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.

Submission Identification Number (SID)

Taxpaver's name

Taxpayer's name	Social security number
SHIVA KUMAR KAPARABOINA	387-93-5238
Spouse's name	Spouse's social security number
Part I Tax Return Information – Tax Year Ending December 31, 2023 (Enter	r year you are 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 67,901.
2 Total tax	
3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099	3 9,376.
4 Amount you want refunded to you	4 2,867.
5 Amount you owe	5
Part II Taxpayer Declaration and Signature Authorization (Be sure you get and k	keep a copy of your return)

Under penalties of perjury, I declare that I have examined a copy of the income tax return (original or amended) I am now authorizing, and to the best of my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above are the amounts from the income tax return (original or amended) I am now authorizing. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution to debit the entry to this account. This authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate the authorization. To revoke (cancel) a payment, I must contact the U.S. Treasury Financial Agent at **1-888-353-4537**. Payment cancellation requests must be received no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I further acknowledge that the personal identification number (PIN) below is my signature for the income tax return (original or amended) I am now authorizing and, if applicable, my Electronic Funds Withdrawal Consent.

Taxpayer's PIN: check one box only

Y	l authorize	CLOBAT.	TAYES	LLC	to enter or generate my PIN	5
~	I authorize	GIODAI	TANDO		to enter or generate my Fin	En
				ERO firm name		

3	Ŭ	2	3	8	as my
Ent dor	er fiv i't er	/e dig nter a	gits, all ze	but ros	j

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 now authorizing. Check this box **only** if you are entering your own PIN **and** your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Your signature 🕨

Date 🕨 🔄

Spouse's PIN: check one box only

I authorize

to enter	or	generate	my	PIN

Enter five digits, but

don't enter all zeros

ERO firm name 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 now authorizing. Check this box **only** if you are entering your own PIN **and** your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Spouse's signature E	ate 🖡							
Practitioner PIN Method Returns Only—continue	bel	ow						
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	2	2	 	0 all zer	2	7 1	

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 *e-file* Providers of Individual Income Tax Returns.

ERO's signature >		Date 🕨	
	RO Must Retain This Form — Se bmit This Form to the IRS Unless		
For Denomicarly Deduction Act Nation and	and the velocity in the stations		Farm 9970 (Day, 01 0001)

