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

	5				
Submis	ssion Identification Number (SID)				
Taxpaye	r's name	Social secu	rity numl	ber	
SRIK	KANYA PURMA	683-56	5-708	7	
Spouse's	s name	Spouse's so	cial sec	urity number	'
Part	Tax Return Information — Tax Year Ending December 31, 2023 (Ente	r vear vou	are au	thorizina '	<u> </u>
	whole dollars only on lines 1 through 5.	i year yea	arc au	ti lonzing.	<u>/</u>
	Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.				
	Adjusted gross income		1	79	,458.
2	Total tax		2		,297.
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3	13	,272.
4	Amount you want refunded to you		4		, 975.
_ 5	Amount you owe		5		
Part	Taxpayer Declaration and Signature Authorization (Be sure you get and	keep a co	py of y	our retu	rn)
return (or to send for any Agent to payment authorize payment business taxes to personal	wledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I aboriginal or amended) I am now authorizing. I consent to allow my intermediate service provider, transmy return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for redelay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account income to 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 terminate, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation recessed as a considerable of the payment (settlement) date. I also authorize the financial institutions involved in the preceive confidential information necessary to answer inquiries and resolve issues related to the all identification number (PIN) below is my signature for the income tax return (original or amended) I and the transfer of the income tax return (original or amended) I and the transfer of the income tax return (original or amended) I and the transfer of the income tax return (original or amended) I are transfer or the income tax return (original or amended) I are transfer or the income tax return (original or amended) I are transfer or the income tax return (original or amended) I are transfer or the income tax return (original or amended) I are transfer or the income tax return (original or amended) I are transfer or the income tax return (original or amended) I are transfer or the income tax return (original or amended).	nitter, or electication of the J.S. Treasury dicated in the ion to debit the the authoriquests must be processing apayment. I furnished the processing apayment. I furnished the processing apayment.	ronic re transminand its tax preperently e entry zation. The pereceing the elerther acceing the elerther acceing the elerther acceing the elerther acceing the electron acceing the electron access to the ele	turn originat ssion, (b) th designated paration sof to this acco To revoke (dived no late lectronic pa cknowledge	tor (ERO) e reason Financial tware for unt. This cancel) a er than 2 yment of that the
	nic Funds Withdrawal Consent. yer's PIN: check one box only				
X	•	my PIN	5 7 1	0 8 7	as my
	ERO firm name signature on the income tax return (original or amended) I am now authorizing.	, E		digits, but er all zeros	ao my
	I will enter my PIN as my signature on the income tax return (original or amended) I am if you are entering your own PIN and your return is filed using the Practitioner PIN metholow.				
Your si	gnature ►	1/24/202	24		
Snous	e's PIN: check one box only	_			
	I authorize to enter or generate	my PIN			as my
Ш	ERO firm name	, _	nter five	digits, but	asiny
	signature on the income tax return (original or amended) I am now authorizing.	d	on't ente	er all zeros	
	I will enter my PIN as my signature on the income tax return (original or amended) I am if you are entering your own PIN and your return is filed using the Practitioner PIN metibelow.				
Spouse	e's signature ▶ Date ▶				
	Practitioner PIN Method Returns Only—continue below	/			
Part I	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 4 9 Don't er	6 0	8 2 7	1
		Poli (el	iter all Ze		
authoriz	that the above numeric entry is my PIN, which is my signature for the electronic individual income ted to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am subments of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS e-file Providers of	nitting this re	turn in a	accordance	
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

