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

Submission Identification Number (SID)		•		
Taxpayer's name	Social security	y number		
PRAVEEN REDDY BADDAM	717-25-	-5437		
Spouse's name	Spouse's soci	al security	number	
KEERTHI REDDY GADDAM	339-99-			
	nter year you a	re autho	rizing.)
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		,313.
2 Total tax		2		<u>,557.</u>
3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3		,404.
4 Amount you want refunded to you		4	7	<u>,847.</u>
5 Amount you owe		5		
Part II Taxpayer Declaration and Signature Authorization (Be sure you get a Under penalties of perjury, I declare that I have examined a copy of the income tax return (original or american)				
return (original or amended) I am now authorizing. I consent to allow my intermediate service provider, trato send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution accoun payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial ins authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to tern payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation business days prior to the payment (settlement) date. I also authorize the financial institutions involved in taxes to receive confidential information necessary to answer inquiries and resolve issues related to personal identification number (PIN) below is my signature for the income tax return (original or amended Electronic Funds Withdrawal Consent.	or rejection of the tra- the U.S. Treasury are it indicated in the ta- titution to debit the ininate the authoriza in requests must be in the processing of the payment. I furti	ansmission dits desing its design of the centry to the centry to the centre ditter and the electrone district acknown in the electrone district acknown distric	n, (b) th gnated tion sof nis acco evoke (c no late onic pa wledge	e reason Financial tware for unt. This cancel) a er than 2 yment of that the
Taxpayer's PIN: check one box only				
▼ I authorize GLOBAL TAXES LLC to enter or gene	rate my PIN	5 4	3 7	as my
ERO firm name signature on the income tax return (original or amended) I am now authorizing.	ř Ent	er five digi n't enter all		ao my
I will enter my PIN as my signature on the income tax return (original or amended) I a if you are entering your own PIN and your return is filed using the Practitioner PIN r below.				
Your signature ▶ Date	-			
Spouse's PIN: check one box only				
I authorize GLOBAL TAXES LLC to enter or gene 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 a if you are entering your own PIN and your return is filed using the Practitioner PIN rebelow.	Ent dor am now authorizir	er five digi i't enter all ng. Chec	zeros k this b	
Spouse's signature ▶ Date	>			
Practitioner PIN Method Returns Only—continue be	elow			
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.	8 7 2 7 8 Don't enter	8 6 1 er all zeros	9 8	9
I certify that the above numeric entry is my PIN, which is my signature for the electronic individual incommunity authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am requirements of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS e-file Providers	submitting this retu	rn in acco	ordanće	
ERO's signature ▶ Date	>			
ERO Must Retain This Form — See Instruction				

