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

| | 1 | | | | | | | |
|--|--|---|--|---|---|--|--|--|
| Submi | ssion Identification Number (SID) | | | | | | | |
| Taxpaye | er's name | Social securit | y numb | per | | | | |
| KART | THEEK JAMPULA | 736-57-5596 | | | | | | |
| Spouse's | s name | Spouse's soc | Spouse's social security number | | | | | |
| Part | Tax Return Information — Tax Year Ending December 31, 2022 (En | nter year you a | re aut | thorizina | <u> </u> | | | |
| | whole dollars only on lines 1 through 5. | iter year you a | i e au | uionzing. | <i>)</i> | | | |
| | Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank. | | | | | | | |
| 1 | Adjusted gross income | | 1 1 | 24 | ,422. | | | |
| 2 | Total tax | | 2 | | ,142. | | | |
| 3 | Federal income tax withheld from Form(s) W-2 and Form(s) 1099 | | 3 | | ,228. | | | |
| 4 | Amount you want refunded to you | | 4 | | ,086. | | | |
| 5 | Amount you owe | | 5 | | | | | |
| Part | | nd keep a cop | y of y | our retu | rn) | | | |
| my knoreturn (to send for any Agent to paymer authorize paymer business taxes to persona | penalties of perjury, I declare that I have examined a copy of the income tax return (original or amen by by by by and belief, it is true, correct, and complete. I further declare that the amounts in Part I a original or amended) I am now authorizing. I consent to allow my intermediate service provider, trail my return to the IRS and to receive from the IRS (a) an acknowledgment of receipt or reason for delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the oinitiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account not of 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 termint, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation as days prior to the payment (settlement) date. I also authorize the financial institutions involved in o receive confidential information necessary to answer inquiries and resolve issues related to the information number (PIN) below is my signature for the income tax return (original or amended in the Witherway) Caracter. | above are the amount of the transmitter, or electron of the transmitter, or electron rejection of the transmittent of the transmittent of the transmittent of the processing of the payment. I further the second of the payment. I further the second of the payment. I further the processing of the payment. I further transmittent of the processing of the payment. I further transmittent of the processing of the payment. I further transmittent of the processing of the payment. I further transmittent of the processing of the payment. | ounts for its cansmission of its cans prepartition. The receive the element of the receive the element of the e | from the incurrence turn original sistem, (b) the designated paration soff to this according to the control of | come tax tor (ERO) he reason Financial tware for bunt. This cancel) a er than 2 hyment of that the | | | |
| | nic Funds Withdrawal Consent. yer's PIN: check one box only | | | | | | | |
| X | - | ate my PIN | 5 5 | 5 9 6 | as my | | | |
| | ERO firm name signature on the income tax return (original or amended) I am now authorizing. | ř Ent | | digits, but er all zeros | do my | | | |
| | I will enter my PIN as my signature on the income tax return (original or amended) I are if you are entering your own PIN and your return is filed using the Practitioner PIN m below. | | | | | | | |
| Your s | ignature ▶ Date I | | | | | | | |
| Spous | se's PIN: check one box only | _ | | | | | | |
| | I authorize to enter or general | ate my PIN | | | as my | | | |
| | ERO firm name | | er five | digits, but | ao my | | | |
| | signature on the income tax return (original or amended) I am now authorizing. | do | n't ente | er all zeros | | | | |
| | I will enter my PIN as my signature on the income tax return (original or amended) I a if you are entering your own PIN and your return is filed using the Practitioner PIN m below. | | | | | | | |
| Spous | e's signature ▶ Date I | • | | | | | | |
| | Practitioner PIN Method Returns Only—continue bel | low | | | | | | |
| Part I | 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 4 9 Don't ente | 6 6 | 1 9 8 | 9 | | | |
| | | Don't ent | or an Ze | 03 | | | | |
| authoriz | with the above numeric entry is my PIN, which is my signature for the electronic individual incompared to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am suments of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers | ubmitting this retu | ırn in a | accordance | | | | |
| ERO's | signature ▶ Date I | • | | | | | | |
| | ERO Must Retain This Form — See Instructions | | | | | | | |
| | Don't Submit This Form to the IRS Unless Requested T | | | | | | | |