1040		artment of the Treasury—Internal Revenue Serv		urn	202	3	OMB No. 1545	-0074	IRS Use	Only-	-Do not w	rite or sta	aple in this space.
For the year Ja	n. 1–Dec	c. 31, 2023, or other tax year beginning			, 2023, end	ding			, 20		See se	parate	instructions.
Your first name	e and m	iddle initial	Last na	me							Your so	cial sec	curity number
SRIKANY	A		PURM	ΙA							683	56	7087
		s first name and middle initial	Last na									•	security number
Homo addross	(numb	er and street). If you have a P.O. box, see	inetructi	one					Apt. no.	_	Dussids	ndial Fla	
		er and street). If you have a F.O. box, see IAL TRACE RD	HISHUCH	UIIS.				'	λρι. no.				ection Campaigr /ou, or your
		ice. If you have a foreign address, also co	mplete s	paces bel	low.	Sta	te	ZIP c	ode				jointly, want \$3
KELLER				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		TX		762			•		nd. Checking a
Foreign countr	v name		F	Foreign pr	rovince/state/			 	gn postal c		your tax		not change und.
Ü	-						•	,			,	□ Yo	
Filing Status	s 🗵	Single					Head of h	ouseh	old (HOH	- 1)			
Check only		Married filing jointly (even if only o	ne had i	ncome)			_						
one box.		Married filing separately (MFS)					Qualifying		0 1	,	,		
	-	you checked the MFS box, enter the		-	oouse. If you	u che	ecked the HOH	or Q	SS box,	enter	the chi	ild's na	me if the
	qu	ıalifying person is a child but not you	ır deper	ndent:									
Digital	At a	ny time during 2023, did you: (a) rec	eive (as	a reward	d, award, or	payn	nent for prope	rty or	services); or (b) sell,		
Assets	exch	nange, or otherwise dispose of a dig			nancial inter	est ir	n a digital asse	et)? (Se	ee instru	ctions	s.)	Y	es 🗵 No
Standard		neone can claim: You as a de	pendent	t 🗌	Your spous	e as	a dependent						
Deduction		Spouse itemizes on a separate retur	n or you	were a	dual-status	alien							
Age/Blindnes	s You	: Were born before January 2, 1	959	Are bl	ind Sp	ouse	: Was bo	rn befo	ore Janua	ary 2,	1959		s blind
Dependent	s (see	(see instructions):		(2) Social security (3) Relationship		nip (4	(4) Check the box		x if quali	fies for	(see instructions):		
If more	(1) F	irst name Last name			number		to you	Child tax of		ax cre	edit	Credit fo	or other dependents
than four													
dependents, see instruction	s												
and check	· —								l	<u> </u>			
here L				<u> </u>									
Income	1a	Total amount from Form(s) W-2, b	`		,						1a	_	93,562.
Attach Form(s)	b	Household employee wages not re	•		` '						1b		
W-2 here. Also attach Forms	C	Tip income not reported on line 1a	•		•						1c	_	
W-2G and	d	Medicaid waiver payments not rep Taxable dependent care benefits to				iistru	ctions)				1d 1e	_	
1099-R if tax was withheld.	e f	Employer-provided adoption bene									1f	_	
If you did not		Wages from Form 8919, line 6.	1115 11011	11 01111 0	033, 11116 23	•					1g		
get a Form	g h	Other earned income (see instruct	ions)								1h		0.
W-2, see instructions.	i	Nontaxable combat pay election (,			•					- 111	<u>'</u>	
instructions.	z	Add lines 1a through 1h	300 111311	uctions)				!			1z		93,562.
Attach Sch. B	<u>-</u> 2a		2a		· · i	 b Ta	axable interes	 t			2b	_	
if required.	3a	. –	3a				rdinary divide				3b	_	
	4a		4a				axable amoun				4b	_	
Standard	5a	_	5a				axable amoun				5b	_	
Deduction for— Single or	6a	_	6a				axable amoun				6b	_	
Married filing separately,	С	If you elect to use the lump-sum e	lection r	method,	check here					. \square			
\$13,850	7	Capital gain or (loss). Attach Sche		•		`	,			. \Box	7		
 Married filing jointly or 	8	Additional income from Schedule									8		-14,104.
Qualifying surviving spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7	, and 8.	This is y	our total in	come	e				9		79,458.
\$27,700	10	Adjustments to income from Sche	djustments to income from Schedule 1, line 26					10					
 Head of household, 	11	Subtract line 10 from line 9. This is	s your a c	djusted	gross inco	me					11		79 , 458.
\$20,800 If you checked	12	Standard deduction or itemized	deduct	ions (fro	m Schedule	A)					12	:	13,850.
any box under	13	Qualified business income deduct	ion from	Form 8	995 or Form	1 899	5-A				13		
Standard Deduction,	14	Add lines 12 and 13									14	.	13,850.
see instructions.	15	Subtract line 1/1 from line 11. If zer	ro or los	c ontor	O Thic ic v	our t	avabla incom				15	: 1	65 608

