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.

Submission Identification Number (SID)

l'axpayer s name	Social security number
ANUDEEP DALE	790-47-0626
Spouse's name	Spouse's social security number
Part I Tax Return Information – Tax Year Ending December 31, 2021 (Enter	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 69,844.
2 Total tax	2 6,341.
3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099	3 11,929.
4 Amount you want refunded to you	4 6,988.
5 Amount you owe	5

Taxpayer Declaration and Signature Authorization (Be sure you get and keep a copy of your return) Part II

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

X lauthorize GLOBAL TAXES LLC to enter or generate my PIN

7	0	6	2	6	
	er fiv n't er				as

03/09/2022

my

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.

Your signature

Spouse's PIN: check one box only

I authorize

to enter or generate my PIN

Date

as mv Enter five digits, but don't enter all zeros

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 Da Da					 	 		
Practitioner PIN Method Returns Only—continu	e be	ow						
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.	5	8			 6 all zer	 9	89	

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 Fo Don't Submit This Form to the I	-		
For Paperwork Reduction Act Notice, see your tax return instructions.	BAA	REV 02/17/22 PRO	Form 8879 (Rev. 01-2021)

104	· ·	artment of the Treasury-Internal Revenue Servi S. Individual Income Tax		(99) urn	202	21	OMB No.	1545-0	074 IRS U	se Only	∕—Do not v	vrite or staple	in this space.
Filing Status Check only one box.	lf yo	Single D Married filing jointly uncharated the MFS box, enter the nion is a child but not your dependent	ame of	-	separately ouse. If you	. ,			`	,		, ,	low(er) (QW) he qualifying
Your first name	e and mi	ddle initial	Last na	me							Your so	ocial securi	ty number
ANUDEEP			DALE	3							790-	47-062	6
If joint return, s	pouse's	first name and middle initial	Last na	me							Spouse	's social se	curity number
Home address 5100 US		er and street). If you have a P.O. box, see LVD	instructio	ons.					Apt. no.		•	ential Electi here if you,	on Campaign
City, town, or p	oost offi	ce. If you have a foreign address, also co	omplete s	paces be	low.	Sta	te	Z	IP code				ntly, want \$3
SAN ANT				-		T	K	-	78240			o this fund. Iow will not	Checking a
Foreign countr	y name		F	Foreign pi	rovince/stat	e/count	ty	F	oreign posta	l code		x or refund	0
At any time du	iring 20	021, did you receive, sell, exchange,	, or othe	rwise di	spose of a	ny fina	ancial inter	est in	any virtual	curre	ncy?	Yes	X No
Standard Deduction		eone can claim: You as a de Spouse itemizes on a separate retur	n or you	i were a	dual-statu	s alien	_						
Age/Blindnes	s You:	Were born before January 2, 1	957	_ Are bl	ind S	pouse	: 📋 Was	born	before Jar		,	ls b	
Dependent				(2) 5	Social secur number	ity	(3) Relati					or (see instru	
If more	(1) Fi	rst name Last name		number			to you		Child tax c		redit	Credit for of	ther dependents
than four dependents,													
see instruction	s ——												
and check here ►													
	1	Wages, salaries, tips, etc. Attach F	Form(s)	N-2							. 1	<u> </u>	
Attach	2a	- · · ·	2a		· · · ·		axable inte	 aract		•	21		11,199.
Sch. B if	3a	· · -	3a				ordinary div		 Is	•	3k		
required.	4a		4a				axable am				. 4k		
	5a	Pensions and annuities	5a			bТ	axable am	iount .			. 5t	b	
Standard	6a	Social security benefits	6a			bТ	axable am	iount .			. 6k	b	
Deduction for-	7	Capital gain or (loss). Attach Sche	dule D if	f require	d. If not re	quired	, check he	ere .		▶ [7		
 Single or Married filing 	8	Other income from Schedule 1, lin	ie 10								. 8		-7,655.
separately, \$12,550	9	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7,	and 8. T	his is yo	ur total in	come					▶ 9		69,844.
 Married filing 	10	Adjustments to income from Sche	dule 1, l	ine 26							. 10)	
jointly or Qualifying	11	Subtract line 10 from line 9. This is	s your a	djusted	gross inc	ome					► <u>1</u> 1	I	69,844.
widow(er), \$25,100	12a	Standard deduction or itemized	deduct	ions (fro	m Schedu	le A)		12a	12	,55	0.		
Head of	b	Charitable contributions if you take	the star	ndard de	duction (se	e instr	uctions)	12b		30	0.		
household, \$18,800	С									-	·	с	12,850.
 If you checked any box under 	13	Qualified business income deduct											
Standard	14												12,850.
Deduction, see instructions.	15	Taxable income. Subtract line 14	ract line 14 from line 11. If zero or less, enter -0							. 15	5	56,994.	

