763Page 1

2023 Virginia Nonresident Income Tax Return Due May 1, 2024



| | Enclose a compi | lete copy o | i your reder | ai ta | T return and ai | Tottler required | virgiiii | elicios | ures. | | | | | | |
|--|---|---------------|----------------|------------------------------|----------------------|----------------------------------|---|------------------|--------------------|---------|---------------|-------------------------------|---------------|------------------|--------|
| First Name | | | MI | . | | Suffix Your Social Security Nu | | | | ber | | Check decea | - 1 | | |
| SAIKRISHNA REDDY Spouse's First Name (Filing Status 2 Only) | | | MI | KASTHURI Last Name | | Suffix | 881-11-5345 fix Spouse's Social Security | | | | Numbo | r | Check | | |
| Spouse 31 instituting (1 ining Status 2 Strily) | | | | IVII | Last Name | | Sullix Spouse's Social Sect | | Curity | Numbe | ı | decea | | | |
| Present Home Address (Number and Street or Rural Route) Your Birth Date | | | | | ite | 1 0 | 2 - 2 0 - 1 0 0 0 | | | | | | | | |
| 7911 N GLEN DR APT 3019 | | | | | | (mm-dd-yyyy) 1 2 - 2 0 - 1 9 9 8 | | | | | 9 8 | | | | |
| | | | | | | Spouse's Birth Date | | | | | | | | | |
| IRVING TX 76227 (mm-dd-yyyy) State of Residence Important - Name of Virginia City or County in which principal place of business, employ | | | | | | vmont | or inco | omo courco | Locality Cod | | | | | | |
| State of Residence Important - Name of \ is located. | | | | | e or virginia City o | r County in which p | лпсіраі р | ace or bus | SII IESS, | | • | | | , , | JE |
| | | | | | | Шс | ty OR | X County | 067 | | | | | | |
| Amended Return Reason Code Name(s) or Address Different than Shown on 2022 VA Return | | | | | | | Overs | seas on Du | e Date | | | | | | |
| Ch | eck Applicable | | | L | | | | | | | | | | | |
| | Boxes | Depe | endent on An | othe | r's Return | Qualifying Face Merchant See | | sherman | , or | | | EIC Claimed on federal return | | | |
| | Filing Status Ente | r Filing Stat | us Code in h | ox h | elow | Wordhall G | | mntions | Add 9 | Section | \$_ ns 1 a | and 2 | Enter the si | 00 um on Line | 12 |
| | _ | _ | ead of house | | | | | • | nouse if | | | | Littor the of | JIII OII EIIIO | 12. |
| | | | | | must have Virgi | nia income | | ′ou Filii | ng Statu 2 or 3 | s Dep | endent — | s | | Total Section | on 1 |
| _ 1 | | | | | e From Any Source | | | 1 + + | | | | = 1 X \$930 | | = 930 | |
| | | • | parate Retur | | | | Yo | — . u 65 Spo∟ | se 65 | You | Spous | | | Total Soct | |
| | g Status 3 or 4, ent | • | | • | | • | or | | over | Blind | Blind | | | Total Sect | 1011 2 |
| box at | t top of form and en | iter Spouse | s Name | | | | | + | + | + | |]= | X \$800 | = | |
| 1 | Adjusted Gross In | come from | federal return | n - N | lot federal taxab | le income | | | | | | 1 | | 109197 | 00 |
| 2 | Additions from Scl | | | | | | | | | | | 2 | | | 00 |
| 3 | Add Lines 1 and | | | | | | | | | | | 3 | | 109197 | 00 |
| 4 | Age Deduction (Se | | | | | | | | | | | 4a | | 100101 | 00 |
| 7 | Enter Birth Dates | above. Ente | er Your Age D | Dedu | ction on Line 4a | a ´ | | | | | | | | | |
| | and Your Spouse's | _ | | | | | | | | | | 4b | | | 00 |
| 5 | Social Security Ac | | | | | | | | | | | 5 | | | 00 |
| 6 | State income tax r | | . , | | · | , | | | | | | 6 | | | 00 |
| 7 Subtractions from Schedule 763 ADJ, Line 7. | | | | | | | | 7 | | | 00 | | | | |
| 8 | Add Lines 4a, 4b | | | | | | | | | | | 8 | | | 00 |
| 9 | Virginia Adjusted | d Gross Inc | ome (VAGI). | . Sul | otract Line 8 fro | om Line 3 | | | | | | 9 | | 109197 | 00 |
| 10 | Itemized Deductio | ns from Vir | ginia Schedu | ıle A, | if applicable. S | ee instructions | | | | | | 10 | | | 00 |
| 11 | 11 If you do not claim itemized deductions on Line 10, enter standard deduction. See instructions | | | | | | | 11 | | 8000 | 00 | | | | |
| 12 Exemption amount. Enter the total amount from the Exemption Sections 1 and 2 above | | | | | | 12 | | 930 | 00 | | | | | | |
| 13 | 13 Deductions from Schedule 763 ADJ, Line 9 | | | | | | 13 | | | 00 | | | | | |
| 14 | Add Lines 10, 11, 12 and 13 | | | | | | 14 | | 8930 | 00 | | | | | |
| 15 | Virginia Taxable Income computed as a resident. Subtract Line 14 from Line 9 | | | | | | 15 | | 100267 | 00 | | | | | |
| 16 | 16 Percentage from Nonresident Allocation Section on Page 2 (Enter to one decimal place only) | | | | | | 16 | | 37.4 | % | | | | | |
| 17 Nonresident Taxable Income. (Multiply Line | | | e 15 | 15 by percentage on Line 16) | | | | | | 17 | | 37500 | 00 | | |
| 18 Income Tax from Tax Table or Tax Rate Sc | | | hedi | dule | | | | | 18 | | 1899 | 00 | | | |
| 19a Your Virginia income tax withheld. Enclose | | | | e For | rms W-2, W-2G, | 1099, and VK-1 | | | | | | 19a | | 2109 | 00 |
| | Dept. of Taxation F 1044 Rev. 02/23 | or Local Use | LTD | | □ \$ | | | | | | | | XX | XXX | |

