Form **8879**

(Rev. August 2020)

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	ission Identification Number (SID)				
Taxpave	er's name	Social securi	tv numb	oer	
	ENDAR KANDULA	887-23			
	's name	Spouse's soc	_		
Part	Tax Return Information — Tax Year Ending December 31, (En	ter year you a	re au	thorizing.)	
Enter	whole dollars only on lines 1 through 5.			<u> </u>	
Note:	Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.				
1	Adjusted gross income		1		700.
2	Total tax		2	2 ,	042.
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3	4,	943.
4	Amount you want refunded to you		4	4,	701.
5	Amount you owe		5		
Part					
my know return to send for any Agent payme authori payme busine taxes to person	penalties of perjury, I declare that I have examined a copy of the income tax return (original or amendowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I a (original or amended) I am now authorizing. I consent to allow my intermediate service provider, trand my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for 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 not 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, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation as says prior to the payment (settlement) date. I also authorize the financial institutions involved in the receive confidential information necessary to answer inquiries and resolve issues related to the laid identification number (PIN) below is my signature for the income tax return (original or amended) and Funds Withdrawal Consent.	bove are the amount of the transmitter, or electron of the transmitter. Treasury a indicated in the transmitter to debit the nate the authorizate quests must be the processing of e payment. I furi	ounts for its can smiss of its can smiss	rom the incturn originates ion, (b) the designated for the tothis accordion to the designation soft or evoke (coved no late ectronic payethnowledge	ome tax or (ERO) e reason Financial ware for unt. This eancel) a r than 2 /ment of that the
×	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) I ar if you are entering your own PIN and your return is filed using the Practitioner PIN m below.	n now authorizi	ter five n't ente		
Yours	signature ► Narendar Kandula Date ►	•			
Spous	se's PIN: check one box only	_			
	I authorize to enter or genera	te my PIN			as my
	ERO firm name			digits, but	
_	signature on the income tax return (original or amended) I am now authorizing.				
L	I will enter my PIN as my signature on the income tax return (original or amended) I are if you are entering your own PIN and your return is filed using the Practitioner PIN m below.				
Spous	se's signature ▶ Date ▶	•			
	Practitioner PIN Method Returns Only—continue belo	ow			
Part	III Certification and Authentication — Practitioner PIN Method Only				
ERO's	s EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN. 5	8 7 2 7 Don't ent	8 6 er all ze	1 9 8 eros	9
authori	y that the above numeric entry is my PIN, which is my signature for the electronic individual incomized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am suments of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS e-file Providers of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers of the Pince	bmitting this retu	ırn in a	accordance	
ERO's	s signature ▶ Date ▶	<u> </u>			
	ERO Must Retain This Form — See Instructions				
	Don't Submit This Form to the IRS Unless Requested T	0 DO 20			

£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.

