(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) | | | | |
|---|--|---|---|--|---|
| Тахрауе | er's name | Social securit | y numbe | er | |
| JAY | ANTEE NARENDRA BHALERAO | 061-81- | -2459 | | |
| Spouse' | s name | Spouse's soc | ial secui | rity number | |
| Part | Tax Return Information — Tax Year Ending December 31, 2021 (Enter | year you a | re auth | norizing.) | |
| | whole dollars only on lines 1 through 5. | , , | | | |
| | Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank. | | | | |
| 1 | Adjusted gross income | | 1 | 31,09 | 92. |
| 2 | Total tax | | 2 | 1,97 | 76. |
| 3 | Federal income tax withheld from Form(s) W-2 and Form(s) 1099 | | 3 | 4,51 | 11. |
| 4 | Amount you want refunded to you | | 4 | 2,53 | 35. |
| 5 | Amount you owe | | 5 | | |
| Part | Taxpayer Declaration and Signature Authorization (Be sure you get and k | eep a cop | y of yo | our return) | |
| return (to send for any Agent t paymen authori paymen busines taxes t person | oviledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above original or amended) I am now authorizing. I consent to allow my intermediate service provider, transmit my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejectedly in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U. o initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indict of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution zation is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate of I, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation requises days prior to the payment (settlement) date. I also authorize the financial institutions involved in the part of the payment (PIN) below is my signature for the income tax return (original or amended) I are not provided in the part of the payment (PIN) below is my signature for the income tax return (original or amended) I are not provided in the part of the payment (PIN) below is my signature for the income tax return (original or amended) I are not provided in the payment (PIN) below is my signature for the income tax return (original or amended) I are provided in the payment (PIN) below is my signature for the income tax return (original or amended) I are provided in the payment of the paym | tter, or electro- ction of the tr S. Treasury ar cated in the ta n to debit the the authoriza- lests must be processing of ayment. I furt | enic retuents ansmissed its de ax preparent to ation. To ation. To the electric the electric receive the electric receivers ack | urn originator (sion, (b) the re esignated Fina aration softwal to this account or revoke (cand ed no later the ctronic payme knowledge tha | (ERO) eason ancial re for . This cel) a nan 2 ent of at the |
| | yer's PIN: check one box only | | | | |
| X | | mv PIN 1 | 2 4 | 5 9 as | s my |
| | ERO firm name signature on the income tax return (original or amended) I am now authorizing. | Ent | | ligits, but all zeros | , |
| | I will enter my PIN as my signature on the income tax return (original or amended) I am notify you are entering your own PIN and your return is filed using the Practitioner PIN methodelow. ignature ► Jayantee Bhalerao Date ► | ow authorizir od. The ERC | must | complete Pa | only art III |
| Your s | ignature ► Utigantee Dnate ► Date ► | | 04/0 | 08/2022 | — |
| Spous | se's PIN: check one box only | | | | |
| | I authorize to enter or generate | my PIN | | as | s my |
| | ERO firm name | Ent | | ligits, but | |
| | signature on the income tax return (original or amended) I am now authorizing. | | | all zeros | |
| | I will enter my PIN as my signature on the income tax return (original or amended) I am notifyou are entering your own PIN and your return is filed using the Practitioner PIN methology. | | | | |
| 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. 5 8 | 7 2 7 Don't ente | 8 6 er all zer | 1 9 8 9 ros | |
| authori | that the above numeric entry is my PIN, which is my signature for the electronic individual income to the taxpayer of the for tax year indicated above for the taxpayer indicated above. I confirm that I am submoments of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS e-file Providers of Inc. | itting this retu | ırn in ad | ccordance wit | |
| FRO'≏ | signature ▶ Date ▶ | | | | |
| <u> </u> | ERO Must Retain This Form — See Instructions | | | | |
| | | | | | |

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

Department of the Treasury-Internal Revenue Service IRS Use Only-Do not write **U.S. Nonresident Alien Income Tax Return** or staple in this space. **Filing** X Single ☐ Married filing separately (MFS) Qualifying widow(er) (QW) **Status** If you checked the QW box, enter the child's name if the Check only qualifying person is a child but not your dependent one box. Your identifying number Your first name and middle initial Last name (see instructions) JAYANTEE NARENDRA **BHALERAO** 061-81-2459 Check if: X Individual Home address (number and street or rural route). If you have a P.O. box, see instructions. Apt. no. 2500 JOHN F KENNEDY Estate or Trust 611 City, town, or post office. If you have a foreign address, also complete spaces below. State ZIP code

Foreign province/state/county

At any time during 2021, did you receive, sell, exchange, or otherwise dispose of any financial interest in any virtual currency?