E 1040-NR Department of the Treasury—Internal Revenue Service U.S. Nonresident Alien Income Tax Return

| 2022 |
|------|
| |

OMB No. 1545-0074

IRS Use Only—Do not write or staple in this space.

| For the year Ja | an. 1–E | Dec. 31, 2022, or other tax year beg | inning | , 2022, | ending | ······································ | 20 | instructions. |
|----------------------------|---|---|---------------|-----------------------------------|-----------------------|--|---------------|-------------------------------|
| Filing Status | ☑ Single ☐ Married filing separately (MFS) ☐ Qualifying surviving spouse (QSS) ☐ If you checked the QSS box, enter the child's name if the qualifying person is a child but not your dependent: | | | | | | | ate Trust |
| Check only one box. | " | you checked the Q55 box, enter the | | ne ii trie qualifying persor | | | ent: | |
| | | | | | | | | entifying number ructions) |
| KARTHEEK | | | JAMP | ULA | | | 736- | 57-5596 |
| Home address | (num | ber and street). If you have a P.O. k | ox, see ins | structions. | | | | Apt. no. |
| 7 OCEAN | VIEW | DR | | | 70 | 9 | | |
| City, town, or p | post o | ffice. If you have a foreign address, | also comp | olete spaces below. | | State | | ZIP code |
| DORCHEST | ER | | | | | MA | | 02125 |
| Foreign countr | y nam | е | Foreig | n province/state/county | | Foreign p | oostal coc | le |
| Digital Asset | | ny time during 2022, did you: (a) re erwise dispose of a digital asset (or | | | | | r (b) sell, e | |
| Dependent | s | | | | | (4) Ch | eck the box | if qualifies for (see ins |
| (see instructions | | (A) 51 . | | (2) Dependent's | (a) D | Chil | d tax credit | . Credit for other |
| | ´ <u> </u> | (1) First name Last nar | ne | identifying number | (3) Relationship to y | ou o | | dependents |
| If more than fou | ır | | | | | | <u> </u> | |
| dependents, se | | | | | | | | |
| instructions and | i | | | | | | <u> </u> | |
| check here | | | | | | | | |
| Income | 1a | Total amount from Form(s) W-2, I | ` | , | | | | 24,422 |
| Effectively | b | Household employee wages not | • | () | | | | |
| Connected | С | Tip income not reported on line 1 | ` | , | | | | |
| With U.S. | d | Medicaid waiver payments not re | • | ` ' | , | | . 1d | |
| Trade or | е | Taxable dependent care benefits | | * | | | . 1e | |
| Business | f | Employer-provided adoption ben | | • | | | . 1f | |
| Attach | g | Wages from Form 8919, line 6 . | | | | | . 1g | |
| Form(s) W-2, | h | Other earned income (see instruc | , | | | | . 1h | |
| 1042-S, | i | Reserved for future use | | | | | | |
| SSA-1042-S, RRB-1042-S, | j | Reserved for future use | | | 1 1 | | . <u>1j</u> | |
| and 8288-A | k | Total income exempt by a treaty | | | | | | |
| here. Also | | line 1(e) | | | 1k | | _ | 0.4.400 |
| attach Form(s) | Z | Add lines 1a through 1h | 1 | 1 | | | . 1z | 24,422 |
| 1099-R if | 2 a | Tax-exempt interest | 2a | | | | . 2b | |
| tax was | 3a | Qualified dividends | 3a | | dinary dividends . | | . 3b | |
| withheld. | 4a | IRA distributions | 4a | | able amount | | | |
| If you did not get a Form | 5a | Pensions and annuities | 5a | | cable amount | | | |
| W-2, see | 6 | Reserved for future use | | | | _ | | |
| instructions. | 7 | Capital gain or (loss). Attach Scho | • | , , | • | | | |
| | 8 | Other income from Schedule 1 (F | | | | | | |
| | 9 | Add lines 1z, 2b, 3b, 4b, 5b, 7, ar | nd 8. This is | s your total effectively c | onnected income | | . 9 | 24,422 |
| | 10 | Adjustments to income: | | | 10a | | | |
| | a | From Schedule 1 (Form 1040), lin | | | | | | |
| | b | Reserved for future use | | | | | | |
| | C | Reserved for future use | | | | | | 4 |
| | d | Enter the amount from line 10a. T | , | • | | | | |
| | 11 | Subtract line 10d from line 9. This | - | | | | | 24,422 |
| | 12 | Itemized deductions (from School deduction (see instructions) | • | ** | | lia, standa _US/India_Tre | 1 | 12,950 |
| | 13a | Qualified business income deduc | | | 1 1 | | | 12,550 |
| | b | Exemptions for estates and trusts | | | | | | |
| | c | Add lines 13a and 13b | | | | | . 13c | 1 |
| | 14 | | | | | | | 12,950 |
| | 15 | Subtract line 14 from line 11. If ze | | | | | 15 | 11,472 |