Filing Status Check only one box.	If yo	Single Married filing jointly bu checked the MFS box, enter the son is a child but not your dependent	name of y	ed filing separately your spouse. If you		_		, ,	_			
Your first name	and m	iddle initial	Last na	me					Your	Your social security number		
NARENDAI	R		KAND	ULA					887	887-23-9067		
If joint return, s	pouse's	s first name and middle initial	Last na	me					Spou	Spouse's social security number		
Home address	•	er and street). If you have a P.O. box, se	e instruction	ons.				Apt. no. 317	Chec	ck he	ere if you,	on Campaign or your tly, want \$3
		ce. If you have a foreign address, also c	complete s	paces below.	Sta			code			0,	Checking a
CARROLL'					T		_	5010	_		w will not	change
Foreign country	y name			Foreign province/state	:/coun	ty	Fore	eign postal cod	le your	tax (or refund.	Spouse
At any time du	ıring 20	020, did you receive, sell, send, ex	change, c	or otherwise acquire	any	financial intere	est in	any virtual	currency	y?	Yes	⊠ No
Standard Deduction		neone can claim:	•			•						
Age/Blindness	s You	: Were born before January 2,	1956	Are blind Sp	ouse	: Was bo	rn be	efore Januar	y 2, 195	6	☐ Is blii	nd
Dependents	s (see	instructions):		(2) Social securi	ty	(3) Relationsh	nip	(4) 🗸 ii	f qualifies	for	(see instruc	ctions):
If more		irst name Last name		number to you		Child tax cre			- 1		er dependents	
than four]			
dependents, see instruction]			
and check]			<u> </u>
here ▶]			
	1	Wages, salaries, tips, etc. Attach	Form(s) \	N-2						1	5	2,400.
Attach Sch. B if	2 a	Tax-exempt interest	2a		b T	axable interes	t		-	2b		
required.	3a	Qualified dividends	3a		b (Ordinary divide	nds		-	3b		
	4a	IRA distributions	4a		b T	axable amoun	t.		-	4b		
	5a	Pensions and annuities	5a		b T	axable amoun	t.		-	5b		
Standard	6a	Social security benefits	6a		bΤ	axable amoun	t.		<u>.</u>	6b		
Deduction for— Single or	7	Capital gain or (loss). Attach Sch	edule D if	required. If not rec	uirec	, check here		🕨		7		
Married filing	8	Other income from Schedule 1, li	ne 9							8	_	4,700.
separately, \$12,400	9	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7	, and 8. T	his is your total inc	ome				•	9	4	17,700.
Married filing	10	Adjustments to income:										
jointly or Qualifying	а	From Schedule 1, line 22				10	а					
widow(er), \$24,800	b	Charitable contributions if you take the standard deduction. See instructions 10b										
Head of	С	Add lines 10a and 10b. These are	e your tot	al adjustments to	inco	me			•	10c		
household, \$18,650	11	Subtract line 10c from line 9. This	s is your a	adjusted gross inc	ome				•	11	4	17,700.
If you checked	12	Standard deduction or itemized	d deducti	ions (from Schedul	e A)				. [12	1	2,400.
any box under Standard	13	Qualified business income deduc	tion. Atta	ich Form 8995 or F	orm 8	3995-A			. [13		
Deduction, see instructions.	14	Add lines 12 and 13							. [14	1	2,400.
550 monuotions.	15	Taxable income. Subtract line 1-	4 from lin	e 11. If zero or less	, ente	er -0			. [15	3	35,300.

Form 1040 (2020))									Paç	ge 2
	16	Tax (see instructions). Check	if any from Form	(s): 1 881	4 2 4972	3 []		. 16	4,042	<u>. </u>
	17	Amount from Schedule 2, lin	ne 3						. 17		
	18	Add lines 16 and 17							. 18	4,042	₹.
	19	Child tax credit or credit for	other dependen	ts					. 19		
	20	Amount from Schedule 3, lin	ne 7						. 20	2,000	١.
	21	Add lines 19 and 20							. 21	2,000	
	22	Subtract line 21 from line 18	. If zero or less,	enter -0					. 22	2,042	₹.
	23	Other taxes, including self-e	mployment tax,	from Schedule	e 2, line 10 .				. 23	C).
	24	Add lines 22 and 23. This is	your total tax						▶ 24	2,042	
	25	Federal income tax withheld	from:								
	а	Form(s) W-2				25a	1 4	,94	3.		
	b	Form(s) 1099				25b	,				
	С	Other forms (see instructions	s)			250	;				
	d	Add lines 25a through 25c	,						. 25d	4,943	3.
	26	2020 estimated tax payment								,	
 If you have a L qualifying child, 	27	Earned income credit (EIC)				27	1				
attach Sch. EIC. If you have	28	Additional child tax credit. A				28					
nontaxable	29	American opportunity credit				29					
combat pay, see instructions.	30	Recovery rebate credit. See		•		30	1	,80	0		
	31	•				31		,,,,	<u> </u>		
	32								▶ 32	1,800)
	33	Add lines 25d, 26, and 32. T	•						·	6,743	
	34	If line 33 is more than line 24						•	. 34	4,701	
Refund	35a					-	-		_ —	4,701	
Direct deposit?	> b									4,701	•
See instructions.	►d	Account number 4 3 1			i i i i		i	Saviii	ys		
	36	Amount of line 34 you want			nd tov	> 36	\top				
Amarint		•					_		. 27		
Amount You Owe	37	Subtract line 33 from line 24		-					▶ 37		
For details on		Note: Schedule H and Schedule SE filers, line 37 may not represent all of the taxes you owe for									
how to pay, see		2020. See Schedule 3, line 12e, and its instructions for details. Estimated tax penalty (see instructions)									
instructions.	38										
Third Party		you want to allow another	•				Yes. C	امسما	to bolovi	⊠ No	
Designee				Phone		. •	_			△ NO	
		signee's me ▶		no.				ber (Pl	lentification N) ►		
Sign	Un	der penalties of perjury, I declare t	hat I have examine		d accompanying s	schedules	and stateme	nts. ar	nd to the bes	st of my knowledge	and
•		lief, they are true, correct, and com									
Here	Yo	ur signature		Date	Your occupation	n			f the IRS se	nt you an Identity	
	k.									IN, enter it here	
Joint return?				SOFTWARE ENGINEER				_	(see inst.)		Ш
See instructions. Keep a copy for	Sp	ouse's signature. If a joint return, I	ooth must sign.	Date	Spouse's occup	oation				nt your spouse an ection PIN, enter it h	here
your records.									(see inst.)		
	———Ph	one no.		Email address							_
		eparer's name	Preparer's signat	l .		Date	9	PTIN	1	Check if:	
Paid		I PRIYA RAM SAGAR GUPTA TALLAM	'		GUPTA TALLA		26/2021	P02	082703	Self-employe	ed
Preparer		m's name ► GLOBAL TA				- /	-,			(678)965-952	
Use Only		m's address ► 2530 Pebb		n Cummin	g GA 3004	1			Firm's EIN		
Go to want ire a							V 04/4E/04 DD:		C EII V	Form 1040 (2	
GO TO WWW.IIS.go	JV/I-Off	n1040 for instructions and the late	or illiorridilori.		BAA	RE	V 01/15/21 PR	,		romi 1040 (2	:020)