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

Form **1040** (2021)

Form 1040 (202	1)									Page
	16	Tax (see instructions). Check	if any from Form	(s): 1 🗌 881	4 2 4972	3 🗌		16		8,283.
	17	Amount from Schedule 2, lin	ne3					17		
	18	Add lines 16 and 17						18		8,283.
	19	Nonrefundable child tax cree	dit or credit for c	other depender	nts from Schedul	e8812		19		
	20	Amount from Schedule 3, lin	ne8					20		1,942.
	21	Add lines 19 and 20						21		1,942.
	22	Subtract line 21 from line 18	. If zero or less,	enter -0				22		6,341.
	23	Other taxes, including self-e	1 2					23		0.
	24	Add lines 22 and 23. This is	your total tax				. 🕨	24		6,341.
	25	Federal income tax withheld	l from:			1 1				
	а	Form(s) W-2					,929.	-		
	b	Form(s) 1099				25b		-		
	С	Other forms (see instructions	,			25c		-		
	d	Add lines 25a through 25c						25d	1	1,929.
If you have a	26	2021 estimated tax payment			3.7	1 1	· ·	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						
	С	Prior year (2019) earned inco				-				
	28	Refundable child tax credit or		L	Schedule 8812	28				
	29	American opportunity credit	from Form 8863	3, line 8		29				
	30	Recovery rebate credit. See		-		30 1	,400.			
	31	Amount from Schedule 3, lin				31	-	1		
	32	Add lines 27a and 28 throug	h 31. These are	your total oth	er payments and	d refundable cred	lits 🕨	32		1,400.
	33	Add lines 25d, 26, and 32. T						33	1	3,329.
Refund	34	If line 33 is more than line 24	1, subtract line 2	4 from line 33.	This is the amou	int you overpaid		34		6,988.
neiuliu	35a	Amount of line 34 you want	refunded to you	J. If Form 8888	3 is attached, che	ck here		35a		6,988.
Direct deposit?	►b	Routing number $2 5 4 0 7 0 1 1 6$ C Type: X Checking Savings								
See instructions.	►d	Account number 6 7 8	8 0 8 3	7 2 1						
	36	Amount of line 34 you want a	applied to your	2022 estimate	ed tax 🕨	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	nstructions) .		🕨	38				
Third Party	Do	you want to allow another	person to disc	cuss this retu	rn with the IRS?	? See			_	
Designee	ins	tructions					•		X No	
		signee's ne ►		Phone no.			onal identif ber (PIN) 🕨			
0:			hat I have exemine						t of my kn	
Sign		der penalties of perjury, I declare t ief, they are true, correct, and com								
Here	Yo	ur signature		Date	Your occupation		If the	IRS sen	nt you an le	dentity
		5							N, enter it	here
Joint return?					SOFTWARE			inst.) 🕨		
See instructions. Keep a copy for	Sp	ouse's signature. If a joint return, I	both must sign.	Date	Spouse's occupat	tion			nt your spo	ouse an , enter it her
your records.								inst.) 🕨 🛛		
	Ph	one no. (703) 343-667	6	Email address	anudeen da	ale@gmail.co	 m			
		eparer's name	Preparer's signat		unddeep.de	Date	PTIN		Check if:	
Paid		PRIYA RAM SAGAR GUPTA TALLAM			GUPTA TALLAN	1 03/08/2022	P02082	2703		-employed
Preparer		n's name ► GLOBAL TAX		0110111(,, 2022				55-9522
Use Only		m's address ► 2530 Pebbl		n Cummin	q GA 30041			's EIN ►		L017196
Go to www.irs.a		1040 for instructions and the late			BAA	REV 02/17/22 PRO				1040 (202
30 10 WWW.113.91			et mornation.		DAA	NEV 02/11/22 PRU			10111	