For Paperwork Reduction Act Notice, see your tax return instructions. BAA

REV 03/04/24 PRO

1040		artment of the Treasury—Internal Revenue Servi S. Individual Income Tax		turn	202	3	OMB No. 1545	-0074	IRS Use On	ly—Do not v	vrite or sta	aple in this space.
For the year Jan	. 1-Dec	. 31, 2023, or other tax year beginning			, 2023, end	ding			, 20	See se	parate	instructions.
Your first name	and m	iddle initial	Last r	ame						Your so	cial sec	urity number
SHIVA KU	JMAR		KAP	ARABOI	INA					387	93	5238
lf joint return, s	oouse's	s first name and middle initial	Last r	ame						Spouse	's social	security number
Home address	(numbe	er and street). If you have a P.O. box, see	instruc	tions.				A	pt. no.	Preside	ntial Ele	ection Campaign
524 SWEE	T P	INE LN										ou, or your
City, town, or p	ost offi	ce. If you have a foreign address, also co	mplete	spaces be	low.	Sta	ite	ZIP co	ode			jointly, want \$3
KNIGHTDA	LE					NC	2	275	45			nd. Checking a not change
Foreign country	name			Foreign p	rovince/state/	'count	ty	Foreig	n postal code		x or refu	0
											Yc	ou 🗌 Spouse
Filing Status] Single					Head of he	ouseh	old (HOH)			
Check only] Married filing jointly (even if only or	ne had	l income)								
one box.] Married filing separately (MFS)					Qualifying	surviv	ing spouse	e (QSS)		
	lf y	you checked the MFS box, enter the	name	of your s	pouse. If yo	u che	ecked the HOF	l or QS	SS box, ent	ter the ch	ild's na	me if the
	qu	alifying person is a child but not you	ır depe	endent:								
Digital	Atar	ny time during 2023, did you: (a) rece	eive (a	s a reward	d award or	navr	ment for prope	rtv or	services): o	r (b) sell		
Assets		ange, or otherwise dispose of a digi						-			∏ Ye	es 🛛 No
Standard		eone can claim: You as a de					a dependent	, (,		
Deduction		Spouse itemizes on a separate retur					•					
Age/Blindness	S You:	: 🗌 Were born before January 2, 1	959	Are bl	lind Sp	ouse	: 🗌 Was bor	n befo	ore January	2. 1959		s blind
Dependents				(2) 5	Social security		(3) Relationsh	14			ifies for (see instructions):
If more		irst name Last name		(-)	number	,	to you	-P	Child tax	credit	Credit fo	or other dependents
than four												
dependents,												
see instructions and check	s —											
here												
Income	1a	Total amount from Form(s) W-2, b	ox 1 (s	ee instruc	ctions) .					. 1a	1	77,721.
Attach Form(s)	b	Household employee wages not re	eporte	d on Form	n(s) W-2 .					. 1t)	
W-2 here. Also	С	Tip income not reported on line 1a	(see i	nstruction	ns)					. 10	;	
attach Forms	d	Medicaid waiver payments not rep	orted	on Form(s	s) W-2 (see i	nstru	uctions)			. 10	1	
W-2G and 1099-R if tax	е	Taxable dependent care benefits f	rom Fo	orm 2441,	, line 26					. 1e	,	
was withheld.	f	Employer-provided adoption bene	fits fro	m Form 8	8839, line 29).				. 11	:	
If you did not	g	Wages from Form 8919, line 6 .								. 10	,	
get a Form W-2, see	h	Other earned income (see instructi					· · · ·	· ·		. 1ł	1	0.
instructions.	i	Nontaxable combat pay election (s	see ins	structions)			1 i					
	z	Add lines 1a through 1h	·		· · .			· ·		. 1 2	-	77,721.
Attach Sch. B	2a	'	2a				axable interest					281.
if required.	<u>3a</u>		3a				Ordinary divider				-	
Standard	4a	-	4a				axable amoun			. 4k		
Deduction for –	5a	-	5a				axable amoun			. 5k	-	
 Single or Married filing 	6a	, _	6a				axable amoun	t		. 6k)	
separately,	_c	If you elect to use the lump-sum e						• •				
\$13,850 • Married filing	7	Capital gain or (loss). Attach Sche						• •			-	10 101
jointly or Qualifying	8	Additional income from Schedule								. 8		-10,101.
surviving spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7,		-						. 9		67,901.
\$27,700 • Head of	10	Adjustments to income from Sche						• •		. 10	_	
household, \$20,800	11	Subtract line 10 from line 9. This is	-		-			• •		. 11		67,901.
• If you checked	12	Standard deduction or itemized						• •		. 12		13,850.
any box under Standard	13	Qualified business income deducti						• •		. 13	-	10.050
Deduction, see instructions.	14	Add lines 12 and 13			• • •					. 14	_	13,850.
	15	Subtract line 14 from line 11. If zer	o or le	ss, enter	-U This is y	our 1	taxable incom	e.		. 15		54,051.

For Disclosure, Privacy Act, and Paperwork Reduction Act Notice, see separate instructions.

Form **1040** (2023)

