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 | y number |
| SHREYA D KULKARNI | 879-94- | -8218 |
| Spouse's name | Spouse's soci | ial security number |
| Part I Tax Return Information — Tax Year Ending December 31, 2022 (E | nter 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 57,250. |
| 2 Total tax | | 2 3,359. |
| 3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099 | | 3 6,475. |
| 4 Amount you want refunded to you | | 4 3,116. |
| 5 Amount you owe | | 5 |
| Part II Taxpayer Declaration and Signature Authorization (Be sure you get as Under penalties of perjury, I declare that I have examined a copy of the income tax return (original or amer | | |
| return (original or amended) I am now authorizing. I consent to allow my intermediate service provider, trato send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to term payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation business days prior to the payment (settlement) date. I also authorize the financial institutions involved in taxes to receive confidential information necessary to answer inquiries and resolve issues related to the personal identification number (PIN) below is my signature for the income tax return (original or amended Electronic Funds Withdrawal Consent. | r rejection of the trans the U.S. Treasury are tindicated in the tactitution to debit the inate the authorizate requests must be the processing of the payment. I furti | ansmission, (b) the reason and its designated Financial ix preparation software for entry to this account. This ition. To revoke (cancel) a received no later than 2 the electronic payment of her acknowledge that the |
| Taxpayer's PIN: check one box only | | |
| ▼ I authorize GLOBAL TAXES LLC to enter or gener | rate my PIN $\frac{4}{}$ | 8 2 1 8 as my |
| ERO firm name signature on the income tax return (original or amended) I am now authorizing. | Ent | er five digits, but n't enter all zeros |
| I will enter my PIN as my signature on the income tax return (original or amended) I a if you are entering your own PIN and your return is filed using the Practitioner PIN n below. | | |
| Your signature ▶ Date | > | |
| Occupate BINL about your bounds | | |
| Spouse's PIN: check one box only | | |
| I authorize to enter or gener | | er 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) I a if you are entering your own PIN and your return is filed using the Practitioner PIN n below. | | |
| Spouse's signature ▶ Date | • | |
| Practitioner PIN Method Returns Only—continue be | low | |
| 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 | | 6 3 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 incorauthorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am sequirements of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS e-file Providers | submitting this retu | rn in accordance with the |
| ERO's signature ▶ Date | • | |
| ERO Must Retain This Form — See Instructions | | |

