR, COLONY	E Ln 22	18,795.	18,795.	0.
<b>Total</b>				

**DO NOT SEND THIS VA-8879 TO THE VIRGINIA DEPARTMENT OF TAXATION OR THE IRS.  
IT MUST BE MAINTAINED IN YOUR FILES!**

Virginia Submission Identification Number (SID)

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<b>Your Name</b>	<b>B Your Social Security Number</b>	
ANIL KRISHNA KONDA	193-02-5298	
<b>Spouse's Name</b>	<b>A Spouse's Social Security Number</b>	
DEEPTHI SREE TOLETY	760-10-1172	
<b>Part I Tax Return Information</b>	<b>A Spouse</b>	<b>B Yourself</b>
1. Federal Adjusted Gross Income (Form 760CG, Line 1; 760PY, Line 1, columns A & B; Form 763, Line 1)		168177.
2. Virginia Adjusted Gross Income (Form 760CG, Line 9; 760PY, Line 10, columns A & B; Form 763, Line 9)		168177.
3. Taxable Income (Form 760CG, Line 15; 760PY, Line 16, columns A & B; Form 763, Line 17)		149387.
4. Virginia Income Tax (Form 760CG, Line 18; 760PY, Line 17, columns A & B; Form 763 Line 18)		8100.
5. Withholding (Form 760CG, Line 19a & 19b; 760PY, Lines 19a & 19b; Form 763, Lines 19a & 19b)		8348.
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)		248.

**Part II Declaration of Taxpayer and Signature Authorization**

Under penalties of perjury, I declare that I have examined a copy of my individual income tax return and accompanying schedules and statements for the year ending December 31, 2023, 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.

**Taxpayer's e-File PIN: check one box only**

I authorize the ERO named below to enter my e-File PIN 

2	5	2	9	8
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 as my signature on my 2023 e-filed Virginia individual income tax return.  
**Do not enter all zeros**

GLOBAL TAXES LLC

ERO Firm Name

I will enter my e-File PIN as my signature on my 2023 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.

Your Signature \_\_\_\_\_ Date \_\_\_\_\_

**Spouse's e-File PIN: check one box only**

I authorize the ERO named below to enter my e-File PIN 

0	1	1	7	2
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 as my signature on my 2023 e-filed Virginia individual income tax return.  
**Do not enter all zeros**

GLOBAL TAXES LLC

ERO Firm Name

I will enter my e-File PIN as my signature on my 2023 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.

Spouse's Signature \_\_\_\_\_ Date \_\_\_\_\_

**Part III Certification and Authentication – Practitioner PIN Method Only**

**ERO's EFIN/PIN:** Enter your six-digit EFIN followed by your five digit self-selected PIN. 

2	2	2	4	9	6	0	8	2	7	1
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**Do not enter all zeros**

I certify that the above numeric entry is my ERO EFIN/PIN, which is my signature for the 2023 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 2023). EROs may sign the form using a rubber stamp, mechanical device, such as a signature pen, or computer software program.

ERO's Signature \_\_\_\_\_ Date 03-06-24