2023 VA760CG Page 1





ANIL KRISHNA KONDA DEEPTHI SREE TOLETY 22525 NORWALK SQUARE

ASHBURN	~	VA 20148					
SSN - You	KOND	193025298	Vendor ID 1555		xxxxxx ¬		
SSN - Spouse	TOLE	760101172					
Fed Adj Gross Income (F	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 Railroa	d 5.		Credit - Low-Income or EIC	23.			
State Income Tax Overpa	ayment 6.		Credit - Schedule OSC	24.			
Subtractions	7.		Credits - Schedule CR	25.			
Subtotal Subtractions	8.		Total Payments / Credits	26.	8348.		
Total VA Adj Gross Incon	ne (VAGI) 9.	168177.	Tax You Owe	27.			
Itemized Deductions - VA	A 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 & E	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				
Spouse Tax Adjustment	(STA) 17.	232.	Will Pay by Credit/Debit Card N Your Refund	1	248.		
VAGI - Spouse	17A.	14664.	Bank Routing #	C	111000614		
Net Amount of Tax 18.		8100.	Bank Account #		00681796053		
	1		Dank Account #	00001	0000T/20033		

__LAR __DLAR __DTD __LTD \$____

Page 1 of 2





Filing Status, Age & License Information Additional Filing Information 2 107 Filing Status Locality Federal Head of Household Uninsured & Authorize DMAS 07051984 DOB - You Name or Filing Status Change VA Driver's License ID - You Address Change VA Driver's License - Iss. Date - You VA Return Not Filed Last Year Spouse Name (Filing Status 3 Only) Dependent on Another's Return Farmer / Fisherman / Merchant Seaman 08151984 DOB - Spouse Amended VA Driver's License ID - Spouse Reason Code VA Driver's License - Iss. Date - Spouse Overseas on Due Date Exemptions (B) Exemptions (A) 65 & Over - You Federal EIC & Amount You 1 Spouse 65 & Over - Spouse Deceased Indicator Form 760C or 760F Dependents Blind - You 3 Total (A) Blind - Spouse No Sales & Use Tax Due Indicator Χ Obtain Electronic 1099G Total (B) ID Theft PIN **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 5107096359 Phone - You 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. 7 Preparer Information P02082703 GLOBAL TAXES LLC

File by May 1, 2024

REV 02/23/24 PRO

Include Page 1, Page 2 and all supporting 760CG documents. 245 ROONEY CT

E BRUNSWICK NJ 08816

2023 Schedule INC/CG

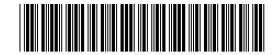
193025298

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



KONDA

DEEPTHI SREE TOLETY



Your/ Spouse SSN	Withholding Type	VA Withholding	Employer FEIN	VA Account Number	VA Wages, tips, other comp.
Γ					コ
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	

2023 Schedule FED/CG

ANIL KRISHNA KONDA DEEPTHI SREE TOLETY 22525 NORWALK SQUARE



ASHBURN VA 20148 193025298 760101172

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	SCHE	DULE C and/or SCHED	ule f information	I
1.	Schedule Name	First Schedule Info.	С	Second Schedule Info.
	Г			
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: Business	647		
9.	# of miles you used your vehicle for: Commuting			
10.	# of miles you used your vehicle for: Other	379		
		SCHEDULE 2106 IN	IFORMATION	
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 IN	FORMATION	
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

Depreciation Deduction

Business Locality Code

21. Elected Section 179 Cost

Department of the Treasury

VTRGTNTA

Passive Activity Loss Limitations

See separate instructions.

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

Go to www.irs.gov/Form8582 for instructions and the latest information.

OMB No. 1545-1008 Attachment

Sequence No. 858 Internal Revenue Service Name(s) shown on return A KONDA & D TOLETY 193025298 2023 Passive Activity Loss Part I Caution: Complete Parts IV and V before completing Part I. Rental Real Estate Activities With Active Participation (For the definition of active participation, see Special Allowance for Rental Real Estate Activities in the instructions.) 1a Activities with net income (enter the amount from Part IV, column (a)) . . . Activities with net loss (enter the amount from Part IV, column (b)) 1b c Prior years' unallowed losses (enter the amount from Part IV, column (c)) . . 1d **All Other Passive Activities** 2a Activities with net income (enter the amount from Part V, column (a)) . . . **b** Activities with net loss (enter the amount from Part V, column (b)) 2b **c** Prior years' unallowed losses (enter the amount from Part V, column (c)) . 2c (2d -18,795.Combine lines 1d and 2d and subtract any prior year unallowed CRD. See instructions. If this line is zero or more, stop here and include this form with your return; all losses are allowed, including any prior year unallowed losses entered on line 1c or 2c. Report the losses on the forms and schedules 3 -18,795. If line 3 is a loss and: • Line 1d is a loss, go to Part II. • Line 2d is a loss (and line 1d is zero or more), skip Part II and go to line 10. Caution: If your filing status is married filing separately and you lived with your spouse at any time during the year, do not complete Part II. Instead, go to line 10. Special Allowance for Rental Real Estate Activities With Active Participation Part II Note: Enter all numbers in Part II as positive amounts. See instructions for an example. 4 Enter the **smaller** of the loss on line 1d or the loss on line 3 4 5 Enter \$150,000. If married filing separately, see instructions 6 Enter modified adjusted gross income, but not less than zero. See instructions 6 Note: If line 6 is greater than or equal to line 5, skip lines 7 and 8 and enter -0on line 9. Otherwise, go to line 7. 7 Multiply line 7 by 50% (0.50). **Do not** enter more than \$25,000. If married filing separately, see instructions 8 9 Part III **Total Losses Allowed** 10 10 Total losses allowed from all passive activities for 2023. Add lines 9 and 10. See instructions to find 11 Complete This Part Before Part I, Lines 1a, 1b, and 1c. See instructions. Part IV Current year Prior years Overall gain or loss Name of activity (a) Net income (b) Net loss (c) Unallowed (d) Gain (e) Loss