Form 1040 (202)	3)								Page Z	
Tax and	16	Tax (see instructions). Check it	f any from Form	(s): 1 881	4 2 🗌 4972	з 🗌		16	9,745.	
Credits	17	Amount from Schedule 2, line	3					17		
	18	Add lines 16 and 17						18	9,745.	
	19	Child tax credit or credit for c	ther dependent	ts from Sched	ule 8812			19		
	20	Amount from Schedule 3, line	8					20	448.	
	21	Add lines 19 and 20						21	448.	
	22	Subtract line 21 from line 18.	If zero or less,	enter -0				22	9,297.	
	23	Other taxes, including self-en	nployment tax,	from Schedule	e 2, line 21			23	0.	
	24	Add lines 22 and 23. This is y	our total tax					24	9,297.	
Payments	25	Federal income tax withheld	from:							
-	а	Form(s) W-2				25a 1	3,272			
	b	Form(s) 1099				25b				
	С	Other forms (see instructions))			25c				
	d	Add lines 25a through 25c .						25d	13,272.	
If you have a	26	2023 estimated tax payments	s and amount a	pplied from 20	22 return			26		
qualifying child,	27	Earned income credit (EIC) .			No .	27				
attach Sch. EIC.	28	Additional child tax credit from	Schedule 8812			28				
	29	American opportunity credit f	rom Form 8863	8, line 8		29				
	30	Reserved for future use				30				
	31	Amount from Schedule 3, line	15			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. Th	ese are your to	tal payments				33	13,272.	
Refund	34	If line 33 is more than line 24,	subtract line 2	4 from line 33.	This is the amour	nt you overpaid		34	3,975.	
	35a	Amount of line 34 you want re	efunded to you	ı. If Form 8888	is attached, chec	ck here	\square	35a	3,975.	
Direct deposit?	b	Routing number 0 8 1				Checking [Savings	3		
See instructions.	d	Account number 1 5 2	3 2 2 0	7 7 8 1	1 8					
	36	Amount of line 34 you want a	pplied to your	2024 estimate	ed tax	36				
Amount	37	Subtract line 33 from line 24.								
You Owe		For details on how to pay, go	to www.irs.gov	//Payments or	see instructions .			37		
	38	Estimated tax penalty (see in:	structions) .			38				
Third Party		you want to allow another	•							
Designee		structions					Complete		⊠ No	
		signee's me		Phone no.			rsonal ider mber (PIN)			
Sign		der penalties of perjury, I declare the	at I have examined	d this return and	accompanying sche		, ,		of my knowledge and	
Here	be	lief, they are true, correct, and comp	lete. Declaration of	of preparer (othe	r than taxpayer) is ba	sed on all informa	tion of whi	ch prepar	er has any knowledge.	
пеге	Yo	ur signature		Date	Your occupation		lf t	he IRS se	nt you an Identity	
		-			· ·			otection P e inst.)	IN, enter it here	
Joint return? See instructions.				5.	SOFTWARE E		,			
Keep a copy for your records.		Spouse's signature. If a joint return, both must sign.		Date	Spouse's occupati	on	Ide	If the IRS sent your spouse an Identity Protection PIN, enter it here (see inst.)		
	Ph	one no. (573) 200-0638	}	Email address	SRIKANYAPURN	MA14@GMAIL.	COM			
Daid	Pre		Preparer's signat	ure	-	Date	PTIN		Check if:	
Paid	SYAN	M PRIYA RAM SAGAR GUPTA TALLAM	SYAM PRIYA	RAM SAGAR	GUPTA TALLAM	01/24/2024	P020	82703	Self-employed	
Preparer		m's name GLOBAL TAX				•			(678) 965-9522	
Use Only		m's address 245 ROONEY		NSWICK N	J 08816			m's EIN	84-3171965	
<u> </u>		10101							- 1010	

SCHEDULE 1 (Form 1040)

Additional Income and Adjustments to Income

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service

SRIKANYA PURMA

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

683-56-7087

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. Att		5	-14,104.
6	Farm income or (loss). Attach Schedule F		6	
7	Unemployment compensation		7	
8	Other income:			
а	Net operating loss	8a ()		
b	Gambling	8b	-	
C	Cancellation of debt	8c	-	
d	Foreign earned income exclusion from Form 2555	8d ()	-	
e	Income from Form 8853	8e		
f	Income from Form 8889	8f	-	
g	Alaska Permanent Fund dividends	8g	-	
h	Jury duty pay	8h	-	
!	Prizes and awards	8i	-	
J	Activity not engaged in for profit income	8j		
K	Stock options	8k	-	
	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	OI		
	Olympic and Paralympic medals and USOC prize money (see	81	-	
m	instructions)	8m		
n	Section 951(a) inclusion (see instructions)	8n	-	
0	Section 951A(a) inclusion (see instructions)	80	-	
g	Section 461(I) excess business loss adjustment	8p	-	
q	Taxable distributions from an ABLE account (see instructions)	8g		
۹ r	Scholarship and fellowship grants not reported on Form W-2	8r	1	
s	Nontaxable amount of Medicaid waiver payments included on Form		-	
Ū	1040, line 1a or 1d	8s ()		
t	Pension or annuity from a nonqualifed deferred compensation plan or	,		
-	a nongovernmental section 457 plan	8t		
u	Wages earned while incarcerated	8u		
z	Other income. List type and amount:			
	Maria and 11	8z		
9	Total other income. Add lines 8a through 8z		9	
10	Combine lines 1 through 7 and 9. This is your additional income . Ente		10	-14.104