Don't Submit This Form to the IRS Unless Requested To Do So

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

2022

OMB No. 1545-007

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

| Filing Status Check only one box. | | Single Married filing jointly uchecked the MFS box, enter the n | _ | ed filing separately (Nover spouse. If you che | , | | , | , | | spou | ifying sur ise (QSS) name if tl | Ü | fying |
|-----------------------------------|---------------|---|------------------------|--|--------|-----------------|----------------|------------------|---------------------------------|--------|---------------------------------------|----------------|-----------|
| | - | on is a child but not your dependent | - | | | | | | | | | | |
| Your first name | and mi | ddle initial | Last nar | name | | | | | | ur so | cial securi | ty numbe | er |
| SHREYA | D | | KULK | ARNI | | | | | 879-94-8218 | | | | |
| If joint return, s | pouse's | s first name and middle initial | Last nai | me | | | | | Spouse's social security number | | | | mber |
| Home address | (numbe | er and street). If you have a P.O. box, see | instruction | ons. | | | Apt. no. | | - 1 | | ntial Electi | - | • |
| 2750 OLI | SA: | INT AUGUSTINE ROAD | | | | | A7 | | - 1 | | ere if you, | , | |
| City, town, or p | ost offi | ce. If you have a foreign address, also co | omplete s _l | paces below. | Stat | e | ZIP code | | | | if filing joir this fund. | | |
| TALLAHAS | SSEE | | | | FL | | 32301 | | bo | x belo | w will not | change | |
| Foreign countr | y name | | F | Foreign province/state/o | county | У | Foreign postal | coc | е уо | ur tax | or refund | _ | ouse |
| Digital | | ny time during 2022, did you: (a) rec | | | - | | - | | | | | ⊠ No | |
| Assets | | ange, gift, or otherwise dispose of a | | | | | asset)? (See | Ins | ructic | ons.) | Yes | NU | , |
| Standard Deduction | _ | eone can claim: | • | · | | a dependent | | | | | | | |
| Age/Blindnes | s You: | ☐ Were born before January 2, 1 | 958 | Are blind Spo | use: | ☐ Was bor | n before Jan | | | | ☐ Is b | | |
| Dependent | s (see | instructions): | | (2) Social security | | (3) Relationsh | ip (4) Check | (4) Check the bo | | qualif | ies for (see | instruction | ons): |
| If more | (1) Fi | rst name Last name | | number | | to you | Child | tax | credit | : | Credit for ot | her depen | idents |
| than four dependents, | | | | | | | | | | | | <u> </u> | |
| see instruction | s | | | | | | | L | | | | <u></u> | |
| and check | , — | | | | | | | Ļ | | | | <u></u> | |
| here | | | | | | | | L | | | | <u> </u> | |
| Income | 1a | Total amount from Form(s) W-2, b | , | , | | | | ٠ | | 1a | | 61 , 54 | <u>9.</u> |
| Attach Form(s) | b | Household employee wages not reported on Form(s) W-2 | | | | | | | | 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) | | | | | | | ٠ | 1d | | | |
| W-2G and 1099-R if tax | е | Taxable dependent care benefits from Form 2441, line 26 | | | | | | | | 1e | | | |
| was withheld. | f | Employer-provided adoption benefits from Form 8839, line 29 | | | | | | | | 1f | | | |
| If you did not | g | Wages from Form 8919, line 6 | | | | | | | | 1g | | | |
| get a Form W-2, see | h | Other earned income (see instruct | , | | | 1 | · · · · | ٠ | ٠ | 1h | | | 0. |
| instructions. | ı | Nontaxable combat pay election (| see instr | ructions) | | <u>1i</u> | | | | | | C1 F1 | 0 |
| | <u>z</u> | Add lines 1a through 1h | | | | | | | ٠ | 1z | | 61,54 | 9. |
| Attach Sch. B if required. | 2a | ' <u>-</u> | 2a | | | axable interest | | ٠ | • | 2b | 1 | | |
| ii required. | 3a | · · | 3a | | | rdinary divide | | | | 3b | | | 8. |
| | 4a | <u> </u> | 4a | | | axable amoun | | | | 4b | | | |
| Standard Deduction for— | 5a | _ | 5a | | | axable amoun | | | | 5b | | | |
| Single or | 6a | , | 6a | | | axable amoun | | | Ċ | 6b | | | |
| Married filing separately, | C _ | If you elect to use the lump-sum e | | | • | , | | ٠ | | - | | ٥٦ | - |
| \$12,950 | 7 | Capital gain or (loss). Attach Sche | | | | | | ٠ | Ш | 7 | | -25 | |
| Married filing jointly or | 8 | Other income from Schedule 1, lin | | | | | | ٠ | • | 8 | | -4,05 | |
| Qualifying surviving spouse, | 9 | Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7 | | | | | | ٠ | ٠ | 9 | + | 57 , 25 | ∪. |
| \$25,900 | 10 | Adjustments to income from Sche | | | | | | • | • | 10 | | | |
| Head of household, | 11 | Subtract line 10 from line 9. This is | - | - | | | | • | • | 11 | 1 | 57 , 25 | |
| \$19,400 | 12 | Standard deduction or itemized Qualified business income deduct | | | | | | ٠ | • | 12 | 1 | 12 , 95 | U . |
| If you checked any box under | 13 | Add lines 12 and 13 | | | | | | ٠ | • | 13 | | 12 05 | |
| Standard Deduction, | 14 15 | Subtract line 14 from line 11. If zer | | | | | | ٠ | • | 15 | | 12,95 | |
| see instructions. | 13 | Subtract line 14 HOITI IIIIE 11. II ZE | 0 01 1633 | 3, GILLOI -0 IIIIS 18 Y | oui L | uxabic IIICUII | ie | • | • | 13 | 1 . | 44,30 | <u> </u> |

