### 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)		•		
Taxpaye	r's name	Social securit	y numb	er	
NARI	ENDRA KUNCHALA	048-61-	-541	3	
Spouse'	s name	Spouse's soc	ial secu	ırity numl	ber
Part	Tax Return Information — Tax Year Ending December 31, 2023 (Enter	year you a	re au	thorizin	g.)
Enter v	whole dollars only on lines 1 through 5.				<u> </u>
Note:	Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.				
1	Adjusted gross income		1	8	34,961.
2	Total tax		2		9,056.
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3	1	15,141.
4	Amount you want refunded to you		4		6,085.
5 Part	Amount you owe	een a con	5 v of v	OUR PA	turn)
	penalties of perjury, I declare that I have examined a copy of the income tax return (original or amended)				
for any Agent t paymer authoriz paymer busines taxes t persona	If my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejected delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U. to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indicated from the financial information account indicated from the financial information from the financial from the financial from the financial financial institutions involved in the financial information information from the financial institutions involved in the financial information from the financial institution for financial from financial financial financial institution for financial financ	S. Treasury are cated in the tand to debit the the authorizates must be processing of ayment. I furt	nd its of ax preparties of the elements of the	designate paration sto this action is the control of the control o	ed Financial software for count. This e (cancel) a ater than 2 payment of ge that the
					7
Тахра	yer's PIN: check one box only  I authorize GLOBAL TAXES LLC to enter or generate r	ny DINI 1	5 4	1 1 3	
	ERO firm name signature on the income tax return (original or amended) I am now authorizing.	Ent		digits, bu r all zero	
	I will enter my PIN as my signature on the income tax return (original or amended) I am not if you are entering your own PIN <b>and</b> your return is filed using the Practitioner PIN method below.				
Your s	ignature ▶ Date ▶				
Spous	se's PIN: check one box only				_
	I authorize to enter or generate r	nv PIN			as my
	ERO firm name	Ent		digits, bu	t
	signature on the income tax return (original or amended) I am now authorizing.			r all zeros	
	I will enter my PIN as my signature on the income tax return (original or amended) I am no if you are entering your own PIN <b>and</b> your return is filed using the Practitioner PIN method below.				
Spous	e's signature ▶ Date ▶				
	Practitioner PIN Method Returns Only—continue below				
Part	Certification and Authentication — Practitioner PIN Method Only				
ERO's	EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN.		6 0	8 2	7 1
		Don't ente	er all ze	eros	
authori	that the above numeric entry is my PIN, which is my signature for the electronic individual income taked to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am submit ments of the Practitioner PIN method and <b>Pub. 1345</b> , Handbook for Authorized IRS <i>e-file</i> Providers of In	tting this retu	rn in a	accordan	ce with the
ERO's	signature ▶ Date ▶				
	ERO Must Retain This Form — See Instructions	_			
	Don't Submit This Form to the IRS Unless Requested To D	o So			

