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)				
Taxpay	yer's name	Social securit	y number		
FNU SHIVAMANGALA 672-57-9458					
Spouse's name Spouse's social security number					
Par	Tax Return Information — Tax Year Ending December 31, 2022 (Ent	er year you a	e authoriz	ring.)	
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	70,559.	
2	Total tax		2	8,295.	
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3	12,020.	
4	Amount you want refunded to you		4	3,725.	
5	Amount you owe		5		
Part	Taxpayer Declaration and Signature Authorization (Be sure you get and	keep a cop	y of your r	return)	
return to sen for an Agent payme author payme busine taxes persor	nowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I ab (original or amended) I am now authorizing. I consent to allow my intermediate service provider, trans and my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for my delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account in ent of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institutization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminatent, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation recess days prior to the payment (settlement) date. I also authorize the financial institutions involved in the to receive confidential information necessary to answer inquiries and resolve issues related to the neal identification number (PIN) below is my signature for the income tax return (original or amended) I onic Funds Withdrawal Consent.	mitter, or electro- ejection of the tr U.S. Treasury andicated in the ta- tion to debit the ate the authoriza- equests must be processing of payment. I furt	nic return or ansmission, and its designate ex preparation entry to this tion. To revolution. To received no the electron her acknowless	iginator (ERO) (b) the reason ated Financial n software for account. This boke (cancel) a bolater than 2 ic payment of edge that the	
	ayer's PIN: check one box only				
	▼ I authorize GLOBAL TAXES LLC to enter or generate	e my PIN	9 4 5	8 as my	
	ERO firm name signature on the income tax return (original or amended) I am now authorizing.	ř Ent	er five digits, n't enter all ze	but	
	I will enter my PIN as my signature on the income tax return (original or amended) I am if you are entering your own PIN and your return is filed using the Practitioner PIN me below.				
Your	signature ▶ Date ▶				
Snou	se's PIN: check one box only				
Spou		o my DIN		90 my	
L	I authorize to enter or generate to enter or generate	_	er five digits.	as my	
	signature on the income tax return (original or amended) I am now authorizing.		i't enter all ze		
	I will enter my PIN as my signature on the income tax return (original or amended) I am if you are entering your own PIN and your return is filed using the Practitioner PIN me below.				
Spou	se's signature ▶ Date ▶				
	Practitioner PIN Method Returns Only—continue belo	w			
Part	Certification and Authentication — Practitioner PIN Method Only				
ERO'	s EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN.		6 6 1 9	8 9	
author	fy that the above numeric entry is my PIN, which is my signature for the electronic individual income rized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am subtements of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS <i>e-file</i> Providers of	mitting this retu	rn in accord	ance with the	
EDO,	s signature ▶ Date ▶				
LNU	s signature ► Date ► ERO Must Retain This Form — See Instructions				
	ENO IVIUSI NEIAIII I IIIS FOITII — See IIISTIUCTIONS				

