8879 Form

(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 securit	y number
TEJA SAI BOLLISETTI	126-29-	-4334
Spouse's name	Spouse's soc	ial security number
Part I Tax Return Information — Tax Year Ending December 31, 2022	 (Enter year you a	re 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 54,058.
2 Total tax		2 3,980.
3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3 7,882.
4 Amount you want refunded to you		4 3,902.
5 Amount you owe		of your return)
Under penalties of perjury, I declare that I have examined a copy of the income tax return (original or am		
to 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 authorized Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution according a payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial in authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to te payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellative business days prior to the payment (settlement) date. I also authorize the financial institutions involved 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 amend Electronic Funds Withdrawal Consent.	e the Ú.S. Treasury as unt indicated in the ta nstitution to debit the rminate the authoriza on requests must be to the processing of to the payment. I furt	nd its designated Financial ax preparation software for entry to this account. This ation. To revoke (cancel) a e received no later than 2 the electronic payment of ther acknowledge that the
Taxpayer's PIN: check one box only X I authorize GLOBAL TAXES LLC to enter or gen	9	4 3 3 4
X I authorize GLOBAL TAXES LLC to enter or gen	Ent	as my
signature on the income tax return (original or amended) I am now authorizing.	doi	n't enter all zeros
I will enter my PIN as my signature on the income tax return (original or amended) if you are entering your own PIN and your return is filed using the Practitioner PIN below.	I am now authorizii I method. The ERC	ng. Check this box only) must complete Part III
Your signature ► <u>Teja Sai Bollisetti</u> Dat	e ► 02/11/20	023
Spouse's PIN: check one box only		
I authorize to enter or gen	erate my PIN	as my
ERO firm name	Ent	ter five digits, but
signature on the income tax return (original or amended) I am now authorizing.		n't enter all zeros
I will enter my PIN as my signature on the income tax return (original or amended) if you are entering your own PIN and your return is filed using the Practitioner PIN below.		
Spouse's signature ▶ Dat	te ▶	
Practitioner PIN Method Returns Only—continue b	oelow	
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.	2 2 2 4 9 Don't enter	6 6 1 9 8 9 er all zeros
I certify that the above numeric entry is my PIN, which is my signature for the electronic individual included 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 Provided	n submitting this retu	irn in accordance with the
ERO's signature ▶ Dat	re ▶	
ERO Must Retain This Form — See Instruction		
Don't Submit This Form to the IRS Unless Requested	i i o Do So	

Department of the Treasury—Internal Revenue Service U.S. Individual Income Tax Return