SCHEDULE 1 (Form 1040)

Additional Income and Adjustments to Income

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service

NARENDAR KANDULA

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.

Attachment Sequence No. **01** Your social security number

887-23-9067

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. Attach Schedule E	5	-4,700.
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,		4 500
Par	t II Adjustments to Income	9	-4,700.
	-	40	
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		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	
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	

SCHEDULE 3 (Form 1040)

Department of the Treasury

Internal Revenue Service

Additional Credits and Payments

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

OMB No. 1545-0074

2020
Attachment
Sequence No. 03

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

Your social security number 887-23-9067

Par	t I Nonrefundable Credits	1		
1	Foreign tax credit. Attach Form 1116 if required		1	
2	Credit for child and dependent care expenses. Attach Form 2441	2		
3	Education credits from Form 8863, line 19	3	2,000.	
4	Retirement savings contributions credit. Attach Form 8880	4		
5	Residential energy credits. Attach Form 5695		5	
6	Other credits from Form: a 3800 b 8801 c		6	
7	Add lines 1 through 6. Enter here and on Form 1040, 1040-SR, or	7	2,000.	
Par	Other Payments and Refundable Credits			
8	Net premium tax credit. Attach Form 8962		8	
9	Amount paid with request for extension to file (see instructions) .	9		
10	Excess social security and tier 1 RRTA tax withheld	10		
11	Credit for federal tax on fuels. Attach Form 4136	11		
12	Other payments or refundable credits:			
а	Form 2439	12a		
b	Qualified sick and family leave credits from Schedule(s) H and Form(s) 7202	12b		
С	Health coverage tax credit from Form 8885	12c		
d	Other:	12d		
е	Deferral for certain Schedule H or SE filers (see instructions) .	12e		
f	Add lines 12a through 12e	12f		
13	Add lines 8 through 12f. Enter here and on Form 1040, 1040-SR, or	1040-NR, line 31	13	

BAA

SCHEDULE E

(Form 1040)

Supplemental Income and Loss

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

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

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

OMB No. 1545-0074

Attachment Sequence No. **13**

Internal Revenue Service (99)