Form 1040 (2023	5)								Page 2
Tax and	16	Tax (see instructions). Check if a	any from Form	(s): 1 🗌 881	4 2 4972	2 3 🗌		. 16	7,204.
Credits	17	Amount from Schedule 2, line 3	3					. 17	
	18	Add lines 16 and 17						. 18	7,204.
	19	Child tax credit or credit for oth	ner dependent	ts from Sched	ule 8812			. 19	
	20	Amount from Schedule 3, line 8	3					. 20	695.
	21	Add lines 19 and 20						. 21	695.
	22	Subtract line 21 from line 18. If	zero or less, (enter -0				. 22	6,509.
	23	Other taxes, including self-emp	ployment tax,	from Schedule	e 2, line 21 .			. 23	0.
	24	Add lines 22 and 23. This is yo	ur total tax					. 24	6,509.
Payments	25	Federal income tax withheld from							
,	а	Form(s) W-2				25a	9,3	356.	
	b	Form(s) 1099				25b		20.	
	с	Other forms (see instructions)				25c			
	d	Add lines 25a through 25c				· · · · ·		. 25d	9,376.
H way have a	26	2023 estimated tax payments a						. 26	,
If you have a L qualifying child,	27	Earned income credit (EIC) .				1 1			
attach Sch. EIC.	28	Additional child tax credit from S				28			
	29	American opportunity credit fro				29			
	30	Reserved for future use				30			
	31	Amount from Schedule 3, line							
	32	Add lines 27, 28, 29, and 31. T					credits	. 32	
	33	Add lines 25d, 26, and 32. The							9,376.
Refund	34	If line 33 is more than line 24, s						. 34	2,867.
neiuliu	35a	Amount of line 34 you want ref				•	-		2,867.
Direct deposit?	b	Routing number 0 6 2 0				X Check		/ings	2,00,1
See instructions.	d		7 8 0					/iligs	
	36	Amount of line 34 you want ap				36			
A		• • •				30			
Amount You Owe	37	Subtract line 33 from line 24. T For details on how to pay, go to						07	
rou Owe	20		-	-				. 37	
	38	Estimated tax penalty (see inst							
Third Party		you want to allow another postructions			m with the IR		Yes. Com	nloto holow	XNo
Designee		signee's		Phone		· · [l identification	
	nai	0		no.			number		
Sign	Un	der penalties of perjury, I declare that	I have examined	d this return and	accompanying so	chedules an	d statements, a	and to the best	of my knowledge and
Here	bel	ief, they are true, correct, and comple	te. Declaration of	of preparer (othe	r than taxpayer) is	s based on a	all information o	of which prepar	rer has any knowledge.
nere	Yo	ur signature		Date	Your occupatio	n			ent you an Identity
									PIN, enter it here
Joint return?				-			NGINEER	(see inst.)	
See instructions. Keep a copy for	Sp	ouse's signature. If a joint return, bot	n must sign.	Date	Spouse's occu	oation			ent your spouse an tection PIN, enter it here
your records.								(see inst.)	colorr in, citter it here
	Ph	one no. (334) 492-0036		Email address	SHIVARAMACH	ANDRA534	ACMATI, COM		
			reparer's signat			Date		TIN	Check if:
Paid		PRIYA RAM SAGAR GUPTA TALLAM SY			GUPTA TALL)2082703	Self-employed
Preparer	-	m's name GLOBAL TAXE		INTEL DAGAL			0/2027 E	1	(678) 965-9522
Use Only		0.45 5.000		NSWICK N	J 08816				84-3171965
Co to use in a				NOWICK N				Firm's EIN	Form 1040 (2023)
GU IU WWW.Irs.go	w/rom	1040 for instructions and the latest i	mormation.		BAA	REV 03/	/04/24 PRO		Form 1040 (2023)

SCHEDULE	1
(Form 1040)	

Department of the Treasury

Additional Income and Adjustments to Income

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. **01**

Internal Revenue Service Name(s) shown on Form 1040, 1040-SR, or 1040-NR Your social security number SHIVA KUMAR KAPARABOINA 387-93-5238

DIIIV			<u> </u>	
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 Sche		5	-10,101.
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	· · · · · ·		
е	Income from Form 8853			
f	Income from Form 8889			
g	Alaska Permanent Fund dividends			
ĥ	Jury duty pay			
i	Prizes and awards			
j	Activity not engaged in for profit income			
k	Stock options			
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)			
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)	
t	Pension or annuity from a nonqualifed deferred compensation plan or			
	a nongovernmental section 457 plan			
u	Wages earned while incarcerated			
Ζ	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. Enter here ar			
	1040, 1040-SR, or 1040-NR, line 8	<u></u>	10	-10,101.
For Pa	perwork Reduction Act Notice, see your tax return instructions.		Schedule	e 1 (Form 1040) 2023