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



OMB No. 1545-0074

IRS Use Only-Do not write or staple in this space

For the year Jar	n. 1–Dec	c. 31, 2023, or other tax year beginning		, 2023, end	ling		, 20		See	separate	instructions.
Your first name	and m	iddle initial	Last na	ıme					Your	social se	curity number
NARENDRA	Α		KUNC	CHALA					04	8   61	5413
If joint return, s	pouse'	s first name and middle initial	Last na	ıme					Spou	se's socia	al security number
Home address	(numb	er and street). If you have a P.O. box, see	instructi	ons.			Apt. r	10.	Pres	idential El	lection Campaign
_1291 AME	3ER	RIDGE ROAD, NORTHWEST							- 1		you, or your
City, town, or p	ost off	ice. If you have a foreign address, also co	mplete s	spaces below.	Sta	ate	ZIP code				j jointly, want \$3 und. Checking a
CONCORD					NC	T.	28027		1 0		I not change
Foreign country	y name			Foreign province/state/o	count	ty	Foreign po	stal cod	le your	tax or ref	
										Y	ou Spouse
Filing Status	s 🗵	Single				☐ Head of he	ousehold (	(HOH)			
Check only		Married filing jointly (even if only or	ne had i	income)							
one box.		Married filing separately (MFS)				☐ Qualifying	surviving	spous	e (QSS)		
	lf y	you checked the MFS box, enter the	name o	of your spouse. If you	ı che	ecked the HOH	or QSS b	ox, en	nter the	child's na	ame if the
	qι	ıalifying person is a child but not you	ır deper	ndent:							
Digital	At a	ny time during 2023, did you: (a) rece	eive (as	a reward, award, or	navr	ment for prope	rtv or serv	ices): (	or (b) se		
Assets		nange, or otherwise dispose of a digi								, □Y	′es ⊠ No
Standard		neone can claim: You as a de		_ <u>`</u>			, ,				
Deduction	_	Spouse itemizes on a separate return		•		•					
		· <u> </u>									
		: Were born before January 2, 1	959 [	_ Are blind Spo	ouse	:: ∐ Was bor	n before J				ls blind
Dependent				(2) Social security	,	(3) Relationsh	ıb İ, ,		•	1	(see instructions):
If more	(1) F	irst name Last name		number		to you	C	hild tax	credit	Credit f	for other dependents
than four dependents,									1		
see instruction	s								1		
and check	ı —								]		
here L		Tabalana and from Farm (s) W.O. Is	4 /							4-	00 255
Income	1a	Total amount from Form(s) W-2, bo	•	,					_	1a	98,255.
Attach Form(s)	b	Household employee wages not re		, ,					_	1b	
W-2 here. Also attach Forms	C	Tip income not reported on line 1a (see instructions)							1c		
W-2G and	d	· ·		, , , ,	nstru	actions)			_	1d	
1099-R if tax	e	Taxable dependent care benefits f		,					•	1e	
was withheld.  If you did not	f	Employer-provided adoption bene							•	1f	
get a Form	g h	Wages from Form 8919, line 6 .  Other earned income (see instructi								1g 1h	0.
W-2, see	i	Nontaxable combat pay election (s	,				i · ·		.	111	
instructions.	z	Add lines to through th		140010113)	•					1z	98,255.
Attach Sch. B	<u>-</u>	1	2a		h Т	axable interest				2b	70,200.
if required.	3a		3a			Ordinary divider			_	3b	
	4a		4a			axable amoun			_	4b	
Standard	5a		5a			axable amoun			_	5b	
Deduction for— Single or	6a		6a			axable amoun			_	6b	
Married filing	С	If you elect to use the lump-sum el	_								
separately, \$13,850	7	Capital gain or (loss). Attach Scheo		·	•	,				7	
<ul> <li>Married filing jointly or</li> </ul>	8	Additional income from Schedule								8	-13,294.
Qualifying surviving spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7,	-						.	9	84,961.
\$27,700	10	Adjustments to income from Sche		•					.	10	
Head of household,	11	Subtract line 10 from line 9. This is							.	11	84,961.
\$20,800	12	Standard deduction or itemized	•	-						12	17,905.
If you checked any box under	13	Qualified business income deducti				95-A			.	13	
Standard Deduction,	14	Add lines 12 and 13							. [	14	17,905.
see instructions.	15	Subtract line 14 from line 11. If zer	o or les	s, enter -0 This is y	our t	taxable incom	ie	<u>.</u> .		15	67,056.

