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

| | 1.07.01.00 | | | | |
|--|--|---|--|---|---|
| Submi | ssion Identification Number (SID) | | | | |
| Taxpaye | r's name | Social securi | ty numl | per | |
| SHIV | VACHARAN RAO CHITNENI | 172-94 | -862 | 4 | |
| Spouse's | s name | Spouse's soo | ial secu | urity number | • |
| Part | Tax Return Information — Tax Year Ending December 31, 2020 (Ente | r vear vou a | re au | thorizina | 1 |
| | whole dollars only on lines 1 through 5. | i yeai you a | ıı c au | u lonzing. | <u> </u> |
| | Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank. | | | | |
| 1 | Adjusted gross income | | 1 1 | J 5 | ,000. |
| 2 | Total tax | | 2 | | 0. |
| 3 | Federal income tax withheld from Form(s) W-2 and Form(s) 1099 | | 3 | | 448. |
| 4 | Amount you want refunded to you | | 4 | | 448. |
| 5 | Amount you owe | | 5 | | |
| Part | | кеер а сор | y of y | our retu | rn) |
| my knoreturn (to send for any Agent to paymer authorize paymer business taxes to persona | penalties of perjury, I declare that I have examined a copy of the income tax return (original or amended wledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I abording and a mended) I am now authorizing. I consent to allow my intermediate service provider, transmy return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejudelay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account induit of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate the I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation requisions active to the payment (settlement) date. I also authorize the financial institutions involved in the part of the payment (settlement) below is my signature for the income tax return (original or amended) I and identification number (PIN) below is my signature for the income tax return (original or amended) I and income tax return (original or amended) I and income tax return (original or amended) I and identification number (PIN) below is my signature for the income tax return (original or amended) I and income tax return (original or amended) I and income tax return (original or amended) I and it is the payment in the payment in the payment is the payment in the payment is the payme | we are the am nitter, or electrection of the tale. S. Treasury a icated in the tale to debit the e the authorizates must be processing of payment. I fur | ounts for the counts of the co | rom the inc turn original ssion, (b) the designated paration soft to this accor- fo revoke (ved no late ectronic paratically | come tax tor (ERO) he reason Financial tware for bunt. This cancel) a er than 2 syment of that the |
| | yer's PIN: check one box only | | | | |
| X | | my PIN | 8 (| 5 2 4 | as my |
| | ERO firm name signature on the income tax return (original or amended) I am now authorizing. | ř En | | digits, but er all zeros | ao my |
| | I will enter my PIN as my signature on the income tax return (original or amended) I am r if you are entering your own PIN and your return is filed using the Practitioner PIN metholow. | | | | |
| Your s | ignature ▶ Date ▶ | | | | |
| Snous | e's PIN: check one box only | | | | |
| Ороцо | I authorize to enter or generate | my PIN | | | as my |
| | ERO firm name | _ | ter five | digits, but | asiny |
| | signature on the income tax return (original or amended) I am now authorizing. | do | n't ente | er all zeros | |
| | I will enter my PIN as my signature on the income tax return (original or amended) I am r if you are entering your own PIN and your return is filed using the Practitioner PIN metholow. | | | | |
| Spous | e's signature ▶ Date ▶ | | | | |
| | Practitioner PIN Method Returns Only—continue below | 1 | | | |
| Part I | Certification and Authentication — Practitioner PIN Method Only | | | | |
| ERO's | EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN. 5 8 | 7 2 7 | 8 6 | 1 9 8 | 9 |
| | | Don't ent | er all ze | eros | |
| authoriz | that the above numeric entry is my PIN, which is my signature for the electronic individual income treed to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am subments of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS e-file Providers of I | nitting this reti | urn in a | accordance | |
| ERO's | signature ▶ Date ▶ | | | | |
| | ERO Must Retain This Form — See Instructions | | | | |
| | Don't Submit This Form to the IRS Unless Requested To | Do So | | | |