Par	t II Adjustments to Income			1
11	Educator expenses		11	
12	Certain business expenses of reservists, performing artists, and fee-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)		-	
b	Deductible expenses related to income reported on line 8I from the			
	rental of personal property engaged in for profit		-	
С	Nontaxable amount of the value of Olympic and Paralympic medals and USOC prize money reported on line 8m			
d	Reforestation amortization and expenses			
e	Repayment of supplemental unemployment benefits under the Trade			
Ŭ	Act of 1974			
f	Contributions to section 501(c)(18)(D) pension plans		-	
g	Contributions by certain chaplains to section 403(b) plans 24g			
-	Attorney fees and court costs for actions involving certain unlawful			
	discrimination claims (see instructions)			
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			
j	Housing deduction from Form 2555			
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form			
	1041)			
z	Other adjustments. List type and amount:			
	24z			
25	Total other adjustments. Add lines 24a through 24z		25	
26	Add lines 11 through 23 and 25. These are your adjustments to income. Enter			
	Form 1040, 1040-SR, or 1040-NR, line 10		26	
	BAA REV 0	3/04/24 PRO	Schedule	e 1 (Form 1040) 2023

Department of the Treasury

Additional Credits and Payments

OMB No. 1545-0074 2

3

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

	artment of the Treasury nal Revenue Service Go to www.irs.gov/Form1040 for instructions and the latest information.				Atta Seq	chment uence No. 03
	(s) shown on Form 1040, 1040-SR, (or 1040-NR				curity number
Pa	va kumar kaparaboina rt I Nonrefundable Credi	ts		387-5	3-523	8
1	Foreign tax credit. Attach Fo				1	
2	0	dent care expenses from Form 244			-	
	Form 2441				2	
3	Education credits from Form	8863, line 19			3	695.
4	Retirement savings contribut	tions credit. Attach Form 8880			4	
5a	Residential clean energy cre	dit from Form 5695, line 15			5a	
b	Energy efficient home impro-	vement credit from Form 5695, line 32			5b	
6	Other nonrefundable credits					
а	General business credit. Atta	ach Form 3800	6a			
b	Credit for prior year minimur	n tax. Attach Form 8801	6b			
С	Adoption credit. Attach Form	18839	6c			
d	Credit for the elderly or disat	oled. Attach Schedule R	6d			
е	Reserved for future use .		6e			
f	Clean vehicle credit. Attach	Form 8936	6f			
g	Mortgage interest credit. Att	ach Form 8396	6g			
h	District of Columbia first-time	homebuyer credit. Attach Form 8859	6h			
i	Qualified electric vehicle cree	dit. Attach Form 8834	6i			
j	Alternative fuel vehicle refueli	ng property credit. Attach Form 8911	6j			
k	Credit to holders of tax cred	it bonds. Attach Form 8912	6k			
Т	Amount on Form 8978, line	4. See instructions	61			
m	Credit for previously owned	clean vehicles. Attach Form 8936.	6m			
z	Other nonrefundable credits.	List type and amount:				
			6z			
7	Total other nonrefundable cr	edits. Add lines 6a through 6z			7	
8	Add lines 1 through 4, 5a, 5	5b, and 7. Enter here and on Form 1	040, 1040-8	SR, or		
	1040-NR, line 20				8	695.

For Paperwork Reduction Act Notice, see your tax return instructions.

Schedule 3 (Form 1040) 2023

Schedule 3 (Form 1040) 2023

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	
	BAA REV	03/04/24 PRO	Schedule 3 (I	Form 1040) 202