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

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

Filing Status Check only one box.	If yo	Single X Married filing jointly uchecked the MFS box, enter the noon is a child but not your dependent	- ame of	ied filing separately your spouse. If you		_			_		. , . ,
Your first name	and mi	ddle initial	Last n	ame					Your so	cial securi	ty number
PRAVEEN	REDI	DY	BAD	DAM					717-	25-543	7
If joint return, s	pouse's	first name and middle initial	Last n	ame					Spouse'	s social sec	curity number
KEERTHI	REDI	DY	GAD	DAM					339-	99-143	1
Home address	(numbe	er and street). If you have a P.O. box, see	instruct	tions.				Apt. no.	Preside	ntial Election	on Campaign
5445 PRI	ESTO	N OAKS ROAD						319		nere if you,	,
City, town, or p	ost offi	ce. If you have a foreign address, also co	mplete	spaces below.	Sta	te	ZIP	code			ntly, want \$3 Checking a
DALLAS					T	X	75	254	U	ow will not	0
Foreign country	/ name			Foreign province/stat	te/coun	ty	Fore	eign postal code		your tax or refund. You Spous	
At any time du	ring 20	021, did you receive, sell, exchange,	or oth	erwise dispose of a	any fina	ancial interest i	in an	y virtual currer	ncy?	Yes	⊠ No
Standard Deduction	_	eone can claim: You as a de Spouse itemizes on a separate return	•			•					
Age/Blindness		Were born before January 2, 1			pouse		rn be	fore January 2	2, 1957	☐ Is bl	ind
Dependents	s (see	instructions):		(2) Social secu	rity	(3) Relationsh	nip	(4) ✓ if qu	ualifies fo	r (see instru	ctions):
If more	(1) F	irst name Last name		number to you CI		Child tax cr	edit	Credit for ot	her dependents		
than four										[
dependents, see instructions											
and check	·										
here ▶ □											
	1	Wages, salaries, tips, etc. Attach F	orm(s)	W-2					. 1	1	10,247.
Attach	2a	Tax-exempt interest	2a		b T	axable interes	t		2b		66.
Sch. B if required.	3a	Qualified dividends	3a		b C	Ordinary divide	nds		. 3b		
required.	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		b T	axable amoun	t.		. 6b		
Deduction for—	7	Capital gain or (loss). Attach Sched	dule D	if required. If not re	quired	, check here		▶ [7		
Single or Married filing	8	Other income from Schedule 1, line	e 10						. 8	-1	10,000.
separately, \$12,550	9	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7, a	and 8.	This is your total ir	come			1	9	1	00,313.
Married filing	10	Adjustments to income from Sche	dule 1,	line 26					. 10		
jointly or Qualifying	11_	Subtract line 10 from line 9. This is	your a	adjusted gross inc	ome			1	▶ 11	10	00,313.
widow(er), \$25,100	12a	Standard deduction or itemized	deduc	tions (from Schedu	ıle A)	12	а	25,100).		
Head of	b	Charitable contributions if you take	the sta	andard deduction (se	ee instr	ructions) 12	b	600).		
household, \$18,800	С	Add lines 12a and 12b							. 120		25,700.
If you checked	13	Qualified business income deducti	on fror	m Form 8995 or Fo	rm 899	05-A			. 13		
any box under Standard	14	Add lines 12c and 13							. 14	. :	25,700.
Deduction, see instructions.	15	Taxable income. Subtract line 14	from li	ne 11. If zero or les	s, ente	er-0			. 15	<u> </u>	74,613.

Form 1040 (2021	1)								Page 2
	16	Tax (see instructions). Check	if any from Form	(s): 1 881	4 2 🗌 4972	3 🗌		16	8,557.
	17	Amount from Schedule 2, lin	ie 3					17	
	18	Add lines 16 and 17						18	8,557.
	19	Nonrefundable child tax cred	dit or credit for c	ther depender	nts from Schedule	e 8812		19	
	20	Amount from Schedule 3, lin	ie 8					20	2,000.
	21	Add lines 19 and 20						21	2,000.
	22	Subtract line 21 from line 18	. If zero or less,	enter -0				22	6,557.
	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	6,557.
	25	Federal income tax withheld	from:						
	а	Form(s) W-2				25 a 14	,404.		
	b	Form(s) 1099				25b			
	С	Other forms (see instructions	s)			25c			
	d	Add lines 25a through 25c						25d	14,404.
If you have a	26	2021 estimated tax payment	ts and amount a	pplied from 20)20 return	.,		26	
qualifying child,	27a	Earned income credit (EIC)			NO	27a			
attach Sch. EIC.		Check here if you were by January 2, 2004, and you taxpayers who are at least a	u satisfy all the ge 18, to claim t	e other requi	rements for				
	b	Nontaxable combat pay elec				_			
	С	Prior year (2019) earned inco							
	28	Refundable child tax credit or				28		-	
	29	American opportunity credit	-						
	30	Recovery rebate credit. See	-						
	31	Amount from Schedule 3, lin							
	32	Add lines 27a and 28 throug						32	11.101
	33	Add lines 25d, 26, and 32. T					. ▶	33	14,404.
Refund	34	If line 33 is more than line 24				•		34	7,847.
	35a	Amount of line 34 you want						35a	7,847.
Direct deposit? See instructions.	►b	Routing number 0 4 4 0 0 0 0 3 7 ▶ c Type: X Checking Savings							
	►d	Account number 8 3 1							
	36	Amount of line 34 you want a				36			
Amount	37	Amount you owe. Subtract				1 1	. ▶	37	
You Owe Third Party	38 Do	Estimated tax penalty (see in you want to allow another				38 See			
Designee	ins	structions					omplete b		X No
		signee's		Phone		Pers	onal identi	ication	
		me ►		no. ▶		numi	oer (PIIN)		
Sign Here	bel	der penalties of perjury, I declare t ief, they are true, correct, and com		of preparer (othe	r than taxpayer) is b		on of which	n prepare	er has any knowledge.
	You	ur signature		Date	Your occupation				nt you an Identity IN, enter it here
Joint return?					SOFTWARE	ENGINEER	I .	inst.) ▶	IIII, CIRCI II HOIC
See instructions.	Spo	ouse's signature. If a joint return, t	ooth must sign.	Date	Spouse's occupat		If the	IRS ser	nt your spouse an
Keep a copy for		, ,	J				Ident	tity Prote	ection PIN, enter it here
your records.					STUDENT		(see	inst.) ▶	
		one no. (402)707-384		Email address	prawinbado	lam@gmail.co			
Paid	Pre	eparer's name	Preparer's signat	ure		Date	PTIN		Check if:
Preparer	SYAM	PRIYA RAM SAGAR GUPTA TALLAM	SYAM PRIYA	RAM SAGAR	GUPTA TALLAM	04/14/2022	P0208		Self-employed
Use Only		m's name ► GLOBAL TAX					Phor	ne no. (678)965-9522
	Firr	m's address ► 2530 Pebb	le Creek I	n Cummin	g GA 30041		Firm	's EIN ▶	
Go to www.irs.go	ov/Forn	n1040 for instructions and the late	st information.		BAA	REV 04/09/22 PRO			Form 1040 (2021)