E 1040 Department of the Treasury—Internal Revenue Service (99) U.S. Individual Income Tax Return

| 2020 |
|------|
| |

OMB No. 1545-0074

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

| Check only | | Single Married filing jointly u checked the MFS box, enter the | _ | ed filing separately | | _ | | • | _ | | | . , . , | |
|--------------------------------|----------|--|--------------------|-------------------------------|------------|--------------|-----------|---------------------|-------------|---------------------------------|----------------|------------------------------|--|
| one box. | | son is a child but not your depende | | , | | | | | | | | | |
| Your first name | and m | iddle initial | Last na | me | | | | | You | ur so | cial securit | y number | |
| SHIVACH | ARAN | RAO | CHIT | 'NENI | | | | | 17 | 12- | 94-862 | 4 | |
| If joint return, s | pouse's | s first name and middle initial | Last na | Last name | | | | | | Spouse's social security number | | | |
| Home address | (numbe | er and street). If you have a P.O. box, se | ee instruction | ons. | | | | Apt. no. | Pre | eside | ntial Election | on Campaign | |
| 464 PRO | SPEC | T CREEK DRIVE | | | | | | D | | | nere if you, | | |
| City, town, or p | ost offi | ce. If you have a foreign address, also o | complete s | paces below. | Sta | te | ZIP | code | | | 0, | itly, want \$3 Checking a | |
| BALLWIN | | | | MO | | | 63 | | | | ow will not | | |
| Foreign country name | | | F | Foreign province/state/county | | | For | Foreign postal code | | - | | | |
| At any time du | ırina 20 | 020, did you receive, sell, send, exc | change, o | or otherwise acqui | re anv | financial in | terest ir | n anv virtual | curren | cv? | ☐ Yes | ⊠ No | |
| | | eone can claim: | | | | | | ., | | | | | |
| Standard Deduction | | Spouse itemizes on a separate retu | | | | | 7111 | | | | | | |
| Age/Blindness | s You: | ☐ Were born before January 2, | 1956 | Are blind S | pouse | : Was | born b | efore Januar | y 2, 19 | 956 | _ ls bli | ind | |
| Dependent | s (see | instructions): | | (2) Social secur | rity | (3) Relation | onship | (4) 🗸 i | if qualific | es fo | r (see instru | ctions): | |
| If more | (1) F | irst name Last name | | number | | to yo | ou | Child tax | x credit | | Credit for oth | her dependents | |
| than four | | | | | | | | |] | | [| | |
| dependents, see instruction | s —— | | | | | | | |] | | [| | |
| and check | | | | | | | | |] | | [| | |
| here | | | | | | | | | <u> </u> | | [| | |
| A 1 | _1_ | Wages, salaries, tips, etc. Attach | Form(s) \ | N-2 | | | | | | 1 | | 9,000. | |
| Attach Sch. B if | 2a | Tax-exempt interest | 2a | | bΤ | axable inte | erest | | | 2b | | | |
| required. | 3a | Qualified dividends | 3a | | b (| Ordinary div | /idends | | | 3b | | | |
| | 4a | IRA distributions | 4a | | b T | axable am | ount . | | | 4b | | | |
| | 5a | Pensions and annuities | 5a | | b T | axable am | ount . | | | 5b | | | |
| Standard Deduction for— | 6a | Social security benefits | 6a | | | axable am | | | · | 6b | | | |
| Single or | 7 | Capital gain or (loss). Attach Schedule D if required. If not required, check here ▶ □ | | | | | | | | 7 | | | |
| Married filing separately, | 8 | Other income from Schedule 1, line 9 | | | | | | | | 8 | + | | |
| \$12,400 | 9 | Add lines 1, 2b, 3b, 4b, 5b, 6b, 7 | , and 8. T | his is your total ir | come | | | | • | 9 | | 9,000. | |
| Married filing jointly or | 10 | Adjustments to income: | | | | 1 | | | | | | | |
| Qualifying | а | From Schedule 1, line 22 | | | | | | 00. | | | | | |
| widow(er), \$24,800 | b | Charitable contributions if you tak | e the stan | dard deduction. S | ee inst | ructions | 10b | | | | | | |
| Head of | С | Add lines 10a and 10b. These are | e your tot | al adjustments to | inco | me | | | • | 10c | ; | 4,000. | |
| household, \$18,650 | 11 | Subtract line 10c from line 9. This | s is your a | adjusted gross in | come | | | | • | 11 | _ | 5,000. | |
| If you checked any box under | 12 | Standard deduction or itemized | d deducti | i ons (from Schedu | ıle A) | | | | | 12 | | 12,400. | |
| Standard | 13 | Qualified business income deduc | ction. Atta | ich Form 8995 or I | Form 8 | 8995-A . | | | | 13 | + | | |
| Deduction, see instructions. | 14 | Add lines 12 and 13 | | | | | | | | 14 | | 12,400. | |
| | 15 | Taxable income. Subtract line 1 | 4 from lin | e 11. If zero or les | s, ente | er -0 | | | | 15 | | 0. | |