Form 1040 (2023	3)								Page 2
Tax and	16	Tax (see instructions). Check	if any from Form	(s): <b>1</b> 881	4 <b>2</b> 🗌 4972	з 🗌		16	10,064.
Credits	17	Amount from Schedule 2, lir	ne3					17	
	18	Add lines 16 and 17						18	10,064.
	19	Child tax credit or credit for	other dependent	ts from Sched	ule 8812			19	
	20	Amount from Schedule 3, lir	ne 8					20	1,008.
	21	Add lines 19 and 20						21	1,008.
	22	Subtract line 21 from line 18	B. If zero or less,	enter -0				22	9,056.
	23	Other taxes, including self-e	mployment tax,	from Schedule	e 2, line 21			23	0.
	24	Add lines 22 and 23. This is	your <b>total tax</b>					24	9,056.
<b>Payments</b>	25	Federal income tax withheld	I from:						
	а	Form(s) W-2				<b>25a</b> 15	,141		
	b	Form(s) 1099				25b			
	С	Other forms (see instruction	s)			25c			
	d	Add lines 25a through 25c						25d	15,141.
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			
allacii Scii. Elc.	28	Additional child tax credit from	m Schedule 8812			28			
	29	American opportunity credit	from Form 8863	3, line 8 .     .		29			
	30	Reserved for future use .				30			
	31	Amount from Schedule 3, lin	ne 15			31			
	32	Add lines 27, 28, 29, and 31	. These are your	total other pa	ayments and refu	ndable credits		32	
	33	Add lines 25d, 26, and 32. T	hese are your <b>to</b>	tal payments				33	15,141.
Refund	34	If line 33 is more than line 24	4, subtract line 2	4 from line 33.	This is the amour	nt you <b>overpaid</b>		34	6,085.
	35a	Amount of line 34 you want	refunded to you	ı. If Form 8888	is attached, chec	k here	. 🗆	35a	6,085.
Direct deposit?	b	Routing number 0 2 1			,, <u> </u>	Checking	Savings		
See instructions.	d	Account number 3 8 1	0 4 9 2	9 7 6 3	3 2				
	36	Amount of line 34 you want	applied to your	2024 estimate	ed tax	36			
Amount You Owe	37	Subtract line 33 from line 24 For details on how to pay, g						37	
104 0 110	38	Estimated tax penalty (see in	_	-		38		07	
Third Party		you want to allow another							
Designee		,	•				omplete	below.	⊠ No
200.900	De	esignee's		Phone			onal iden		_
	na	me		no.		num	ber (PIN)		
Sign		der penalties of perjury, I declare t lief, they are true, correct, and com							, ,
Here			ipiete. Deciaration t	· · · · ·	, <i>, ,</i>	sed on an imormati			, ,
	Yo	our signature		Date	Your occupation				nt you an Identity IN, enter it here
Joint return?					SOFTWARE E	NGTNEER		e inst.)	irv, onto it nore
See instructions.	Sp	ouse's signature. If a joint return, l	both must sign.	Date	Spouse's occupation		If th	ne IRS se	nt your spouse an
Keep a copy for your records.								ntity Prote e inst.)	ection PIN, enter it here
	Ph	one no. (848)219-574	5	Email address	Kunchala.nare	endra@gmail.c	om		
Doid	Pr	eparer's name	Preparer's signat	ure		Date	PTIN		Check if:
Paid	SYA	M PRIYA RAM SAGAR GUPTA TALLAM	SYAM PRIYA	RAM SAGAR	GUPTA TALLAM	03/12/2024	P0208	32703	Self-employed
Preparer Use Only	Fir	m's name GLOBAL TA	XES LLC				Pho	one no. (	(678)965-9522
Use Only	Fir	m's address 245 ROONE	Y CT E BRU	NSWICK N	J 08816		Fire	n's EIN	84-3171965

### SCHEDULE 1 (Form 1040)

### **Additional Income and Adjustments to Income**

OMB No. 1545-0074

2023

Attachment
Sequence No. 01

Department of the Treasury Internal Revenue Service

NARENDRA KUNCHALA

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.

	Sequence No. <b>U1</b>
Your soc	ial security number
048-61	-5413

Par	t 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. Atta	ach Schedule E .	5	-13,294.
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 (	$\overline{)}$	
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		
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)	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 (	)	
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 <b>additional income</b> . Enter	here and on Form		10.05:
	1040, 1040-SR, or 1040-NR, line 8		10	-13,294.

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				
	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:				
0E	Total ather adjustments Add lines 04s through 04s	24z		0-	
25 06	Total other adjustments. Add lines 24a through 24z			25	
26	Add lines 11 through 23 and 25. These are your <b>adjustments to income</b> Form 1040, 1040-SR, or 1040-NR, line 10	. Enter	nere and on	06	
				26	I- 4 (F 4040) 2222
	BAA	REV 03/	04/24 PRO	ocnedu	le 1 (Form 1040) 2023

## SCHEDULE 3 (Form 1040)

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

### **Additional Credits and Payments**

OMB No. 1545-0074

2023

Attachment

Department of the Treasury Internal Revenue Service

NARENDRA KUNCHALA

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

Go to www.irs.gov/Form1040 for instructions and the latest information.

Attachment Sequence No. 03 Your social security number

048-61-5413

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	, line 11. Attach	2	
3	Education credits from Form 8863, line 19		3	1,008.
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	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 credits. Add lines 6a through 6z		7	
8	Add lines 1 through 4, 5a, 5b, and 7. Enter here and on Form 10	040, 1040-SR, o		
	1040-NR, line 20		8	1,008.
		(	continue	d on page 2)

Schedule 3 (Form 1040) 2023 Page **2** 

Par	t II 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 A (Form 1040)

**Itemized Deductions** 

Attach to Form 1040 or 1040-SR.