SCHEDULE 1 (Form 1040)

Additional Income and Adjustments to Income

OMB No. 1545-0074

2021

Attachment Sequence No. 01

Department of the Treasury Internal Revenue Service

PRAVEEN REDDY

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

BADDAM & KEERTHI REDDY GADDAM

► 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 717-25-5437

Par	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, tru Schedule E		5	-10,000.
6	Farm income or (loss). Attach Schedule F		6	
7	Unemployment compensation		7	
8	Other income:			
а	Net operating loss	8a ()		
b	Gambling income	8b		
С	Cancellation of debt	8c		
d	Foreign earned income exclusion from Form 2555	8d ()		
е	Taxable Health Savings Account distribution	8e		
f	Alaska Permanent Fund dividends	8f		
g	Jury duty pay	8g		
h	Prizes and awards	8h		
i	Activity not engaged in for profit income	8i		
j	Stock options	8j		
k	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	8k		
I	Olympic and Paralympic medals and USOC prize money (see instructions)	81	-	
m	Section 951(a) inclusion (see instructions)	8m		
n	Section 951A(a) inclusion (see instructions)	8n		
0	Section 461(I) excess business loss adjustment	80		
р	Taxable distributions from an ABLE account (see instructions) .	8p		
Z	Other income. List type and amount ▶	8z		
9	Total other income. Add lines 8a through 8z	· · · · · · · · · · · · · · · · · · ·	9	
10	Combine lines 1 through 7 and 9. Enter here and on Form 10 1040-NR, line 8		10	_10_000

Schedule 1 (Form 1040) 2021 Page **2**

Par	Adjustments to Income			
11	Educator expenses		11	
12	Certain business expenses of reservists, performing artists, and fee-officials. Attach Form 2106			
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)	24a		
b	Deductible expenses related to income reported on line 8k from the rental of personal property engaged in for profit	24b		
С	Nontaxable amount of the value of Olympic and Paralympic medals and USOC prize money reported on line 8l	24c		
d	Reforestation amortization and expenses	24d		
е	Repayment of supplemental unemployment benefits under the Trade Act of 1974	24e		
f	Contributions to section 501(c)(18)(D) pension plans	24f		
g	Contributions by certain chaplains to section 403(b) plans	24 g		
h	,	24h		
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	24i		
j	Housing deduction from Form 2555	24 j		
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form 1041)	24k		
z	Other adjustments. List type and amount ▶	24z		
25	Total other adjustments. Add lines 24a through 24z		25	
26	Add lines 11 through 23 and 25. These are your adjustments there and on Form 1040 or 1040-SR, line 10, or Form 1040-NR, line			

SCHEDULE 3 (Form 1040)