| If you have a qualifying child, attach Sch. Etc. | Form 1040 (2020 | J) | | | | | | | | | | Page 2 |
|--|------------------------------------|--|---|--|--|-------------------|-------------|----------------|------------|------------------|------------------|------------------|
| 18 | | 16 | Tax (see instructions). Check | if any from Form | n(s): 1 881 | 4 2 🗌 4972 | 3 🗌 | | | 16 | | 0. |
| 19 | | 17 | Amount from Schedule 2, lin | ne 3 | | | | | | 17 | | |
| 20 | | 18 | Add lines 16 and 17 | | | | | | | 18 | | 0. |
| 21 Add lines 19 and 20 22 Subtract line 21 from line 18. If zero or less, enter -0- 23 Other taxes, including self-employment tax, from Schedule 2, line 10 24 Add lines 22 and 23. This is your total tax 25 Federal income tax withheld from: 26 Form(s) 1099 27 Other forms (see instructions) 28 Other forms (see instructions) 29 Other forms (see instructions) 20 Other forms (see instructions) 20 Other forms (see instructions) 21 Add lines 25a through 25c 22 Other forms (see instructions) 22 Other forms (see instructions) 23 Other forms (see instructions) 25c | | 19 | Child tax credit or credit for | other dependen | ts | | | | | 19 | | |
| 22 Subtract line 21 from line 18. If zero or less, enter -0- 23 Other taxes, including self-employment tax, from Schedule 2, line 10 24 Add lines 22 and 23. This is your total tax Federal income tax withheld from: a Form(s) W-2 b Form(s) 1099 c Other forms (see instructions) d Add lines 25a through 25c 25c 25c 25d 44.8. From(s) W-2 b Form(s) 1099 c Other forms (see instructions) d Add lines 25a through 25c 2020 estimated tax payments and amount applied from 2019 return 26 27 additional child tax credit. Attach Schedule 8812 28 Additional child tax credit. Attach Schedule 8812 29 American opportunity credit from Form 8863, line 8 29 American opportunity credit from Form 8863, line 8 29 Add lines 27 through 31. These are your total other payments and refundable credits Add lines 25d, 26, and 32. These are your total other payments and refundable credits Amount from Schedule 3, line 13 4 If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid 37 Amount of line 34 you want refunded to you. If Form 8888 is attached, check here b Account number 5 8 6 0 3 8 2 0 4 6 9 3 Amount of line 34 you want applied to your 2021 estimated tax | | 20 | Amount from Schedule 3, lin | ne 7 | | | | | | 20 | | |
| 23 Other taxes, including self-employment tax, from Schedule 2, line 10 | | 21 | Add lines 19 and 20 | | | | | | | 21 | | |
| 24 Add lines 22 and 23. This is your total tax Federal income tax withheld from: Form(s) W-2 Complete of the promise of the promise of the properties of | | 22 | Subtract line 21 from line 18 | 3. If zero or less, | enter -0 | | | | | 22 | | 0. |
| 24 Add lines 22 and 23. This is your total tax Federal income tax withheld from: a Form(s) W-2 b Form(s) 1099 c Other forms (see instructions) d Add lines 25a through 25c c Other forms (see instructions) d Add lines 25a through 25c 25c d Add lines 25a through 25c d Add lines 25a through 25c 25c 25d 4 4 8 . Figure Name 8 qualifying child, a control of the control | | 23 | Other taxes, including self-e | mployment tax, | from Schedule | e 2, line 10 . | | | | 23 | | 0. |
| 25 | | 24 | _ | | | | | | | 24 | | 0. |
| b Form(s) 1099 c Other forms (see instructions) d Add lines 25a through 25c d Add lines 25a through 25c 27 attach Sch. EliCatatach Sch. EliCa | | 25 | | | | | | | | | | |
| b Form(s) 1099 . 25b | | а | Form(s) W-2 | | | | 25a | | 448. | | | |
| c Other forms (see instructions) . 25c | | b | Form(s) 1099 | | | | 25b | | | 7 | | |
| d Add lines 25a through 25c | | С | | | | | 25c | | | 1 | | |
| If you have a qualifying child, catach Sch. E. If you have nontaxable combat pay, see instructions. 26 | | d | | | | | | | | 25d | 4 | 448. |
| dualifying child, attach Sch. EIC. 19 with you have northashed processing see instructions. 29 Additional child tax credit. Attach Schedule 8812 29 American opportunity credit from Form 8863, line 8 29 American opportunity credit. See instructions 30 30 30 30 30 30 30 30 30 30 30 30 30 | 15 | 26 | • | | | | | | | 26 | | |