| Form 1040 (202 | 2) | | | Page 2 | | |
|--|-----|--|-----|-----------------|--|--|
| Tax and | 16 | Tax (see instructions). Check if any from Form(s): 1 🗌 8814 2 🔲 4972 3 🔲 | 16 | 5,359. | | |
| Credits | 17 | Amount from Schedule 2, line 3 | 17 | | | |
| | 18 | Add lines 16 and 17 | 18 | 5 , 359. | | |
| | 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 | 3,359. | | |
| | 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 | 3,359. | | |
| Payments | 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 | 6,475. | | |
| If you have a qualifying child, attach Sch. EIC. | 26 | 2022 estimated tax payments and amount applied from 2021 return | 26 | | | |
| | 27 | Earned income credit (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 | 6,475. | | |
| Refund | 34 | If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid | 34 | 3,116. | | |
| itorana | 35a | Amount of line 34 you want refunded to you . If Form 8888 is attached, check here | 35a | 3,116. | | |
| Direct deposit? | b | Routing number 0 4 1 0 0 0 1 2 4 c Type: X Checking Savings | | | | |
| See instructions. | d | Account number 4 6 3 5 2 1 5 5 6 4 | | | | |
| | 36 | Amount of line 34 you want applied to your 2023 estimated tax 36 | | | | |
| Amount You Owe | 37 | Subtract line 33 from line 24. This is the amount you owe . For details on how to pay, go to <i>www.irs.gov/Payments</i> or see instructions | 37 | | | |
| | 38 | Estimated tax penalty (see instructions) | | | | |
| Third Party Designee | ins | you want to allow another person to discuss this return with the IRS? See tructions | | ⊠ No | | |
| | | Designee's Phone Personal identification no. Personal identification number (PIN) | | | | |

| | | | | | | | • | | |
|---|---|--|-----------------|---------------------|---------------|-------------|--|---|--------|
| | Designee's name | | | Phone no. | | | onal identification ber (PIN) | | \top |
| Sign Here | | Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, a belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of | | | | | | | |
| пеге | Your signature | Date | Your occupation | | | | If the IRS sent you an Identity Protection PIN, enter it here | | |
| Joint return? See instructions. Keep a copy for your records. | | | IT PRO | FESS | IONAL | (see inst.) | | | |
| | Spouse's signature. If a joint return, both must sign. | | Date | Spouse's occupation | | | Identity Prote | If the IRS sent your spouse an Identity Protection PIN, enter it he | |
| your records. | Phone no. | Email address | SHREYAK | TIT.KARN | NI225@GMAIL.C | (see inst.) | | | |
| | Preparer's name | Preparer's signat | ture | OIII EIII III | O LI II II II | Date | PTIN | Check if: | |
| Paid Proparer | SYAM PRIYA RAM SAGAR GUPTA TALLAM | SYAM PRIYA | RAM SAGAR | GUPTA TA | LLAM | 04/18/2023 | P02082703 | Self-emp | oloyed |
| | | | | | | | | | |

GLOBAL TAXES LLC

245 ROONEY CT E BRUNSWICK NJ 08816

Firm's name

Firm's address

Preparer

Use Only

Phone no. (678) 965-9522

Firm's EIN

SCHEDULE 1 (Form 1040)

Additional Income and Adjustments to Income

OMB No. 1545-0074

2022

Attachment Sequence No. 01

Your social security number

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.

| SHRE | YA D KULKARNI | 879-9 | 94-82 | 18 |
|--------|--|-----------|-------|---------|
| 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. Attach Sch | edule E . | 5 | -4,050. |
| 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 | | | |
| 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) | | - | |
| 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 | , | | |
| | | | 4 | |
| t | The second secon | | | |
| | a nongovernmental section 457 plan | | | |
| u Z | Other income. List type and amount: | | | |
| ~ | 0- | | | |
| 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 104 | | - | -4 050 |

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-t | | | |
| | 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 | - 41 | | |
| | F | 24i | | |
| j | <u> </u> | 24j | | |
| k | Excess deductions of section 67(e) expenses from Schedule K-1 (Form | S.4. | | |
| | | 24k | | |
| Z | Other adjustments. List type and amount: | | | |
| 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 | |

SCHEDULE 3 (Form 1040)

Additional Credits and Payments

OMB No. 1545-0074

2022

Attachment Sequence No. 03

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
SHREYA D KULKARNI
879-94-8218

| Par | Nonrefundable Credits | | | |
|-----|--|-----------------|--------|--------------|
| 1 | Foreign tax credit. Attach Form 1116 if required | | 1 | |
| 2 | Credit for child and dependent care expenses from Form 2441 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 | SR, or 1040-NR, | 8 | 2,000. |
| | | (cc | ntinue | d 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 | from Schedule(s) H for leave taken after March 31, 2021, and | 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 D (Form 1040)

Capital Gains and Losses

OMB No. 1545-0074

2022

Attachment Sequence No. **12**

Department of the Treasury Internal Revenue Service Attach to Form 1040, 1040-SR, or 1040-NR.