| Tax and | 16 | Tax (see instructions). Check if any | from For | rm(s): 1 | 314 2 🗌 497 | 2 3 | ₃ 🗆 | | 16 | 1,172. |
|-------------------|---|--|--------------------|-------------------------|---------------------|---------|-----------|-------------|---------------------------------|---------------------|
| Credits | 17 | Amount from Schedule 2 (Form 1 | 17 | 0. | | | | | | |
| | 18 | Add lines 16 and 17 | | | | | | | 18 | 1,172. |
| | 19 | Child tax credit or credit for other | depende | ents from Sched | ule 8812 (Form 10 | 40) . | | | 19 | |
| | 20 | Amount from Schedule 3 (Form 1 | 040), line | 8 | | | | | 20 | 30. |
| | 21 | Add lines 19 and 20 | | | | | | | 21 | 30. |
| | 22 | Subtract line 21 from line 18. If ze | ero or less | s, enter -0 | | | | | 22 | 1,142. |
| | 23a | Tax on income not effectively cor | nected w | rith a U.S. trade | or business from | | | | | |
| | b | Schedule NEC (Form 1040-NR), li Other taxes, including self-emplo | | | | 23a | | | - | |
| | | line 21 | | | | 23b | | | | |
| | С | Transportation tax (see instructio | ns) | | | 23c | | | | |
| | d | Add lines 23a through 23c | , | | | | | | 23d | |
| | 24 | Add lines 22 and 23d. This is you | | | | | | | 24 | 1,142. |
| Payments | 25 | Federal income tax withheld from | | | | mi | | | | 1,112. |
| ayinents | a | Form(s) W-2 | | | | 25a | 2 | ,228. | | |
| | b | Form(s) 1099 | | | | 25b | | , 220. | | |
| | | , , | | | | 25c | | | | |
| | C | Other forms (see instructions) . | | | | | | | 054 | 2 220 |
| | d | Add lines 25a through 25c | | | | | | | 25d | 2,228. |
| | е | Form(s) 8805 | | | | | | | 25e | |
| | f | Form(s) 8288-A | | | | | | | 25f | |
| | g | Form(s) 1042-S | | | | | | | 25g | |
| | 26 | 2022 estimated tax payments and | | | | | | | 26 | |
| | 27 | Reserved for future use | | | | 27 | | | | |
| | 28 | Additional child tax credit from S | chedule 8 | 812 (Form 1040 |) | 28 | | | | |
| | 29 | Credit for amount paid with Form | 1040-C | | | 29 | | | | |
| | 30 | Reserved for future use | | | | 30 | | | | |
| | 31 | Amount from Schedule 3 (Form 1 | 040), line | 15 | | 31 | | | | |
