

IRS e-file Signature Authorization

▶ ERO must obtain and retain completed Form 8879.
▶ Go to www.irs.gov/Form8879 for the latest information.

Submission Identification Number (SID) ▶

| | |
|------------------------------------|---------------------------------------|
| Taxpayer's name VINAYA M CHINTI | Social security number 355-97-3883 |
| Spouse's name | Spouse's social security number |

Part I Tax Return Information – Tax Year Ending December 31, 2023 (Enter year you are 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 | 76,656. |
| 2 | Total tax | 9,129. |
| 3 | Federal income tax withheld from Form(s) W-2 and Form(s) 1099 | 9,095. |
| 4 | Amount you want refunded to you | |
| 5 | Amount you owe | 34. |

Part II Taxpayer Declaration and Signature Authorization (Be sure you get and keep a copy of your return)

Under penalties of perjury, I declare that I have examined a copy of the income tax return (original or amended) I am now authorizing, and to the best of my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above are the amounts from the income tax return (original or amended) I am now authorizing. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution to debit the entry to this account. This authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate the authorization. To revoke (cancel) a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation requests must be received no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I further acknowledge that the personal identification number (PIN) below is my signature for the income tax return (original or amended) I am now authorizing and, if applicable, my Electronic Funds Withdrawal Consent.

Taxpayer's PIN: check one box only

- I authorize GLOBAL TAXES LLC to enter or generate my PIN

| | | | | |
|---|---|---|---|---|
| 7 | 3 | 8 | 8 | 3 |
|---|---|---|---|---|

 as my signature on the income tax return (original or amended) I am now authorizing. Enter five digits, but don't enter all zeros
- I will enter my PIN as my signature on the income tax return (original or amended) I am now authorizing. Check this box **only** if you are entering your own PIN **and** your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Your signature ▶ _____ Date ▶ _____

Spouse's PIN: check one box only

- I authorize _____ to enter or generate my PIN

| | | | | |
|--|--|--|--|--|
| | | | | |
|--|--|--|--|--|

 as my signature on the income tax return (original or amended) I am now authorizing. Enter five digits, but don't enter all zeros
- I will enter my PIN as my signature on the income tax return (original or amended) I am now authorizing. Check this box **only** if you are entering your own PIN **and** your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Spouse's signature ▶ _____ Date ▶ _____

Practitioner PIN Method Returns Only—continue below

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 | 6 | 1 | 9 | 8 | 9 |
|---|---|---|---|---|---|---|---|---|---|---|

 Don't enter all zeros

I certify that the above numeric entry is my PIN, which is my signature for the electronic individual income tax return (original or amended) I am now authorized to file for tax year indicated above 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 **Pub. 1345**, Handbook for Authorized IRS e-file Providers of Individual Income Tax Returns.

ERO's signature ▶ _____ Date ▶ _____

ERO Must Retain This Form – See Instructions
Don't Submit This Form to the IRS Unless Requested To Do So

| IF you live in... | THEN use this address to send in your payment... |
|--|--|
| Alabama, Florida, Georgia, Louisiana, Mississippi, North Carolina, South Carolina, Tennessee, Texas | Internal Revenue Service P.O. Box 1214 Charlotte, NC 28201-1214 |
| Arkansas, Connecticut, Delaware, District of Columbia, Illinois, Indiana, Iowa, Kentucky, Maine, Maryland, Massachusetts, Minnesota, Missouri, New Hampshire, New Jersey, New York, Oklahoma, Rhode Island, Vermont, Virginia, West Virginia, Wisconsin | Internal Revenue Service P.O. Box 931000 Louisville, KY 40293-1000 |
| Alaska, Arizona, California, Colorado, Hawaii, Idaho, Kansas, Michigan, Montana, Nebraska, Nevada, New Mexico, North Dakota, Ohio, Oregon, Pennsylvania, South Dakota, Utah, Washington, Wyoming | Internal Revenue Service P.O. Box 802501 Cincinnati, OH 45280-2501 |
| A foreign country, American Samoa, or Puerto Rico (or are excluding income under Internal Revenue Code section 933), or use an APO or FPO address, or file Form 2555 or 4563, or are a dual-status alien or nonpermanent resident of Guam or the U.S. Virgin Islands | Internal Revenue Service P.O. Box 1303 Charlotte, NC 28201-1303 |

MAIL FORM 1040-V TO THE INTERNAL REVENUE SERVICE CENTER AT THE ADDRESS LISTED BELOW.

▼ Detach Here and Mail With Your Payment and Return ▼

Department of the Treasury
Internal Revenue Service

2023

Form 1040-V Payment Voucher

- ▶ Use this voucher when making a payment with Form 1040.
- ▶ Do not staple this voucher or your payment to Form 1040.
- ▶ Make your check or money order payable to the 'United States Treasury.'
- ▶ Write your social security number (SSN) on your check or money order.

| | |
|--|------------|
| Enter the amount of your payment ▶ | 34. |
|--|------------|

REV 03/07/24 PRO 1555

VINAYA M CHINTI
 8370 GREENSBORO DRIVE 1005
 MC LEAN VA 22102

INTERNAL REVENUE SERVICE
 P.O. BOX 931000
 LOUISVILLE, KY 40293-1000

355973883 JD CHIN 30 0 202312 610

For the year Jan. 1–Dec. 31, 2023, or other tax year beginning , 2023, ending , 20 See separate instructions.

Your first name and middle initial VINAYA M Last name CHINTI Your social security number 355 97 3883

If joint return, spouse's first name and middle initial Last name Spouse's social security number

Home address (number and street). If you have a P.O. box, see instructions. 8370 GREENSBORO DRIVE Apt. no. 1005 Presidential Election Campaign

City, town, or post office. If you have a foreign address, also complete spaces below. Mc Lean State VA ZIP code 22102 Check here if you, or your spouse if filing jointly, want \$3 to go to this fund. Checking a box below will not change your tax or refund.