2022

OMB No. 1545-0074

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

Filing Status Check only			_	ed filing separately (N		_		•		spou	ifying sun ıse (QSS)	-	
one box.		u checked the MFS box, enter the nation is a child but not your dependent		our spouse. If you ch	necke	ed the HOH or	r QSS	box, ente	er the	child's	name if th	ne qualifying	
Your first name	and mi	ddle initial	Last na	me					Y	our so	cial securit	ty number	
TEJA SAI	Ε		BOLL	ISETTI					1	126-29-4334			
		first name and middle initial		Last name Spouse's so					s social se	curity number			
Home address	(numbe	er and street). If you have a P.O. box, see	instruction	ons.				Apt. no.	P	reside	ntial Election	on Campaign	
7859 LIV	/ERP(OOL LN								Check here if you, or your			
City, town, or p	ost offi	ce. If you have a foreign address, also co	mplete s	paces below.	Stat	е	ZIP	ode	- 1	•	0,	ntly, want \$3 Checking a	
IRVING					TX		750	063			ow will not		
Foreign country	y name		F	Foreign province/state/o	count	/	Forei	gn postal co	ode y	our tax	or refund.	_	
District	۸٠	ti di 0000 did (a)	-: (//-	\ II	∐ You	Spouse	
Digital Assets		ny time during 2022, did you: (a) rec ange, gift, or otherwise dispose of a	•	· · · · · · · · · · · · · · · · · · ·			-				☐ Yes	⊠ No	
Standard		eone can claim: You as a de		<u>_</u>				, (
Deduction	_	Spouse itemizes on a separate retur				'							
Age/Blindness	You:	☐ Were born before January 2, 1	958 [Are blind Spo	use:	☐ Was bor	rn bef	ore Janua	ary 2,	1958	☐ Is bl	ind	
Dependents	s (see	instructions):		(2) Social security		(3) Relationsh	nip (4) Check th	ne box	if qualif	ies for (see	instructions):	
If more	(1) Fi	rst name Last name		number		to you		Child to	ax crec	lit	Credit for ot	her dependents	
than four											[
dependents, see instructions	s ——										l		
and check	, —							L					
here L]							L		\dashv	<u> </u>		
Income	1a	Total amount from Form(s) W-2, b								1a		61,354.	
Attach Form(s)	b	Household employee wages not re		` '						1b			
W-2 here. Also	C	Tip income not reported on line 1a (see instructions)						1c					
attach Forms	d	Medicaid waiver payments not reported on Form(s) W-2 (see instructions)						1d					
W-2G and 1099-R if tax	e	Taxable dependent care benefits f								1e			
was withheld.	f	Employer-provided adoption bene								1f			
If you did not	g	Wages from Form 8919, line 6					1g						
get a Form W-2, see	h	Other earned income (see instructions)						1h		0.			
instructions.	i	Nontaxable combat pay election (s	see instr	uctions)		<u>1i</u>				-	1 ,	61,354.	
	<u>z</u>	Add lines 1a through 1h	 		L T.					1z		31,334.	
Attach Sch. B if required.	2a	· —	2a 3a			axable interest rdinary divide				2b 3b			
	3a					axable amoun				4b			
Dhamaland D	4a 5a		4a 5a			axable amoun				5b	_		
Standard Deduction for—	6a		6a			axable amoun				6b			
Single or	C	If you elect to use the lump-sum e								OD			
Married filing separately,	7	Capital gain or (loss). Attach Sche							. 1	7			
\$12,950 Married filing	8	Other income from Schedule 1, lin		· · · · · · ·					. Ш	8	<u> </u>	-7 , 296.	
jointly or	9	•								9		54 , 058.	
surviving spouse, 10 Adjustments to income from Schedule 1 line 26					10	†	<u>, , , , , , , , , , , , , , , , , , , </u>						
\$25,900 • Head of	11	Subtract line 10 from line 9. This is								11	1	54 , 058.	
household,	12	Standard deduction or itemized	•	-						12		12,950.	
\$19,400 If you checked	13	Qualified business income deduct		,	,					13	1	,	
any box under Standard	14		13					14		12,950.			
Deduction,	15	Subtract line 14 from line 11. If zer								15		41,108.	
see instructions.				_									

