IRS e-file Signature Authorization

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service

ERO must obtain and retain completed Form 8879. ▶ Go to www.irs.gov/Form8879 for the latest information.

Submission Identification Number (SID)

Taxpayer's name	Social security number
NITIN CHIKOTI	191-79-0556
Spouse's name	Spouse's social security number
SHILPA BILLA	379-53-3356
Part I Tax Return Information – Tax Year Ending December 31, 2021 (Er	nter year you are authorizing.)
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 88,406.
2 Total tax	. 2 5,345.
3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099	. 3 9,379.
4 Amount you want refunded to you	4 ,034.
5 Amount you owe	5
Part II Taxpayer Declaration and Signature Authorization (Be sure you get an	nd keep a copy of your return)

Under penalties of periury. I declare that I have examined a copy of the income tax return (original or amended) I am now authorizing, and to the best of my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above are the amounts from the income tax return (original or amended) I am now authorizing. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution to debit the entry to this account. This authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate the authorization. To revoke (cancel) a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation requests must be received no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I further acknowledge that the personal identification number (PIN) below is my signature for the income tax return (original or amended) I am now authorizing and, if applicable, my Electronic Funds Withdrawal Consent.

Taxpayer's PIN: check one box only

••	radifionizo		FBO firm name		E
X	Lauthorize	GLOBAL TAXES	LLC	to enter or generate my PIN	9

9	0	5	5	6	00 mV
Ent don	er fiv n't er	/e di nter a	gits, all ze	but ros	as my

6

as mv

3 3 3 5

Enter five digits, but don't enter all zeros

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 am now authorizing. Check this box only if you are entering your own PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Your signature

Spouse's PIN: check one box only

X I authorize GLOBAL TAXES LLC ERO firm name

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 am now authorizing. Check this box only if you are entering your own PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Spouse's signature ►	Date 🕨	
	Returns Only—continue below	
Part III Certification and Authentication – Practition	er 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	

I certify that the above numeric entry is my PIN, which is my signature for the electronic individual income tax return (original or amended) I am now authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am submitting this return in accordance with the requirements of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers of Individual Income Tax Returns.

ERO's signature >		Date 🕨	
ERO Must Retain This Form — See Instructions Don't Submit This Form to the IRS Unless Requested To Do So			
For Demonstral, Deduction Act Nation	and a second data we have a final way of the second	DEV 04/04/00 DDO	Farm 8870 (Day, 01 0001)

For Paperwork Reduction Act Notice, see your tax return instructions. BAA Date

to enter or generate my PIN

Department of the Treasury-Interr U.S. Individual Ind		,	²⁰	21	OMB No.	1545-00	074 IRS Use	Only—	Do not w	rite or staple	in this space.
Filing StatusSingleMarried filinCheck only one box.If you checked the MFS bo person is a child but not you	ox, enter the name		filing separatel ur spouse. If yo				ousehold (HOF QW box, ente	· -	_	, ,	. , . ,
Your first name and middle initial	Las	st name)					١	Your so	cial securi	ty number
NITIN	CF	IIKO	TI						191-'	79-055	6
If joint return, spouse's first name and middle ini	tial Las	st name	•					5	Spouse'	s social se	curity number
SHILPA	BJ	LLA							379-	53-335	6
Home address (number and street). If you have a	a P.O. box, see instr	ructions	3.				Apt. no.	F	Preside	ntial Electi	on Campaign
976 SCHILLING ROW AVE							302	0	Check h	nere if you,	or your
City, town, or post office. If you have a foreign a	ddress, also comple	ete spac	ces below.	Stat	te	Z	IP code		•		ntly, want \$3
COLLIERVILLE				TI	1		38017		0	ow will not	Checking a change
Foreign country name		For	eign province/sta	ite/count	y	F	oreign postal co			or refund	0
										You	Spouse
At any time during 2021, did you receive, se	ell, exchange, or c	otherw	ise dispose of	any fina	ncial inter	est in a	any virtual cu	rrenc	cy?	Yes	X No
Standard Someone can claim:	You as a depend	dent		use as	a depende	ent					
Deduction Spouse itemizes on a s	•		— .								
	•	<u> </u>			_						
Age/Blindness You: Were born before	January 2, 1957	<u> </u>		Spouse			before Janua	-		ls b	-
Dependents (see instructions):			(2) Social secu number	irity	(3) Relati to yo			•	alifies for (see instructions):		,
	t name			10 yc	Ju	Child tax cre		ait	Credit for of	ther dependents	
than four								-			
see instructions								-			
and check								-			
		())									
Attach 1 Wages, salaries, tips,		1(s) VV- 	2	• •				• •	1		96,385.
Sch. B if			4.1		axable inte				2b	-	
required.	3a		41.		ordinary div				3b	-	41.
4a IRA distributions .	4a				axable am				4b	-	
5a Pensions and annuiti					axable am			• •	5b	-	
Standard 6a Social security benefit					axable am			· .	6b		
Single or Capital gain or (loss).				•	, check he	re .			7		
Married filing 8 Other income from Separately,	·					• •		•••	8		-8,020.
\$12,550 9 Add lines 1, 2D, 3D, 4			•	ncome		• •		. 🕨	9		88,406.
Married filing jointly or Adjustments to incon									10	-	
Qualifying 11 Subtract line 10 from											88,406.
\$25,100 Iza Standard deduction				,	• •	12a	25,2	100	·		
Head of household, b Charitable contributio	-				uctions)	12b			_	_	
\$18,800 c Add lines 12a and 12b									120		25,100.
• If you checked any box under 13 Qualified business ind									13	-	05 100
Standard 14 Add lines 12c and 13									14		<u>25,100.</u>
see instructions. 15 Taxable income. Sul	otract line 14 from	n line 1	11. If zero or les	ss, ente	r-U				15		63,306.

