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

Submi	ssion Identification Number (SID)							
Taxpayer's name Social secur								
KRIS	SHNA REDDY MUNAGALA	654-15	-5924	1				
Spouse'	s name	Spouse's soc	ial secu	rity numb	er			
CHAI	RITHA PEDDIREDDY	196-97	-153	3				
Part	Tax Return Information — Tax Year Ending December 31, 2023 (Ente	r year you a	re aut	horizing	g.)			
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	8	6,901.			
2	Total tax		2		4,667.			
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3	1	3,572.			
4	Amount you want refunded to you		4		8,905.			
5	Amount you owe		5					
Part	Taxpayer Declaration and Signature Authorization (Be sure you get and	keep a cop	y of y	our ret	urn)			
return (to send for any Agent t paymer authoriz paymer busines taxes to persona	wledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I abo original or amended) I am now authorizing. I consent to allow my intermediate service provider, transn I my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for red delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the Lo initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account income for 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 the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation recessed days prior to the payment (settlement) date. I also authorize the financial institutions involved in the or receive confidential information necessary to answer inquiries and resolve issues related to the ali identification number (PIN) below is my signature for the income tax return (original or amended) I and Financial Withdrawal Consent.	nitter, or electro ection of the tr J.S. Treasury a licated in the tr on to debit the e the authoriza juests must be processing of payment. I furl	onic ret ransmis nd its c ax prep entry t ation. T e receiv the elector	urn origin sion, (b) elesignated aration so this accorevoke yed no la ectronic pknowledg	nator (ERO) the reason d Financial oftware for count. This (cancel) a ater than 2 payment of ge that the			
	yer's PIN: check one box only			Τ.Τ.	1			
X		mv PIN 5	5 9		as my			
_	ERO firm name	En		digits, but r all zeros				
	signature on the income tax return (original or amended) I am now authorizing.							
	I will enter my PIN as my signature on the income tax return (original or amended) I am r if you are entering your own PIN and your return is filed using the Practitioner PIN metholow.							
Your s	ignature ► M. Krishna reddy Date ►	04/08/2024						
Spous	e's PIN: check one box only				7			
X		my PIN 7	1 5	3 3	as my			
	ERO firm name	En		digits, but	:			
	signature on the income tax return (original or amended) I am now authorizing.	do	n't ente	r all zeros				
	I will enter my PIN as my signature on the income tax return (original or amended) I am r if you are entering your own PIN and your return is filed using the Practitioner PIN metholow.							
	e's signature ► P. Date ► Practitioner PIN Method Returns Only—continue below							
Snous	e's signature ► Date ►	04/08/2024						
Ороцо	Practitioner PIN Method Returns Only—continue below	,						
Part		·						
ERO's	EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN. 2 2	2 4 9 Don't ent	6 0 er all ze		7 1			
authoriz	I certify that the above numeric entry is my PIN, which is my signature for the electronic individual income tax return (original or amended) I am now authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am submitting this return in accordance with the requirements of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS <i>e-file</i> Providers of Individual Income Tax Returns.							
ERO's	signature ▶ Date ▶							
	FRO Must Retain This Form — See Instructions							

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

E1040 Department of the Treasury—Internal Revenue Service
U.S. Individual Income Tax Return

2023

OMB No. 1545-0074 IRS Use Only—Do not write or staple in this space.

