Form **8879**

(Rev. January 2021)

Department of the Treasury Internal Revenue Service

IRS e-file Signature Authorization

▶ ERO must obtain and retain completed Form 8879.

► Go to www.irs.gov/Form8879 for the latest information.

OMB No. 1545-0074

Subm	nission Identification Number (SID)								
Taxpayer's name					Social security number				
MAD	HUKAR DONGALA		760-22-8899						
Spouse	o's name		Spouse's s	ocial secu	rity numbe	er			
Part	Tax Return Information — Tax Year Ending December 31, 202	22 (Enter	year you	are aut	horizing	J.)			
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			1		9,466.			
2	Total tax			2	12	2,453.			
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099			3	23	3,788.			
4	Amount you want refunded to you			4	11	1,335.			
5	Amount you owe			5					
Part	Taxpayer Declaration and Signature Authorization (Be sure you	get and k	ceep a co	py of y	our retu	urn)			
to send for any Agent payme author payme busine taxes person	(original or amended) I am now authorizing. I consent to allow my intermediate service provided my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or really delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorized to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution are not of my federal taxes owed on this return and/or a payment of estimated tax, and the financial rization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to the total the U.S. Treasury Financial Agent at 1-888-353-4537. Payment canceless days prior to the payment (settlement) date. I also authorize the financial institutions invo to receive confidential information necessary to answer inquiries and resolve issues related that it is a support of the income tax return (original or among the tax and the treatment of the income tax return (original or among tax meturn).	son for rejective the U. ccount indiction institution terminate ellation required to the ped to the ped to the ped to the U.	ection of the S. Treasury cated in the on to debit the the author uests must processing ayment. I fu	transmis and its do tax prep ne entry t ization. T be received of the ele-	sion, (b) to lesignated aration so this according to the following properties of the f	the reason of Financial oftware for count. This (cancel) a ter than 2 ter that the			
	onic Funds Withdrawal Consent. ayer's PIN: check one box only					1			
X		generate i	my PINI	2 8 8	9 9	as my			
	ERO firm name	generate	· E	Enter five o	digits, but	asiny			
	signature on the income tax return (original or amended) I am now authorizing. I will enter my PIN as my signature on the income tax return (original or amended if you are entering your own PIN and your return is filed using the Practitioner below.		od. The EF	RO must	complet				
Your	signature	Date ► _	02	/21/202	23				
Spous	se's PIN: check one box only					1			
. г	I authorize to enter or	generate i	mv PIN			as my			
_	ERO firm name	J	E		digits, but	,			
	signature on the income tax return (original or amended) I am now authorizing.			don't ente					
	I will enter my PIN as my signature on the income tax return (original or amendatify you are entering your own PIN and your return is filed using the Practitioner below.								
Spous	se's signature ▶	Date ►							
	Practitioner PIN Method Returns Only—continu								
Part	Certification and Authentication — Practitioner PIN Method Only	<i>'</i>							
ERO's	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 e	nter all ze	ros				
author	by that the above numeric entry is my PIN, which is my signature for the electronic individual rized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that ements of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS <i>e-file</i> Programmer of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS <i>e-file</i> Programmer of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS <i>e-file</i> Programmer of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS <i>e-file</i> Programmer of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS <i>e-file</i> Programmer of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS <i>e-file</i> Programmer of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS <i>e-file</i> Programmer of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS <i>e-file</i> Programmer of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS <i>e-file</i> Programmer of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS <i>e-file</i> Programmer of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS <i>e-file</i> Programmer of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS <i>e-file</i> Programmer of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS <i>e-file</i> Programmer of the Pink Pink Pink Pink Pink Pink Pink Pink	I am subm	itting this re	eturn in a	ccordanc				
ERO's	s signature ▶	Date ►							
	ERO Must Retain This Form — See Instruc								
	Don't Submit This Form to the IRS Unless Reques		Oo So						

E1040 Department of the Treasury—Internal Revenue Service U.S. Individual Income Tax Return

2022

OMB No. 1545-007

IRS Use Only-Do not write or staple in this space.

