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 securit	v novembou
PAVANKUMAR KOLANUPAKA Spouse's name	665-57- Spouse's soc	al security number
·	(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 40 404
1 Adjusted gross income		1 40,424. 2 1,092.
 Total tax		
4 Amount you want refunded to you		3 5,119. 4 4,027.
5 Amount you owe		5
Part II Taxpayer Declaration and Signature Authorization (Be sure you get	and keep a copy	
Under penalties of perjury, I declare that I have examined a copy of the income tax return (original or arm my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part return (original or amended) I am now authorizing. I consent to allow my intermediate service provider, 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 accorpayment 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 cancellating 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.	I above are the amount ansmitter, or electron for rejection of the trace the U.S. Treasury are untindicated in the tangent and the authorization requests must be in the processing of the payment. I furt	nunts from the income tax onic return originator (ERO) ansmission, (b) the reason and its designated Financial or preparation software for entry to this account. This tion. To revoke (cancel) a received no later than 2 the electronic payment of the racknowledge that the
Taxpayer's PIN: check one box only		
 X I authorize GLOBAL TAXES LLC to enter or gen 	perate my PIN	3 6 7 1 as my
ERO firm name signature on the income tax return (original or amended) I am now authorizing.	Ent	er five digits, but '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.		
Your signature ▶ Dat	re ▶	
Spouse's PIN: check one box only		
· _	avata my DIN	
I authorize to enter or gen		er five digits, but
signature on the income tax return (original or amended) I am now authorizing.		'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	re >	
Practitioner PIN Method Returns Only—continue I	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.	- - - - -	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 incauthorized 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 <i>e-file</i> Provide	n submitting this retu	rn in accordance with the
	e ▶	
ERO Must Retain This Form — See Instruction Don't Submit This Form to the IRS Unless Requested		

E 1040 Department of the Treasury—Internal Revenue Service U.S. Individual Income Tax Return



OMB No. 1545-007

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

Filing Status	S X S	Single $\ \ \square$ Married filing jointly $\ \ \ [$	Marrie	ed filing separately	(MFS)	Head of	household (Ho	DH)		ifying surv	iving
Check only one box.	If vo	ou checked the MFS box, enter the I	name of v	your engues If you	ı chack	ad the HOH o	r OSS hav lan	tar tha		ise (QSS)	e aualifyina
one box.		son is a child but not your depender		our spouse. If you	CHECK		QOO DOX, GI	ter trie	Ciliu S	name ii uii	5 qualifyirig
Your first name			Last nai	me					our so	cial security	v number
PAVANKUN				NUPAKA					665-57-3671		
		s first name and middle initial	Last nai					-			urity number
ii joint rotairi, o	podoo	s inot harro ana miadio imida	Lastria					`	pouco	5 000iai 000	arity manibor
Home address	(numbe	er and street). If you have a P.O. box, se	e instructio	ons.			Apt. no.	-	Presider	ntial Electio	n Campaign
	•	LAGO CT STE.					212	+	Check here if you, or y		
		ce. If you have a foreign address, also c	omplete s	paces below.	Sta	te	ZIP code				tly, want \$3
ROWLETT					T	ζ	75089			this fund. (ow will not (Checking a
Foreign country	y name		F	Foreign province/sta	te/count	ty	Foreign postal			or refund.	silarigo
										You	Spouse
Digital	At ar	ny time during 2022, did you: (a) red	ceive (as	a reward. award.	or pavr	ment for prope	rtv or service	s): or (b) sell.		
Assets		lange, gift, or otherwise dispose of					-			Yes	⊠ No
Standard	Som	eone can claim: You as a d	ependent	Your spo	use as	a dependent					
Deduction		Spouse itemizes on a separate retu	rn or you								
Age/Blindness	Vau	: Were born before January 2,	1050	Are blind S	pouse	. Mac bo	rn before Jan	ion ()	1050	☐ Is bli	
			1900 _		•		1				instructions):
•	s (see instructions): (1) First name Last name			(2) Social security number		(3) Relationsh to you	"P ' '	tax cred		•	er dependents
If more than four	(1)	Last name				. ,	Offilia		ant		
dependents,	_							H			╬──
see instruction	s —							H			-
and check here [1 —							\vdash			
	1a	Total amount from Form(s) W-2, I	nox 1 (see	e instructions)					1a	1 4	5,183.
Income	b	Household employee wages not	,	,					1b		<u> </u>
Attach Form(s)	c	Tip income not reported on line 1							1c		
W-2 here. Also	d	Medicaid waiver payments not re	•	,					1d		
attach Forms W-2G and	е	Taxable dependent care benefits from Form 2441, line 26					1e				
1099-R if tax	f	Employer-provided adoption ben			29 .				1f		
was withheld.	g	Wages from Form 8919, line 6.							1g		
If you did not get a Form	h	Other earned income (see instruc							1h		0.
W-2, see	i		ontaxable combat pay election (see instructions)								
instructions.	z	Add lines 1a through 1h							1z	4	5,183.
Attach Sch. B	2a	Tax-exempt interest	2a		b T	axable interes	t		2b		
if required.	3a	Qualified dividends	3a		b C	ordinary divide	nds		3b		
	4a	IRA distributions	4a		b T	axable amoun	t		4b		
Standard	5a	Pensions and annuities	5a		b T	axable amoun	t		5b		
Deduction for—	6a	Social security benefits	6a		b T	axable amoun	t		6b		
Single or Married filing	С	If you elect to use the lump-sum	election r	nethod, check he	re (see	instructions)					
separately, \$12,950	7	Capital gain or (loss). Attach Sche	Capital gain or (loss). Attach Schedule D if required. If not required, check here					7			
Married filing	8	Other income from Schedule 1, li	ne 10 .						8	_	4,759.
jointly or Qualifying	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7	7, and 8.	This is your total	incom	e			9	4	0,424.
surviving spouse, \$25,900	10	Adjustments to income from Scho	edule 1, l	ine 26					10		
Head of	11	Subtract line 10 from line 9. This	is your a c	djusted gross inc	ome				11	4	0,424.
household, \$19,400	12	Standard deduction or itemized	l deducti	ons (from Schedu	ıle A)				12	1	2,950.
If you checked	13	Qualified business income deduc							13		
any box under Standard	14	Add lines 12 and 13							14	1 1	2,950.
Deduction, see instructions.	15	Subtract line 14 from line 11. If zero or less, enter -0 This is your taxable income						15	2	27,474.	