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

OMB No. 1545-0074

2023

Attachment
Sequence No. 07

Department of the Treasury Internal Revenue Service

ion: If you are claiming a not qualified disaster loss on Form 4684, see the instructions for line 16

Internal Revenue Se	ervice	Caution: If you are claiming a net qualified disaster loss on Form 4684, see the	instructions for line	б.	Sequence No. <b>U</b> /
Name(s) shown on	Form	1040 or 1040-SR		Your s	ocial security number
NARENDRA I	KUN	CHALA		048-	61-5413
Medical		Caution: Do not include expenses reimbursed or paid by others.			
and	1	Medical and dental expenses (see instructions)	1		
Dental		Enter amount from Form 1040 or 1040-SR, line 11   2			
Expenses		Multiply line 2 by 7.5% (0.075)	3		
•		Subtract line 3 from line 1. If line 3 is more than line 1, enter -0		4	
Taxes You		State and local taxes.		·	
Paid					
i did	a	State and local income taxes or general sales taxes. You may include either income taxes or general sales taxes on line 5a, but not both. If			
		you elect to include general sales taxes instead of income taxes,			
		check this box	<b>5a</b> 4,19	,	
	ŀ	State and local real estate taxes (see instructions)	5b 2,35		
		State and local personal property taxes	5c 2,35.	2	
		I Add lines 5a through 5c		_	
			<b>5d</b> 6,54	٥.	
	e	Enter the smaller of line 5d or \$10,000 (\$5,000 if married filing	<b>5e</b> 6.54	_	
	6	separately)	<b>5e</b> 6,54	٥.	
	O	Other taxes. List type and amount:	6		
	7	Add lines Es and 6	-		6 546
		Add lines 5e and 6		7	6,546.
Interest	8	Home mortgage interest and points. If you didn't use all of your home			
You Paid		mortgage loan(s) to buy, build, or improve your home, see			
Caution: Your mortgage interest		instructions and check this box			
deduction may be	а	Home mortgage interest and points reported to you on Form 1098.			
limited. See instructions.		See instructions if limited	<b>8a</b> 11,359	<del>)</del>	
	b	Home mortgage interest not reported to you on Form 1098. See			
		instructions if limited. If paid to the person from whom you bought the			
		home, see instructions and show that person's name, identifying no.,			
		and address	8b	_	
	C	Points not reported to you on Form 1098. See instructions for special			
		rules	8c	_	
		Reserved for future use	8d		
		Add lines 8a through 8c	<b>8e</b> 11,359	9.	
		Investment interest. Attach Form 4952 if required. See instructions	9		
	10	Add lines 8e and 9		10	11,359.
Gifts to	11	Gifts by cash or check. If you made any gift of \$250 or more, see			
Charity		instructions	11	_	
Caution: If you made a gift and	12	Other than by cash or check. If you made any gift of \$250 or more,			
got a benefit for it,		see instructions. You <b>must</b> attach Form 8283 if over \$500	12		
see instructions.		Carryover from prior year	13		
	14	Add lines 11 through 13		14	
Casualty and	15	Casualty and theft loss(es) from a federally declared disaster (other			
Theft Losses		disaster losses). Attach Form 4684 and enter the amount from line 1		е	
		instructions		15	
Other	16	Other—from list in instructions. List type and amount:			
Itemized					
Deductions				16	
Total	17	Add the amounts in the far right column for lines 4 through 16. Also, e	nter this amount o	n	
Itemized		Form 1040 or 1040-SR, line 12		17	17,905.
Deductions	18	If you elect to itemize deductions even though they are less than your		۱,	
		check this box	[		

#### **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.

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.