Additional Credits and Payments

OMB No. 1545-0074

2021

Attachment
Seguence No. 03

Department of the Treasury Internal Revenue Service

PRAVEEN REDDY

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

BADDAM & KEERTHI REDDY GADDAM

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

Attachment Sequence No. 03 Your social security number

717-25-5437

Par	t I Nonrefundable Credits	·		
1	Foreign tax credit. Attach Form 1116 if required		1	
2	Credit for child and dependent care expenses from Form 244 Form 2441	1, line 11. Attach	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 nonrefundable credits:			
а	General business credit. Attach Form 3800	6a		
b	Credit for prior year minimum tax. Attach Form 8801	6b		
С	Adoption credit. Attach Form 8839	6c		
d	Credit for the elderly or disabled. Attach Schedule R	6d		
е	Alternative motor vehicle credit. Attach Form 8910	6e		
f	Qualified plug-in motor vehicle credit. Attach Form 8936	6f		
g	Mortgage interest credit. Attach Form 8396	6g		
h	District of Columbia first-time homebuyer credit. Attach Form 8859	6h		
i	Qualified electric vehicle credit. Attach Form 8834	6i		
j	Alternative fuel vehicle refueling property credit. Attach Form 8911	6j		
k	Credit to holders of tax credit bonds. Attach Form 8912	6k		
I	Amount on Form 8978, line 14. See instructions	61		
Z	Other nonrefundable credits. List type and amount ▶	6z		
7	Total other nonrefundable credits. Add lines 6a through 6z		7	
8	Add lines 1 through 5 and 7. Enter here and on Form 1040, 1040)-SR, or 1040-NR,		
	line 20		8	2,000.
		(co	ontinu	ied on page 2)

Schedule 3 (Form 1040) 2021 Page **2**

Par	Other Payments and Refundable Credits			
9	Net premium tax credit. Attach Form 8962		9	
10	Amount paid with request for extension to file (see instructions) .		10	
11	Excess social security and tier 1 RRTA tax withheld		11	
12	Credit for federal tax on fuels. Attach Form 4136		12	
13	Other payments or refundable credits:			
а	Form 2439	13a		
b	Qualified sick and family leave credits from Schedule(s) H and Form(s) 7202 for leave taken before April 1, 2021	13b		
С	Health coverage tax credit from Form 8885	13c		
d		13d		
е	Reserved for future use	13e		
f	Deferred amount of net 965 tax liability (see instructions)	13f		
g	Credit for child and dependent care expenses from Form 2441, line 10. Attach Form 2441	13g		
h	Qualified sick and family leave credits from Schedule(s) H and Form(s) 7202 for leave taken after March 31, 2021	13h		
Z	- 1 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	13z		
14	Total other payments or refundable credits. Add lines 13a through	13z	14	
15	Add lines 9 through 12 and 14. Enter here and on Form 1040, 1040 line 31		15	

BAA

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.

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

OMB No. 1545-0074

2021

Attachment Sequence No. 13

Department of the Treasury Internal Revenue Service (99) Name(s) shown on return

NEGGER THEOGRAP S MEGGER

Your social security number

		DAM & KEERTHI REDDY GADDA							17-25-54	
Part		s From Rental Real Estate and Roy	-		-					
		instructions. If you are an individual, repo								
	, , ,	nts in 2021 that would require you to		` '						_
		ou file required Form(s) 1099?							📙	Yes U No
1a	Physical address of	each property (street, city, state, ZIF	, code	e)						
A										
В										
C	T of D out.					Fair	Dontol	Day	sonal Use	
1b	Type of Property (from list below)	For each rental real estate propabove, report the number of fair	oerty I ir rent	isted al and			Rental Days	Per	Days	QJV
Α.	,	personal use days. Check the	QJV b	ox only		-				
A B	3	if you meet the requirements to qualified joint venture. See inst) file a ructio	is a	A B		365		0	
C		quamieu joint voittarei eee met			С					
	│ of Property:									
	le Family Residence	3 Vacation/Short-Term Rental	5 la	nd		7 Self-	Rontal			
	ti-Family Residence			valties			r (describe)			
Incom		Properties:		yanies	Α	o Otile	<u>r (describe)</u> E			С
3			3			600.				
4			4			500.				
Expen			<u> </u>							
5 5			5							
6	_	nstructions)	6							
7		nance	7		1,	500.				
8	•		8							
9	Insurance		9							
10		essional fees	10							
11			11		1,	200.				
12	_	d to banks, etc. (see instructions)	12							
13	Other interest		13							
14	Repairs		14		2,	600.				
15	Supplies		15		2,	300.				
16	Taxes		16							
17	Utilities		17		3,	000.				
18	Depreciation expense	e or depletion	18							
19	Other (list)		19							
20	Total expenses. Add	lines 5 through 19	20		10,	600.				
21		line 3 (rents) and/or 4 (royalties). If								
		instructions to find out if you must								
	file Form 6198		21		-10,	000.				
22		l estate loss after limitation, if any,		,		١	,			,
00	on Form 8582 (see in	•	22	[(10,0	000.)	()()
23a		eported on line 3 for all rental proper				23a		6	00.	
b		eported on line 4 for all royalty properties				23b				
C C		eported on line 12 for all properties				23c				
d		eported on line 18 for all properties				23d	1	0 6	00	
e 24		eported on line 20 for all properties e amounts shown on line 21. Do no t				23e		0,6	24	
24 25	·	e amounts snown on line 21. Do no t sses from line 21 and rental real estate		-		ntor tot	· · · ·		25 (10,000.)
	, ,								20 (10,000.)
26		ate and royalty income or (loss). (V, and line 40 on page 2 do not a								
		40), line 5. Otherwise, include this ar							26	-10,000.