	2)			Page 2
ax and	16	Tax (see instructions). Check if any from Form(s): 1 🗌 8814 2 🗍 4972 3 🗍	16	3,092.
redits	17	Amount from Schedule 2, line 3	17	
	18	Add lines 16 and 17	18	3,092.
	19	Child tax credit or credit for other dependents from Schedule 8812	19	
	20	Amount from Schedule 3, line 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	1,092.
	23	Other taxes, including self-employment tax, from Schedule 2, line 21	23	0.
	24	Add lines 22 and 23. This is your total tax	24	1,092.
ayments	25	Federal income tax withheld from:		
	а	Form(s) W-2		
	b	Form(s) 1099		
	С	Other forms (see instructions)		
	d	Add lines 25a through 25c	25d	5,119.
ou have a	26	2022 estimated tax payments and amount applied from 2021 return	26	
alifying child,	27	Earned income credit (EIC)		
ach Sch. EIC.	28	Additional child tax credit from Schedule 8812		
	29	American opportunity credit from Form 8863, line 8		
	30	Reserved for future use		
	31	Amount from Schedule 3, line 15		
	32	Add lines 27, 28, 29, and 31. These are your total other payments and refundable credits	32	
	33	Add lines 25d, 26, and 32. These are your total payments	33	5,119.
efund	34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid	34	4,027.
Jidiid	35a	Amount of line 34 you want refunded to you . If Form 8888 is attached, check here	35a	4,027.
ect deposit?	b	Routing number 1 2 4 0 0 1 5 4 5 c Type: X Checking Savings		
e instructions.	d	Account number 5 2 3 1 0 2 0 6 6		
	36	Amount of line 34 you want applied to your 2023 estimated tax		
mount	37	Subtract line 33 from line 24. This is the amount you owe .		
ou Owe		For details on how to pay, go to www.irs.gov/Payments or see instructions	37	
	38	Estimated tax penalty (see instructions)		
nird Party esignee		you want to allow another person to discuss this return with the IRS? See tructions	elow.	X No
	Des	signee's Phone Personal identif	ication _	