07304

Foreign postal code

Yes

Form **1040-NR** (2021)

REV 03/25/22 PRO

BAA

X No

JERSEY CITY

Foreign country name

| Dependents | | | | | | | | | (4) 🗸 | if qualifie | s for (see i | nst.): |
|----------------------------------|-----|---|--------------|----------------------|----------------------------|--------------|---------------------|--------------------------|----------|--------------|--------------|----------|
| (see instructions): | | (1) First name | Last n | ame | (2) Depende identifying nu | | | pendent's ship to you | 1 | x credit | Credit fo | or other |
| | | (1) 1 1101 1101110 | | | ,g | | 70.00.0 | op to you | 1 - | 7 | depen | 7 |
| If more than four | | | | | | | | | + | | - | <u>-</u> |
| dependents, see instructions and | | | | | | | | | | - | | i |
| check here ► | | | | | | | | | 1 7 | | | i |
| Income | 1a | Wages, salaries, tips, | etc. Attacl | n Form(s) W | -2 | | | | | 1a | 31, | ,092. |
| Effectively | b | Scholarship and fello | wship gran | ts. Attach Fo | orm(s) 1042-S or | require | d statemer | t. See instru | ctions . | 1b | | |
| Connected With U.S. | С | Total income exempt L, line 1(e) | | | edule OI (Form 1 | 040-NR | · | Ic | | | | |
| Trade or | 2a | Tax-exempt interest | | 2a | | b Tax | ـــ kable intere | st | | 2b | | |
| Business | За | Qualified dividends | | 3a | | b Ord | dinary divic | ends | | 3b | | |
| | 4a | IRA distributions . | | 4a | | b Tax | rable amoι | ınt | | 4b | | |
| | 5a | Pensions and annuitie | es | 5a | | b Tax | kable amou | int | | 5b | | |
| | 6 | Reserved for future us | se | | | | | | | 6 | | |
| | 7 | Capital gain or (loss). | Attach Scl | nedule D (Fo | orm 1040) if requi | red. If n | ot required | , check here | . ▶ 🗌 | 7 | | |
| | 8 | Other income from So | chedule 1 (| Form 1040), | line 10 | | | | | 8 | | |
| | 9 | Add lines 1a, 1b, 2b, | 3b, 4b, 5b, | 7, and 8. Th | his is your total e | effective | ely connec | ted income | ▶ | 9 | 31, | ,092. |
| - | 10 | Adjustments to incom | ne: | | | | | | | | | |
| | а | From Schedule 1 (For | ,, | | | | | 0a | | | | |
| | b | Reserved for future us | se | | | | 1 | 0b | | | | |
| | С | Scholarship and fellow | wship gran | ts excluded | | | 1 | 0с | | | | |
| | d | Add lines 10a and 10 | | - | = | | е | | ▶ | 10d | | |
| • | 11 | Subtract line 10d from | n line 9. Th | is is your ad | ljusted gross ind | come | | | ▶ | 11 | 31, | ,092. |
| • | 12a | Itemized deductions residents of India, sta | | | | | | 2a 1 | 2,550. | | | |
| | b | Charitable contributio | ns for certa | ain residents | of India. See ins | truction | s . 1 | 2b | | | | |
| | С | Add lines 12a and 12 | b | | | | | | | 12c | 12, | ,550. |
| - | 13a | Qualified business inc | ome dedu | ction from F | orm 8995 or For | m 8995- | -A . 1 | 3a | | | | |
| | b | Exemptions for estate | es and trus | ts only. See | instructions . | | 1 | 3b | | | | |
| | С | Add lines 13a and 13 | b | | | | | | | 13c | | |
| - | 14 | Add lines 12c and 13 | c | | | | | | | 14 | 12, | ,550. |
| • | 15 | Taxable income. Sub | otract line | 14 from line | 11. If zero or less | s, enter - | -0 | | | 15 | 18, | ,542. |