Filing Status Check only one box.	If yo	u checked the MFS box, enter the n	ame of y	ed filing separately (N our spouse. If you ch					spou	ifying sun Ise (QSS) name if th	Ü	ng
		on is a child but not your dependent	t:									
Your first name and middle initial La				me					Your social security number			
MADHUKAF	λ		DONG	ALA					760-22-8899			
If joint return, s	pouse's	s first name and middle initial	Last nar	me					Spouse's social security number			er
Home address	(numbe	er and street). If you have a P.O. box, see	instructio	ons.			Apt. no.		Presider	ntial Election	on Campai	gn
_2728 VII	LLAGI	E GREEN DR					A3			theck here if you, or your pouse if filing jointly, want \$3 to go to this fund. Checking a		
City, town, or p	ost offi	ce. If you have a foreign address, also co	omplete spaces below. State ZI			ZIP code						
AURORA			IL 6			60504			ow will not		а	
Foreign country	/ name		F	oreign province/state/o	county	y	Foreign postal of	oreign postal code your tax or		or refund.	r refund.	
										You	Spou	ıse
Digital Assets		ny time during 2022, did you: (a) rec ange, gift, or otherwise dispose of a			-		-			Yes	⊠ No	
Standard		eone can claim: You as a de		<u>_</u>			, (,			_
Deduction		Spouse itemizes on a separate retur		•								
Age/Blindness	You:	☐ Were born before January 2, 1	958	Are blind Spo	use:	☐ Was bor	n before Janu	ary 2	, 1958	☐ Is bl	ind	
Dependents	s (see	instructions):		(2) Social security		(3) Relationsh	ip (4) Check	he bo	x if qualif	ies for (see	instructions	s):
If more	(1) F	rst name Last name		number		to you	Child	ax cr	edit	Credit for other dependents		nts
than four												
dependents, see instructions										[
and check										[
here												
Income	1a	Total amount from Form(s) W-2, b	ox 1 (see	e instructions)					1a		98,480	
moonic	b	Household employee wages not re	eported	on Form(s) W-2					1b			
Attach Form(s) W-2 here. Also	С	Tip income not reported on line 1a	a (see ins	structions)					1c			
attach Forms	d	Medicaid waiver payments not reported on Form(s) W-2 (see instructions)						1d				
W-2G and	е	Taxable dependent care benefits from Form 2441, line 26						1e				
1099-R if tax was withheld.	f	Employer-provided adoption benefits from Form 8839, line 29						1f				
If you did not	g	Wages from Form 8919, line 6 .							1g			
get a Form	h	Other earned income (see instruct	ions) .						1h		0	•
W-2, see instructions.	i	Nontaxable combat pay election (see instr	uctions)		<u>1</u> i						
	Z	Add lines 1a through 1h	. , .						1z		98,480	
Attach Sch. B	2 a	Tax-exempt interest	2a		b Ta	axable interest	:		2b			
if required.	3a	Qualified dividends	3a		b Or	rdinary divider	nds		3b			
	4a	IRA distributions	4a		b Ta	axable amoun	t		4b			
Standard	5a	Pensions and annuities	5a		b Ta	axable amoun	t		5b			
Deduction for— Single or	6a	Social security benefits	6a		b Ta	axable amoun	t		6b			
Married filing	С	If you elect to use the lump-sum e	election n	nethod, check here ((see i	nstructions)						
separately, \$12,950	7	Capital gain or (loss). Attach Sche	dule D if	required. If not requ	ired,	check here		. L	7			
Married filing jointly or	8	Other income from Schedule 1, lin							8		-9 , 014	
Qualifying	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income							9	3	39 , 466	•
surviving spouse, \$25,900	10	Adjustments to income from Schedule 1, line 26							10			
Head of	11	Subtract line 10 from line 9. This is your adjusted gross income							11		39,466	
household, \$19,400	12	Standard deduction or itemized deductions (from Schedule A)							12	:	12 , 950	•
If you checked any box under	13	Qualified business income deduct							13	1		
Standard	14	Add lines 12 and 13							14		12 , 950	_
Deduction, see instructions.	15	Subtract line 14 from line 11. If zer	ro or less	s, enter -0 This is y	our t a	axable incom	e		15		76 , 516	