2023 FORM 763 Page 2

| 2023 | FORM 763 Page 2 | | | | | | | | | | |
|--|---|------------------------------|-----------|--|----------|--|---|--|----------|----------------------------------|--|
| Your N | ame KRISHNA REDDY KASTHURI | Your SSN 881-11-5345 | | | | | | | | | |
| 19b | Spouse's Virginia income tax withheld. Enclo | | 99, and ' | VK-1 | | | | 19b | | | 00 |
| 20 | 2023 Estimated Tax Payments. | | | | | | | | | | 00 |
| 21 | 2022 overpayment credited to 2023 estimate | | | | | | 21 | | | 00 | |
| 22 | Extension Payment - submitted using Form 7 | | | | | | 22 | | | 00 | |
| 23 | Credit for Low-Income Individuals or Virginia | | | | | | | | | 00 | |
| 24 | Total credits from Schedule OSC | | | | | | | | | 00 | |
| 25 | Credits from Schedule CR, Section 5, Line 1/ | | | | | | | | | 00 | |
| 26 | Total payments and credits. Add Lines 19 | | | | | | | | 2109 | - | |
| 27 | If Line 18 is larger than Line 26, enter the diff | | | | | | | | 210 | 00 | |
| 28 | If Line 26 is larger than Line 18, enter the diff | | | | | | | | 210 | + | |
| | • | | | | | | | | | 21(| 00 |
| 29 | Amount of overpayment on Line 28 to be CREI | | | | | | | | | | - |
| 30 | Virginia529 and ABLE Contributions from Scl | • | | | | | | | | | 00 |
| 31 | Other Voluntary Contributions from Schedule | • | | | | | | 31 | | | 00 |
| 32 | Addition to Tax, Penalty, and Interest from en See instructions Encl | | | | | | | 32 | | | 00 |
| 33 | Sales and Use Tax is due on Internet, mail ord | ler, and out-of-state purcha | ases (Co | nsun | ner's Us | e Tax). | | 33 | | | 00 |
| 0.4 | See instructions | | | | | | | | | | - |
| 34 | Add Lines 29 through 33 | | | | | | | 34 | | | 00 |
| 35 | If you owe tax on Line 27, add Lines 27 and 34 - OR - If you have an overpayment on Line 28 and Line 34 is larger than Line 28, enter the difference. AMOUNT YOU OWE . Enclose payment or pay at www.tax.virginia.govCheck here if paying by credit or debit card - See instructions | | | | | | | | 00 | | |
| 36 | If Line 28 is larger than Line 34, subtract Line 3 | 4 from Line 28. This is the | amount | to be | REFUN | DED TO | YOU. | 36 | | 21(| 00 |
| | 210 | | | | | | | | | | |
| | Direct Deposit section below is not completed, T BANK DEPOSIT Your Bank Routing 1 | • | | | | | | 1 . 1 | | | |
| | I DANK DEL OOIT YOUR BANK BOUTING I | | | | | | | | 1371 (| | |
| Domes | tic Accounts Only | Talisit Nullibel | Your | Bank | Accoun | t Numbe | r Ch | ecking | X S | Savings L | |
| | tic Accounts Only prnational Deposits 0 4 4 0 0 | | 7 7 | Bank 3 | 2 0 | 8 6 | | TŤ | X | Savings L | |
| No Inte | tic Accounts Only | | | | 2 0 | | 0 5 | TŤ | | Savings L | s |
| No Inte | tic Accounts Only ernational Deposits 0 4 4 0 0 | 0 0 3 7 | 7 7 | | 2 0 | 8 6 A - All S | 0 5 | TŤ | | | |