SCHEDULE E (Form 1040)		Supplemental Income and Loss (From rental real estate, royalties, partnerships, S corporations, estates, trusts, REMICs, etc.)									OMB No. 1545-0074			
			•	-		Cs, etc.)	2023							
Department of the Treasury Internal Revenue Service Go to www.irs.gov/ScheduleE for							Attachment Sequence No. 13							
Name(s) shown on return											Your soci	cial security number		
SHIV	'A KUMAR KA	PARAI	BO	INA								93-5238		
Part				From Rental Rea							1			
				e business of renting pe s from Form 4835 on pa		ty, use	Schedul	e C. See	instru	ctions. If you	are an indi	vidual, rep	ort farm	
Α				I	0	to file	Form(s)	10992.5	See ins	structions			s X No	
	Did you make any payments in 2023 that would require you to file Form(s) 1099? See instructions													
1 a	Physical address of each property (street, city, state, ZIP code)													
	SAINIKPURI HYDERABAD TELANGANA IN 500094													
 	SAINIKPUK			RADAD ILLANGAN	A IN JUUU	194								
1b	Type of Prope	rtv	2	For each rental real	estate prope	rtv list	ted		Fa	ir Rental	Persor	nal Use	0.11/	
	(from list below		-	above, report the nu	Imber of fair I	rental						iys	QJV	
Α	3			personal use days.				Α	355		0			
В				if you meet the required joint ventur				В						
C								С						
	of Property:								_					
	Single Family R				ort-Term Rent	tal	5 Land			Self-Rental				
2	Multi-Family Re	sidenc	ce	4 Commercial			6 Roya	alties	8	Other (desc	scribe)			
							Properties:							
Incom								Α		В			С	
3						3		5	20.					
4		ivea .	•			4								
Exper 5						5								
6	-			tructions)		6								
7		•				7		1,0	025.					
8	-						8							
9						9								
10				ional fees		10								
11						11		1,1	54.					
12		•		to banks, etc. (see in		12								
13						13			6.6					
14						14		2,8						
15 16						15 16		2,6	99.					
17						17		2,8	77					
18				r depletion		18		270						
19	Other (list)					19								
20	· · ·			es 5 through 19 .		20		10,6	21.					
21	Subtract line 2	0 from	n lin	ne 3 (rents) and/or 4 (royalties). If									
				structions to find out	•									
						21		-10,1	01.					
22				state loss after limita		00	(10 10		(١	(
23a	on Form 8582 (see instructions)						<u>)</u> 520.	(
zsa b			-	orted on line 3 for all					23a 23b		520.			
c			-	orted on line 12 for a					23c					
d			-	orted on line 18 for a					23d					
e			-	orted on line 20 for a					23e	10	0,621.			
24			•	mounts shown on lin		inclu	de any lo	sses			. 24			
25	Losses. Add ro	valtv lo	255	es from line 21 and rer	ntal real estate	e losse	es from lir	ne 22, Fi	nter to	tal losses he	re 25	(10,101.	

ZIJ 26 Total rental real estate and royalty income or (loss). Combine lines 24 and 25. Enter the result 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 .

For Paperwork Reduction Act Notice, see the separate instructions.

26

-10,101.

-10,101.

NPA

Form **8863**

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

CAUTION

Education Credits (American Opportunity and Lifetime Learning Credits)

Attach to Form 1040 or 1040-SR.

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

	OMB No. 1545-0074						
		20	23				
		Attachme Sequenc	ent e No. 50				
Your social security number							
38	7	93	5238				

SHIVA KUMAR KAPARABOINA

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.