Form 1040 (2022	2)										Page 2
Tax and	16	Tax (see instructions). Check	if any from Form	(s): 1 881	4 2 🗌 4972	3 🗌			16		4,730.
Credits	17	Amount from Schedule 2, lin	ne3						17		
	18	Add lines 16 and 17							18		4,730.
	19	Child tax credit or credit for	other dependen	ts from Sched	ule 8812				19		
	20	Amount from Schedule 3, lin	ne 8						20		750.
	21	Add lines 19 and 20							21		750.
	22	Subtract line 21 from line 18	B. If zero or less,	enter -0					22		3,980.
	23	Other taxes, including self-e	employment tax,	from Schedule	e 2, line 21				23		0.
	24	Add lines 22 and 23. This is	your total tax						24		3,980.
Payments	25	Federal income tax withheld									
-	а	Form(s) W-2				25a	-	7 , 882	· .		
	b	Form(s) 1099				25b					
	С	Other forms (see instruction	s)			25c					
	d	Add lines 25a through 25c				·			25d]	7,882.
If you have a	26	2022 estimated tax paymen	ts and amount a	pplied from 20)21 return				26		
qualifying child,	27	Earned income credit (EIC)				27					
attach Sch. EIC.	28	Additional child tax credit fro	m Schedule 8812			28					
	29	American opportunity credit	from Form 8863	3, line 8 . .		29					
	30	Reserved for future use .				30					
	31	Amount from Schedule 3, lin				31					
	32	Add lines 27, 28, 29, and 31	. These are your	total other pa	ayments and refu	ındable	credits		32]	
	33	Add lines 25d, 26, and 32. T	hese are your to	tal payments					33		7,882.
Refund	34	If line 33 is more than line 24	4, subtract line 2	4 from line 33.	This is the amou	nt you c	verpaid		34		3,902.
neiulia	35a	Amount of line 34 you want	refunded to you	ا. If Form 8888	is attached, che	ck here		[35a		3,902.
Direct deposit?	b	Routing number 0 5 1	0 0 0 0	1 7	c Type: 🛛	Check	ing 🗌	Saving	s		
See instructions.	d	Account number 4 3 5	0 3 8 6	3 8 1 !	5 8						
	36	Amount of line 34 you want	applied to your	2023 estimate	ed tax	36					
Amount You Owe	37	Subtract line 33 from line 24 For details on how to pay, g							37		
	38	Estimated tax penalty (see i				38			0,		
Third Party	Do	you want to allow another	person to disc	cuss this retu		See	7 v oo 0	omplot	e below.	⊠ No	
Designee		signee's		Phone		• 1			ntification	Z NC	,
		me		no.				ber (PIN			
Sign		der penalties of perjury, I declare lief, they are true, correct, and com									
Here	Yo	ur signature		Date	Your occupation				the IRS se		•
Joint return?		a Sai Bollisetti		02/11/2023	SOFTWARE E	ENGIN	EER	(s	rotection F ee inst.)		
See instructions. Keep a copy for your records.	Šp	ouse's signature. If a joint return,	both must sign.	Date	Spouse's occupati	ion		Id	the IRS se entity Prot ee inst.)		oouse an N, enter it here
	Ph	one no. (703) 303-363	9	Email address	TEJASAI.BOLLI	SETTI(GMAIL.C	OM			
Paid	Pre	eparer's name	Preparer's signat	ure		Date		PTIN		Check i	if:
Paid Preparer	SYAM	M PRIYA RAM SAGAR GUPTA TALLAM	SYAM PRIYA	RAM SAGAR	GUPTA TALLAM	02/1	1/2023	P020	82703	Sel	f-employed
Use Only	Fin	m's name GLOBAL TA	XES LLC	· ·				Р	none no.	(678)9	65-9522
	Firm's address 245 ROONEY CT E BRUNSWICK NJ 08816 Firm's EIN 84-317196				3171965						

Go to www.irs.gov/Form1040 for instructions and the latest information.

REV 02/05/23 PRO

BAA

Form **1040** (2022)

SCHEDULE 1 (Form 1040)

Additional Income and Adjustments to Income

OMB No. 1545-0074

2022

Attachment
Sequence No. 01

Department of the Treasury Internal Revenue Service

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						
126-20	-1331					

TEJA	SAI BOLLISETTI	126-	29-43	334
Par				
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 Sc		5	- 7 , 296.
6	Farm income or (loss). Attach Schedule F		6	
7	Unemployment compensation		7	
8	Other income:			
а	Net operating loss)	
b	Gambling			
С	Cancellation of debt			
d	Foreign earned income exclusion from Form 2555 8d ()	
е	Income from Form 8853			
f	Income from Form 8889			
g	Alaska Permanent Fund dividends			
h	Jury duty pay			
i	Prizes and awards			
j	Activity not engaged in for profit income			
k	Stock options			
- 1	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 81			
m	Olympic and Paralympic medals and USOC prize money (see			
	instructions)			
n	Section 951(a) inclusion (see instructions)			
0	Section 951A(a) inclusion (see instructions)			
р	Section 461(I) excess business loss adjustment			
q	Taxable distributions from an ABLE account (see instructions) 8q			
r	Scholarship and fellowship grants not reported on Form W-2 8r			
S	Nontaxable amount of Medicaid waiver payments included on Form			
	1040, line 1a or 1d)	
t	Pension or annuity from a nonqualifed deferred compensation plan or			
	a nongovernmental section 457 plan 8t			
u	Wages earned while incarcerated			
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 1040, 1040-SR, or 1040-SR, o	40-NR, line 8	10	-7,296.