| | 32 | Add lines 28, 29, and 31. These a | re your t o | otal other paym | ents and refunda | ble cr | edits | | 32 | |
| | 33 | Add lines 25d, 25e, 25f, 25g, 26, | and 32. T | hese are your to | tal payments . | | | | 33 | 2,228. |
| Refund | 34 | If line 33 is more than line 24, sub | tract line | 24 from line 33. | This is the amoun | nt you | overpaid | | 34 | 1,086. |
| | 35a | Amount of line 34 you want refur | nded to y | ou. If Form 8888 | s is attached, chec | k here | | . 🗆 | 35a | 1,086. |
| Direct deposit? | b | Routing number 0 1 1 0 | | | _ | Check | | Savings | | · |
| See instructions. | d | Account number 4 6 6 0 | | | | | | | | |
| | e | If you want your refund check ma | nage 1 | | | | | | | |
| | Ŭ | enter it here. | | | | | | | | |
| | 36 | Amount of line 34 you want appli | ed to you | ur 2023 estimat | ed tax | 36 | | | | |
| Amount | 37 | Subtract line 33 from line 24. This | s is the ar | nount you owe | | | | | | |
| You Owe | | For details on how to pay, go to | www.irs.g | ov/Payments or | see instructions . | | | | 37 | |
| | 38 | Estimated tax penalty (see instruc | ctions) . | | | 38 | | | | |
| Third | Do yo | u want to allow another person to | discuss t | his return with th | ne IRS? See instru | ctions. | | s. Compl | ete bel | ow. 🛛 No |
| Party | Desig | nee's | | Phone | | | Persor | al identifi | cation. | |
| Designee | name | | | | | | | | | |
| - | | penalties of perjury, I declare that I have they are true, correct, and complete. De | e examined | d this return and a | | | | | | |
| Sign | | | | Date | Your occupation | | | | | ent you an Identity |
| Here | Your signature | | | Date | Tour occupation | | | | | PIN, enter it here |
| ileie | | | | SOFTWARE | | | I | inst.) | | |
| | Phone | e no. | | Email address | | | | 1, | | |
| D - : -! | | rer's name | Preparer | 's signature | | Date | | PTIN | | Check if: |
| Paid | • | | • | · · | R GUPTA TAT.T.AM | 03/2 | 1/2023 | P02082 | 2703 | Self-employed |
| Preparer | <u> </u> | | | | | | Phone n | | | |
| Use Only | | | | | | | Firm's El | | <u>78)965-9522</u> 4-3171965 | |
| | Firm's address 245 ROONEY CT E BRUNSWICK NJ 08816 | | | | | | | | v. () | - JI/IJUJ |