For Pa	perwork Reduction Act Notice, see your tax return instructions.	AA		REV 03/04/2	4 PRO	Form 8863 (2023)
	instructions) here and on Schedule 3 (Form 1040), line 3				19	695.
19	Nonrefundable education credits. Enter the amount from line 7 of the Credit			•		
18	Multiply line 12 by line 17. Enter here and on line 1 of the Credit Limit Worksheet	tions) .	18	695.		
	• Less than line 16, divide line 15 by line 16. Enter the result as a decimal (roun least three places)	ded t	o at		17	1.000
	• Equal to or more than line 16, enter 1.000 on line 17 and go to line 18					
17	qualifying surviving spouse	16		10,000.		
16	line 18, and go to line 19	15		22,099.		
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		22 000		
17	2555 or 4563, or you're excluding income from Puerto Rico, see Pub. 970 for the amount to enter instead	14		67,901.		
14	Enter the amount from Form 1040 or 1040-SR, line 11. But if you're filing Form	13		JU, UUU.		
13	Enter: \$180,000 if married filing jointly; \$90,000 if single, head of household, or qualifying surviving spouse	13		90,000.	12	
11 12	Multiply line 11 by 20% (0.20)				12	<u> </u>
44	zero, skip lines 11 through 17, enter -0- on line 18, and go to line 19 Enter the smaller of line 10 or \$10,000				10 11	<u> </u>
10	After completing Part III for each student, enter the total of all amounts from a					
9	Subtract line 8 from line 7. Enter here and on line 2 of the Credit Limit Worksheet	(see	instruc	ctions) .	9	
Part	on Form 1040 or 1040-SR, line 29. Then go to line 9 below				8	
8	Refundable American opportunity credit. Multiply line 7 by 40% (0.40). Enter					
7	Multiply line 1 by line 6. Caution: If you were under age 24 at the end of th 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	portur	nity credit;	7	
	at least three places)				0	
	 Equal to or more than line 5, enter 1.000 on line 6			}	6	
6	If line 4 is:					
5	Enter: \$20,000 if married filing jointly; \$10,000 if single, head of household, or qualifying surviving spouse	5				
4	Subtract line 3 from line 2. If zero or less, stop ; you can't take any education credit	4				
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				
2	Enter: \$180,000 if married filing jointly; \$90,000 if single, head of household, or qualifying surviving spouse	2				
1	After completing Part III for each student, enter the total of all amounts from all P	arts I	II, line	30	1	
Part	Refundable American Opportunity Credit					

Form 8863 (2023) Page					
Name(s) shown on return	Your social	security	number		
SHIVA KUMAR KAPARABOINA	387	93	5238		

CAUT	Complete Part III for each student for whom credit or lifetime learning credit. Use addition	-	•	
Par	Student and Educational Institution Informatio	n. See	e instructions.	
20	Student name (as shown on page 1 of your tax return)	21	Student social security number (as sh	nown on page 1 of
	SHIVA KUMAR KAPARABOINA		your tax return) 387-93-5238	
22	Educational institution information (see instructions)		507-95-5250	
	Name of first educational institution	b	Name of second educational institution	on (if anv)
•	CAMPBELLSVILLE UNIVERSITY INC			
(Address. Number and street (or P.O. box). City, town or post office, state, and ZIP code. If a foreign address, see instructions. 1 UNIVERSITY DRIVE 	(1) Address. Number and street (or P.C post office, state, and ZIP code. If a instructions.	
	CAMPBELLSVILLE KY 42718			
(1	2) Did the student receive Form 1098-T from this institution for 2023? ⊠ Yes □ No	(2) Did the student receive Form 1098- from this institution for 2023?	T 🗌 Yes 🗌 No
(3) Did the student receive Form 1098-T from this institution for 2022 with box Yes X 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 ider if you're claiming the American opp checked "Yes" in (2) or (3). You can 1098-T or from the institution.	ortunity credit or if you
	61-0469267			
23	Has the American opportunity credit been claimed for this student for any 4 prior tax years?		Yes — Stop! Go to line 31 for this student. 🗙 No -	- Go to line 24.
24	Was the student enrolled at least half-time for at least one academic period that began or is treated as having begun in 2023 at an eligible educational institution in a program leading towards a postsecondary degree, certificate, or other recognized postsecondary educational credential? See instructions.	X		- Stop! Go to line 31 nis student.
25	Did the student complete the first 4 years of postsecondary education before 2023? See instructions.	×)	Yes — Stop! Go to line 31 for this student. 🗌 No -	- Go to line 26.
26	Was the student convicted, before the end of 2023, of a felony for possession or distribution of a controlled substance?			- Complete lines 27 ugh 30 for this student.
CAUT	You can't take the American opportunity credit and the layou complete lines 27 through 30 for this student, don't a			in the same year. If
	American Opportunity Credit			
27	Adjusted qualified education expenses (see instructions). Do			27
28	Subtract \$2,000 from line 27. If zero or less, enter -0	28		
29 20	Multiply line 28 by 25% (0.25)	29		
30	enter the result. Skip line 31. Include the total of all amounts f			30
	Lifetime Learning Credit		- , , ,	
31	Adjusted qualified education expenses (see instructions). Incl III, line 31, on Part II, line 10			31 3,477.
				Form 8863 (2022)