For the year Jan	. 1–Dec	c. 31, 2023, or other tax year beginning		, 2023, end	ding		, 20		See sep	oarate inst	ructions.
Your first name	and m	iddle initial	Last na	ame					Your so	cial securit	y number
KRISHNA	RED.	DY	MIINI	AGALA					654	15 59	-
		s first name and middle initial	Last na								curity numbe
CHARITHA			PEDI	DIREDDY					196	97 1	533
		er and street). If you have a P.O. box, see					Apt. no.				on Campaigr
8 DAANIA	DR							İ	Check h	ere if you,	or your
City, town, or p	ost offi	ice. If you have a foreign address, also co	mplete	spaces below.	Sta	te	ZIP code				tly, want \$3
WESTBORG	UGH				MA	<u> </u>	01581		•	this fund. (ow will not	Checking a change
Foreign country	name			Foreign province/state/	count	у	Foreign postal c			or refund.	•
										You	Spouse
Filing Status	, [Single				Head of ho	ousehold (HOH	H)			
Check only	X	Married filing jointly (even if only or	ne had	income)							
one box.		Married filing separately (MFS)				☐ Qualifying	surviving spo	use (C	QSS)		
	If y	you checked the MFS box, enter the	name	of your spouse. If you	u che	cked the HOH	or QSS box,	enter	the chil	d's name	if the
	qu	ıalifying person is a child but not you	ır depe	ndent:							
Digital	At a	ny time during 2023, did you: (a) rece	eive (as	a reward, award, or	pavn	nent for proper	tv or services): or (b) sell.		
Assets		nange, or otherwise dispose of a digi	•					, ,	,	☐ Yes	⊠ No
Standard	Som	neone can claim:	pender	nt Your spous	e as	a dependent					
Deduction		Spouse itemizes on a separate retur	n or yo	u were a dual-status	alien						
Age/Blindness	You	: Were born before January 2, 1	959	Are blind Spo	ouse:	. Was bor	n before Janua	arv 2	1959	☐ Is bli	ind
Dependents			000 [(2) Social security			(4) 011-4				instructions):
•	•	First name Last name		number	′	(3) Relationshi to you	Child t			,	ner dependents
If more than four	、,							\neg			
dependents,											
see instructions and check	s —										
here											<u> </u>
Income	1a	Total amount from Form(s) W-2, be	ox 1 (se	ee instructions) .					1a	9	96,848.
	b	Household employee wages not re	eported	on Form(s) W-2 .					1b		
Attach Form(s) W-2 here. Also	С	Tip income not reported on line 1a	a (see ir	structions)					1c		
attach Forms	d	Medicaid waiver payments not rep	orted o	on Form(s) W-2 (see i	nstru	ctions)			1d		
W-2G and 1099-R if tax	е	Taxable dependent care benefits f	rom Fo	rm 2441, line 26					1e		
was withheld.	f	Employer-provided adoption bene	fits fror	m 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 instruction	ions)						1h		0.
instructions.	i	Nontaxable combat pay election (s	see inst	ructions)		<u>1i</u>				4	
	Z	Add lines 1a through 1h	· ;	· · · · · ;					1z	<u> </u>	96,848.
Attach Sch. B	2a	· —	2a			axable interest			2b	+	
if required.	3a		3a			rdinary divider			3b		
Standard	4a		4a			axable amount			4b	+	
Deduction for—	5a		5a			axable amount			5b	+	
Single or Married filing	6a	,	6a ∣			axable amount		٠ ـ	6b	-	
separately, \$13,850	_C	If you elect to use the lump-sum e		•	•	,			1 -	4	
Married filing	7	Capital gain or (loss). Attach Sched			,			. L	7	+	0 047
jointly or Qualifying	8	Additional income from Schedule							8		9,947.
surviving spouse, \$27,700	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7,		•					9	+	36,901.
Head of	10	Adjustments to income from Sche							10	+	
household, [\$20,800	11	Subtract line 10 from line 9. This is	-						11		<u>36,901.</u>
If you checked	12	Standard deduction or itemized		•	,	 5 A			12	+ - 4	27,700.
any box under Standard	13	Qualified business income deducting Add lines 12 and 13			1 099	J-A			13	+	7 700
Deduction, see instructions.	14 15	Subtract line 14 from line 11. If zer				avable incom			14		27,700. 59 201