| No Inte | tic Accounts Only ernational Deposits 0 4 4 0 0 resident Allocation Percentage | 0 0 3 7 | 7 7 | 3 | 2 0 | 8 6 A - All S | 0 5 | 00 | | ginia Source | 00 |
| No Inte Noni 1. 2. | tic Accounts Only prnational Deposits 0 4 4 0 0 resident Allocation Percentage Wages, salaries, tips, etc | 0 0 3 7 | 7 7 | 1 | 2 0 | 8 6 A - All S | 0 5 ources 08818 | 00 | | ginia Source | 00 |
| No Inte | tic Accounts Only prnational Deposits 0 4 4 0 0 resident Allocation Percentage Wages, salaries, tips, etc | 0 0 3 7 | 7 7 | 1 2 | 2 0 | 8 6 A - All S | 0 5 ources 08818 | 00 00 | | ginia Source | 00 |
| No Intellement Noni 1. 2. 3. 4. | resident Allocation Percentage Wages, salaries, tips, etc | 0 0 3 7 | 7 7 | 1 2 3 | 2 0 | 8 6 A - All S | 0 5 ources 08818 | 00 00 00 | | ginia Source | 00 |
| No Intellement Noni 1. 2. 3. 4. 5. | resident Allocation Percentage Wages, salaries, tips, etc | 0 0 3 7 | 7 7 | 1 2 3 4 | 2 0 | 8 6 A - All S | 0 5 ources 08818 | 00 00 00 00 | | ginia Source | 00 00 00 00 |
| No Intel Noni 1. 2. 3. 4. 5. 6. | tic Accounts Only prnational Deposits 0 4 4 0 0 resident Allocation Percentage Wages, salaries, tips, etc | 0 0 3 7 | 7 7 | 1 2 3 4 5 5 | 2 0 | 8 6 A - All S | 0 5 ources 08818 | 00 00 00 00 00 | | ginia Source | 00 00 00 00 00 |
| No Intellement Noni 1. 2. 3. 4. 5. 6. 7. 8. | tic Accounts Only prnational Deposits 0 4 4 0 0 resident Allocation Percentage Wages, salaries, tips, etc | 0 0 3 7 | 7 7 | 1 2 3 4 5 6 | 2 0 | 8 6 A - All S | 0 5 ources 08818 | 00 00 00 00 00 | | ginia Source | 00 00 00 00 00 00 |
| No Intellement Noni 1. 2. 3. 4. 5. 6. 7. 8. 9. | tic Accounts Only prnational Deposits 0 4 4 0 0 resident Allocation Percentage Wages, salaries, tips, etc | 0 0 3 7 | 7 7 | 1 2 3 4 5 6 7 8 9 | 2 0 | 8 6 A - All S | 0 5 ources 08818 | 00 00 00 00 00 00 00 00 | | ginia Source | 00 00 00 00 00 00 00 |
| No Intervented No. 1. 2. 3. 4. 5. 6. 7. 8. 9. 10. | tic Accounts Only prnational Deposits 0 4 4 0 0 resident Allocation Percentage Wages, salaries, tips, etc | 0 0 3 7 | 7 7 | 1 2 3 4 5 6 7 8 9 10 | 2 0 | 8 6 A - All S | 0 5 ources 08818 379 | 00 00 00 00 00 00 00 00 | | ginia Source 40886 | 00 00 00 00 00 00 00 |
| No Intel Noni 1. 2. 3. 4. 5. 6. 7. 8. 9. 10. | tic Accounts Only prnational Deposits O 4 4 0 0 resident Allocation Percentage Wages, salaries, tips, etc | 0 0 3 7 | 7 7 | 1 2 3 4 5 6 7 8 9 10 11 1 | 2 0 | 8 6 A - All S | 0 5 ources 08818 379 | 00 00 00 00 00 00 00 00 00 | | ginia Source 40886 | 00 00 00 00 00 00 00 |
| No Intel Noni 1. 2. 3. 4. 5. 6. 7. 8. 9. 10. 11. | tic Accounts Only prnational Deposits 0 4 4 0 0 resident Allocation Percentage Wages, salaries, tips, etc | 0 0 3 7 | 7 7 | 1 2 3 4 5 6 7 8 9 10 11 12 | 2 0 | 8 6 A - All S | 0 5 ources 08818 379 | 00 00 00 00 00 00 00 00 00 00 | | ginia Source 40886 | 00 00 00 00 00 00 00 00 |