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

Use Form 8949 to list your transactions for lines 1b, 2, 3, 8b, 9, and 10.

Name(s) shown on return Your social security number 879-94-8218 SHREYA D KULKARNI Did you dispose of any investment(s) in a qualified opportunity fund during the tax year? If "Yes." attach Form 8949 and see its instructions for additional requirements for reporting your gain or loss. Part I Short-Term Capital Gains and Losses - Generally Assets Held One Year or Less (see instructions) See instructions for how to figure the amounts to enter on the (h) Gain or (loss) (g) Adjustments Subtract column (e) lines below. Proceeds Cost to gain or loss from from column (d) and This form may be easier to complete if you round off cents to (sales price) (or other basis) Form(s) 8949, Part I, combine the result whole dollars. line 2, column (a) with column (a) 1a Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b . 1b Totals for all transactions reported on Form(s) 8949 with Box A checked 2,131. -185. 1,946. Totals for all transactions reported on Form(s) 8949 with Box B checked 3 Totals for all transactions reported on Form(s) 8949 with Short-term gain from Form 6252 and short-term gain or (loss) from Forms 4684, 6781, and 8824 . . . 4 Net short-term gain or (loss) from partnerships, S corporations, estates, and trusts from 5 Short-term capital loss carryover. Enter the amount, if any, from line 8 of your Capital Loss Carryover 6 7 Net short-term capital gain or (loss). Combine lines 1a through 6 in column (h). If you have any longterm capital gains or losses, go to Part II below. Otherwise, go to Part III on the back 7 -185. Part II Long-Term Capital Gains and Losses – Generally Assets Held More Than One Year (see instructions) See instructions for how to figure the amounts to enter on the (g) (h) Gain or (loss) Adjustments Subtract column (e) (d) (e) lines below Proceeds to gain or loss from from column (d) and Cost This form may be easier to complete if you round off cents to (sales price) (or other basis) Form(s) 8949, Part II, combine the result whole dollars. line 2, column (a) with column (a) 8a Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b . . 8b Totals for all transactions reported on Form(s) 8949 with Box D checked 316. 388. -72. Totals for all transactions reported on Form(s) 8949 with Box E checked 10 Totals for all transactions reported on Form(s) 8949 with 11 Gain from Form 4797, Part I; long-term gain from Forms 2439 and 6252; and long-term gain or (loss) 11