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

2021

Attachment Sequence No. 50

Name(s) shown on return
PRAVEEN REDDY

BADDAM & KEERTHI REDDY GADDAM

Your social security number 717-25-5437



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	I, 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		1		
	• Less than line 5, divide line 4 by line 5. Enter the result as a decimal (rou at least three places)			6	
7	Multiply line 1 by line 6. Caution: If you were under age 24 at the end of th conditions described in the instructions, you can't take the refundable America	an op	portunity credit;	7	
•	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 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	(see	instructions) .	9	
10	After completing Part III for each student, enter the total of all amounts from a	•	,		
	zero, skip lines 11 through 17, enter -0- on line 18, and go to line 19			10	14,253.
11	Enter the smaller of line 10 or \$10,000			11	10,000.
12	Multiply line 11 by 20% (0.20)			12	2,000.
13	Enter: \$180,000 if married filing jointly; \$90,000 if single, head of household, or qualifying widow(er)	13	180,000.		
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	100,313.		
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	79,687.		
16	Enter: \$20,000 if married filing jointly; \$10,000 if single, head of household, or qualifying widow(er)	16	20,000.		
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 (rour	nded	to at least three		
	places)			17	1.000
18	Multiply line 12 by line 17. Enter here and on line 1 of the Credit Limit Worksheet			18	2,000.
19	Nonrefundable education credits. Enter the amount from line 7 of the Credit	Limit	Worksheet (see		
	instructions) here and on Schedule 3 (Form 1040), line 3			19	2,000.

, ,		
Name(s) shown on return		Your social security number
PRAVEEN REDDY	BADDAM & KEERTHI REDDY GADDAM	717-25-5437

A
CAUTION

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.

Part	Student and Educational Institution Information	1. 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	
	KEERTHI REDDY	У	your tax return)			
	GADDAM		339-99-1431			
22	Educational institution information (see instructions)					
а	Name of first educational institution	b. N	lame of second educational institut	ion (if	any)	
	MASTERS IN COMPUTERS AND INFORMATION SCIENCE				` .	
(-	 Address. Number and street (or P.O. box). City, town or post office, state, and ZIP code. If a foreign address, see instructions. SOUTHERN ARKANSAS UNIVERSITY 	(1)	Address. Number and street (or P. post office, state, and ZIP code. If instructions.			
	MAGNOLIA AR 717535000					
(2	2) Did the student receive Form 1098-T	(2)	Did the student receive Form 1098 from this institution for 2021?	-Т _] Yes □ No	
(;	B) Did the student receive Form 1098-T from this institution for 2020 with box ☐ Yes ☒ No 7 checked?	(3)	Did the student receive Form 1098 from this institution for 2020 with b 7 checked?		Yes No	
(4	1) 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). You	oortunity credit or can get the EIN	
	71-6007749					
23	Has the Hope Scholarship Credit or American opportunity credit been claimed for this student for any 4 tax years before 2021?		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 2021 at an eligible educational institution in a program leading towards a postsecondary degree, certificate, or other recognized postsecondary educational credential? See instructions.	X Ye			p! Go to line 31 udent.	
25	Did the student complete the first 4 years of postsecondary education before 2021? See instructions.	× Go	s – Stop! to line 31 for this No	– Go	to line 26.	
26	Was the student convicted, before the end of 2021, of a felony for possession or distribution of a controlled substance?	Go			mplete lines 27 O for this student.	
CAUT				in the	e same year. If	
	American Opportunity Credit					
27	Adjusted qualified education expenses (see instructions). Don			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 for	rom all I	rarts III, line 30, on Part I, line 1.	30		
	Lifetime Learning Credit		Askal of all account of the U.S. i			
31	Adjusted qualified education expenses (see instructions). Incl III, line 31, on Part II, line 10			31	14,253.	