Form 1040 (202)	3)									Page 2
Tax and	16	Tax (see instructions). Check	if any from Form	(s): 1 881	4 2 4972	3 🗌			16	6,667.
Credits	17	Amount from Schedule 2, lir	ne 3						17	
	18	Add lines 16 and 17							18	6,667.
	19	Child tax credit or credit for	other dependen	ts from Sched	ule 8812				19	
	20	Amount from Schedule 3, lir	ne 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	4,667.
	23	Other taxes, including self-e	mployment tax,	from Schedule	2, line 21 .				23	0.
	24	Add lines 22 and 23. This is	your total tax						24	4,667.
Payments	25	Federal income tax withheld								
-	а	Form(s) W-2				25a	13	,572.		
	b	Form(s) 1099				25b				
	С	Other forms (see instruction	s)			25c				
	d	Add lines 25a through 25c							25d	13,572.
If you have a	26	2023 estimated tax paymen	ts and amount a	pplied from 20	22 return				26	
qualifying child, attach Sch. EIC.	27	Earned income credit (EIC)			No .	27				
allach Sch. ElC.	28	Additional child tax credit from	m Schedule 8812			28				
	29	American opportunity credit	from Form 8863	8, line 8 . .		29				
	30	Reserved for future use .				30				
	31	Amount from Schedule 3, lir	ne 15			31				
	32	Add lines 27, 28, 29, and 31	. These are your	total other pa	ayments and ref	undable	credits		32	
	33	Add lines 25d, 26, and 32. T	hese are your to	tal payments					33	13,572.
Refund	34	If line 33 is more than line 24	1, subtract line 2	4 from line 33.	This is the amou	nt you o v	erpaid/		34	8,905.
	35a	Amount of line 34 you want			is attached, che	ck here			35a	8,905.
Direct deposit?	b	Routing number 0 1 1			c Type:	Checkir	ng 🗌 S	Savings		
See instructions.	d	Account number 3 8 5	0 1 8 8	0 3 9 4	1 3]			
	36	Amount of line 34 you want	applied to your	2024 estimate	ed tax	36				
Amount	37	Subtract line 33 from line 24	. This is the amo	ount you owe.						
You Owe		For details on how to pay, g	•	,					37	
	38	Estimated tax penalty (see in	nstructions) .			38				
Third Party		you want to allow another	•			_	7			
Designee		structions								⊠ No
		lesignee's Phone Personal identif ame no. number (PIN)						ification		
Sign		der penalties of perjury, I declare the	nat I have examined		accompanying sche	edules and			the best	of my knowledge and
Here	be	lief, they are true, correct, and com	plete. Declaration	of preparer (other	r than taxpayer) is b	ased on al	informatio	n of whic	h prepar	er has any knowledge.
пеге	Yo	ur signature		Date	Your occupation					nt you an Identity
									ection P inst.)	PIN, enter it here
Joint return? See instructions.				5.	SOFTWARE		EER	,		
Keep a copy for	Sp	ouse's signature. If a joint return, I	ooth must sign.	Date	Spouse's occupat	tion				nt your spouse an ection PIN, enter it here
your records.					STUDENT			I .	inst.)	•
	Ph	one no. (860)259-709	6	Email address	K.MUNAGALA	66@GM	AIL.CO	M		
Deid	Pre	eparer's name	Preparer's signat	ure		Date		PTIN		Check if:
Paid SYAM PRIYA RAM SAGAR GUPTA SYAM PRIYA RAM SAGAR GUPTA 04/08/2024 P0208:					2703	Self-employed				
Preparer	Fir	m's name GLOBAL TA	XES LLC			,	1.			(678)965-9522
Use Only	Firm's address 245 ROONEY CT E BRUNSWICK NJ 08816					Firm	's EIN	84-3171965		

SCHEDULE 1 (Form 1040)

Additional Income and Adjustments to Income

OMB No. 1545-0074

2023

Attachment
Seguence No. 01

Department of the Treasury Internal Revenue Service

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

KRISHNA REDDY MUNAGALA & CHARITHA PEDDIREDDY

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

654-15-5924

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	ach Schedule E .	5	-9,947.
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		
i	Prizes and awards	8i		
j	Activity not engaged in for profit income	8j		
k	Stock options	8k		
I	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 (<u>)</u>	
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:			
_		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	r here and on Form		
	1040, 1040-SR, or 1040-NR, line 8		10	-9,947.

Schedule 1 (Form 1040) 2023 Page **2**

Par	t II Adjustments to Income				
11	Educator expenses			. 11	
12	Certain business expenses of reservists, performing artists, and fee-				
	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				
16	Self-employed SEP, SIMPLE, and qualified plans				
17	Self-employed health insurance deduction				
18	Penalty on early withdrawal of savings				
19a	Alimony paid				
b	Recipient's SSN				
С	Date of original divorce or separation agreement (see instructions):				Į.
20	IRA deduction				
21	Student loan interest deduction				
22	Reserved for future use				
23	Archer MSA deduction			. 23	
24	Other adjustments:				
а	,	24a			
b	Deductible expenses related to income reported on line 8l from the				
		24b			
С	Nontaxable amount of the value of Olympic and Paralympic medals				
	· · · · · · · · · · · · · · · · · · ·	24c			
d	the state of the s	24d			
е	Repayment of supplemental unemployment benefits under the Trade Act of 1974	24e			
f		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				
	-	24i			
j		24j			
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form				
		24k			
Z	Other adjustments. List type and amount:				
		24z			Į.
25	Total other adjustments. Add lines 24a through 24z				
26	Add lines 11 through 23 and 25. These are your adjustments to income . Form 1040, 1040-SR, or 1040-NR, line 10	. Enter	r here and	on 26	
	1 OITH 1070, 1070-011, 01 1070-1111, 11110-10	• •		. 20	

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

KRISHNA REDDY MUNAGALA & CHARITHA PEDDIREDDY

Your social security number 654-15-5924

Par	Nonrelundable Credits			
1	Foreign tax credit. Attach Form 1116 if required		1	
2	Credit for child and dependent care expenses from Form 2441, line 11. Form 2441	Attach	2	
3	Education credits from Form 8863, line 19		3	2,000.
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 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			
ı	Amount on Form 8978, line 14. See instructions 6I			
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	2,000.
		(CC	ritinue	d 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