| attach Sch. EIC. 19 Additional child tax credit. Attach Schedule 8812 | qualifying child, | | | | | | 1 1 | | | | | |
| 29 American opportunity credit from Form 8863, line 8 | | | ` ' | | | | | | | 1 | | |
| Refund Refund Refund Amount of line 34 you want refunded to you. If Form 8888 is attached, check here | nontaxable | 29 | American opportunity credit from Form 8863, line 8 29 | | | | | | 1 | | | |
| 31 Amount from Schedule 3, line 13 | | 30 | | | • | | 30 | | | 1 | | |
| 32 Add lines 27 through 31. These are your total other payments and refundable credits . | | ' | | | | | | | | 1 | | |
| Refund 34 | | | | | | | | ts | . ▶ | 32 | | |
| Refund 34 | | | • | , | | | | | | - | | 448. |
| Sign Here 35a Amount of line 34 you want refunded to you. If Form 8888 is attached, check here ▶ □ 35a 44 35a Amount of line 34 you want refunded to you. If Form 8888 is attached, check here ▶ □ 35a 44 35a Amount of line 34 you want refunded to you. If Form 8888 is attached, check here ▶ □ 35a 44 46 35a Amount of line 34 you want refunded to you. If Form 8888 is attached, check here ▶ □ 35a 44 46 35a Amount of line 34 you want refunded to you. If Form 8888 is attached, check here ▶ □ 35a 44 46 35a Amount of line 34 you want refunded to you. If Form 8888 is attached, check here ▶ □ 35a 44 46 Account number □ 1 1 1 1 0 0 0 0 0 2 5 ▶ ▶ c Type: ▼ Checking □ Savings 36 Amount of line 34 you want applied to your 2021 estimated tax . ▶ 36 Amount You Owe For details on how to pay, see instructions 37 may not represent all of the taxes you owe for 2020. See Schedule 3, line 12e, and its instructions for details. Estimated tax penalty (see instructions) ▶ □ 38 Do you want to allow another person to discuss this return with the IRS? See instructions ▶ □ Yes. Complete below. ▼ No Designee's □ Phone □ Personal identification □ number (PIN) ▶ □ □ Sign Here Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledged the penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledged the penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledged the penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledged the penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledged the penalties of perjury, I declare that I have examined this return and accompanying | | | | | | | | | | | | 448. |
| Direct deposit? See instructions. Note: Schedule H and Schedule SE filers, line 37 may not represent all of the taxes you owe for 2020. See Schedule 3, line 12e, and its instructions. Note: Schedule H and Schedule SE filers, line 37 may not represent all of the taxes you owe for 2020. See Schedule 3, line 12e, and its instructions for details. Estimated tax penalty (see instructions) | Retuna | | | - | | | , | • | | | | 448. |
| Amount 70u Owe 70v | Direct deposit? | | | | | | _ | | _ | | | |
| Amount You Owe For details on how to pay, see instructions. Third Party Designee Designee's name ▶ Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledges in the protection PIN, enter it here | | | | | | | | | ugc | | | |
| Amount You Owe For details on how to pay, see instructions. Third Party Designee Designee Designee Sign Here 37 Subtract line 33 from line 24. This is the amount you owe now Note: Schedule H and Schedule SE filers, line 37 may not represent all of the taxes you owe for 2020. See Schedule 3, line 12e, and its instructions for details. Bestimated tax penalty (see instructions) Do you want to allow another person to discuss this return with the IRS? See instructions Personal identification number (PIN) Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledged belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledged and statements and to the IRS sent you an Identify Protection PIN, enter it here | | | | | | | 36 | | | | | |