Third Party Designee	Do you want to allow another person to discuss this return with the IRS? See instructions						×	No			
	Designee's name			Phone no.			onal identification ber (PIN)		Ш	工	\top
Sign	Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.										
Here	Your signature			Date	Your occupation		If the IRS se Protection P	,			y
Joint return?					SOFTWARE E	(see inst.)	П	Т	П	П	
See instructions. Keep a copy for your records.	Spouse's signature. If a joint return, both must sign.			Date	The state of the s			ent your spouse an otection PIN, enter it he			
	Phone no. (929) 422-703	6	Email address	PAVANKPK040	04@GMAIL.CO	OM				
D-1-I	Preparer's name		Preparer's signa	ture		Date	PTIN	Ch	eck if:		
Paid	OVAN DDTVA DAN O	ACAD CUDMA MALLAM	OVAM DDTVA	D 3 M C 3 C 3 D	CIIDMA MATTAM	00/00/0000	D00000700		Colf	omole	

SYAM PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA RAM SAGAR GUPTA TALLAM

GLOBAL TAXES LLC

Use Only 245 ROONEY CT E BRUNSWICK NJ 08816 Firm's address Go to www.irs.gov/Form1040 for instructions and the latest information.

Firm's name

Preparer

BAA

REV 01/28/23 PRO

02/02/2023

P02082703

Firm's EIN

88-2145487 Form **1040** (2022)

Phone no. (678) 965-9522

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

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

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

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

Your social security number
665-57-3671

Par	t I Additional Income			
1	Taxable refunds, credits, or offsets of state and local income taxes		1	
2a	Alimony received		2a	
b	Date of original divorce or separation agreement (see instructions):			
3	Business income or (loss). Attach Schedule C		3	
4	Other gains or (losses). Attach Form 4797		4	
5	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Atta		5	-4,759.
6	Farm income or (loss). Attach Schedule F		6	
7	Unemployment compensation		7	
8	Other income:			
а	Net operating loss	8a ()		
b	Gambling	8b		
С	Cancellation of debt	8c		
d	Foreign earned income exclusion from Form 2555	8d ()		
е	Income from Form 8853	8e	-	
f	Income from Form 8889	8f		
g	Alaska Permanent Fund dividends	8g		
h	Jury duty pay	8h		
į	Prizes and awards	8i	-	
j	Activity not engaged in for profit income	8j	-	
	Stock options	8k	-	
ı	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)	8m		
n	Section 951(a) inclusion (see instructions)	8n		
0	Section 951A(a) inclusion (see instructions)	80		
р	Section 461(I) excess business loss adjustment	8p		
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	8s ()		
t	. Charles of distribution of the control of the con			
	a nongovernmental section 457 plan	8t		
u	Wages earned while incarcerated	8u		
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-NR, line 8	10	-4 , 759.

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

Par	Adjustments to Income			
11	Educator expenses		11	
12	Certain business expenses of reservists, performing artists, and fee-ti-			
	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 8I from the			
	rental of personal property engaged in for profit	24b		
С	Nontaxable amount of the value of Olympic and Paralympic medals			
		24c		
d		24d		
е	Repayment of supplemental unemployment benefits under the Trade			
		24e		
f		24f		
g	, , , , , , , , , , , , , , , , , , , ,	24g		
h	Attorney fees and court costs for actions involving certain unlawful			
	·	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			
	F	24i	-	
j	<u> </u>	24j	-	
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form			
		24k	-	
Z	Other adjustments. List type and amount:	na_		
05		24z	05	
25	Total other adjustments. Add lines 24a through 24z		25	
26	Add lines 11 through 23 and 25. These are your adjustments to income .		00	
	Form 1040 or 1040-SR, line 10, or Form 1040-NR, line 10a		26	

BAA

SCHEDULE 3 (Form 1040)

Department of the Treasury

Additional Credits and Payments

Attachment Sequence No. **03**

665-57-3671

Your social security number

OMB No. 1545-0074

Internal Revenue Service

PAVANKUMAR KOLANUPAKA

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.

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		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			
	line 20		8	2,000.
		(CC	ontinu	ied on page 2)

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		

BAA

SCHEDULE E (Form 1040)