Attachment Sequence No. 13

OMB No. 1545-0074

NARI	ENDRA KUNCHALA						048-6	1-5413	)
Par	Income or Loss From Rental Real Estate an Note: If you are in the business of renting personal proper			C Soc	inetru	ctions If you	aro an indiv	idual ror	ort form
	rental income or loss from <b>Form 4835</b> on page 2, line 40.	rty, use	Scriedule	<b>c</b> . see	HISTIU	Clions. II you	are an indiv	nuuai, rep	on iaiii
Α	Did you make any payments in 2023 that would require you	to file	Form(s)	1099? 5	See ins	structions.		. <b>Y</b>	es 🗵 No
	If "Yes," did you or will you file required Form(s) 1099? .								
1a	Physical address of each property (street, city, state, ZII								
Α	SURARAM COLONY, QUTBULLAPUR HYDERABAD T		<u> </u>	N 50	0055				
	SORARAM COHONI, QUIBUHLAFOR HIDERABAD	LELIAL	IGAINA I	-IN 30	0033				
C									
1b	Type of Property 2 For each rental real estate prope	rty liet	ed		E	ir Rental	Person	al Hea	
10	(from list below) above, report the number of fair				'	Days	Da		QJV
Α	personal use days. Check the Q	JV box	c only	Α		365		0	
В	if you meet the requirements to f			В					
С	qualified joint venture. See instru	ictions	S.	С					
Туре	of Property:								
1	Single Family Residence 3 Vacation/Short-Term Ren	ıtal	5 Lanc	I	7	Self-Rental			
2	Multi-Family Residence 4 Commercial		6 Roya	alties	8	Other (desc	ribe)		
						Propert			
Incor	no.			Α		В	103.		С
3	Rents received	3			00.				
4	Royalties received	4			00.				
	nses:	<u> </u>							
5	Advertising	5							
6	Auto and travel (see instructions)	6							
7	Cleaning and maintenance	7		1,3	25.				
8	Commissions	8							
9	Insurance	9							
10	Legal and other professional fees	10							
11	Management fees	11		1,0	00.				
12	Mortgage interest paid to banks, etc. (see instructions)	12							
13	Other interest	13							
14	Repairs	14			51.				
15	Supplies	15		2,5	92.				
16	Taxes	16							
17	Utilities	17			<u>17.</u>				
18	Depreciation expense or depletion	18		2,9	09.				
19 20	Other (list)  Total expenses. Add lines 5 through 19	19		12 0	0.4				
		20		13,8	94.				
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 <b>Form 6198</b>	21		-13,2	94.				
22	Deductible rental real estate loss after limitation, if any,	ļ							
	on <b>Form 8582</b> (see instructions)	22	(	13,29	94.)	(	)	(	
23a	Total of all amounts reported on line 3 for all rental prope				23a	•	600.	`	
b	Total of all amounts reported on line 4 for all royalty prop				23b				
С	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		2,909.		
е	Total of all amounts reported on line 20 for all properties				23e	13	3,894.		
24	Income. Add positive amounts shown on line 21. Do not	t includ	de any lo	sses			. 24		
25	Losses. Add royalty losses from line 21 and rental real estat	e losse	es from lin	e 22. E	nter to	tal losses he	re <b>25</b>	(	13,294.
26	Total rental real estate and royalty income or (loss).								
	here. If Parts II, III, and IV, and line 40 on page 2 do no								
	Schedule 1 (Form 1040), line 5. Otherwise, include this at	mount	in the to	tal on li	ne 41	on page 2	. 26		-13,294.

### Form **8863**

## Education Credits (American Opportunity and Lifetime Learning Credits)

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

NARENDRA KUNCHALA

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

5413

Your social security number

61

048

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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.

	<del>-</del>		
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, <b>stop</b> ; 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 <b>can't</b> 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	<b>'</b>	
Ū	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	11,162.
11	Enter the smaller of line 10 or \$10,000	11 12	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	-	
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	0.504
18	Multiply line 12 by line 17. Enter here and on line 1 of the Credit Limit Worksheet (see instructions) .	18	1,008.
19	<b>Nonrefundable education credits.</b> Enter the amount from line 7 of the Credit Limit Worksheet (see instructions) here and on Schedule 3 (Form 1040), line 3	19	1,008.

Name(s) shown on return	Your social security number	
NARENDRA KUNCHALA	048   61   5413	



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 shown on page 1 of			
	NARENDRA	your tax return)			
	KUNCHALA	048-61-5413			
	Educational institution information (see instructions)				
a	. Name of first educational institution	<b>b.</b> Name of second educational institut	ion (if a	any)	
—,	Westcliff University  1) Address. Number and street (or P.O. box). City, town or	(1) Address. Number and street (or P.	O hov	City town or	
,	post office, state, and ZIP code. If a foreign address, see instructions.	post office, state, and ZIP code. If instructions.			
	17877 Von Karman Ave., #400				
	IRVINE CA 92614				
	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 b 7 checked?		] Yes 🗌 No	
(	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.			
	46-0658370				
23	Has the American opportunity credit been claimed for this student for any 4 prior tax years?	$\square$ Yes — <b>Stop!</b> 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.		– <b>Sto</b> his stu	<b>p!</b> Go to line 31 ident.	
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 — <b>Stop!</b> Go to line 31 for this student.  No — Complete lines 27 through 30 for this student.			
CAUT	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	7 Adjusted qualified education expenses (see instructions). Don't enter more than \$4,000				
28	• •		28		
29	, , , ,		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 <b>Lifetime Learning Credit</b>	rom all Parts III, line 30, on Part I, line 1.	30		
24	<u> </u>	ude the total of all amounts from all Dorts			
31	Adjusted qualified education expenses (see instructions). Incl III, line 31, on Part II, line 10		31	11,162.	