| You Owe Note: Schedule H and Schedule SE filers, line 37 may not represent all of the taxes you owe for 2020. See Schedule 3, line 12e, and its instructions for details. Third Party Designee Do you want to allow another person to discuss this return with the IRS? See instructions | Amount | | | | | | | | • | 37 | | |
| Third Party Designee Do you want to allow another person to discuss this return with the IRS? See instructions of personal identification number (PIN) ▶ Sign Here Do you want to allow another person to discuss this return with the IRS? See instructions | | 01 | | | - | | | | | | | |
| Third Party Designee Do you want to allow another person to discuss this return with the IRS? See instructions | | | | | • | | or the taxe | ss you c | we loi | | | |
| Third Party Designee Do you want to allow another person to discuss this return with the IRS? See instructions | | | · · | • | | | 38 | | | | | |
| instructions instructions Personal identification number (PIN) ► Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge belief. | Third Party | Do | | | | | See | | | | | |
| Designee's name ► no. ► Personal identification number (PIN) ► Sign Here Designee's name ► no. ► Personal identification number (PIN) ► Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge and statements, and to the best of my knowledge belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge and statements, and to the best of my knowledge belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge and statements, and to the best of my knowledge and statements, and the statement and statem | | | • | • | | | | Yes. Co | mplete l | below. | X No | |
| Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge belief, they are true, correct, and complete. Date Your signature Date Your occupation Protection PIN, enter it here | • | Des | signee's | | | | | | | | | |
| Here Your signature Date Your occupation Fit the IRS sent you an Identity Protection PIN, enter it here | | nan | me ► | | no. | | | numb | er (PIN) | > | | \Box |
| Your signature Protection In the IRS sent you an identity Protection Ply, enter the Protection P | | | | | | | | | | | | |
| Da ma a di martini di | icic | You | ur signature | | Date Your occupation | | | | | | | |
| | | | | | | | | | | | N, enter it nere | <u>;</u> |
| See instructions. Spouse's signature. If a joint return, both must sign. Date Spouse's occupation If the IRS sent your spouse are | Joint return? See instructions. | Snu | ouse's signature. If a joint return. I | DATA SCIENTIST Date Spouse's occupation | | | | <u> </u> | | nt vour spouse | an | |
| Keep a copy for Identity Protection PIN, enter | Keep a copy for | Spouse's signature. If a joint return, both must sign. | | Date Spouse's occupation | | | | Iden | tity Prote | ection PIN, ento | er it here | |
| your records. (see inst.) ▶ | our records. | | | | | | (see | inst.) 🕨 | | | | |
| Phone no. (361) 228-4547 Email address SHIVACHARAN.CHITNENI@GMAIL.COM | | Pho | one no. (361) 228-454 | 7 | Email address | SHIVACHARAN.C | HITNENI@G | MAIL.CO | 1 | | | |
| Preparer's name Preparer's signature Date PTIN Check if: | Doid | Pre | eparer's name | Preparer's signat | ture | | Date | | PTIN | | Check if: | |
| Paid Preparer SYAM PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA RAM SAGAR GUPTA TALLAM 11/20/2021 P02082703 Self-emplo | | SYAM | PRIYA RAM SAGAR GUPTA TALLAM | SYAM PRIYA | YAM PRIYA RAM SAGAR GUPTA TALLAM 11/20/2021 PO | | | | | 2703 | Self-emp | oloyed |
| Use Only Firm's name ► GLOBAL TAXES LLC Phone no. (678) 965-9 | | Firr | m's name ▶ GLOBAL TA | | | | | Pho | ne no. (| 678) 965- | 9522 | |
| Firm's address ► 2530 Pebble Creek Ln Cumming GA 30041 Firm's EIN ► 30-1017 | Jae Only | Firr | m's address ▶ 2530 Pebb | le Creek I | n Cummin | g GA 30041 | | | Firm | ı's EIN ▶ | → 30-101 | 7196 |
| Go to www.irs.gov/Form1040 for instructions and the latest information. BAA REV 08/30/21 PRO Form 1040 | Go to www.irs.go | ov/Form | n1040 for instructions and the late | st information. | | BAA | REV 08/3 | 0/21 PRO | | | Form 10 4 | 10 (2020) |