Supplemental Income and Loss

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

Attachment

OMB No. 1545-0074

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. Sequence No. 13

Name(s) shown on return Your social security number 665-57-3671 PAVANKUMAR KOLANUPAKA **Income or Loss From Rental Real Estate and Royalties** Part I 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 В 1a Physical address of each property (street, city, state, ZIP code) H NO: SRINIVAS NAGAR COLONY KOTHPET, LB NAGAR HYDERABAD, TELANGANA IN 500074 Α В C 1b Type of Property **Fair Rental Personal Use** For each rental real estate property listed QJV (from list below) above, report the number of fair rental and **Davs 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: 1 Single Family Residence 3 Vacation/Short-Term Rental 7 Self-Rental 5 Land 8 Other (describe) 2 Multi-Family Residence 4 Commercial 6 Royalties **Properties:** Α В C Income: 450. 3 Rents received . 4 Royalties received **Expenses:** 5 5 Advertising 6 Auto and travel (see instructions) 6 550. 7 7 Cleaning and maintenance. 8 Commissions 8 9 9 Insurance . . . 10 10 Legal and other professional fees 11 Management fees 11 785. 12 12 Mortgage interest paid to banks, etc. (see instructions) 13 13 1,824. 14 14 Repairs 15 15 1,126. Supplies 16 16 Taxes 17 17 924. 18 18 Depreciation expense or depletion 19 19 Other (list) 20 20 5,209. Total expenses. Add lines 5 through 19 21 Subtract line 20 from line 3 (rents) and/or 4 (royalties). If result is a (loss), see instructions to find out if you must -4,759.file Form 6198 21 22 Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions) 4,759. 450. 23a Total of all amounts reported on line 3 for all rental properties 23a Total of all amounts reported on line 4 for all royalty properties 23b Total of all amounts reported on line 12 for all properties 23c Total of all amounts reported on line 18 for all properties 23d e Total of all amounts reported on line 20 for all properties . 23e 5,209. 24 **Income.** Add positive amounts shown on line 21. **Do not** include any losses 24 25 Losses. Add royalty losses from line 21 and rental real estate losses from line 22. Enter total losses here 25 4,759. Total rental real estate and royalty income or (loss). Combine lines 24 and 25. Enter the result 26 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 ...

-4,759.

8863

Department of the Treasury Internal Revenue Service

PAVANKUMAR KOLANUPAKA

Education Credits (American Opportunity and Lifetime Learning Credits)

OMB No. 1545-0074

2022

Attachment Sequence No. 50

Attach to Form 1040 or 1040-SR.

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

Name(s) shown on return

Your social security number 665-57-3671



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 F	arts I	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					
	• Less than line 5, divide line 4 by line 5. Enter the result as a decimal (ro at least three places)			}	6	
7	Multiply line 1 by line 6. Caution: If you were under age 24 at the end of the conditions described in the instructions, you can't take the refundable America skip line 8, enter the amount from line 7 on line 9, and check this box	an op	portu	inity 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.				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	instru	ictions) .	9	
10	After completing Part III for each student, enter the total of all amounts from zero, skip lines 11 through 17, enter -0- on line 18, and go to line 19				10	11,600.
11 12	Enter the smaller of line 10 or \$10,000				11 12	10,000. 2,000.
13	Enter: \$180,000 if married filing jointly; \$90,000 if single, head of household, or 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		40,424.		
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		49 , 576.		
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 (roun least three places)	ded t	o at	}	17	1.000
18	Multiply line 12 by line 17. Enter here and on line 1 of the Credit Limit Worksheet	(see	instru	ctions) .	18	2,000.
19	Nonrefundable education credits. Enter the amount from line 7 of the Credit instructions) here and on Schedule 3 (Form 1040), line 3	Limit	Work	sheet (see	19	2,000.

Name(s) shown on return
PAVANKUMAR KOLANUPAKA
Your social security number
665-57-3671



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

Par			
20	Student name (as shown on page 1 of your tax return)	21 Student social security number (as si	hown on page 1 of
	PAVANKUMAR	your tax return)	
	KOLANUPAKA	665-57-3671	
	Educational institution information (see instructions)		
6	. Name of first educational institution	b. Name of second educational instituti	on (if any)
	Campbellsville University Inc.	(1) A	<u> </u>
(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.0 post office, state, and ZIP code. If instructions.	
	1 University Drive		
	CAMPBELLSVILLE KY 42718		
(2) Did the student receive Form 1098-T from this institution for 2022? ✓ Yes ☐ No	(2) Did the student receive Form 1098 from this institution for 2022?	-T Yes No
(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 from this institution for 2021 with b 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.	(4) Enter the institution's employer identify you're claiming the American opposed checked "Yes" in (2) or (3). You can 1098-T or from the institution.	ortunity credit or if you
	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.		– Stop! Go to line 31 his student.
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?		– Complete lines 27 ugh 30 for this student.
CAUT	You can't take the American opportunity credit and the li you complete lines 27 through 30 for this student, don't don		in the same year. If
	American Opportunity Credit		
27	Adjusted qualified education expenses (see instructions). Dor	't enter more than \$4,000	27
28			28
29	Multiply line 28 by 25% (0.25)		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		30
	Lifetime Learning Credit		
31	Adjusted qualified education expenses (see instructions). Incl	ude the total of all amounts from all Parts	31 11 600