Schedule 1 (Form 1040) 2022 Page **2**

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	1
24	Other adjustments:		
а	Jury duty pay (see instructions)	-	
b	Deductible expenses related to income reported on line 8l from the		
	rental of personal property engaged in for profit	-	
С	Nontaxable amount of the value of Olympic and Paralympic medals and USOC prize money reported on line 8m		
٦	and USOC prize money reported on line 8m	-	
d	Repayment of supplemental unemployment benefits under the Trade	+	
е	Act of 1974		
f	Contributions to section 501(c)(18)(D) pension plans	\dashv	
a a	Contributions by certain chaplains to section 403(b) plans	1	
_	Attorney fees and court costs for actions involving certain unlawful	1	
••	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		
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form		
	1041)		
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		
			(=

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

2022

Attachment Sequence No. 03

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

Your social security number 126-29-4334

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 244Form 2441	1, lin 	e 11. Attach	2	
3	Education credits from Form 8863, line 19			3	750.
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	6 l			
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 line 20			8	750.

Schedule 3 (Form 1040) 2022 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	Credit for qualified sick and family leave wages paid in 2022 from Schedule(s) H for leave taken before April 1, 2021	13b		
С	Reserved for future use	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	Reserved for future use	13g		
h	Credit for qualified sick and family leave wages paid in 2022 from Schedule(s) H for leave taken after March 31, 2021, and before October 1, 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	

SCHEDULE E (Form 1040)

Supplemental Income and Loss

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

Department of the Treasury Internal Revenue Service

Attach to Form 1040, 1040-SR, 1040-NR, or 1041, Go to www.irs.gov/ScheduleE for instructions and the latest information. Attachment Sequence No. 13

OMB No. 1545-0074

Name(s) shown on return Your social security number 126-29-4334 TEJA SAI BOLLISETTI 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, report farm rental income or loss from Form 4835 on page 2, line 40. Did you make any payments in 2022 that would require you to file Form(s) 1099? See instructions ☐ Yes
☒ No В ☐ Yes ☐ No 1a Physical address of each property (street, city, state, ZIP code) H.NO:4-160/202, FLAT NO:202 SECUNDERABAD TELANGANA IN 500094 Α В С Type of Property 1b For each rental real estate property listed **Fair Rental** Personal Use QJV (from list below) above, report the number of fair rental and **Days Days** personal use days. Check the QJV box only Α Α 365 0 if you meet the requirements to file as a В В qualified joint venture. See instructions. C C Type of Property: 3 Vacation/Short-Term Rental 1 Single Family Residence 5 Land 7 Self-Rental 8 Other (describe) 2 Multi-Family Residence 4 Commercial 6 Royalties **Properties:** С Income: Α В 607. 3 Rents received . 4 Royalties received 4 **Expenses:** 5 Advertising 5 6 Auto and travel (see instructions) 6 1,421. 7 Cleaning and maintenance. 7 8 8 Commissions 9 Insurance 9 10 10 Legal and other professional fees 11 Management fees 11 1,914. 12 12 Mortgage interest paid to banks, etc. (see instructions) 13 13 14 Repairs 14 1,325. 15 15 1,481. Supplies 16 16 1,762. 17 Utilities 17 18 Depreciation expense or depletion 18 19 19 Other (list) Total expenses. Add lines 5 through 19 20 20 7,903. Subtract line 20 from line 3 (rents) and/or 4 (royalties). If 21 result is a (loss), see instructions to find out if you must -7,296. 21 22 Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions) 7,296.) 23a Total of all amounts reported on line 3 for all rental properties 23a 607. Total of all amounts reported on line 4 for all royalty properties 23b **c** Total of all amounts reported on line 12 for all properties . . 23c **d** Total of all amounts reported on line 18 for all properties . . 23d 7,903. e Total of all amounts reported on line 20 for all properties . 23e 24 Income. Add positive amounts shown on line 21. Do not include any losses . . . 24 25 7,296. 25 Losses. Add royalty losses from line 21 and rental real estate losses from line 22. Enter total losses here 26 Total rental real estate and royalty income or (loss). Combine lines 24 and 25. Enter the result here. If Parts II, III, IV, and line 40 on page 2 do not apply to you, also enter this amount on

Schedule 1 (Form 1040), line 5. Otherwise, include this amount in the total on line 41 on page 2

-7,296.