SCHEDULE	1
(Form 1040)	

rtmont of the

Additional Income and Adjustments to Income

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

2021 Attachment Sequence No. 01 Your social security number

OMB No. 1545-0074

Internal Revenue		► Go te	o www.irs.gov/F
Name(s) sho	own on Fo	orm 1040, 1040-S	R, or 1040-NR
ANUDEEP	DALE		

-	04.	000101 000001	•••	
,	790	-47-0626		

Part I Additional Income

1	Taxable refunds, credits, or offsets of state and local income taxes		1	
2 a	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. A Schedule E		5	-7,655.
6	Farm income or (loss). Attach Schedule F		6	
7	Unemployment compensation		7	
8	Other income:			
а	Net operating loss)		
b	Gambling income			
С	Cancellation of debt			
d	Foreign earned income exclusion from Form 2555 8d ()		
е	Taxable Health Savings Account distribution			
f	Alaska Permanent Fund dividends			
g	Jury duty pay			
h	Prizes and awards			
i	Activity not engaged in for profit income			
j	Stock options			
k	the rental for profit but were not in the business of renting such			
	property			
I	Olympic and Paralympic medals and USOC prize money (see instructions) 81			
	Section 951(a) inclusion (see instructions)			
n	Section 951A(a) inclusion (see instructions)			
0	Section 461(I) excess business loss adjustment			
р	Taxable distributions from an ABLE account (see instructions) 8p			
Z	Other income. List type and amount			
9	Total other income. Add lines 8a through 8z		9	
10	Combine lines 1through 7 and 9.Enter here and on Form 1040, 1040-S1040-NR, line 8		10	-7,655.

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

Par	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)		
b	Deductible expenses related to income reported on line 8k from the rental of personal property engaged in for profit		
С	Nontaxable amount of the value of Olympic and Paralympicmedals and USOC prize money reported on line 8l 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 violations		
j	Housing deduction from Form 2555 . . . 24j		
k	Excess deductions of section 67(e) expenses from Schedule K-1 24k (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	
	BΔ REV 02/17/22 PRO	Sched	ule 1 (Form 1040) 2021

REV 02/17/22 PRO

Additional Credits and Payments

OMB No. 1545-0074 20

1

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

	Department of the Treasury ► Attach to Form 1040, 1040-SR, or 1040-NR. Internal Revenue Service ► Go to www.irs.gov/Form1040 for instructions and the latest information.				achment juence No. 03
	e(s) shown on Form 1040, 1040-SR, or 1040-NR				curity number
Par	IDEEP DALE		/90-	1/-062	.0
1				1	
2	Credit for child and dependent care expenses from			-	
_	Form 2441			2	
3	Education credits from Form 8863, line 19			3	1,942.
4	Retirement savings contributions credit. Attach Form 8	3880		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 893	36 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 .	6 i			
j	Alternative fuel vehicle refueling property credit. Attach	Form 8911 6j			
k	Credit to holders of tax credit bonds. Attach Form 891	2 6k			
I.	Amount on Form 8978, line 14. See instructions	6			
z	Other nonrefundable credits. List type and amount \blacktriangleright				
-		6z		-	
7 8	Total other nonrefundable credits. Add lines 6a throug Add lines 1 through 5 and 7. Enter here and on Form			7	
0		· · · · · · · · · · · ·	· · · · ·	8	1,942.
			(cc	ontinue	d on page 2)

For Paperwork Reduction Act Notice, see your tax return instructions. REV 02/17/22 PRO Schedule 3 (Form 1040) 2021 BAA

Schedule 3 (Form 1040) 2021

Par	t 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								
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	13z	14					
15	Add lines 9 through 12 and 14. Enter here and on Form 1040, 1040 line 31		15					
	BAA REV	02/17/22 PRO	Schedu	le 3 (Form 1040) 2021				

SCHEDUI	_E	Ε
(Form 104	0)	

Department of the Treasury Internal Revenue Service (99)

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.