12 Net long-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1

15 Net long-term capital gain or (loss). Combine lines 8a through 14 in column (h). Then, go to Part III

BAA

12

13

14

15

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

Part III Summary

| If line 16 is a gain, enter the amount from line 16 on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 17 below. If line 16 is a loss, skip lines 17 through 20 below. Then, go to line 21. Also be sure to complete line 22. If line 16 is zero, skip lines 17 through 21 below and enter -0- on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 22. Are lines 15 and 16 both gains? Yes. Go to line 18. No. Skip lines 18 through 21, and go to line 22. If you are required to complete the 28% Rate Gain Worksheet (see instructions), enter the amount, if any, from line 7 of that worksheet If you are required to complete the Unrecaptured Section 1250 Gain Worksheet (see instructions), enter the amount, if any, from line 18 of that worksheet Are lines 18 and 19 both zero or blank and you are not filling Form 4952? Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 16. Don't complete lines 21 and 22 below. No. Complete the Schedule D Tax Worksheet in the instructions. Don't complete lines 21 and 22 below. If line 16 is a loss, enter here and on Form 1040, 1040-SR, or 1040-NR, line 7, the smaller of: | | | | | |
|---|----|---|----|---|-------|
| Then, go to line 17 below. If line 16 is a loss, skip lines 17 through 20 below. Then, go to line 21. Also be sure to complete line 22. If line 16 is zero, skip lines 17 through 21 below and enter -0- on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 22. Are lines 15 and 16 both gains? Yes. Go to line 18. No. Skip lines 18 through 21, and go to line 22. If you are required to complete the 28% Rate Gain Worksheet (see instructions), enter the amount, if any, from line 7 of that worksheet If you are required to complete the Unrecaptured Section 1250 Gain Worksheet (see instructions), enter the amount, if any, from line 18 of that worksheet Order of the worksheet or lines 18 and 19 both zero or blank and you are not filing Form 4952? Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 16. Don't complete lines 21 and 22 below. If line 16 is a loss, enter here and on Form 1040, 1040-SR, or 1040-NR, line 7, the smaller of: The loss on line 16; or (\$3,000), or if married filing separately, (\$1,500) Note: When figuring which amount is smaller, treat both amounts as positive numbers. Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 16. | 16 | Combine lines 7 and 15 and enter the result | 16 | | -257. |
| line 22. If line 16 is zero, skip lines 17 through 21 below and enter -0- on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 22. Are lines 15 and 16 both gains? Yes. Go to line 18. No. Skip lines 18 through 21, and go to line 22. If you are required to complete the 28% Rate Gain Worksheet (see instructions), enter the amount, if any, from line 7 of that worksheet | | | | | |
| 1040-NR, line 7. Then, go to line 22. 17 Are lines 15 and 16 both gains? Yes. Go to line 18. No. Skip lines 18 through 21, and go to line 22. 18 If you are required to complete the 28% Rate Gain Worksheet (see instructions), enter the amount, if any, from line 7 of that worksheet | | , 1 | | | |
| Yes. Go to line 18. | | | | | |
| If you are required to complete the Unrecaptured Section 1250 Gain Worksheet (see instructions), enter the amount, if any, from line 18 of that worksheet If you are required to complete the Unrecaptured Section 1250 Gain Worksheet (see instructions), enter the amount, if any, from line 18 of that worksheet If line 18 and 19 both zero or blank and you are not filing Form 4952? Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 16. Don't complete lines 21 and 22 below. No. Complete the Schedule D Tax Worksheet in the instructions. Don't complete lines 21 and 22 below. If line 16 is a loss, enter here and on Form 1040, 1040-SR, or 1040-NR, line 7, the smaller of: The loss on line 16; or (\$3,000), or if married filing separately, (\$1,500) Note: When figuring which amount is smaller, treat both amounts as positive numbers. Do you have qualified dividends on Form 1040, 1040-SR, or 1040-NR, line 3a? Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 16. | 17 | Yes. Go to line 18. | | | |
| Instructions), enter the amount, if any, from line 18 of that worksheet | 18 | | 18 | | |
| Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 16. Don't complete lines 21 and 22 below. No. Complete the Schedule D Tax Worksheet in the instructions. Don't complete lines 21 and 22 below. If line 16 is a loss, enter here and on Form 1040, 1040-SR, or 1040-NR, line 7, the smaller of: • The loss on line 16; or • (\$3,000), or if married filing separately, (\$1,500) Note: When figuring which amount is smaller, treat both amounts as positive numbers. Do you have qualified dividends on Form 1040, 1040-SR, or 1040-NR, line 3a? ✓ Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 16. | 19 | | 19 | | |
| and 22 below. 21 If line 16 is a loss, enter here and on Form 1040, 1040-SR, or 1040-NR, line 7, the smaller of: ■ The loss on line 16; or ■ (\$3,000), or if married filling separately, (\$1,500) Note: When figuring which amount is smaller, treat both amounts as positive numbers. 22 Do you have qualified dividends on Form 1040, 1040-SR, or 1040-NR, line 3a? ▼ Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 16. | 20 | ☐ Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions | | | |
| The loss on line 16; or (\$3,000), or if married filing separately, (\$1,500) Note: When figuring which amount is smaller, treat both amounts as positive numbers. Do you have qualified dividends on Form 1040, 1040-SR, or 1040-NR, line 3a? Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 16. | | | | | |
| Note: When figuring which amount is smaller, treat both amounts as positive numbers. Do you have qualified dividends on Form 1040, 1040-SR, or 1040-NR, line 3a? Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 16. | 21 | If line 16 is a loss, enter here and on Form 1040, 1040-SR, or 1040-NR, line 7, the smaller of: | | | |
| Do you have qualified dividends on Form 1040, 1040-SR, or 1040-NR, line 3a? Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 16. | | • The loss on line 16; or • (\$3,000), or if married filing separately, (\$1,500) | 21 | (| 257.) |
| ▼ Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 16. | | Note: When figuring which amount is smaller, treat both amounts as positive numbers. | | | |
| for Form 1040, line 16. | 22 | Do you have qualified dividends on Form 1040, 1040-SR, or 1040-NR, line 3a? | | | |
| ☐ No. Complete the rest of Form 1040, 1040-SR, or 1040-NR. | | | | | |
| | | ☐ No. Complete the rest of Form 1040, 1040-SR, or 1040-NR. | | | |