Don't Submit This Form to the IRS Unless Requested To Do So

E 1040 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	s 🔀 S	Single Married filing jointly	Marrie	ed filing separatel	y (MFS)	☐ Head of	household (HOH)		ifying su		j
Check only one box.	-	u checked the MFS box, enter the n	-	our spouse. If yo	u check	ed the HOH or	QSS box, enter tl		use (QSS name if	,	alifying
Your first name		on is a child but not your dependen	Last nar	me.				Vour so	cial secu	rity nur	mher
FNU	and m	udie ilitiai		AMANGALA				Your social security number 672-57-9458			libei
	nouse's	s first name and middle initial	Last nar					 	s social s		number
ii joint rotairi, o	pouse	s mot harre and middle mittal	Lastrial	110				Opouse	3 300101 0	Courty	Hamber
Home address	(numbe	er and street). If you have a P.O. box, see	instruction	ons.			Apt. no.	Preside	ntial Elec	tion Ca	ımpaign
7362 PAI	RKRII	OGE BLVD					364		nere if yo		
		ce. If you have a foreign address, also co	omplete sp	paces below.	Sta	te	ZIP code		if filing jo		
IRVING				TX 7			75063		this fund ow will n		_
Foreign countr	y name		F	oreign province/sta	ate/coun	ty	Foreign postal code		ax or refund.		3-
									You	i 🔲	Spouse
Digital		ny time during 2022, did you: (a) rec	•				, ,	. ,		s X	
Assets		ange, gift, or otherwise dispose of		<u>_</u>			asset)? (See Instri	uctions.)	Yes	· 🔼	NO
Standard Deduction	_	eone can claim:	•	•		a dependent					
Age/Blindnes	s You:	☐ Were born before January 2, 1	958	Are blind	Spouse	: Was bor	n before January	2, 1958	☐ Is	blind	
Dependent	s (see	instructions):		(2) Social secu	urity	(3) Relationsh	ip (4) Check the b	ox if quali	fies for (se	e instru	uctions):
If more		(1) First name Last name		number		to you	Child tax of	redit	Credit for	other de	pendents
than four											
dependents, see instruction	s ——										
and check											
here]										
Income	1a	Total amount from Form(s) W-2, b	ox 1 (see	e instructions) .				. 1a		78,9	909.
	b	Household employee wages not r		, ,				. 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)									
W-2G and 1099-R if tax	е	Taxable dependent care benefits from Form 2441, line 26						. 1e			
was withheld.	f	Employer-provided adoption bene	efits from	Form 8839, line	29 .			. 1f			
If you did not	g	Wages from Form 8919, line 6.						. 1g			
get a Form W-2, see	h	Other earned income (see instruct	,					. 1h			0.
instructions.	i	Nontaxable combat pay election (see instr	uctions)		<u>1</u> i				70 /	000
	<u>z</u>	Add lines 1a through 1h	· · ·	· · · · · i				. 1z		/8,	909.
Attach Sch. B if required.	2a	Tax-exempt interest	2a			axable interes		. 2b			
ii required.	3a	Qualified dividends	3a			ordinary divide		. 3b			
	4a	IRA distributions	4a			axable amoun axable amoun					
Standard Deduction for—	5a	_	5a			axable amoun axable amoun		. 5b			
Single or	6a	Social security benefits If you elect to use the lump-sum e	6a	nothed shook he				. 6b			
Married filing separately,	C 7	,		*	`	,	[7			
\$12,950 Married filing	Capital gain or (loss). Attach Schedule Diffrequired. If not required, check here				. 8			350.			
jointly or	9	•						. 9			559.
Qualifying surviving spouse,	10	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income								10,	<u> </u>
\$25,900 • Head of	11	Subtract line 10 from line 9. This is						. 10		70 '	559.
household,	12	Standard deduction or itemized						. 12			950.
\$19,400 If you checked	13	Qualified business income deduct		•	,			. 13			,,,,
any box under Standard	14									12 - (950.
Deduction,	15	Subtract line 14 from line 11. If ze									609.
see instructions.				.,	. ,					- · ·	

Form 1040 (2022	2)								Page 2
Tax and	16	Tax (see instructions). Check	if any from Form	(s): 1 881	4 2 🗌 4972	3 🗌		16	8,295.
Credits	17	Amount from Schedule 2, lir	ie 3				[17	
	18	Add lines 16 and 17					[18	8,295.
	19	Child tax credit or credit for	other dependent	ts from Sched	ule 8812		[19	
	20	Amount from Schedule 3, lin	ie 8				[20	
	21	Add lines 19 and 20					[21	
	22	Subtract line 21 from line 18	. If zero or less,	enter -0			[22	8,295.
	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	8,295.
Payments	25	Federal income tax withheld							•
,	а	Form(s) W-2				25a 12	,020.		
	b	Form(s) 1099				25b			
	С	Other forms (see instructions				25c			
	d	Add lines 25a through 25c	,					25d	12,020.
	26	2022 estimated tax paymen						26	,
If you have a qualifying child,	27	Earned income credit (EIC)				27			
attach Sch. EIC.	28	Additional child tax credit from			_	28			
	29	American opportunity credit	from Form 8863	8. line 8		29			
	30	Reserved for future use .				30			
	31	Amount from Schedule 3, lin	ne 15			31			
	32	Add lines 27, 28, 29, and 31						32	
	33	Add lines 25d, 26, and 32. T					-	33	12,020.
Defined	34	If line 33 is more than line 24						34	3,725.
Refund	35a	Amount of line 34 you want				•	. 🗆 🗔	35a	3,725.
Direct deposit?	b	Routing number 1 1 1					Savings		
See instructions.	d	Account number 4 8 8 1 0 8 2 8 8 2 3 6							
	36	Amount of line 34 you want				36			
Amount	37	Subtract line 33 from line 24							
You Owe	٠.	For details on how to pay, g						37	
	38	Estimated tax penalty (see in	nstructions) .			38			
Third Party	Do	you want to allow another				See			
Designee	ins	structions				. Yes. Co	mplete be	ow.	X No
		signee's		Phone			nal identifica	ation	
		ne		no.			er (PIN)		
Sign		der penalties of perjury, I declare t ief, they are true, correct, and com			1 , 0		,		, ,
Here		ur signature	pioto: Boolaration	Date	Your occupation	ood on all illionnatio		•	nt you an Identity
	10	ur signature		Date	Tour occupation				N, enter it here
Joint return?	TEST				TEST SPECIAL	IST AUTOMATI	(see ins	st.)	
See instructions.	opodoo o olgitataro. Il a joint rotarri, botii ritaot olgiti.		ooth must sign.	Date Spouse's occupation				nt your spouse an	
Keep a copy for your records.						Identity (see ins		ection PIN, enter it here	
,		/// 00 007 000		Farall address		7.00.00.00.00.00.00.00.00.00.00.00.00.00		,,	
		one no. (469) 837-989 eparer's name	6 Preparer's signat	Email address	SHIVAMANGAL	ARB@GMAIL.CO Date	M PTIN		Check if:
Paid		•	'		מידדייי			, , ,	Self-employed
Preparer		I PRIYA RAM SAGAR GUPTA TALLAM		KAM SAGAR	GUPTA TALLAM	03/13/2023	P020827		
Use Only		m's name GLOBAL TA		NIOTAT OTC. 37	T 00016				678) 965-9522
			Y CT E BRU	NSWICK N			Firm's	ΕIN	84-3171965
Go to www.irs.go	ov/Forr	n1040 for instructions and the late	st information.		BAA	REV 03/02/23 PRO			Form 1040 (2022)