For Disclosure, Privacy Act, and Paperwork Reduction Act Notice, see separate instructions.

Form **1040** (2021)

Form 1040 (2021	1)								Page 2
	16	Tax (see instructions). Check						16	7,195.
	17	Amount from Schedule 2, lin	ne3					17	
	18	Add lines 16 and 17						18	7,195.
	19	Nonrefundable child tax cree	dit or credit for c	ther depender	nts from Schedul	e8812		19	
	20	Amount from Schedule 3, lin	ne8					20	1,850.
	21	Add lines 19 and 20						21	1,850.
	22	Subtract line 21 from line 18	. If zero or less,	enter -0				22	5,345.
	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	5,345.
	25	Federal income tax withheld	from:			1 1			
	а	Form(s) W-2				25a 9	,379.		
	b	Form(s) 1099				25b			
	С	Other forms (see instructions	,			25c			
	d	Add lines 25a through 25c						25d	9,379.
If you have a	26	2021 estimated tax payment		• •	37			26	
qualifying child, attach Sch. EIC. [27a	Earned income credit (EIC)				27a			
		Check here if you were b							
		January 2, 2004, and you taxpayers who are at least a							
	b	Nontaxable combat pay elec	-	1 1					
	c	Prior year (2019) earned inco				-			
	28	Refundable child tax credit or		L	Schedule 8812	28			
	29	American opportunity credit				29			
	30	Recovery rebate credit. See				30			
	31	Amount from Schedule 3, lir				31			
	32	Add lines 27a and 28 throug					lits 🕨	32	
	33	Add lines 25d, 26, and 32. T		•				33	9,379.
Defend	34	If line 33 is more than line 24						34	4,034.
Refund	35a					•		35a	4,034.
Direct deposit?	►b	Amount of line 34 you want refunded to you. If Form 8888 is attached, check here							-
See instructions.	►d	Account number 4 8 3 0 5 3 1 7 0 9 3 1							
	36	Amount of line 34 you want a				36			
Amount	37	Amount you owe. Subtract	line 33 from line	24. For detail	s on how to pay,	see instructions	. 🕨	37	
You Owe	38	Estimated tax penalty (see in				38			
Third Party	Do	you want to allow another				? See			
Designee		structions	•			. —	omplete l	below.	× No
		signee's		Phone			onal identi		
		me 🕨		no. 🕨			ber (PIN)		
Sign		der penalties of perjury, I declare t ief, they are true, correct, and com							
Here		· · ·		Date	Your occupation				it you an Identity
	, 10	ur signature		Dale	Four occupation				N, enter it here
Joint return?					SOFTWARE	ENGINEER	(see	inst.) 🕨	
See instructions.	Sp	ouse's signature. If a joint return, I	ooth must sign.	Date	Spouse's occupa	tion			it your spouse an
Keep a copy for your records.	,							tity Prote inst.) ► 🛛	ection PIN, enter it here
,					STUDENT			ii ist.)	
		one no. (770)617-119		Email address	NITIN.A55	5@GMAIL.COM			Chaolifi
Paid			Preparer's signat			Date	PTIN		Check if:
Preparer		ATASAI PAVAN KUMAR DUDIPALLI		PAVAN KUM	AR DUDIPALLI	01/29/2022	P0247		Self-employed
Use Only		m's name ► GLOBAL TA			- 07 20041				678)965-9522
		m's address ► 2530 Pebb.		n Cummin	-		Firm	's EIN ►	
Go to www.irs.ge	ov/Forn	n1040 for instructions and the late	st information.		BAA	REV 01/24/22 PRO			Form 1040 (2021)