| Noni 1. 2. 3. 4. 5. 6. 7. 8. 9. 10. 11. 12. | tic Accounts Only prnational Deposits 0 4 4 0 0 resident Allocation Percentage Wages, salaries, tips, etc | 0 0 3 7 | 7 7 | 3 1 2 3 4 5 6 7 8 8 9 10 11 12 13 | 2 0 | 8 6 A - AII S | 0 5 ources 08818 379 | 00 00 00 00 00 00 00 00 00 00 | | ginia Source 40886 0 | 00 00 00 00 00 00 00 00 |
| No Intellection Noni 1. 2. 3. 4. 5. 6. 7. 8. 9. 10. 11. 12. 13. 14. | tic Accounts Only prnational Deposits O 4 4 0 0 resident Allocation Percentage Wages, salaries, tips, etc | ons. S corporations, etc | 7 7 | 1 2 3 4 5 6 7 8 9 10 11 12 | 2 0 | 8 6 A - AII S | 0 5 ources 08818 379 | 00 00 00 00 00 00 00 00 00 00 | | ginia Source 40886 | 00 00 00 00 00 00 00 00 |
| No Intellection In | tic Accounts Only prnational Deposits 0 4 4 0 0 resident Allocation Percentage Wages, salaries, tips, etc | ons. S corporations, etc | 7 7 | 3 1 2 3 4 5 6 7 8 8 9 10 11 12 13 | 2 0 | 8 6 A - AII S | 0 5 ources 08818 379 | 00 00 00 00 00 00 00 00 00 00 | | ginia Source 40886 0 | 00 00 00 00 00 00 00 00 00 |
| No Intel Non I 1. 2. 3. 4. 5. 6. 7. 8. 9. 10. 11. 12. 13. 14. 15. | tic Accounts Only prnational Deposits O 4 4 0 0 resident Allocation Percentage Wages, salaries, tips, etc | ons. S corporations, etc | 7 7 | 3 1 2 3 4 4 5 6 7 8 9 10 11 12 13 14 15 [| 2 0 | 8 6 A - AII S 1 to obtain | 0 5 ources 08818 379 0 0 0 0 0 my Form | 00 00 00 00 00 00 00 00 00 00 00 | B - Virg | 9inia Source 40886 0 40886 37.49 | 00 00 00 00 00 00 00 00 00 |
| No Intervented No. 1. 2. 3. 4. 5. 6. 7. 8. 9. 10. 11. 12. 13. 14. 15. | tic Accounts Only prnational Deposits O 4 4 0 0 resident Allocation Percentage Wages, salaries, tips, etc | ons. S corporations, etc | 7 7 | 3 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 [| 2 0 | 8 6 A - AII S 1 to obtain | 0 5 ources 08818 379 0 0 0 0 0 my Form | 00 00 00 00 00 00 00 00 00 00 00 | B - Virg | 9inia Source 40886 0 40886 37.49 | 00 00 00 00 00 00 00 00 00 |
| No Intervented No. 1. 2. 3. 4. 5. 6. 7. 8. 9. 10. 11. 12. 13. 14. 15. | tic Accounts Only prnational Deposits O 4 4 0 0 resident Allocation Percentage Wages, salaries, tips, etc | ons. S corporations, etc | 7 7 | 3 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 [| 2 0 | 8 6 A - AII S 1 to obtain | 0 5 ources 08818 379 0 0 0 0 0 my Form | 00 00 00 00 00 00 00 00 00 00 00 00 | B - Virg | 9inia Source 40886 0 40886 37.49 | 00 00 00 00 00 00 00 00 00 |
| No Intellection Nonit 1. 2. 3. 4. 5. 6. 7. 8. 9. 10. 11. 12. 13. 14. 15. I (W Your Si | tic Accounts Only prnational Deposits O 4 4 0 0 resident Allocation Percentage Wages, salaries, tips, etc | ons. S corporations, etc | 7 7 | 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 [| 2 0 | 8 6 A - AII S 1 to obtain of my (our | 0 5 ources 08818 379 0 0 0 0 0 my Form | 00 00 00 00 00 00 00 00 00 00 00 00 00 | B - Virg | 9inia Source 40886 0 40886 37.49 | 00 00 00 00 00 00 00 00 00 |