Page 2 Schedule 1 (Form 1040) 2023

Par	Adjustments to Income				
11	Educator expenses			11	
12	Certain business expenses of reservists, performing artists, and fee	e-basis	government		
	officials. Attach Form 2106			12	
13	Health savings account deduction. Attach Form 8889			13	
14	Moving expenses for members of the Armed Forces. Attach Form 3903			14	
15	Deductible part of self-employment tax. Attach Schedule SE			15	
16	Self-employed SEP, SIMPLE, and qualified plans			16	
17	Self-employed health insurance deduction			17	
18	Penalty on early withdrawal of savings			18	
19a	Alimony paid			19a	
b	Recipient's SSN	·			
С	Date of original divorce or separation agreement (see instructions):				
20	IRA deduction			20	
21	Student loan interest deduction			21	
22	Reserved for future use			22	
23	Archer MSA deduction			23	
24	Other adjustments:				
а	Jury duty pay (see instructions)	24a			
b	Deductible expenses related to income reported on line 8l from the				
	rental of personal property engaged in for profit	24b			
С	Nontaxable amount of the value of Olympic and Paralympic medals				
	and USOC prize money reported on line 8m	24c			
d	Reforestation amortization and expenses	24d			
е	Repayment of supplemental unemployment benefits under the Trade				
	Act of 1974	24e			
f	Contributions to section 501(c)(18)(D) pension plans	24f		_	
g	Contributions by certain chaplains to section 403(b) plans	24g		_	
h	Attorney fees and court costs for actions involving certain unlawful				
	discrimination claims (see instructions)	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				
	tax law violations	24i		-	
J	Housing deduction from Form 2555	24j		-	
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form				
	1041)	24k		-	
Z	Other adjustments. List type and amount:				
05		24z			
25 06	Total other adjustments. Add lines 24a through 24z			25	
26	Add lines 11 through 23 and 25. These are your adjustments to income Form 1040, 1040-SR, or 1040-NR, line 10	e. Enter	nere and on		
				26	L. 4 /F 4040\ 0000
	BAA	REV 01/	12/24 PRO	ocnedu	le 1 (Form 1040) 2023

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

2023

Attachment
Sequence No. 03

Name(s) shown on Form 1040, 1040-SR, or 1040-NR SRIKANYA PURMA

Your social security number 683-56-7087

Par	Nonretundable Credits			
1	Foreign tax credit. Attach Form 1116 if required		1	
2	Credit for child and dependent care expenses from Form 2441, li Form 2441	ne 11. Attach	2	
3	Education credits from Form 8863, line 19		3	448.
4	Retirement savings contributions credit. Attach Form 8880		4	
5a	Residential clean energy credit from Form 5695, line 15		5a	
b	Energy efficient home improvement credit from Form 5695, line 32		5b	
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	Reserved for future use			
f	Clean vehicle credit. Attach Form 8936 6f			
g	Mortgage interest credit. Attach Form 8396			
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			
ı	Amount on Form 8978, line 14. See instructions			
m	Credit for previously owned clean vehicles. Attach Form 8936 . 6m			
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 4, 5a, 5b, and 7. Enter here and on Form 1040	, 1040-SR, or		
	1040-NR, line 20		8	448.
		(co	ontinue	ed on page 2)

Schedule 3 (Form 1040) 2023 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 repayment of amounts included in income from earlier years	13b			
С	Elective payment election amount from Form 3800, Part III, line 6, column (i)	13c			
d	Deferred amount of net 965 tax liability (see instructions)	13d			
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.)