8949 Form

Sales and Other Dispositions of Capital Assets

Go to www.irs.gov/Form8949 for instructions and the latest information.

File with your Schedule D to list your transactions for lines 1b, 2, 3, 8b, 9, and 10 of Schedule D.

OMB No. 1545-0074

2022

Attachment
Sequence No. 12A

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

Social security number or taxpayer identification number

879-94-8218

SHREYA D KULKARNI

Before you check Box A, B, or C below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your broker and may even tell you which box to check.

Part I Short-Term. Transactions involving capital assets you held 1 year or less are generally short-term (see instructions). For long-term transactions, see page 2.

Note: You may aggregate all short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 1a; you aren't required to report these transactions on Form 8949 (see instructions).

You *must* check Box A, B, *or* C below. Check only one box. If more than one box applies for your short-term transactions, complete a separate Form 8949, page 1, for each applicable box. If you have more short-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

| X (A) Short-term☐ (B) Short-term | | • | | - | • | | • | 9) |
|--|---|--|--------------------------------|----------------------------------|---|-------------------------------------|---------------------------------------|--|
| (C) Short-term | transactions | not reported | to you on F | orm 1099-B | | | | |
| 1 (a | of property | (b) Date acquired | (c) Date sold or disposed of | (d) Proceeds (sales price) | (e) Cost or other basis See the Note below and see Column (e) | See the separate instructions. | | (h) Gain or (loss) Subtract column (e) from column (d) and |
| (Example: 100 | sh. XYZ Co.) | (Mo., day, yr.) | (Mo., day, yr.) | (see instructions) | in the separate instructions. | (f) Code(s) from instructions | (g) Amount of adjustment | combine the result with column (g). |
| ROBINHOOD SECUR | RITIES LLC | 01/01/22 | 12/31/22 | 1,946. | 2,131. | | | -185. |
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| | | | | | | | | |
| 2 Totals. Add the amonegative amounts). Schedule D, line 1b above is checked), | Enter each total (if Box A above | al here and inc e is checked), lir | lude on your ne 2 (if Box B | 1,946. | 2,131. | | | -185. |

Note: If you checked Box A above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See *Column* (g) in the separate instructions for how to figure the amount of the adjustment.

Form 8949 (2022) Attachment Sequence No. **12A** Page

Name(s) shown on return. Name and SSN or taxpayer identification no. not required if shown on other side

SHREYA D KULKARNI

879-94-8218

Before you check Box D, E, or F below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your broker and may even tell you which box to check.

Part II

Long-Term. Transactions involving capital assets you held more than 1 year are generally long-term (see instructions). For short-term transactions, see page 1.

Note: You may aggregate all long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 8a; you aren't required to report these transactions on Form 8949 (see instructions).

You *must* check Box D, E, *or* F below. Check only one box. If more than one box applies for your long-term transactions, complete a separate Form 8949, page 2, for each applicable box. If you have more long-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

| ✗ (D) Long-term transactions☐ (E) Long-term transactions☐ (F) Long-term transactions | reported on | Form(s) 1099 | -B showing bas | • | , | | e) |
|--|--|--------------------------------|-------------------------------------|--|-------------------------------------|--|---|
| 1 (a) | (b) Date acquired | (c) Date sold or | (d) Proceeds | (e) Cost or other basis See the Note below | If you enter an enter a co | f any, to gain or loss amount in column (g), ode in column (f). arate instructions. | (h) Gain or (loss) Subtract column (e) |
| Description of property (Example: 100 sh. XYZ Co.) | (Mo., day, yr.) | disposed of (Mo., day, yr.) | (sales price) (see instructions) | and see Column (e) in the separate instructions. | (f) Code(s) from instructions | (g) Amount of adjustment | from column (d) and combine the result with column (g). |
| ROBINHOOD SECURITIES LLC | 01/01/22 | 12/31/22 | 316. | 388. | | | -72. |
| | | | | | | | |
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| | | | | | | | |
| 2 Totals. Add the amounts in columns negative amounts). Enter each total Schedule D, line 8b (if Box D above above is checked), or line 10 (if Box | al here and inc is checked), lir | lude on your ne 9 (if Box E | 316. | 388. | | | -72. |

Note: If you checked Box D above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See *Column* (g) in the separate instructions for how to figure the amount of the adjustment.