Foreign country name Foreign province/state/county Foreign postal code You Spouse

Filing Status [X] Single [] Head of household (HOH) [] Married filing jointly (even if only one had income) [] Married filing separately (MFS) [] Qualifying surviving spouse (QSS)
Check only one box.
If you checked the MFS box, enter the name of your spouse. If you checked the HOH or QSS box, enter the child's name if the qualifying person is a child but not your dependent:

Digital Assets At any time during 2023, did you: (a) receive (as a reward, award, or payment for property or services); or (b) sell, exchange, or otherwise dispose of a digital asset (or a financial interest in a digital asset)? (See instructions.) [] Yes [X] No

Standard Deduction Someone can claim: [] You as a dependent [] Your spouse as a dependent [] Spouse itemizes on a separate return or you were a dual-status alien

Age/Blindness You: [] Were born before January 2, 1959 [] Are blind Spouse: [] Was born before January 2, 1959 [] Is blind

Table with 5 columns: (1) First name, Last name, (2) Social security number, (3) Relationship to you, (4) Check the box if qualifies for (see instructions): Child tax credit, Credit for other dependents. Includes rows for dependents and checkboxes for more than four dependents.

Income section table with columns 1a-1z and 1a-1z. Rows include: Total amount from Form(s) W-2, box 1 (76,656); Household employee wages; Tip income; Medicaid waiver payments; Taxable dependent care benefits; Employer-provided adoption benefits; Wages from Form 8919, line 6; Other earned income (0); Nontaxable combat pay election (1i); Add lines 1a through 1h (76,656).

Table with columns 2a-2b, 3a-3b, 4a-4b, 5a-5b, 6a-6b. Rows include: Tax-exempt interest; Qualified dividends; IRA distributions; Pensions and annuities; Social security benefits; Taxable interest; Ordinary dividends; Taxable amount.

Table with columns 7-15. Rows include: Capital gain or (loss); Additional income from Schedule 1, line 10; Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income (76,656); Adjustments to income from Schedule 1, line 26; Subtract line 10 from line 9. This is your adjusted gross income (76,656); Standard deduction or itemized deductions (from Schedule A) (13,850); Qualified business income deduction from Form 8995 or Form 8995-A; Add lines 12 and 13 (13,850); Subtract line 14 from line 11. If zero or less, enter -0-. This is your taxable income (62,806).

Attach Sch. B if required.
Standard Deduction for—
• Single or Married filing separately, \$13,850
• Married filing jointly or Qualifying surviving spouse, \$27,700
• Head of household, \$20,800
• If you checked any box under Standard Deduction, see instructions.



VINAYA M CHINTI
8370 GREENSBORO DRIVE APT 1005
MC LEAN VA 22102

SSN - You CHIN 355973883 Vendor ID 1555 XXXXX

SSN - Spouse

| | | | | | |
|------------------------------------|------|--------|-------------------------------------|-------------|-------|
| Fed Adj Gross Income (FAGI) | 1. | 76656. | Withholding (VA) - You | 19A. | 3682. |
| Additions | 2. | | Withholding (VA) - Spouse | 19B. | |
| Subtotal | 3. | 76656. | 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. | 3682. |
| Total VA Adj Gross Income (VAGI) | 9. | 76656. | Tax You Owe | 27. | |
| Itemized Deductions - VA Sch A | 10. | | Tax Overpayment | 28. | 45. |
| Standard Deduction | 11. | 8000. | Overpayment Credited to Next Year | 29. | |
| Exemptions | 12. | 930. | VAC - Virginia 529 / ABLE | 30. | |
| Deductions | 13. | | VAC - Other Contributions | 31. | |
| Subtotal (Deductions & Exemptions) | 14. | 8930. | Addition to Tax, Penalty & Interest | 32. | |
| VA Taxable Income | 15. | 67726. | Sales and Use Tax | 33. | |
| Amount of Tax | 16. | 3637. | Amount You Owe | | |
| Spouse Tax Adjustment (STA) | 17. | | Will Pay by Credit/Debit Card | N | |
| VAGI - Spouse | 17A. | | Your Refund | | 45. |
| Net Amount of Tax | 18. | 3637. | Bank Routing # | C 051400549 | |
| | | | Bank Account # | 8316040156 | |





Filing Status, Age & License Information

Additional Filing Information

Filing Status 1
 Federal Head of Household
 DOB - You 03301995
 VA Driver's License ID - You E66004869
 VA Driver's License - Iss. Date - You 04082023
 Spouse Name (Filing Status 3 Only)
 DOB - Spouse
 VA Driver's License ID - Spouse
 VA Driver's License - Iss. Date - Spouse

Locality 600
 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 65 & Over - Spouse
 Dependents Blind - You
 Total (A) 1 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
 Signature - Spouse _____ Date
 Signature - Preparer VENKATA SAI PAVAN KUMAR DUDIPALLI Date

Phone - You
 Phone - Spouse
 Phone - Preparer 6789659522

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

Preparer Information 7 P02470833
 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

355973883

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



VINAYA

M CHINTI

| Your/ Spouse SSN | Withholding Type | VA Withholding | Employer FEIN | VA Account Number | VA Wages, tips, other comp. |
|---------------------|---------------------|-------------------|------------------|----------------------|--------------------------------|
| 355973883 | W | 3682. | 522168499 | 30522168499F001 | 76656. |

| Total VA Withholding | SSN | VA Withholding |
|--------------------------------|-----------|----------------|
| You | 355973883 | 3682. |
| Spouse | | |
| Total # of W-2s, 1099s & VK-1s | 01 | |

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