Form 1040 (2022	2)								Page 2
Tax and	16	Tax (see instructions). Check	if any from Form	n(s): 1 881	4 2 🗌 4972	3 🗌		16	12,453.
Credits	17	Amount from Schedule 2, lir						17	
0.000	18	Add lines 16 and 17					[18	12,453.
	19	Child tax credit or credit for	other dependen	ts from Sched	ule 8812		[19	·
	20	Amount from Schedule 3, lir	ne 8				[20	
	21	Add lines 19 and 20					[21	
	22	Subtract line 21 from line 18	I. If zero or less,	enter -0			[22	12,453.
	23	Other taxes, including self-e	mployment tax,	from Schedule	e 2, line 21		[23	0.
	24	Add lines 22 and 23. This is	your total tax				[24	12,453.
Payments	25	Federal income tax withheld							<u> </u>
,	а	Form(s) W-2				25a 23	,788.		
	b	Form(s) 1099				25b			
	С	Other forms (see instruction	s)			25c			
	d	Add lines 25a through 25c					2	25d	23 , 788.
If you have a	26	2022 estimated tax paymen	ts and amount a	pplied from 20)21 return		[26	
qualifying child,	27	Earned income credit (EIC)			No .	27			
attach Sch. EIC.	28	Additional child tax credit from	m Schedule 8812	2		28			
	29	American opportunity credit	from Form 8863	3, line 8		29			
	30	Reserved for future use .				30			
	31	Amount from Schedule 3, lir	ne 15			31			
	32	Add lines 27, 28, 29, and 31	. These are your	total other pa	ayments and refu	ındable credits		32	
	33	Add lines 25d, 26, and 32. T	hese are your to	otal payments				33	23,788.
Refund	34	If line 33 is more than line 24	4, subtract line 2	4 from line 33.	This is the amoun	nt you overpaid		34	11,335.
riciana	35a	Amount of line 34 you want			is attached, chec	ck here	. 🗆 🗒	35a	11,335.
Direct deposit?	b	Routing number 1 2 1				Checking S	Savings		
See instructions.	d	Account number 3 2 5	0 6 0 3	7 7 6 () 7				
-	36	Amount of line 34 you want	applied to your	2023 estimate	ed tax	36			
Amount You Owe	37	Subtract line 33 from line 24 For details on how to pay, g						37	
	38	Estimated tax penalty (see in	nstructions) .			38			
Third Party Designee		you want to allow another structions	•		rn with the IRS?		mplete bel	ow.	× No
•		signee's		Phone			nal identifica	ation _[
		me		no.			er (PIN)		
Sign Here		der penalties of perjury, I declare to lief, they are true, correct, and com-							
11010	Yo	ur signature		Date	Your occupation				nt you an Identity N, enter it here
Joint return?						(see ins		I, enter it fiele	
See instructions.	Sp	Spouse's signature. If a joint return, both must sign. D		Date Spouse's occupation			If the IF	L ≀S sen	nt your spouse an
Keep a copy for your records.							Identity (see ins		ection PIN, enter it here
	Ph	one no. (302) 509-581	9	Email address	HANUMADHUK	AR@GMAIL.CO	М		
Paid	Pre	eparer's name	Preparer's signat	ture		Date	PTIN		Check if:
	SYAN	M PRIYA RAM SAGAR GUPTA TALLAM	SYAM PRIYA	RAM SAGAR	GUPTA TALLAM	02/18/2023	P020827	03	Self-employed
Preparer Use Only	Fin	m's name GLOBAL TA	XES LLC				Phone	no. (678) 965-9522
————	Fin	m's address 245 ROONE	Y CT E BRU	NSWICK N	J 08816		Firm's I	ΞIN	84-3171965
Go to www.irs.g	ov/Form	n1040 for instructions and the late	est information.		BAA	REV 02/10/23 PRO			Form 1040 (2022)