BAA REV 03/22/23 PRO Form **8949** (2022)

SCHEDULE E (Form 1040)

Supplemental Income and Loss

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

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

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

Attachment Sequence No. 13

Department of the Treasury Internal Revenue Service

Name(s) shown on return

Your social security number

OMB No. 1545-0074

| SHRE | YA D KULKARNI | | | | | | 879-94 | 1-8218 | | |
|-------|---|-----------|-------------|-----------|---------|--------------------|-------------|----------------|----------|--|
| Par | | nd Ro | valties | | | | | | | |
| | Note: If you are in the business of renting personal proper | | | C. See | instru | ctions. If you are | an indiv | idual, rep | ort farm | |
| | rental income or loss from Form 4835 on page 2, line 40. | | | | | | | | | |
| | Did you make any payments in 2022 that would require you | | | | | | | | | |
| В | f "Yes," did you or will you file required Form(s) 1099? . | | | | | | | . 🗌 Y e | s No | |
| 1a | Physical address of each property (street, city, state, ZIF | P code | e) | | | | | | | |
| Α | BANER PASHAN LINK ROAD BANER PUNE, MAH | HARAS | SHTRA 1 | N 411 | 1021 | | | | | |
| В | | | | | | | | | | |
| С | | | | | | | | | | |
| 1b | Type of Property 2 For each rental real estate prope | ertv list | ted | | Fa | ir Rental | Person | al Use | 0.07 | |
| | (from list below) above, report the number of fair | | | | | Days | Day | | QJV | |
| Α | personal use days. Check the Q | | | Α | | 185 | | 0 | | |
| В | if you meet the requirements to find a qualified joint venture. See instru | | | В | | | | | | |
| С | quaimed joint venture. See instru | CHOIS | 5. | С | | | | | | |
| Туре | of Property: | | | | | • | | | | |
| 1 | Single Family Residence 3 Vacation/Short-Term Ren | ıtal | 5 Lanc | l | 7 | Self-Rental | | | | |
| 2 | Multi-Family Residence 4 Commercial | | 6 Roya | alties | 8 | Other (describ | oe) | | | |
| | | | | | | Propertie | | | | |
| Incon | ne· | | | Α | | В | | | С | |
| 3 | Rents received | 3 | | | 00. | | | | | |
| 4 | Royalties received | 4 | | | | | | | | |
| Expe | | | | | | | | | | |
| 5 | Advertising | 5 | | | | | | | | |
| 6 | Auto and travel (see instructions) | 6 | | | | | | | | |
| 7 | Cleaning and maintenance | 7 | | 4 | 50. | | | | | |
| 8 | Commissions | 8 | | | | | | | | |
| 9 | Insurance | 9 | | | | | | | | |
| 10 | Legal and other professional fees | 10 | | | | | | | | |
| 11 | Management fees | 11 | | | | | | | | |
| 12 | Mortgage interest paid to banks, etc. (see instructions) | 12 | | | | | | | | |
| 13 | Other interest | 13 | | | | | | | | |
| 14 | Repairs | 14 | | 1,6 | | | | | | |
| 15 | Supplies | 15 | | 1,2 | 00. | | | | | |
| 16 | Taxes | 16 | | | | | | | | |
| 17 | Utilities | 17 | | 1,1 | 00. | | | | | |
| 18 | Depreciation expense or depletion | 18 | | | | | | | | |
| 19 | Other (list) | 19 | | | - 0 | | | | | |
| 20 | Total expenses. Add lines 5 through 19 | 20 | | 4,3 | 50. | | | | | |
| 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 file Form 6198 | 21 | | -4,0 | 50 | | | | | |
| 22 | Deductible rental real estate loss after limitation, if any, | | | 1,0 | · · | | | | | |
| ~~ | on Form 8582 (see instructions) | 22 | (| 4,05 | 0) | (|)(| , |) | |
| 23a | Total of all amounts reported on line 3 for all rental prope | | | | 23a | 1 | 300. | | <i></i> | |
| b | Total of all amounts reported on line 4 for all royalty prop | | | | 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 | | $\neg \neg$ | | | |
| e | Total of all amounts reported on line 20 for all properties | | | | 23e | 4, | 350. | | | |
| 24 | Income. Add positive amounts shown on line 21. Do no | | | | | | 24 | | | |
| 25 | Losses. Add royalty losses from line 21 and rental real estate | | - | | nter to | otal losses here | | , , | 4,050.) | |
| 26 | Total rental real estate and royalty income or (loss). | | | | | | | | , | |
| | here. If Parts II, III, IV, and line 40 on page 2 do not | | | | | | | | | |
| | Schedule 1 (Form 1040), line 5. Otherwise, include this ar | mount | t in the to | tal on li | ne 41 | on page 2 . | 26 | | -4,050. | |