SCHEDULE	1
(Form 1040)	

Department of the Treasury

Additional Income and Adjustments to Income

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

2021 Attachment Sequence No. 01

OMB No. 1545-0074

Internal Revenu	ue Service		► GO	to www.irs.gov/FormT040 for instructions and th
Name(s) sh	iown on Fo	orn	n 1040, 1040-	-SR, or 1040-NR
NITIN C	HIKOTI	&	SHILPA B	ILLA

Your social security number 191-79-0556

Part 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, tru Schedule E		5	-8,020.
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	01-		
	Olympic and Paralympic medals and USOC prize money (see	8k		
1	instructions)	81		
m	Section 951(a) inclusion (see instructions)	8m		
n	Section 951A(a) inclusion (see instructions)	8n		
ο	Section 461(I) excess business loss adjustment	80		
р	Taxable distributions from an ABLE account (see instructions) .	8р		
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	-8,020.

For Paperwork Reduction Act Notice, see your tax return instructions.

Par	t II Adjustments to Income		
11	Educator expenses	11	
12	Certain business expenses of reservists, performing artists, and fee-basis government 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) . . . 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 Paralympicmedals and USOC prize money reported on line 81 24c		
d	Reforestation amortization and expenses		
е	Repayment of supplemental unemployment benefits under the Trade Act of 1974		
f	Contributions to section 501(c)(18)(D) pension plans 24f		
g	Contributions by certain chaplains to section 403(b) plans 24g		
h	Attorney fees and court costs for actions involving certain unlawful discrimination claims (see instructions)		
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 violations24i		
j	Housing deduction from Form 2555 . . . 24j		
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 to income. Enter here and on Form 1040 or 1040-SR, line 10, or Form 1040-NR, line 10a	26	

REV 01/24/22 PRO

Additional Credits and Payments

OMB No. 1545-0074 20

21

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

	Attach to Form 1040, 1040-SR, or 1040-NR. Revenue Service Go to www.irs.gov/Form1040 for instructions and the latest information.			Attachment Sequence No. 03		
Name	(s) shown on Fo	rm 1040, 1040-SR, or 1040-NR			cial se	ecurity number
		& SHILPA BILLA		191-7	79-05	56
Pa	rt I Nonrei	undable Credits				
1	Foreign tax	credit. Attach Form 1116 if required			1	
2	Credit for c Form 2441	hild and dependent care expenses from Form 2441,		Attach	2	
3	Education c	redits from Form 8863, line 19			3	1,850.
4	Retirement :	savings contributions credit. Attach Form 8880			4	
5	Residential	energy credits. Attach Form 5695			5	
6	Other nonre	fundable credits:				
а	General bus	iness credit. Attach Form 3800 6a	a			
b	Credit for pr	ior year minimum tax. Attach Form 8801 6	b			
С	Adoption cr	edit. Attach Form 8839 60	c			
d	Credit for th	e elderly or disabled. Attach Schedule R 6	3			
е	Alternative r	notor vehicle credit. Attach Form 8910 6	e			
f	Qualified plu	ug-in motor vehicle credit. Attach Form 8936 6	f			
g	Mortgage in	terest credit. Attach Form 8396 69	9			
h	District of Co	olumbia first-time homebuyer credit. Attach Form 8859	۱			
i	Qualified ele	ectric vehicle credit. Attach Form 8834 6	i			
j	Alternative for	uel vehicle refueling property credit. Attach Form 8911 6	i			
k	Credit to ho	Iders of tax credit bonds. Attach Form 8912 6	‹			
I	Amount on I	Form 8978, line 14. See instructions 6	1			
z	Other nonref	undable credits. List type and amount ►6	z			
7	Total other r	nonrefundable credits. Add lines 6a through 6z			7	
8	Add lines 1	through 5 and 7. Enter here and on Form 1040, 1040-Sl	R, or 104	0-NR,		
	line 20			• •	8	1,850.
				(cc	ontinu	ed on page 2)
For Pa	perwork Reducti	on Act Notice, see your tax return instructions.	REV 01/24/22	PRO S	Schedul	e 3 (Form 1040) 2021

erwork Reduction Act Notice, see your tax return instructions. REV 01/24/22 PRO Schedule 3 (Form 1040) 2021 BAA