Your social security number

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

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

Sequence No. 13

OMB No. 1545-0074

KRISHNA REDDY MUNAGALA & CHARITHA PEDDIREDDY 654-15-5924 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) MUMUDURU, NELLORE NELLORE ANDHRA PRADESH IN 524309 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 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 . 3 561. 4 4 Royalties received . **Expenses:** 5 5 Advertising 6 Auto and travel (see instructions) 6 7 Cleaning and maintenance. 7 1,284. 8 Commissions 8 9 9 Insurance . . . 10 10 Legal and other professional fees 11 Management fees 11 843. 12 Mortgage interest paid to banks, etc. (see instructions) 12 13 13 14 1,389. 14 Repairs 15 Supplies 15 1,621. 16 16 Taxes 17 Utilities 17 2,013. 18 3,358. 18 Depreciation expense or depletion Other (list) 19 19 20 20 Total expenses. Add lines 5 through 19 10,508. 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 -9,947. 22 Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions) 9,947.) 561. 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 3,358. 23d Total of all amounts reported on line 18 for all properties 10,508. Total of all amounts reported on line 20 for all properties 23e 24 Income. Add positive amounts shown on line 21. Do not include any losses 24 25 Losses. Add royalty losses from line 21 and rental real estate losses from line 22. Enter total losses here 25 9,947. 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 26 -9,947.

Education Credits (American Opportunity and Lifetime Learning Credits)

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

KRISHNA REDDY MUNAGALA & CHARITHA PEDDIREDDY

Attach to Form 1040 or 1040-SR. Go to www.irs.gov/Form8863 for instructions and the latest information. OMB No. 1545-0074 Attachment Sequence No. **50**

5924

Your social security number

15

654

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 Pa	arts II	I, 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 (rou 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	portunity credit;	7	
8	Refundable American opportunity credit. Multiply line 7 by 40% (0.40). Enter on Form 1040 or 1040-SR, line 29. Then go to line 9 below.			8	
Part	II Nonrefundable Education Credits				
9	Subtract line 8 from line 7. Enter here and on line 2 of the Credit Limit Worksheet	(see	instructions) .	9	
10	After completing Part III for each student, enter the total of all amounts from a zero, skip lines 11 through 17, enter -0- on line 18, and go to line 19			10	10,000.
11	Enter the smaller of line 10 or \$10,000		[11	10,000.
12	Multiply line 11 by 20% (0.20)		[12	2,000.
13	Enter: \$180,000 if married filing jointly; \$90,000 if single, head of household, or qualifying surviving spouse	13	180,000.		
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	86,901.		
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	93,099.		
16	Enter: \$20,000 if married filing jointly; \$10,000 if single, head of household, or qualifying surviving spouse	16	20,000.		
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 (round least three places)	ded to	oat	17	1.000
18	Multiply line 12 by line 17. Enter here and on line 1 of the Credit Limit Worksheet			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	Worksheet (see	19	2,000.
or Pa	A Body Co. Ad National Association in the Co.	۸۸		4 PRO	Form 8863 (2023)

Name(s) shown on return	Your social	security	number
KRISHNA REDDY MINAGALA & CHARITHA DEDDIREDDY	654	15	5924



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	1	
20	Student name (as shown on page 1 of your tax return) CHARITHA	21 Student social security number (as s your tax return)	hown on page 1 of
	PEDDIREDDY	196-97-1533	
22	Educational institution information (see instructions)		
	. Name of first educational institution	b. Name of second educational institut	on (if any)
	SOUTH ARKANSAS UNIVERSITY		, ,,
(1) Address. Number and street (or P.O. box). City, town or post office, state, and ZIP code. If a foreign address, see	(1) Address. Number and street (or P. post office, state, and ZIP code. If	
	instructions.	instructions.	-
	100 E University MSC 9403		
	MAGNOLIA AR 71753		
(:	2) Did the student receive Form 1098-T	(2) Did the student receive Form 1098 from this institution for 2023?	-T ☐ Yes ☐ No
(:	j 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 b 7 checked?	
(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 opposed checked "Yes" in (2) or (3). You can 1098-T or from the institution.	ortunity credit or if you
	71-6007749		
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 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 31 his student.
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?	Yes - Stop! Go to line 31 for this student. No thro	– Complete lines 27 ugh 30 for this student.
CAUT			in the same year. If
	American Opportunity Credit		
27	Adjusted qualified education expenses (see instructions). Dor	i'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	rom all Parts III, line 30, on Part I, line 1.	30
	Lifetime Learning Credit		
31	Adjusted qualified education expenses (see instructions). Incl	ude the total of all amounts from all Parts	
	III line 31 on Part II line 10		31 10.000.