FILER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone number California State University San Bernardino 5500 University Parkway San Bernardino CA 92407 Contact: 909-537-5162 ECSI: 866-428-1098		1 Payments received for qualified tuition and related expenses \$7,905.60	OMB No. 1545-1574 2023 Form 1098-T	Tuition Statement	
FILER'S federal identification no. 33-0644150	STUDENT'S TIN	3		Copy B For Student	
STUDENT'S name, street address, city, state, and ZIP code DINESH CHAPALA 11803 BERNARDO TER SAN DIEGO CA 92128-1903		4 Adjustments made for a prior year	5 Scholarships or grants	This is important tax information and is being furnished to the Internal Revenue.	
		6 Adjustments to scholarships or grants for a prior year	7 Checked if the amount in box 1 includes amounts for an academic period beginning January - March 2024	Service. This form must be used to complete Form 8863 to claim education credits. Give it to the tax preparer or use it to prepare the tax return.	
Service Provider/Acct No. (see instr.) 008447160	8 Checked if at least half-time student [X]	9 Checked if a graduate student [X]	10 Ins. contract reimb./refund	prepare the tax return.	
Neither your school nor ECSI can answe	tion or ,our 1098-T, please contact your so r tax questions or provide tax advice, you n tion History	nformation regarding your tax documents thool directly, must contact your tax professional.	rtment of the Treasury-Int nts and to obtain contact informati Transaction History Box# Trans Description	ernal Revenue Service on for ECSI. If you have any	

For a complete listing of your student account transactions, please access your student account online through the student portal provided by your institution.

Access your electronic tax document at https://heartland.ecsi.net.

Create a profile and connect your Heartland key (00569-BBB6892F1B9F) to view your tax profile.