Schedule 3 (Form 1040) 2021

Par	II 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	Credit for repayment of amounts included in income from earlier years	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	Other payments or refundable credits. List type and amount	13z		
14	Total other payments or refundable credits. Add lines 13a through	14		
15	Add lines 9 through 12 and 14. Enter here and on Form 1040, 1040 line 31	-SR, or 1040-NR,	15	
	BAA REV	01/24/22 PRO	Schedu	le 3 (Form 1040) 2021

SCHEDULE E	
(Form 1040)	(

Supplemental Income and Loss

OMB No. 1545-0074

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

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

Department of the Treasury Internal Revenue Service (99)

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

rrusts, REMICs, etc.) 2021 Attachment Sequence No. 13 Your social security number

Name(s) shown on return Your social security number											
NITIN CHIKOTI & SHILPA BILLA 191-79-0556											
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, rep	ort farr	n rental i	income	or loss fi	om Form 48	35 on page	2, line 4	0.	
A Did	you make any payme	nts in 2021 that would require you to	file F	orm(s) 1	099? S	ee instr	uctions .		. 🗆 '	Yes	X No
B If "`	Yes," did you or will yo	ou file required Form(s) 1099?							. 🗆 `	Yes [No
1a		each property (street, city, state, ZIF									
Α	HUZURABAD HYDE	RABAD TELANGANA IN 50546	58								
В											
С											
1b	Type of Property	2 For each rental real estate prop	isted		Fair Rental		Personal Use		QJV		
	(from list below)	above, report the number of fa	air rental and			Days 365		Days			
Α	3	personal use days. Check the if you meet the requirements to	to file as a A								
В		qualified joint venture. See inst	ructio	ns.	В						
С					С						
Туре о	of Property:										
1 Sing	le Family Residence	3 Vacation/Short-Term Rental	5 La	nd		7 Self-	Rental				
	i-Family Residence		6 Ro	yalties		8 Othe	r (describe)				
Incom	-	Properties:			Α		B	6		С	
			3			650.					
4	Royalties received .		4								
Expen											
			5								
		nstructions)	6								
		nance	7		1,	190.					
			8								
9			9								
10		ssional fees	10								
11	-		11		1,	300.					
		d to banks, etc. (see instructions)	12								
			13								
			14			140.					
			15		1,	900.					
			16			1.4.0					
			17		2,	140.					
		e or depletion	18								
19		lines 5 through 19	19 20		0	670					
			20		8,	670.					
		line 3 (rents) and/or 4 (royalties). If									
		instructions to find out if you must	21		_ 0	020.					
			21		ο,	020.					
22	on Form 8582 (see in	l estate loss after limitation, if any, structions)	22	(8 (20.)	(١	(
	-	eported on line 3 for all rental prope		(0,0	20.) 23a	(650.	(
		eported on line 4 for all royalty prop		• •	• •	23b		050.			
		eported on line 12 for all properties	Cruco			23c					
		eported on line 18 for all properties	• •	• •	• •	23d					
		eported on line 20 for all properties				23e		8,670.			
		e amounts shown on line 21. Do no	t inclu	 Ide anv	losses			. 24			
		sses from line 21 and rental real estate		-		nter tot:	al losses her		(8 -	020.
	Total rental real estate and royalty income or (loss). Combine lines 24 and 25. Enter the result										
		V, and line 40 on page 2 do not									
	Schedule 1 (Form 1040), line 5. Otherwise, include this amount in the total on line 41 on page 2 . 26 -8, 020.										

For Paperwork Reduction Act Notice, see the separate instructions.

Schedule E (Form 1040) 2021

Form **88663** Department of the Treasury Internal Revenue Service (99)

Name(s) shown on return

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.

Attachment Sequence No. 50 Your social security number

191-79-0556

OMB No. 1545-0074

2021

NITIN CHIKOTI & SHILPA BILLA

CAUTION

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.