Name(s) shown on return

Department of the Treasury

Your social security number

<u>NAR</u> E	NDAR KANDULA								87-23-90	
Part		s From Rental Real Estate and Ro	-		-				• .	
	Schedule C. See	instructions. If you are an individual, repe	ort far	m rental i	ncome	or loss f	rom Form 48	335 or	n page 2, line	e 40.
A Dic	l you make any payme	nts in 2020 that would require you to	file F	orm(s) 1	099? S	See instr	ructions .		[Yes 🛛 No
B If "	Yes," did you or will yo	ou file required Form(s) 1099?							[Yes 🗌 No
1a	Physical address of	each property (street, city, state, ZIF	code	e)						
A	PLOT NO-666 HY	DERABAD TELANGANA IN 500	090							
В										
C										
1b	Type of Property	2 For each rental real estate prop	erty !	isted			Rental	Per	rsonal Use	QJV
	(from list below)	above, report the number of fa personal use days. Check the	ır rent ດ.IV h	al and			Days		Days	
A	3	if you meet the requirements to	o file a	as a 🔝	Α		365		0	
B		qualified joint venture. See inst	ructio	ns.	В					
C					С					
	of Property:									
-	le Family Residence	3 Vacation/Short-Term Rental				7 Self-				
	ti-Family Residence		6 Ro	oyalties	_	8 Othe	r (describe)			
Incom		Properties:	-		Α	0=0	E	3		С
3			3			350.				
4			4							
Expen			_							
5	_		5			1-0				
6		nstructions)	6			150.				
7	•	nance	7			150.				
8			8							
9			9							
10		essional fees	11			250				
11	_		12			350.				
12 13		d to banks, etc. (see instructions)	13			FOO				
14			14		۷,	500. 950.				
15	•		15			950.				
16			16			230.				
17			17							
18		e or depletion	18							
19	Other (list) ►	•	19							
20	` ′	lines 5 through 19	20		5	050.				
21	•	line 3 (rents) and/or 4 (royalties). If				030.				
21		instructions to find out if you must								
	file Form 6198		21		-4,	700.				
22		l estate loss after limitation, if any,								
	on Form 8582 (see in		22	(-4,5	700.)	()()
23a	•	eported on line 3 for all rental prope				23a		3	50.	
b		eported on line 4 for all royalty prop				23b				
С		eported on line 12 for all properties				23c				
d		eported on line 18 for all properties				23d				
е		eported on line 20 for all properties				23e		5,0	50.	
24		e amounts shown on line 21. Do no	t inclu	ude any	losses				24	
25	•	sses from line 21 and rental real estate		•		nter tota	al losses her	е.	25 (4,700.)
26	Total rental real esta	ate and royalty income or (loss).	Comb	ine lines	s 24 ar	nd 25. E	nter the re	sult		
		V, and line 40 on page 2 do not								
		40), line 5. Otherwise, include this ar							26	-4,700.

Form **8863**

Department of the Treasury Internal Revenue Service (99)

Education Credits(American Opportunity and Lifetime Learning Credits)

► Attach to Form 1040 or 1040-SR.

▶ Go to www.irs.gov/Form8863 for instructions and the latest information.

OMB No. 1545-0074

2020
Attachment Sequence No. 50

Name(s) shown on return

NARENDAR KANDULA

Your social security number 887-23-9067



Complete a separate Part III on page 2 for each student for whom you're claiming either credit before you complete Parts I and II.

Par	Refundable American Opportunity Credit				
1	After completing Part III for each student, enter the total of all amounts from all P	arts II	II, line 30	1	
2	Enter: \$180,000 if married filing jointly; \$90,000 if single, head of household, or qualifying widow(er)	2			
3	Enter the amount from Form 1040 or 1040-SR, line 11. If you're filing Form 2555 or 4563, or you're excluding income from Puerto Rico, see Pub. 970 for the amount to enter	3			
4	Subtract line 3 from line 2. If zero or less, stop ; you can't take any education credit	4			
5	Enter: \$20,000 if married filing jointly; \$10,000 if single, head of household, or qualifying widow(er)	5			
6	If line 4 is:		,		
	• Equal to or more than line 5, enter 1.000 on line 6		I		
	• Less than line 5, divide line 4 by line 5. Enter the result as a decimal (round at least three places)			6	
7	• • •				
7	Multiply line 1 by line 6. Caution: If you were under age 24 at the end of the conditions described in the instructions, you can't take the refundable America				
	skip line 8, enter the amount from line 7 on line 9, and check this box			7	
8	Refundable American opportunity credit. Multiply line 7 by 40% (0.40). Enter	the a	mount here and		
	on Form 1040 or 1040-SR, line 29. Then go to line 9 below			8	
Part					
9	Subtract line 8 from line 7. Enter here and on line 2 of the Credit Limit Worksheet	•	,	9	
10	After completing Part III for each student, enter the total of all amounts from a				1 - 0 - 0
	zero, skip lines 11 through 17, enter -0- on line 18, and go to line 19			10	15,960.
11 12	Enter the smaller of line 10 or \$10,000			11 12	10,000.
	Multiply line 11 by 20% (0.20)			12	2,000.
13	Enter: \$138,000 if married filing jointly; \$69,000 if single, head of household, or qualifying widow(er)	13	69,000.		
14	Enter the amount from Form 1040 or 1040-SR, line 11. If you're filing Form 2555 or 4563, or you're excluding income from Puerto Rico, see Pub. 970 for				
	the amount to enter	14	47,700.		
15	Subtract line 14 from line 13. If zero or less, skip lines 16 and 17, enter -0- on line 18, and go to line 19	15	21,300.		
16	Enter: \$20,000 if married filing jointly; \$10,000 if single, head of household, or qualifying widow(er)	16	10,000.		
17	If line 15 is:				
	• Equal to or more than line 16, enter 1.000 on line 17 and go to line 18				
	• Less than line 16, divide line 15 by line 16. Enter the result as a decimal (roun places)			17	1.000
18	Multiply line 12 by line 17. Enter here and on line 1 of the Credit Limit Worksheet	(see i	nstructions) 🕨	18	2,000.
19	Nonrefundable education credits. Enter the amount from line 7 of the Credit				
	instructions) here and on Schedule 3 (Form 1040), line 3			19	2,000.