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

| Form 1040-NR (2 | 2021) | | | | | | | | | Page 2 |
|-------------------------|----------------|---|-----------------------|------------------------|--------------------|-----------------------|---------------------------|---------|--------------|---------------|
| | 16 | Tax (see instructions). Check if | any from Form | (s): 1 88 | 14 2 4972 | 2 3 🗌 | | 16 | 2 | ,024. |
| | 17 | Amount from Schedule 2 (Form | n 1040), line 3 | | | | | 17 | | 0. |
| | 18 | Add lines 16 and 17 | | | | | | 18 | 2 | ,024. |
| | 19 | Nonrefundable child tax credit | or credit for c | ther depender | its from Schedule | 8812 (Form 104 | 0) | 19 | | |
| | 20 | Amount from Schedule 3 (Form | n 1040), line 8 | | | | | 20 | | 48. |
| | 21 | Add lines 19 and 20 | | | | | | 21 | | 48. |
| | 22 | Subtract line 21 from line 18. It | f zero or less, | enter -0 | | | | 22 | 1 | <u>,976.</u> |
| | 23a | Tax on income not effectively from Schedule NEC (Form 104 | , | | | 23 a | | | | |
| | b | Other taxes, including self-em line 21 | | | · / / | 23b | | | | |
| | С | Transportation tax (see instruc | tions) | | | 23c | | | | |
| | d | Add lines 23a through 23c . | | | | | | 23d | | |
| | 24 | Add lines 22 and 23d. This is y | our total tax | | | | . ▶ | 24 | 1 | ,976. |
| | 25 | Federal income tax withheld fr | om: | | | | | | | |
| | а | Form(s) W-2 | | | | 25 a 4 | ,511. | | | |
| | b | Form(s) 1099 | | | | 25b | | | | |
| | С | Other forms (see instructions) | | | | 25c | | | | |
| | d | Add lines 25a through 25c . | | | | | | 25d | 4 | ,511. |
| | е | Form(s) 8805 | | | | | | 25e | | |
| | f | Form(s) 8288-A | | | | | | 25f | | |
| | g | Form(s) 1042-S | | | | | | 25g | | |
| | 26 | 2021 estimated tax payments | and amount a | pplied from 20 | 20 return | | | 26 | | |
| | 27 | Reserved for future use | | | | 27 | | | | |
| | 28 | Refundable child tax credit o 8812 (Form 1040) | | hild tax credit | | 28 | | | | |
| | 29 | Credit for amount paid with Fo | rm 1040-C | | | 29 | | | | |
| | 30 | Reserved for future use | | | | 30 | | | | |
| | 31 | Amount from Schedule 3 (Forn | n 1040), line 1 | 5 | | 31 | | | | |
| | 32 | Add lines 28, 29, and 31. Thes | e are your tot | al other paym | ents and refunda | ble credits | . ▶ | 32 | | |
| | 33 | Add lines 25d, 25e, 25f, 25g, 2 | 26, and 32. The | ese are your to | tal payments . | | . ▶ | 33 | 4 | ,511. |
| Refund | 34 | If line 33 is more than line 24, | subtract line 2 | 4 from line 33. | This is the amoun | t you overpaid | | 34 | 2 | ,535. |
| | 35a | Amount of line 34 you want re | funded to you | J. If Form 8888 | is attached, check | k here | | 35a | | ,535. |
| Direct deposit? | ▶b | Routing number 3 2 2 | 2 7 1 6 | 5 2 7 | ▶ c Type: 🛛 | Checking | Savings | | | |
| See instructions. | ▶ d | Account number 5 2 5 | 1 9 3 ! | 5 7 6 | | | | | | |
| | ►e | If you want your refund check enter it here. | | | | es not shown on | page 1, | | | |
| | 36 | Amount of line 34 you want ap | plied to your | 2022 estimate | ed tax . 🕨 | 36 | | | | |
| Amount | 37 | Amount you owe. Subtract lin | ne 33 from line | 24. For details | on how to pay, se | ee instructions | . ▶ | 37 | | |
| You Owe | 38 | Estimated tax penalty (see inst | tructions) . | | 🕨 | 38 | | | | |
| Third Party Designee | • | ou want to allow another structions | • | | | | Complete b | elow. | ⊠ No | |
| 3 | Desigi name | | | Phone no. ▶ | | | nal identific er (PIN) | ation _ | | |
| Sign | | penalties of perjury, I declare that I they are true, correct, and complete | | | | | | | | |
| Here | Your signature | | | Date | Your occupation | | | | it you an lo | |
| | | | | | | | l l | | N, enter it | here |
| | <u> </u> | | | | DATA ENGIN | EEK | (see ir | nst.) ▶ | | |
| | Phone | | D 1 . | Email addres | S | Date | DTIN | | <u> </u> | |
| Paid | | rer's name | Preparer's si | • | | Date | PTIN | | Check if: | |
| Preparer | | RIYA RAM SAGAR GUPTA TALLAM | | A RAM SAGAR | GUPTA TALLAM | 04/08/2022 | P02082 | | Self-er | |
| Use Only | | name GLOBAL TAXES | | | | | | | 8)965- | |
| · · · · · | Firm's | address ► 2530 Pebble | e Creek I | n Cummin | g GA 30041 | | Firm's Ell | N ▶ 30 | -10171 | .96 |