SCHEDULE 1 (Form 1040)

Additional Income and Adjustments to Income

OMB No. 1545-0074

2022

Attachment
Sequence No. 01

Department of the Treasury Internal Revenue Service Attach to Form 1040, 1040-SR, or 1040-NR.

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

FNU SHIVAMANGA	LA	672-57	-9458
Name(s) shown on Fo	rm 1040, 1040-SR, or 1040-NR	Your soci	ial security numbe
Internal Revenue Service			Sequence No. U I

Par	t 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	ch Schedule E .	5	-8,350.
6	Farm income or (loss). Attach Schedule F		6	
7	Unemployment compensation		7	
8	Other income:			
а	Net operating loss	8a ()	
b	Gambling	8b		
С	Cancellation of debt	8c		
d	Foreign earned income exclusion from Form 2555	8d ()	
е	Income from Form 8853	8e		
f	Income from Form 8889	8f		
g	Alaska Permanent Fund dividends	8g		
h	Jury duty pay	8h		
i	Prizes and awards	8i		
j	Activity not engaged in for profit income	8j		
k	Stock options	8k		
- 1	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			
	instructions)	8m		
n	Section 951(a) inclusion (see instructions)	8n		
0	Section 951A(a) inclusion (see instructions)	80		
р	Section 461(I) excess business loss adjustment	8p		
q	Taxable distributions from an ABLE account (see instructions)	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	8s ()	
t	Pension or annuity from a nonqualifed deferred compensation plan or	_		
	a nongovernmental section 457 plan	8t	-	
u	Wages earned while incarcerated	8u		
Z	Other income. List type and amount:			
_		8z		
9	Total other income. Add lines 8a through 8z		9	0.050
10	Combine lines 1 through 7 and 9. Enter here and on Form 1040, 1040-SR	or 1040-NR line 8	10	-8.350

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-base			
	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)	1		
b	Deductible expenses related to income reported on line 8I 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	i e		
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 24g	1		
h	Attorney fees and court costs for actions involving certain unlawful			
	discrimination claims (see instructions)	1		
i	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	Housing deduction from Form 2555			
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form			
	1041)			
Z	Other adjustments. List type and amount:			
05	Tatal athous diseases and Add lines Of a three will Of		05	
25	Total other adjustments. Add lines 24a through 24z		25	
26	Add lines 11 through 23 and 25. These are your adjustments to income . En		00	
	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.)

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

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service Name(s) shown on return

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

2022
Attachment Sequence No. 13

Your social security number

672-57-9458 FNU SHIVAMANGALA 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) BELAKUNI B, AURAD(B), BIDAR KARNATAKA IN 585326 Α B C 1b Type of Property **Fair Rental Personal Use** For each rental real estate property listed 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: 3 450. 4 Royalties received 4 **Expenses:** 5 5 Advertising 6 Auto and travel (see instructions) 6 900. 7 Cleaning and maintenance. 7 8 Commissions 8 9 9 Insurance . . 10 10 Legal and other professional fees 1,500. 11 Management fees 11 12 Mortgage interest paid to banks, etc. (see instructions) 12 13 13 1,800. 14 14 Repairs . . . 2,200. 15 Supplies 15 16 16 Taxes 17 17 2,400. 18 18 Depreciation expense or depletion Other (list) 19 19 20 20 Total expenses. Add lines 5 through 19 8,800. 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 -8,350.22 Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions) 8,350.) 450. 23a 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 8,800. Total of all amounts reported on line 20 for all properties 23e 24 **Income.** Add positive amounts shown on line 21. **Do not** include any losses 24 25 Losses. Add royalty losses from line 21 and rental real estate losses from line 22. Enter total losses here 25 8,350. Total rental real estate and royalty income or (loss). Combine lines 24 and 25. Enter the result 26 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 -8,350.

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