Name(s) shown on return	Your social security number
NAPENDAP KANDIII.A	887-23-9067



Complete Part III for each student for whom you're claiming either the American opportunity credit or lifetime learning credit. Use additional copies of page 2 as needed for each student.

Par	Student and Educational Institution Information	n. See i	nstructions.		
20	Student name (as shown on page 1 of your tax return)		Student social security number (as s	hown	on page 1 of
	NARENDAR	У	our tax return)		
	KANDULA		887-23-9067		
22	Educational institution information (see instructions)				
а	Name of first educational institution	b. N	lame of second educational institut	ion (if	any)
	UNIVERSITY OF THE CUMBERLANDS	(4)			\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
(Address. Number and street (or P.O. box). City, town or post office, state, and ZIP code. If a foreign address, see instructions. 	(1)	Address. Number and street (or P. post office, state, and ZIP code. If instructions.		
	6178 COLLEGE STATION DR				
	WILLIAMSBURG KY 40769				
(Did the student receive Form 1098-T from this institution for 2020? X Yes □ No	(2)	Did the student receive Form 1098 from this institution for 2020?	-T [Yes No
(Did the student receive Form 1098-T from this institution for 2019 with box ☐ Yes ☒ No 7 checked?	(3)	Did the student receive Form 1098 from this institution for 2019 with b 7 checked?		Yes No
(4	4) Enter the institution's employer identification number (EIN) if you're claiming the American opportunity credit or if you checked "Yes" in (2) or (3). You can get the EIN from Form 1098-T or from the institution.		Enter the institution's employer (EIN) if you're claiming the America if you checked "Yes" in (2) or (3) from Form 1098-T or from the institution.	an opp J. You	oortunity credit or can get the EIN
	61-0470593				
23	Has the Hope Scholarship Credit or American opportunity credit been claimed for this student for any 4 tax years before 2020?		s - Stop! to line 31 for this student. No	– Go	to line 24.
24	Was the student enrolled at least half-time for at least one academic period that began or is treated as having begun in 2020 at an eligible educational institution in a program leading towards a postsecondary degree, certificate, or other recognized postsecondary educational credential? See instructions.	X Ye		– Sto his stu	p! Go to line 31 udent.
25	Did the student complete the first 4 years of postsecondary education before 2020? See instructions.	× Go	s – Stop! o to line 31 for this No	– Go	to line 26.
26	Was the student convicted, before the end of 2020, of a felony for possession or distribution of a controlled substance?	Go			mplete lines 27 O for this student.
CAUT	You complete lines 27 through 30 for this student, don't t			in the	e same year. If
	American Opportunity Credit				
27	Adjusted qualified education expenses (see instructions). Dor			27	
28	Subtract \$2,000 from line 27. If zero or less, enter -0			28	
29	1 3 4 7			29	
30	If line 28 is zero, enter the amount from line 27. Otherwise, a				
	enter the result. Skip line 31. Include the total of all amounts f	rom all f	Parts III, line 30, on Part I, line 1.	30	
	Lifetime Learning Credit				
31	Adjusted qualified education expenses (see instructions). Incl III, line 31, on Part II, line 10			31	15,960.