SCHEDULE 1 (Form 1040)

Additional Income and Adjustments to Income

OMB No. 1545-0074

2022

Attachment
Seguence No. 01

Department of the Treasury Internal Revenue Service

MADHUKAR DONGALA

Name(s) shown on Form 1040, 1040-SR, or 1040-NR

Attach to Form 1040, 1040-SR, or 1040-NR.

Go to www.irs.gov/Form1040 for instructions and the latest information.

	Sequence No. 01
Your soc	ial security number
760-22	_8899

Par	t I Additional Income			
1	Taxable refunds, credits, or offsets of state and local income taxes		1	
2a	Alimony received		2a	
b	Date of original divorce or separation agreement (see instructions):			
3	Business income or (loss). Attach Schedule C		3	
4	Other gains or (losses). Attach Form 4797		4	
5	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Atta		5	-9,014.
6	Farm income or (loss). Attach Schedule F		6	
7	Unemployment compensation		7	
8	Other income:			
а	Net operating loss	8a ()		
b	0	8b		
С		8c		
d		8d ()		
е	Income from Form 8853	8e		
f	Income from Form 8889	8f		
g		8g		
h		8h		
i	Prizes and awards	8i		
j	Activity not engaged in for profit income	8j		
	Stock options	8k		
I	Income from the rental of personal property if you engaged in the rental			
	for profit but were not in the business of renting such property	81		
m	Olympic and Paralympic medals and USOC prize money (see			
	,	8m		
	·	8n		
0	·	80		
р	•	8p		
q	·	8q		
r	Scholarship and fellowship grants not reported on Form W-2	8r		
S	Nontaxable amount of Medicaid waiver payments included on Form 1040, line 1a or 1d	0- (
	, , , , , , , , , , , , , , , , , , ,	8s ()		
t	Pension or annuity from a nonqualifed deferred compensation plan or a nongovernmental section 457 plan	8t		
		8u		
u z	Other income. List type and amount:	Ou		
_		8z		
9	Total other income. Add lines 8a through 8z		9	
10	Combine lines 1 through 7 and 9. Enter here and on Form 1040. 1040-SR.			-9,014.

Schedule 1 (Form 1040) 2022 Page **2**

Par	t II Adjustments to Income			
11	Educator expenses		11	
12	Certain business expenses of reservists, performing artists, and fee-basis gov			
	officials. Attach Form 2106		12	
13	Health savings account deduction. Attach Form 8889		13	
14	Moving expenses for members of the Armed Forces. Attach Form 3903		14	
15	Deductible part of self-employment tax. Attach Schedule SE		15	
16	Self-employed SEP, SIMPLE, and qualified plans		16	
17	Self-employed health insurance deduction		17	
18	Penalty on early withdrawal of savings		18	
19a	Alimony paid		19a	
b	Recipient's SSN			
С	Date of original divorce or separation agreement (see instructions):			
20	IRA deduction		20	
21	Student loan interest deduction		21	
22	Reserved for future use		22	
23	Archer MSA deduction		23	
24	Other adjustments:			
а	Jury duty pay (see instructions)			
b	Deductible expenses related to income reported on line 8l from the			
	rental of personal property engaged in for profit			
С	Nontaxable amount of the value of Olympic and Paralympic medals			
	and USOC prize money reported on line 8m		-	
d	Reforestation amortization and expenses		-	
е	Repayment of supplemental unemployment benefits under the Trade			
	Act of 1974		-	
f	Contributions to section 501(c)(18)(D) pension plans		-	
g	Contributions by certain chaplains to section 403(b) plans		-	
h	Attorney fees and court costs for actions involving certain unlawful			
	discrimination claims (see instructions)		-	
- 1	Attorney fees and court costs you paid in connection with an award			
	from the IRS for information you provided that helped the IRS detect tax law violations			
			-	
J			-	
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form 1041)			
-	Other adjustments. List type and amount:		-	
Z	04-			
25	Total other adjustments. Add lines 24a through 24z		25	
25 26	Add lines 11 through 23 and 25. These are your adjustments to income . Enter here		23	
20	Form 1040 or 1040-SR, line 10, or Form 1040-NR, line 10a		26	
		· · ·		