For Pa	perwork Reduction Act Notice, see your tax return instructions.	AA	REV 01/24/2	22 PRO	Form 8863 (2021)
	instructions) here and on Schedule 3 (Form 1040), line 3			19	1,850.
19	Nonrefundable education credits. Enter the amount from line 7 of the Credit		· ·		
18	Multiply line 12 by line 17. Enter here and on line 1 of the Credit Limit Worksheet		,	18	1,850.
	places)			17	1.000
	• Less than line 16, divide line 15 by line 16. Enter the result as a decimal (rou				
	 Equal to or more than line 16, enter 1.000 on line 17 and go to line 18 				
17	If line 15 is:				
	qualifying widow(er)	16	20,000.		
16	Enter: \$20,000 if married filing jointly; \$10,000 if single, head of household, or				
	line 18, and go to line 19	15	91,594.		
15	Subtract line 14 from line 13. If zero or less, skip lines 16 and 17, enter -0- on	<u> </u>			
	the amount to enter	14	88,406.		
14	2555 or 4563, or you're excluding income from Puerto Rico, see Pub. 970 for				
14	Enter the amount from Form 1040 or 1040-SR, line 11. If you're filing Form	10	100,000.		
13	Enter: \$180,000 if married filing jointly; \$90,000 if single, head of household, or qualifying widow(er)	13	180,000.		
12	Multiply line 11 by 20% (0.20)		12	1,850.	
11	Enter the smaller of line 10 or \$10,000			11	9,249.
	zero, skip lines 11 through 17, enter -0- on line 18, and go to line 19			10	9,249.
10	After completing Part III for each student, enter the total of all amounts from a				
9	Subtract line 8 from line 7. Enter here and on line 2 of the Credit Limit Worksheet	•	,	9	
Part	II Nonrefundable Education Credits				
	on Form 1040 or 1040-SR, line 29. Then go to line 9 below.			8	
8	Refundable American opportunity credit. Multiply line 7 by 40% (0.40). Enter				
	skip line 8, enter the amount from line 7 on line 9, and check this box			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				
_	at least three places)				
	• Less than line 5, divide line 4 by line 5. Enter the result as a decimal (rot			6	
	• Equal to or more than line 5, enter 1.000 on line 6				
6	If line 4 is:		,		
	qualifying widow(er)	5			
5	Enter: \$20,000 if married filing jointly; \$10,000 if single, head of household, or				
•		4			
4	Subtract line 3 from line 2. If zero or less, stop ; you can't take any education				
	the amount to enter	3			
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				
	or qualifying widow(er)	2			
2	Enter: \$180,000 if married filing jointly; \$90,000 if single, head of household,				
1	After completing Part III for each student, enter the total of all amounts from all P	arts I	II, line 30	1	
Part					

Name(s) shown on return

Your social security number 191-79-0556

NITIN CHIKOTI & SHILPA BILLA

CAUT	Complete Part III for each student for whom opportunity credit or lifetime learning credit each student.					
Part	Student and Educational Institution Information	n. See	e instructions.			
	Student name (as shown on page 1 of your tax return) SHILPA BILLA	21	Student social security number (as shown on page 1 of your tax return) 379-53-3356			
22	Educational institution information (see instructions)		377 33 3330			
	Name of first educational institution	b	Name of second educational institution (if any)			
	UNIVERSITY OF HOUSTON CLEAR LAKE					
(1	 Address. Number and street (or P.O. box). City, town or post office, state, and ZIP code. If a foreign address, see instructions. 5000 GULF FWY RM 109 	(1	 Address. Number and street (or P.O. box). City, town or post office, state, and ZIP code. If a foreign address, see instructions. 			
	HOUSTON TX 77204					
(2	P) Did the student receive Form 1098-T from this institution for 2021? X Yes No	(2	2) Did the student receive Form 1098-T from this institution for 2021?			
(3	B) Did the student receive Form 1098-T from this institution for 2020 with box Yes No 7 checked?	(3	B) Did the student receive Form 1098-T from this institution for 2020 with box Yes No 7 checked?			
(4	I) 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.		4) Enter the institution's employer identification number (EIN) if you're claiming the American opportunity credit of if you checked "Yes" in (2) or (3). You can get the EIN from Form 1098-T or from the institution.			
	74-6001399					
23	Has the Hope Scholarship Credit or American opportunity credit been claimed for this student for any 4 tax years before 2021?		Yes — Stop! Go 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.	×	Yes — Go to line 25. No — Stop! Go to line 31 for this student.			
25	Did the student complete the first 4 years of postsecondary education before 2021? See instructions.	X	Yes — Stop! Go to line 31 for this I No — Go to line 26. student.			
26	Was the student convicted, before the end of 2021, of a felony for possession or distribution of a controlled substance?		Yes — Stop! Go to line 31 for this student. No — Complete lines 27 through 30 for this student.			
CAUT	you complete lines 27 through 30 for this student, don't o		e learning credit for the same student in the same year. If ete line 31.			
	American Opportunity Credit					
27	Adjusted qualified education expenses (see instructions). Dor					
28	Subtract \$2,000 from line 27. If zero or less, enter -0 28					
29			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					
	Lifetime Learning Credit					
31	Adjusted qualified education expenses (see instructions). Incl III, line 31, on Part II, line 10					
			Form 6603 (2021			