Form 1040-NR (2021)

SCHEDULE 3 (Form 1040)

Department of the Treasury

Additional Credits and Payments

OMB No. 1545-0074

2021

Attachment
Sequence No. 03

Your social security number

Department of the Treasury Internal Revenue Service

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

JAYANTEE NARENDRA BHALERAO 061-81-2459 Part I **Nonrefundable Credits** 1 Foreign tax credit. Attach Form 1116 if required 1 2 Credit for child and dependent care expenses from Form 2441, line 11. Attach Form 2441 2 3 3 4 Retirement savings contributions credit. Attach Form 8880 4 48. 5 Residential energy credits. Attach Form 5695 5 Other nonrefundable credits: 6 a General business credit. Attach Form 3800 6a Credit for prior year minimum tax. Attach Form 8801 6b c Adoption credit. Attach Form 8839 6c **d** Credit for the elderly or disabled. Attach Schedule R 6d Alternative motor vehicle credit. Attach Form 8910 6e Qualified plug-in motor vehicle credit. Attach Form 8936 . . . 6f f Mortgage interest credit. Attach Form 8396 6g h District of Columbia first-time homebuyer credit. Attach Form 8859 6h Qualified electric vehicle credit. Attach Form 8834 6i Alternative fuel vehicle refueling property credit. Attach Form 8911 6i k Credit to holders of tax credit bonds. Attach Form 8912 . . . 6k Amount on Form 8978, line 14. See instructions 61 z Other nonrefundable credits. List type and amount ▶ 6z 7 7 Add lines 1 through 5 and 7. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 20 . . . 8 48.

Schedule 3 (Form 1040) 2021

Schedule 3 (Form 1040) 2021 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 | Qualified sick and family leave credits from Schedule(s) H and Form(s) 7202 for leave taken before April 1, 2021 | 13b | | |
| С | Health coverage tax credit from Form 8885 | 13c | | |
| d | Credit for repayment of amounts included in income from earlier years | 13d | | |
| е | Reserved for future use | 13e | | |
| f | Deferred amount of net 965 tax liability (see instructions) | 13f | | |
| g | Credit for child and dependent care expenses from Form 2441, line 10. Attach Form 2441 | 13g | | |
| h | Qualified sick and family leave credits from Schedule(s) H and Form(s) 7202 for leave taken after March 31, 2021 | 13h | | |
| 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

SCHEDULE NEC (Form 1040-NR)

Tax on Income Not Effectively Connected With a U.S. Trade or Business

Attachment

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service (99)

Name shown on Form 1040-NR

▶ Go to www.irs.gov/Form1040NR for instructions and the latest information. ► Attach to Form 1040-NR.

Sequence No. 7B

Your identifying number

JAYANTEE NARENDRA BHALERAO 061-81-2459 Enter amount of income under the appropriate rate of tax. See instructions. (d) Other (specify) (a) 10% Nature of Income (c) 30% **(b)** 15% % Dividends and dividend equivalents: Dividends paid by U.S. corporations 1a 1b Dividend equivalent payments received with respect to section 871(m) transactions 1c 2 Interest: 2a 2b 2c 3 4 5 Real property income and natural resources royalties 6 7 8 9 10 Gambling-Residents of Canada only. Enter net income in column (c). If zero or less, enter -0-. Winnings _____ 10c Gambling winnings—Residents of countries other than Canada. 11 12 Other (specify) 12 13 Add lines 1a through 12 in columns (a) through (d) 13 14 14 15 Tax on income not effectively connected with a U.S. trade or business. Add columns (a) through (d) of line 14. Enter the total here and on Form 1040-NR, line 23a ▶ 15 **Capital Gains and Losses From Sales or Exchanges of Property** Enter only the capital gains and losses from property sales or exchanges that are from source

within the United States and not effectively connected with a U.S business. Do not include a gain or loss on disposing of a U.S. reproperty interest; report these gains and losses on Schedule D (Form 1040).