Department of the Treasury Internal Revenue Service (99)

Passive Activity Loss Limitations

► See separate instructions.

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

▶ Go to www.irs.gov/Form8582 for instructions and the latest information.

OMB No. 1545-1008 Attachment Sequence No. 858

Name(s) shown on return Identifying number PRAVEEN REDDY BADDAM & KEERTHI REDDY GADDAM 717-25-5437 Part I 2021 Passive Activity Loss Caution: Complete Parts IV and V before completing Part I. Rental Real Estate Activities With Active Participation (For the definition of active participation, see Special Allowance for Rental Real Estate Activities in the instructions.) 1a Activities with net income (enter the amount from Part IV, column (a)) . . . **b** Activities with net loss (enter the amount from Part IV, column (b)) 1b 10,000. c Prior years' unallowed losses (enter the amount from Part IV, column (c)) . . . **d** Combine lines 1a, 1b, and 1c 1d -10,000. **All Other Passive Activities** 2a Activities with net income (enter the amount from Part V, column (a)) . . . 2a **b** Activities with net loss (enter the amount from Part V, column (b)) 2b **c** Prior years' unallowed losses (enter the amount from Part V, column (c)) . 2c (2d Combine lines 1d and 2d. If this line is zero or more, stop here and include this form with your return; all losses are allowed, including any prior year unallowed losses entered on line 1c or 2c. Report the losses on the forms and schedules normally used 3 -10,000. If line 3 is a loss and: • Line 1d is a loss, go to Part II. • Line 2d is a loss (and line 1d is zero or more), skip Part II and go to line 10. Caution: If your filing status is married filing separately and you lived with your spouse at any time during the year, do not complete Part II. Instead, go to line 10. Special Allowance for Rental Real Estate Activities With Active Participation Part II Note: Enter all numbers in Part II as positive amounts. See instructions for an example. 4 Enter the **smaller** of the loss on line 1d or the loss on line 3 10,000. 5 Enter \$150,000. If married filing separately, see instructions 150,000. Enter modified adjusted gross income, but not less than zero. See instructions 6 110,313. Note: If line 6 is greater than or equal to line 5, skip lines 7 and 8 and enter -0on line 9. Otherwise, go to line 7. 7 39,687. Multiply line 7 by 50% (0.50). **Do not** enter more than \$25,000. If married filing separately, see instructions 8 19,844. Enter the **smaller** of line 4 or line 8 9 9 10,000. Part III **Total Losses Allowed** 10 10 0. Total losses allowed from all passive activities for 2021. Add lines 9 and 10. See instructions to find 10,000. 11 Part IV Complete This Part Before Part I, Lines 1a, 1b, and 1c. See instructions. Overall gain or loss Current year Prior years Name of activity (a) Net income (b) Net loss (c) Unallowed (d) Gain (e) Loss (line 1a) loss (line 1c) (line 1b) 0. 10,000. 10,000.

Total. Enter on Part I, lines 1a, 1b, and 1c ▶

10,000.

0.

Form 8582 (2021) Page **2**

Part V	Complete This Part Before	e P	art I, Lines 2	a, 2b,	and 2c. S	ee instruc	tions.			•	
	Name of activity		Currer	nt year		Prior years		Overall ga		ain or loss	
			(a) Net income (line 2a)		Net loss ne 2b)	(c) Unallowed loss (line 2c)		(d) Gain		(e) Loss	
Total. Enter	on Part I, lines 2a, 2b, and 2c ▶										
Part VI	Use This Part if an Amour	it Is	Shown on F	Part II,	Line 9. S	ee instruc	tions.				
	Name of activity	Form or schedule and line number to be reported on (see instructions)		(a) Loss		(b) Ratio		(c) Special allowance		(d) Subtract column (c) from column (a).	
			E Ln 22	10,000.		1.00000000		10,000.		0.	
Total			•	10,000.		1.00		10,000.		0.	
Part VII	Allocation of Unallowed L	oss	ses. See instr							1	
	Name of activity		Form or sche and line nun to be reporte (see instruct	nber d on (a) l		_oss		(b) Ratio		(c) Unallowed loss	
Total					1.00						
Part VIII	Allowed Losses. See instru	ucti	ons.								
	Name of activity		Form or sche and line nun to be reporte (see instruct	nber d on (a) l		LOSS	(b) Unallowed loss		(c) Allowed loss		
Total											