8863 Form

Department of the Treasury Internal Revenue Service

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
SHREYA D KULKARNI

Your social security number

879-94-8218



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 year and meet the conditions described in the instructions, you can't take the refundable American opportunity credit; skip line 8, enter the amount from line 7 on line 9, and check this box | | | | | | |
| 8 | Refundable American opportunity credit. Multiply line 7 by 40% (0.40). Enter the amount here and on Form 1040 or 1040-SR, line 29. Then go to line 9 below. | | | | | | |
| 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) . | | | | | | |
| 10 | After completing Part III for each student, enter the total of all amounts from all Parts III, line 31. If zero, skip lines 11 through 17, enter -0- on line 18, and go to line 19 | | | | | | 16,260. |
| 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 | | 57,250. | | | |
| 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 | | 32,750. | | | |
| 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) | | | } | 17 | | 1.000 |
| 18 | Multiply line 12 by line 17. Enter here and on line 1 of the Credit Limit Worksheet (see instructions) . 18 | | | | | | 2,000. |
| 19 | Nonrefundable education credits. Enter the amount from line 7 of the Credit Limit Worksheet (see instructions) here and on Schedule 3 (Form 1040), line 3 | | | | | | |

Name(s) shown on return

SHREYA D KULKARNI

879-94-8218



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 | t III Student and Educational Institution Information | n. See instructions. | | | | |
|-----|--|--|--|--|--|--|
| | Student name (as shown on page 1 of your tax return) SHREYA D KULKARNI | 21 Student social security number (as shown on page 1 of your tax return) 879-94-8218 | | | | |
| 22 | Educational institution information (see instructions) | 073-34-0210 | | | | |
| | Name of first educational institution | b. Name of second educational institution (if any) | | | | |
| • | HARRISBURG UNIVERSITY OF SCIENCE & TECH | Si Namo di decena dadadiana mattation (il arry) | | | | |
| (| Address. Number and street (or P.O. box). City, town or post office, state, and ZIP code. If a foreign address, see instructions. 326 MARKET STREET HARRISBURG PA 17101 | (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 Yes No from this institution for 2022? | (2) Did the student receive Form 1098-T Yes No from this institution for 2022? | | | | |
| (| 3) 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) 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. | | | | |
| | 25-1900793 | | | | | |
| 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. \times 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. | $\overline{\mathbf{X}}$ Yes — Go to line 25. \square No — Stop! Go to line 31 for this student. | | | | |
| 25 | Did the student complete the first 4 years of postsecondary education before 2022? See instructions. | $\overline{\mathbf{X}}$ Yes $-$ Stop! 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? | $\begin{tabular}{ c c c c c c c c c c c c c c c c c c c$ | | | | |
| CAU | You can't take the American opportunity credit and the lifetime learning credit for the same student in the same year. If you complete lines 27 through 30 for this student, don't 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 | Multiply line 28 by 25% (0.25) | | | | | |
| 30 | enter the result. Skip line 31. Include the total of all amounts f | | | | | |
| | Lifetime Learning Credit | | | | | |
| 31 | Adjusted qualified education expenses (see instructions). Incl | ude the total of all amounts from all Parts | | | | |
| | III line 31 on Part II line 10 | 31 16.260. | | | | |