Report property sales or exchanges that are effectively connected with a U.S. business on Schedule D (Form 1040). Form 4797, or both.

| nd ces not | 16 | (a) Kind of property and description (if necessary, attach statement of descriptive details not shown below) | (b) Date acquired mm/dd/yyyy | (c) Date sold mm/dd/yyyy | (d) Sales price | (e) Cost or other basis | (f) LOSS If (e) is more than (d), subtract (d) from (e). | |
|------------------|------|--|------------------------------|-----------------------------|-----------------|-------------------------|--|--|
| J.S. in | | | | | | | | |
| real | | | | | | | | |
| e D | | | | | | | | |
| | | | | | | | | |
| , | | | | | | | | |
| ss | 17 / | Add columns (f) and (g) of line 16 . | | | | 17 | (| |

18 Capital gain. Combine columns (f) and (g) of line 17. Enter the net gain here and on line 9 above. If a loss, enter -0- . > 18

SCHEDULE OI (Form 1040-NR)

Other Information

► Go to www.irs.gov/Form1040NR for instructions and the latest information.

► Attach to Form 1040-NR.
► Answer all questions.

OMB No. 1545-0074

2021

Attachment
Sequence No. 7C

Your identifying number

Department of the Treasury Internal Revenue Service (99)

Name shown on Form 1040-NR

| JA: | ΥA | NTEE NARENDRA BHALEF | RAO | | | | 061-81-2 | 459 | |
|-----|----|--|---|---------------------|----------|---|------------------------|-------------------------------|------------|
| Α | | Of what country or countries w | | | | | | | |
| В | | In what country did you claim | residence for tax purposes | s during the tax y | /ear? | United States | | | |
| С | | Have you ever applied to be a | green card holder (lawful p | ermanent resider | nt) of t | the United States? . | | Yes | ⊠ No |
| D | | Were you ever: | | | | | | | |
| 1 | ١. | A U.S. citizen? | | | | | | Yes | ⊠ No |
| 2 | 2. | A green card holder (lawful per | | | | | | | X No |
| | | If you answer "Yes" to (1) or (2) | , | | | | | | |
| E | | If you had a visa on the last d immigration status on the last d | ay of the tax year, enter year | our visa type. If y | you di | | • | | |
| F | | Have you ever changed your v | | | | | | ☐ Yes | ⊠ No |
| | | If you answered "Yes," indicate | e the date and nature of the | e change ► | | | | | |
| G | | List all dates you entered and I | eft the United States during | g 2021. See instr | uction | 1S. | | | |
| | | Note: If you are a resident of C check the box for Canada or | Canada or Mexico AND cor Mexico and skip to item H | mmute to work ir | the l | Jnited States at frequ □ Canada | ent intervals, Mexico | | |
| | | Date entered United States mm/dd/yy | Date departed United State mm/dd/yy | es | Dat | e entered United State mm/dd/yy | | arted United mm/dd/yy | d States |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| Н | | Give number of days (including 2019 | | | | | | | |
| I | | Did you file a U.S. income tax I If "Yes," give the latest year an | return for any prior year?. | | | | | ☐ Yes | ⊠ No |
| J | | Are you filing a return for a trus | st? | | | | | ☐ Yes | ⊠ No |
| | | If "Yes," did the trust have a U.S. person, or receive a contr | J.S. or foreign owner unde ibution from a U.S. person | r the grantor trus | st rule | s, make a distributior | or loan to a | ☐ Yes | □No |
| K | | Did you receive total compens | ation of \$250,000 or more | during the tax yea | ar? . | | | Yes | ⊠ No |
| | | If "Yes," did you use an alterna | ative method to determine t | the source of this | comp | pensation? | | Yes | ☐ No |
| L | | Income Exempt From Tax—If complete (1) through (3) below | | | | | tax treaty with | n a foreign | country, |
| 1 | ١. | Enter the name of the country, amount of exempt income in the | | | | | claimed the tr | eaty benefi | t, and the |
| | | (a) Cour | ntry | (b) Tax treaty ar | ticle | (c) Number of month claimed in prior tax ye | | nount of exe in current ta | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | (e) Total. Enter this amount or | n Form 1040-NR. line 1c. D | o not enter it on | line 1a | a or line 1b | • | | |
| 2 | 2. | Were you subject to tax in a fo | | | | | | Yes | □ No |
| | | Are you claiming treaty benefit: | | | | | | ☐ Yes | ⊠ No |
| | | If "Yes," attach a copy of the C | | - | | | | | |
| м | | Check the applicable box if: | , | | , • | | | | |
| | ١. | This is the first year you are ma with a U.S. trade or business u | | | | | | | onnected |
| • |) | You have made an election in | | | | | | | e United |
| | _ | States as effectively connected | | | | | | | |