Education Credits (American Opportunity and Lifetime Learning Credits)

OMB No. 1545-0074

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

Attach to Form 1040 or 1040-SR. Go to www.irs.gov/Form8863 for instructions and the latest information. Attachment Sequence No. **50**

TEJA SAI BOLLISETTI

Your social security number 126-29-4334



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.

Part	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 surviving spouse	2				
3	Enter the amount from Form 1040 or 1040-SR, line 11. But if you're filing Form 2555 or 4563, or you're excluding income from Puerto Rico, see Pub. 970 for the amount to enter instead	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 surviving spouse	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 (rou at least three places)		J	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 skip line 8, enter the amount from line 7 on line 9, and check this box	an op	portunity credit;	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	the a	mount here and	8		
Part	II Nonrefundable Education Credits					
9	Subtract line 8 from line 7. Enter here and on line 2 of the Credit Limit Worksheet	(see	instructions) .	9		
10						
	zero, skip lines 11 through 17, enter -0- on line 18, and go to line 19	10	3,750.			
11	Enter the smaller of line 10 or \$10,000	11	3,750. 750.			
12	Multiply line 11 by 20% (0.20)		 I	12	/50.	
13	qualifying surviving spouse	13	90,000.			
14	Enter the amount from Form 1040 or 1040-SR, line 11. But if you're filing Form 2555 or 4563, or you're excluding income from Puerto Rico, see Pub. 970 for the amount to enter instead	14	54,058.			
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	35 , 942.			
16	Enter: \$20,000 if married filing jointly; \$10,000 if single, head of household, or qualifying surviving spouse	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 (rounded to at least three places)				1.000	
18	Multiply line 12 by line 17. Enter here and on line 1 of the Credit Limit Worksheet	•	,	18	750.	
19	Nonrefundable education credits. Enter the amount from line 7 of the Credit instructions) here and on Schedule 3 (Form 1040), line 3		,	19	750.	
	induction, note and on contead of the one of the original of t			10	/50•	

Name(s) shown on return	Your social security number
TEJA SAI BOLLISETTI	126-29-4334



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 III Student and Educational Institution Information. See instructions.			
	Student name (as shown on page 1 of your tax return)	21 Student social security number (as shown on page 1 of	
	TEJA SAI	your tax return)	
	BOLLISETTI	126-29-4334	
22	Educational institution information (see instructions)		
а	Name of first educational institution	b. Name of second educational institution (if any)	
	CAMPBELLSVILLE UNIVERSITY		
(-	 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.O. box). City, town or post office, state, and ZIP code. If a foreign address, see instructions.	
	1 University Dr		
	CAMPBELLSVILLE KY 42718		
(2	2) Did the student receive Form 1098-T from this institution for 2022? X Yes □ No	(2) Did the student receive Form 1098-T ☐ Yes ☐ No from this institution for 2022?	
(3	B) Did the student receive Form 1098-T from this institution for 2021 with box ☐ Yes ☒ No 7 checked?	(3) Did the student receive Form 1098-T from this institution for 2021 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 or if you checked "Yes" in (2) or (3). You can get the EIN from Form 1098-T or from the institution.	
	61-0469267		
23	Has the American opportunity credit been claimed for this student for any 4 prior tax years?	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 2022 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.	
25	Did the student complete the first 4 years of postsecondary education before 2022? See instructions.	Yes — Stop! Go to line 31 for this student. No — Go to line 26.	
26	Was the student convicted, before the end of 2022, 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	ifetime learning credit for the same student in the same year. If complete 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		
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 Parts III, line 30, on Part I, line 1 . 30	
	Lifetime Learning Credit		
31	Adjusted qualified education expenses (see instructions). Incl	ude the total of all amounts from all Parts 3.750.	