SCHEDULE 1 (Form 1040)

Additional Income and Adjustments to Income

OMB No. 1545-0074

2020
Attachment
Sequence No. 01

Department of the Treasury Internal Revenue Service

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

SHIVACHARAN RAO CHITNENI

► Attach to Form 1040, 1040-SR, or 1040-NR.
 Go to www.irs.gov/Form1040 for instructions and the latest information.

Your social security number 172-94-8624

| Par | t I Additional Income | | |
|-----|---|------------|--------|
| 1 | Taxable refunds, credits, or offsets of state and local income taxes | 1 | |
| 2a | Alimony received | 2 a | |
| 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. Attach Schedule E | 5 | |
| 6 | Farm income or (loss). Attach Schedule F | 6 | |
| 7 | Unemployment compensation | 7 | |
| 8 | Other income. List type and amount ▶ | | |
| | | 8 | |
| 9 | Combine lines 1 through 8. Enter here and on Form 1040, 1040-SR, or 1040-NR, | 9 | |
| Par | line 8 | 9 | |
| 10 | | 10 | |
| 11 | Educator expenses | 10 | |
| •• | officials. Attach Form 2106 | 11 | |
| 12 | Health savings account deduction. Attach Form 8889 | 12 | |
| 13 | Moving expenses for members of the Armed Forces. Attach Form 3903 | 13 | |
| 14 | Deductible part of self-employment tax. Attach Schedule SE | 14 | |
| 15 | Self-employed SEP, SIMPLE, and qualified plans | 15 | |
| 16 | Self-employed health insurance deduction | 16 | |
| 17 | Penalty on early withdrawal of savings | 17 | |
| 18a | Alimony paid | 18a | |
| b | Recipient's SSN | | |
| С | Date of original divorce or separation agreement (see instructions) ▶ | | |
| 19 | IRA deduction | 19 | |
| 20 | Student loan interest deduction | 20 | |
| 21 | Tuition and fees deduction. Attach Form 8917 | 21 | 4,000. |
| 22 | Add lines 10 through 21. These are your adjustments to income. Enter here and | | |
| | on Form 1040, 1040-SR, or 1040-NR, line 10a | 22 | 4,000. |

Form **8917**(Rev. January 2020)

Tuition and Fees Deduction

► Attach to Form 1040 or 1040-SR.

► Go to www.irs.gov/Form8917 for the latest information.

OMB No. 1545-0074

Attachment Sequence No. **60**

Internal Revenue Service

Name(s) shown on return

Department of the Treasury

SHIVACHARAN RAO CHITNENI

Your social security number 172-94-8624



Use this form for qualified tuition and fees paid in 2018, 2019, or 2020, and later years if legislation extends the deduction (see instructions). File a separate Form 8917 for each year after 2017 for which you qualify to take the deduction.

You can't take both an education credit from Form 8863 and the tuition and fees deduction from this form for the same student for the same tax year.

Before you begin:

- ✓ To see if you qualify for this deduction, see Who Can Take the Deduction in the instructions below.
- ✓ If you file Form 1040 or 1040-SR, figure any write-in adjustments.
- For 2018: Figure any write-in adjustments to be entered on the dotted line next to Schedule 1 (Form 1040), line 36.
 - For 2019: Figure any write-in adjustments to be entered on the dotted line next to Schedule 1 (Form 1040 or 1040-SR), line 22.
 - For 2020 and later years: Figure any write-in adjustments for Schedule 1 (Form 1040 or 1040-SR); see the Instructions for Forms 1040 and 1040-SR.

| Last name CHITNENI ne 1, column (c), and enter the total m your "total income" line of Form 1040 or | | own on page x return) | (c) Adjusted qualified expenses (see instructions) 6,825. |
|---|-----------------------------------|------------------------------------|---|
| ne 1, column (c), and enter the total | | 2 | |
| m your "total income" line of Form 1040 or total of the amounts on your 2018 Schedule 1 through 33, plus any write-in adjustments you line next to Schedule 1 (Form 1040), line 36. | | | 6,825. |
| total of the amounts on your 2018 Schedule 1 through 33, plus any write-in adjustments you line next to Schedule 1 (Form 1040), line 36. | | ,000. | |
| through 33, plus any write-in adjustments you line next to Schedule 1 (Form 1040), line 36. | | | |
| - | | | |
| Enter the total of the amounts on your 2019 0 or 1040-SR), lines 10 through 20, plus any ou entered on the dotted line next to 0 or 1040-SR), line 22. | | | |
| www.irs.gov/Form8917 to find out if the line 2019 have changed | 4 | | |
| | | jointly), | 9,000. |
| of Your Income on the Amount of Your Deduct | | | |
| duction. Is the amount on line 5 more than \$ | 65,000 (\$130,000 if n | narried | |
| } | | 6 | 4,000. |
| 1 | he deduction for tuition and fees | the deduction for tuition and fees | 2555, 2555-EZ, or 4563, or you're excluding income from Puerto Rico, see of Your Income on the Amount of Your Deduction in Pub. 970 to figure the lee 5. duction. Is the amount on line 5 more than \$65,000 (\$130,000 if married raller of line 2, or \$2,000. |

Also enter this amount on line 21 of the 2019 and 2020 Schedule 1 (Form 1040 or 1040-SR), or line 34 of the 2018 Schedule 1 (Form 1040). See *www.irs.gov/Form8917* to find out if the line references above for 2019 have changed.