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

Your soci	al security number	r
	Sequence No.	13
	Allachment	

6 12

Name(s)	shown on return							Your soci	al securit	y number
-	EEP DALE								7-062	
Part	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 farn	n rental in	icome o	or loss f	rom Form 483	15 on page	e 2, line 4	0.
A Dic	d you make any payments in 2021 that would require you to file Form(s) 1099? See instructions									
B If "	Yes," did you or will yo	ou file required Form(s) 1099?							. 🗌 Y	′es 🗌 No
_1a	Physical address of e	each property (street, city, state, ZIF	code)						
Α	ROAD NUMBER 3,	RADHA NAGAR GODARIGUNTA,	,KAKI	NADA	ANDHI	ra pf	ADESH IN	53300	3	
В										
С										
1b	Type of Property (from list below)	2 For each rental real estate propabove, report the number of fa	iir renta	al and			Rental Days	Persona Day		QJV
Α	3	personal use days. Check the if you meet the requirements to	QJV bo	ox only	Α		365	2,	0	
B		qualified joint venture. See inst	tructior	sa _ ns	B		303		0	
<u> </u>	+	· · · · · · · · · · · · · · · · · · ·		-	C					
	of Property:				U					
	le Family Residence	3 Vacation/Short-Term Rental	5 l ar	hd		7 Salf	Rental			
•	i-Family Residence	4 Commercial		valties			r (describe)			
Incom	•	Properties:		yanies	A	5 Othe	B			С
3	-		3			590.	В			0
4		· · · · · · · · · · · · · ·	4			550.				
Expen										
5			5							
6	0	nstructions)	6							
7	•		7		1.	755.				
8	÷		8		/	100.				
9			9							
10		essional fees	10							
11	•		11		1.	650.				
12	-	d to banks, etc. (see instructions)	12		/					
13			13							
14			14		1.	710.				
15	Supplies		15			620.				
16	Taxes		16		,					
17			17		1.	510.				
18		e or depletion	18		-/	020.				
19	Other (list)	·	19							
20	Total expenses. Add	lines 5 through 19	20		8.	245.				
21		line 3 (rents) and/or 4 (royalties). If			- / -					
21		instructions to find out if you must								
	file Form 6198		21		-7,	655.				
22		l estate loss after limitation, if any,		,			,			
	on Form 8582 (see in		22	(7,6	55.)	()	()
23a		eported on line 3 for all rental prope			•	23a		590.		
b		eported on line 4 for all royalty prop	erties		•	23b			-	
C		eported on line 12 for all properties	• •		•	23c			-	
d	Total of all amounts reported on line 18 for all properties									
		eported on line 20 for all properties	، ، با جيمانية	· · ·		23e	<u> </u>	3,245.		
24	· · · · · ·	e amounts shown on line 21. Do no				• •		. 24	(
25		sses from line 21 and rental real estate							(7,655.)
26		ate and royalty income or (loss).								
		V, and line 40 on page 2 do not								_7 655
Fer Di		 line 5. Otherwise, include this an Notice, see the separate instructions. 			PA	iirie 41	on page 2 -7,655	. 26		-7,655.

For Paperwork Reduction Act Notice, see the separate instructions.

Form **8863**

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.