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

Attachment

Department of the Treasury Internal Revenue Service

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

Sequence No. 13

OMB No. 1545-0074

Name(s) shown on return Your social security number 683-56-7087 SRIKANYA 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 2023 that would require you to file Form(s) 1099? See instructions 1a Physical address of each property (street, city, state, ZIP code) 1-2-258/2/2, GOKUL NAGAR JANGAON TELANGANA IN 506167 Α В C 1b Type of Property For each rental real estate property listed **Fair Rental Personal Use** QJV (from list below) above, report the number of fair rental and **Davs Davs** 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. С 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:** Α В C Income: 3 Rents received . 3 651. 4 4 Royalties received . **Expenses:** 5 5 Advertising 6 Auto and travel (see instructions) 6 7 Cleaning and maintenance . . . 7 2,387. 8 Commissions 8 9 9 Insurance . . . 10 Legal and other professional fees 10 11 Management fees 11 2,453. 12 Mortgage interest paid to banks, etc. (see instructions) 12 13 13 14 14 2,179. Repairs 2,630. 15 Supplies 15 16 16 Taxes 17 Utilities 17 2,571. 18 2,535. 18 Depreciation expense or depletion Other (list) 19 19 20 20 14,755. 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 file Form 6198 21 -14,104. 22 Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions) 22 14,104.) 651. 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 2,535. 23d Total of all amounts reported on line 18 for all properties 23e 14,755. Total of all amounts reported on line 20 for all properties 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 14,104. Total rental real estate and royalty income or (loss). Combine lines 24 and 25. Enter the result 26

here. If Parts II, III, and 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 .

-14,104.

Form **8863**

Education Credits(American Opportunity and Lifetime Learning Credits)

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.

OMB No. 1545-0074

2023

Attachment Sequence No. 50

SRIKANYA PURMA

Your social security number 683 56 7087

	Ì	
CA	IJΤ	ION

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.

CAUTI	<u></u>		
Part	Refundable American Opportunity Credit		
1	After completing Part III for each student, enter the total of all amounts from all Parts III, line 30	1	
2	Enter: \$180,000 if married filing jointly; \$90,000 if single, head of household, or qualifying surviving spouse		
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		
4	Subtract line 3 from line 2. If zero or less, stop ; you can't take any education credit		
5	Enter: \$20,000 if married filing jointly; \$10,000 if single, head of household, or qualifying surviving spouse		
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 (rounded to	6	
	at least three places)		
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	7	
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.	8	
Part			
9	Subtract line 8 from line 7. Enter here and on line 2 of the Credit Limit Worksheet (see instructions) .	9	
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	10	2,240.
11	Enter the smaller of line 10 or \$10,000	11	2,240.
12	Multiply line 11 by 20% (0.20)	12	448.
13	Enter: \$180,000 if married filing jointly; \$90,000 if single, head of household, or qualifying surviving spouse		
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		
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		
16	Enter: \$20,000 if married filing jointly; \$10,000 if single, head of household, or qualifying surviving spouse		
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)	17	1.000
18	Multiply line 12 by line 17. Enter here and on line 1 of the Credit Limit Worksheet (see instructions) .	18	448.
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	19	448.
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REV 01/12/24 PRO

Name(s) shown on return

SRIKANYA PURMA

Your social security number

683 | 56 | 7087

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CA	UT	ION

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	Student and Educational Institution Information	n. See instructions.		
20	Student name (as shown on page 1 of your tax return)	21 Student social security number (as s	hown on page 1 of	
	SRIKANYA	your tax return)		
	PURMA	683-56-7087	,	
	Educational institution information (see instructions)			
а	. Name of first educational institution	b. Name of second educational institut	ion (if any)	
	SOUTHEAST MISSOURI STATE UNIV			
(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) Address. Number and street (or P. post office, state, and ZIP code. If instructions.		
	ONE UNIVERSITY PLAZA MAILSTOP 3740			
	CAPE GIRARDEAU MO 63701			
(2) Did the student receive Form 1098-T	(2) Did the student receive Form 1098 from this institution for 2023?	-T ☐ Yes ☐	No
(;	Did the student receive Form 1098-T from this institution for 2022 with box ☐ Yes ☒ No 7 checked?	(3) Did the student receive Form 1098 from this institution for 2022 with by 7 checked?		No
(4	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 ide if you're claiming the American opposite checked "Yes" in (2) or (3). You can 1098-T or from the institution.	portunity credit or if	you
	43-6003569			
23	Has the American opportunity credit been claimed for this student for any 4 prior tax years?	\square Yes — Stop! Go to line 31 for this student. \bowtie 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 2023 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 this student.	31
25	Did the student complete the first 4 years of postsecondary education before 2023? See instructions.	X Yes − Stop! Go to line 31 for this student. No	— Go to line 26.	
26	Was the student convicted, before the end of 2023, of a felony for possession or distribution of a controlled substance?		— Complete lines 2 ugh 30 for this stud	
CAUT			t in the same year. I	lf
	American Opportunity Credit			
27	Adjusted qualified education expenses (see instructions). Dor		27	
28	Subtract \$2,000 from line 27. If zero or less, enter -0		28	
29	• • • • • • • • • • • • • • • • • • • •		29	
30	If line 28 is zero, enter the amount from line 27. Otherwise,			
	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		T T	
31	Adjusted qualified education expenses (see instructions). Incl III, line 31, on Part II, line 10		31 2,24	40.