Form **8880**

Credit for Qualified Retirement Savings Contributions

Department of the Treasury Internal Revenue Service ► Attach to Form 1040, 1040-SR, or 1040-NR.

► Go to www.irs.gov/Form8880 for the latest information.

OMB No. 1545-0074

2021

Attachment
Sequence No. 54

Name(s) shown on return

JAYANTEE NARENDRA BHALERAO

Your social security number

061-81-2459



You cannot take this credit if either of the following applies.

- The amount on Form 1040, 1040-SR, or 1040-NR, line 11, is more than \$33,000 (\$49,500 if head of household; \$66,000 if married filing jointly).
- The person(s) who made the qualified contribution or elective deferral (a) was born after January 1, 2004; (b) is claimed as a dependent on someone else's 2021 tax return; or (c) was a **student** (see instructions).

| | | | | | | (a) You | u | (b) Your spouse |
|-----------------|----------------|-----------------------|---|--------------------------|--------|------------|--------------|-----------------|
| | | • | LE account contribu | • | | | | |
| • | • | | ollover contributions. | | 1 | | | |
| | | | mployer plan, volunta | | | | | |
| | | | n contributions for 2021 (see instructions) 2 | | | | | |
| Add lines 1 an | | | | | 3 | 4 | 175. | |
| | | | before the due dat | , | | | | |
| | | | ns). If married filing jo | | | | | |
| • | | | ructions for an except | | 4 | | | |
| | | • | • | | 5 | | 175. | |
| | • | | 00 | | 6 | 4 | <u> 175.</u> | |
| | | | take this credit | | | | 7 | 475 |
| | | | 040-NR, line 11* | 8 | | 31,092. | | |
| Enter the appl | icable decimal | amount from the table | e below. | | | | | |
| | | | | | | | | |
| If line | 8 is- | | And your filing status | | | | | |
| 0 | But not | Married | Head of household | Single, Marr | | ng | | |
| Over— | over— | filing jointly | | separate Qualifying w | | .rl | | |
| | 4 | | line 9— | | | 1) | | |
| | \$19,750 | 0.5 | 0.5 | 0.5 | | | | |
| \$19,750 | \$21,500 | 0.5 | 0.5 | 0.2 | | | | |
| \$21,500 | \$29,625 | 0.5 | 0.5 | 0.1 | | | 9 | x0 .1 |
| \$29,625 | \$32,250 | 0.5 | 0.2 | 0.1 | | | | |
| \$32,250 | \$33,000 | 0.5 | 0.1 | 0.1 | | | | |
| \$33,000 | \$39,500 | 0.5 | 0.1 | 0.0 | | | | |
| \$39,500 | \$43,000 | 0.2 | 0.1 | 0.0 | | | | |
| \$43,000 | \$49,500 | 0.1 | 0.1 | 0.0 | | | | |
| \$49,500 | \$66,000 | 0.1 | 0.0 | 0.0 | | | | |
| \$66,000 | | 0.0 | 0.0 | 0.0 | | | | |
| | | | you can't take this cre | | | | | Į. |
| Multiply line 7 | , | | | | | | 10 | 48 |
| | | • | from the Credit Limit | | | | 11 | 2,024 |
| • | | • | utions. Enter the sma | | or lir | ne 11 here | | |
| and on Sched | uie 3 (Form 10 | 40), iine 4 | | | | | 12 | 48 |

^{*} See Pub. 590-A for the amount to enter if you claim any exclusion or deduction for foreign earned income, foreign housing, or income from Puerto Rico or for bona fide residents of American Samoa.