Form 1040-NR (2022)

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

2022

Attachment
Sequence No. 03

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

Your social security number 736-57-5596

| · u | Nonrelundable Credits | | | |
|-----|--|----|-------|-----|
| 1 | Foreign tax credit. Attach Form 1116 if required | | | |
| 2 | Credit for child and dependent care expenses from Form 2441 Form 2441 | - | _ | |
| 3 | Education credits from Form 8863, line 19 | | 3 | |
| 4 | Retirement savings contributions credit. Attach Form 8880 | | 4 | 30. |
| 5 | Residential energy credits. Attach Form 5695 | | 5 | |
| 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 | 6с | | |
| d | Credit for the elderly or disabled. Attach Schedule R | 6d | | |
| е | Alternative motor vehicle credit. Attach Form 8910 | 6e | | |
| f | Qualified plug-in motor 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 | | |
| I | Amount on Form 8978, line 14. See instructions | 6I | | |
| 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 5 and 7. Enter here and on Form 1040, 1040-line 20 | | 8 | 30. |

(continued on page 2)

Schedule 3 (Form 1040) 2022 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 qualified sick and family leave wages paid in 2022 from Schedule(s) H for leave taken before April 1, 2021 | 13b | | |
| С | Reserved for future use | 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 | Reserved for future use | 13g | | |
| h | Credit for qualified sick and family leave wages paid in 2022 from Schedule(s) H for leave taken after March 31, 2021, and before October 1, 2021 | 13h | | |
| Z | Other payments or refundable credits. List type and amount: | 13z | | |
| 14 | Total other payments or refundable credits. Add lines 13a through | - | 14 | |
| 15 | Add lines 9 through 12 and 14. Enter here and on Form 1040, 1040-line 31 | -SR, or 1040-NR, | 15 | |

SCHEDULE NEC (Form 1040-NR)

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

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

Attach to Form 1040-NR.

Attach to Form 1040-NR.

2022 Attachment Sequence No. 7B

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service

Name shown on Form 1040-NR

Your identifying number 736-57-5596

KARTHEEK JAMPULA 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 C 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 Other (specify): 12 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 Capital Gains and Losses From Sales or Exchanges of Property Enter only the capital gains and 16 (a) Kind of property and description (f) LOSS (g) GAIN (b) Date acquired (c) Date sold (d) Sales price (e) Cost or losses from property sales or (if necessary, attach statement of If (e) is more than (d), If (d) is more than (e), mm/dd/yyyy mm/dd/yyyy other basis exchanges that are from sources descriptive details not shown below) subtract (d) from (e). subtract (e) from (d). 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. real property 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 17 Add columns (f) and (g) of line 16 on Schedule D (Form 1040). 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 Form 4797, or both.

SCHEDULE OI (Form 1040-NR)

Other Information

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

Attachment

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service

Answer all questions. Sequence No. 7C Name shown on Form 1040-NR Your identifying number KARTHEEK JAMPULA 736-57-5596 Of what country or countries were you a citizen or national during the tax year? _INDIA Α In what country did you claim residence for tax purposes during the tax year? United States В С Have you ever applied to be a green card holder (lawful permanent resident) of the United States? Were you ever: Yes X No 1. A U.S. citizen? X No If you answer "Yes" to (1) or (2), see Pub. 519, chapter 4, for expatriation rules that apply to you. If you had a visa on the last day of the tax year, enter your visa type. If you didn't have a visa, enter your U.S. Ε immigration status on the last day of the tax year. ____F1 X No F Have you ever changed your visa type (nonimmigrant status) or U.S. immigration status? Yes If you answered "Yes," indicate the date and nature of the change: G List all dates you entered and left the United States during 2022. See instructions. Note: If you're a resident of Canada or Mexico AND commute to work in the United States at frequent intervals, Date entered United States Date entered United States Date departed United States Date departed United States mm/dd/yy mm/dd/yy mm/dd/yy mm/dd/yy Give number of days (including vacation, nonworkdays, and partial days) you were present in the United States during: н 2020 ______, 2021 ______, and 2022 ______365 ___. Ves X No Т If "Yes," give the latest year and form number you filed: X No Yes J If "Yes," did the trust have a U.S. or foreign owner under the grantor trust rules, make a distribution or loan to a Yes No X No Κ Yes No If "Yes," did you use an alternative method to determine the source of this compensation? L Income Exempt From Tax-If you are claiming exemption from income tax under a U.S. income tax treaty with a foreign country, complete (1) through (3) below. See Pub. 901 for more information on tax treaties. 1. Enter the name of the country, the applicable tax treaty article, the number of months in prior years you claimed the treaty benefit, and the amount of exempt income in the columns below. Attach Form 8833 if required. See instructions. (b) Tax treaty article (a) Country (c) Number of months (d) Amount of exempt claimed in prior tax years income in current tax vear (e) Total. Enter this amount on Form 1040-NR, line 1k. Do not enter it anywhere else on line 1 2. Were you subject to tax in a foreign country on any of the income shown in 1(d) above? No Yes If "Yes," attach a copy of the Competent Authority determination letter to your return. M Check the applicable box if: 1. This is the first year you are making an election to treat income from real property located in the United States as effectively connected