Form 8582 (2023) VIRGINIA Page **2**

Part V Complete This Part Befor	e Pa	art I, Lines 2a	a, 2b,	and 2c. S	ee instruc	tions.				
		Curren	t year		Prior years (c) Unallowed loss (line 2c)		Overall gain or loss			
Name of activity	(a)	Net income (line 2a)		Net loss ne 2b)			(d) Gain		(e) Loss	
LAXMI NAGAR, COLONY		0.	15,682.		3,113.				18,795.	
Total. Enter on Part I, lines 2a, 2b, and 2c										
Part VI Use This Part if an Amou	⊥ nt Is	Shown on P	art II,	Line 9. S	L ee instruc	tions.				
Name of activity	For an to k	m or schedule d line number be reported on e instructions)) Loss	(b) Ra		(c) Special allowance		(d) Subtract column (c) from column (a).	
T-4-1					4.00					
Total Allocation of Unallowed L	oss	s es. See instri	uction	S.	1.00)				
Name of activity		Form or schedu and line numbe to be reported of (see instruction			_oss		(b) Ratio		(c) Unallowed loss	
LAXMI NAGAR, COLONY		E Ln 2:	2	18,795.		1.00000000		18,795.		
Total							1.00			
Part VIII Allowed Losses. See instr	ucti	ons.								
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	2		18,795.		18,795.		0.	
Total										

VA-8879 Virginia Department of Taxation

Virginia Submission Identification Number (SID)

Virginia Individual Income Tax e-File Signature Authorization

Tax Year 2023

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

You	Your Name B Your Social Security Number												curity Number						
ANIL KRISHNA KONDA											193-02-5298								
Spouse's Name											A Spouse's Social Security Number								
DEE	DEEPTHI SREE TOLETY											760-10-1172							
Par	t I	Ta	x Ret	urn Inf	orma	ion											A Spo	use	B Yourself
1.	F	edera	al Adjust	ted Gross	Incon	ne (Fo	rm 760C	G, Lir	ne 1; 760	0PY, I	Line 1, o	column	s A & B;	Fo	orm 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.	V	irgini	a Incom	ie Tax (F	orm 76	OCG,	Line 18;	760P	Y, Line 1	7, col	umns A	& B; F	orm 763	Lir	ne 18)				8100.
5.	V	/ithho	olding (F	orm 760	CG, Lir	ne 19a	a & 19b;	760P\	Y, Lines	19a &	19b; Fo	orm 76	3, Lines	19a	a & 19b)				8348.
6.	Α	mour	nt you O	we (Forn	n 760C	G, Lir	ne 35; Fo	rm 76	60PY, Lin	e 35;	Form 7	63, Lin	e 35)						
7.	R	efun	d (Form	760CG,	Line 36	; 760	PY, Line	36; F	orm 763,	, Line	36)								248.
Par									ture Au										s for the year ending
Returnum filing liable Virgi refur of the signal	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																		
X							o enter m	ny e-F	ile PIN [2 5			as my enter all	-	-	y 2023 e-fil	ed Virginia ind	ividual inc	ome tax return.
	-	كتل	BAL	TAXES) LIL	<u>-</u>					E	RO Fir	m Name						
											ginia ind	dividual	income	tax	k return. Che Part III below.		only if you are	entering	your own e-File
Your	Sig	natur	e												Date				
Spo	use'	's e-F	ile PIN	: check o	ne bo	x only	y		_										
X	Ta	autho	rize the	ERO na	med be	elow to	o enter m	ny e-F	ile PIN	0 1			as my er all ze	_		y 2023 e-fil	ed Virginia ind	ividual inco	ome tax return.
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																			
ERC	's E	FIN/	PIN: En	nter your	six-digi	t EFIN	l followed	d by y	our five	digit s	elf-sele	cted PI	N. 2	2	2 2 4	9 6 0	8 2 7	1	
indic Hand a sig	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 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																		
0		J																	