SCHEDULE E (Form 1040)

Supplemental Income and Loss

(From rental real estate, royalties, partnerships, S corporations, estates, trusts, REMICs, etc.)

Department of the Treasury Internal Revenue Service

Attach to Form 1040, 1040-SR, 1040-NR, or 1041, Go to www.irs.gov/ScheduleE for instructions and the latest information. Attachment Sequence No. 13

OMB No. 1545-0074

Name(s) shown on return Your social security number MADHUKAR DONGALA 760-22-8899 Part I **Income or Loss From Rental Real Estate and Royalties** Note: If you are in the business of renting personal property, use Schedule C. See instructions. If you are an individual, report farm rental income or loss from Form 4835 on page 2, line 40. Did you make any payments in 2022 that would require you to file Form(s) 1099? See instructions . 1a Physical address of each property (street, city, state, ZIP code) H.NO: 2-4-1134/8, RAM NAGAR HANMAKONDA WARANGAL IN 506001 Α В C 1b Type of Property For each rental real estate property listed **Fair Rental Personal Use** QJV (from list below) above, report the number of fair rental and **Davs Davs** personal use days. Check the QJV box only Α Α 365 0 if you meet the requirements to file as a В В qualified joint venture. See instructions. С C Type of Property: 3 Vacation/Short-Term Rental 1 Single Family Residence 5 Land 7 Self-Rental 8 Other (describe) 2 Multi-Family Residence 4 Commercial 6 Royalties **Properties:** Α В C Income: 3 590. 4 Royalties received 4 **Expenses:** 5 5 Advertising 6 Auto and travel (see instructions) 6 7 Cleaning and maintenance. 7 955. 8 Commissions 8 9 9 Insurance . . 10 10 Legal and other professional fees 1,129. 11 Management fees 11 12 Mortgage interest paid to banks, etc. (see instructions) 12 13 13 3,155. 14 14 Repairs 2,743. 15 Supplies 15 16 16 Taxes 17 Utilities 17 1,622. 18 18 Depreciation expense or depletion Other (list) 19 19 20 20 Total expenses. Add lines 5 through 19 9,604. 21 Subtract line 20 from line 3 (rents) and/or 4 (royalties). If result is a (loss), see instructions to find out if you must file Form 6198 21 -9,014. 22 Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions) 9,014.) 590. Total of all amounts reported on line 3 for all rental properties Total of all amounts reported on line 4 for all royalty properties 23b Total of all amounts reported on line 12 for all properties 23c 23d Total of all amounts reported on line 18 for all properties

23e

9,604.

24

25

9,014.

-9,014.

24

25

26

Total of all amounts reported on line 20 for all properties

Income. Add positive amounts shown on line 21. **Do not** include any losses

Losses. Add royalty losses from line 21 and rental real estate losses from line 22. Enter total losses here

Total rental real estate and royalty income or (loss). Combine lines 24 and 25. Enter the result

here. If Parts II, III, IV, and line 40 on page 2 do not apply to you, also enter this amount on Schedule 1 (Form 1040), line 5. Otherwise, include this amount in the total on line 41 on page 2 .