2021 Attachment Sequence No. 50

OMB No. 1545-0074

Your social security number 790-47-0626

ANUDEEP DALE

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 02/17/2	22 PRO	Form 8863 (2021)
	instructions) here and on Schedule 3 (Form 1040), line 3			19	1,942.
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	1,942.
	places)			17	1.000
	• Less than line 16, divide line 15 by line 16. Enter the result as a decimal (rout				
	 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	10,000.		
16	Enter: \$20,000 if married filing jointly; \$10,000 if single, head of household, or				
	line 18, and go to line 19	15	20,156.		
15	Subtract line 14 from line 13. If zero or less, skip lines 16 and 17, enter -0- on		,		
	the amount to enter	14	69,844.		
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				
4.4		13	30,000.		
13	Enter: \$180,000 if married filing jointly; \$90,000 if single, head of household, or qualifying widow(er)	13	90,000.		
12	Multiply line 11 by 20% (0.20)			12	1,942.
11	Enter the smaller of line 10 or \$10,000		11	9,712.	
	zero, skip lines 11 through 17, enter -0- on line 18, and go to line 19			10	9,712.
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	(see	instructions) .	9	
Part					
0	on Form 1040 or 1040-SR, line 29. Then go to line 9 below.			8	
8	skip line 8, enter the amount from line 7 on line 9, and check this box Refundable American opportunity credit. Multiply line 7 by 40% (0.40). Enter				
	conditions described in the instructions, you can't take the refundable America			7	
7	Multiply line 1 by line 6. Caution: If you were under age 24 at the end of th				
	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:	L	1		
5	qualifying widow(er)	5			
5	Enter: \$20,000 if married filing jointly; \$10,000 if single, head of household, or			-	
4	Subtract line 3 from line 2. If zero or less, stop ; you can't take any education credit	4			
4		3		-	
	2555 or 4563, or you're excluding income from Puerto Rico, see Pub. 970 for	2			
3	Enter the amount from Form 1040 or 1040-SR, line 11. If you're filing Form				
	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	Refundable American Opportunity Credit				

Name(s) shown on return

ANUDEEP DALE

CAU	ion each student.	
Par	t III Student and Educational Institution Informatio	n. See instructions.
20	Student name (as shown on page 1 of your tax return) ANUDEEP	21 Student social security number (as shown on page 1 of your tax return)
	DALE	790-47-0626
22	Educational institution information (see instructions)	
á	a. Name of first educational institution NEW ENGLAND COLLEGE	b. Name of second educational institution (if any)
(Address. Number and street (or P.O. box). City, town or post office, state, and ZIP code. If a foreign address, see instructions. 98 BRIDGE ST HENNIKER NH 03242 	(1) Address. Number and street (or P.O. box). City, town or post office, state, and ZIP code. If a foreign address, see instructions.
(2) Did the student receive Form 1098-T X Yes □ No from this institution for 2021?	(2) Did the student receive Form 1098-T from this institution for 2021?
(3) Did the student receive Form 1098-T from this institution for 2020 with box ☐ Yes X No 7 checked?	(3) Did the student receive Form 1098-T from this institution for 2020 with box Ves No 7 checked?
(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.	(EIN) if you're claiming the American opportunity credit or
	02-0223955	
23	Has the Hope Scholarship Credit or American opportunity credit been claimed for this student for any 4 tax years before 2021?	
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, o other recognized postsecondary educational credential? See instructions.	$r^{1} \times Yes - Go to line 25.$ 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.	 Yes - Stop! X Go to line 31 for this Student.
26	Was the student convicted, before the end of 2021, of a felony for possession or distribution of a controlled substance?	A Yes - Stop! ☐ Go to line 31 for this student. No - Complete lines 27 through 30 for this student.
CAU	you complete lines 27 through 30 for this student, don't	lifetime learning credit for the same student in the same year. If complete line 31.
	American Opportunity Credit	
27	Adjusted qualified education expenses (see instructions). Do	
28	Subtract \$2,000 from line 27. If zero or less, enter -0	
29		29
30	If line 28 is zero, enter the amount from line 27. Otherwise, enter the result. Skip line 31. Include the total of all amounts	
	Lifetime Learning Credit	1 1
31	Adjusted qualified education expenses (see instructions). Inc III, line 31, on Part II, line 10	

Form **8863** (2021)