(678) 965-9522

SYAM PRIYA RAM SAGAR GUPTA TALLAM GLOBAL TAXES LLC

2023 Schedule INC/CG

881115345

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

SAIKRISHNA R

KASTHURI



| Your/ Spouse SSN | Withholding Type | VA Withholding | Employer FEIN | VA Account Number | VA Wages, tips, other comp. |
|---------------------|---------------------|-------------------|------------------|----------------------|-----------------------------|
| Γ | | | | | ⊣ |
| 881115345 | W | 2109. | 204938068 | 30204938068F001 | 40886. |

Total VA Withholding SSN VA Withholding 881115345 2109.

Spouse

You

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

01

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!

| | r Name KRISHNA REDDY KASTHURI | B Your Social Sec 881-11-53 | , | | | | | |
|--|--|--------------------------------|-------------|--|--|--|--|--|
| | use's Name | A Spouse's Socia | | | | | | |
| D | 41. Too Determ Information | A Crosses | D. Vourself | | | | | |
| Part | | A Spouse | B Yourself | | | | | |
| 1. | Federal Adjusted Gross Income (Form 760CG, Line 1; 760PY, Line 1, columns A & B; Form 763, Line 1) | | 109197. | | | | | |
| 2. | Virginia Adjusted Gross Income (Form 760CG, Line 9; 760PY, Line 10, columns A & B; Form 763, Line 9) | | 109197. | | | | | |
| 3. | Taxable Income (Form 760CG, Line 15; 760PY, Line 16, columns A & B; Form 763, Line 17) | | 37500. | | | | | |
| 4. | Virginia Income Tax (Form 760CG, Line 18; 760PY, Line 17, columns A & B; Form 763 Line 18) | | 1899. | | | | | |
| | 5. Withholding (Form 760CG, Line 19a & 19b; 760PY, Lines 19a & 19b; Form 763, Lines 19a & 19b) | | | | | | | |
| 6. | Amount you Owe (Form 760CG, Line 35; Form 760PY, Line 35; Form 763, Line 35) | | | | | | | |
| 7. Pari | Refund (Form 760CG, Line 36; 760PY, Line 36; Form 763, Line 36) Il Declaration of Taxpayer and Signature Authorization | | 210. | | | | | |
| Retu numb filing liable Virgin refun of the signa | Do not enter all zeros GLOBAL TAXES LLC ERO Firm Name | | | | | | | |
| | Signature Date | | | | | | | |
| Spor | use'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 2023 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 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. | | | | | | | |
| | use's Signature Date | | | | | | | |
| Par | t III Certification and Authentication – Practitioner PIN Method Only | | | | | | | |
| ERO | P'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 | Date 01- | -30-24 | | | | | | |