2. You have made an election in a previous year that has not been revoked, to treat income from real property located in the United States as effectively connected with a U.S. trade or business under section 871(d). See instructions

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 Attachment Sequence No. 54

(b) Your spouse

Name(s) shown on return KARTHEEK JAMPULA Your social security number 736-57-5596

(a) You



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 \$34,000 (\$51,000 if head of household; \$68,000 if married filing jointly).
- The person(s) who made the qualified contribution or elective deferral (a) was born after January 1, 2005; (b) is claimed as a dependent on someone else's 2022 tax return; or (c) was a student (see instructions).

| | | | | | | | (a) Tou | | (b) Tour | apouse |
|----|---|-------------------------|---------------------------------|---|------------------|------------|---------|---|----------|--------|
| 1 | | | | LE account contribu bllover contributions. | | 1 | | | | |
| 2 | • | • | | | | | | - | | |
| 2 | Elective deferrals to a 401(k) or other qualified employer plan, voluntary employee contributions, and 501(c)(18)(D) plan contributions for 2022 (see instructions) 2 | | | | | | | | | |
| _ | | | | • | ions) | 2 | 300 | _ | | |
| 3 | | | | | | 3 | 300 | • | | |
| 4 | | | | before the due date | , | | | | | |
| | extensions) of your 2022 tax return (see instructions). If married filing jointly, include | | | | | | | | | |
| | both spouses | ' amounts in b e | oth columns. See inst | ructions for an excep | tion | 4 | | | | |
| 5 | Subtract line 4 | from line 3. If | zero or less, enter -0- | | | 5 | 300 | | | |
| 6 | In each colum | n, enter the sn | naller of line 5 or \$2,0 | 00 | | 6 | 300 | | | |
| 7 | Add the amou | nts on line 6. If | zero, stop ; you can't | take this credit | | | 7 | 7 | | 300. |
| 8 | | | | 040-NR, line 11* | | I. | ,422. | | | |
| 9 | | | amount from the tabl | | | | , - | | | |
| • | | | | | | | | | | |
| | If line | 8 is- | A | And your filing status | is— | | 7 | | | |
| | | | Married | Head of | Single, Marr | iad filiaa | 1 | | | |
| | Over- | But not | filing jointly | household | separate | | | | | |
| | | over— | | i line 9— | Qualifying survi | | | | | |
| | | \$20,500 | 0.5 | 0.5 | 0.5 | | | | | |
| | | | 0.5 | 0.5 | 0.3 | | | | | |
| | \$20,500 | \$22,000 | | | | | | | | 1 |
| | \$22,000 | \$30,750 | 0.5 | 0.5 | 0.1 | | 9 | , | X | 1 |
| | \$30,750 | \$33,000 | 0.5 | 0.2 | 0.1 | | | | | |
| | \$33,000 | \$34,000 | 0.5 | 0.1 | 0.1 | | | | | |
| | \$34,000 | \$41,000 | 0.5 | 0.1 | 0.0 | | | | | |
| | \$41,000 | \$44,000 | 0.2 | 0.1 | 0.0 | | | | | |
| | \$44,000 | \$51,000 | 0.1 | 0.1 | 0.0 | | | | | |
| | \$51,000 | \$68,000 | 0.1 | 0.0 | 0.0 | | | | | |
| | \$68,000 | | 0.0 | 0.0 | 0.0 | | | | | |
| | | Note: | f line 9 is zero, stop ; | you can't take this cre | edit. | | | | | |
| 10 | Multiply line 7 | by line 9 . | | | | | 10 | 0 | | 30. |
| 11 | Limitation bas | ed on tax liabil | ity. Enter the amount | from the Credit Limit | Worksheet in t | he instruc | tions 1 | 1 | 1 | ,172. |
| 12 | | | | utions. Enter the sm | | | | | | |
| | | | | | | | 1 | 2 | | 30. |
| | | | | | | | | | | |

^{*} 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.