Department of the Treasury Internal Revenue Service

IRS e-file Signature Authorization

OMB No. 1545-0074

ERO must obtain and retain completed Form 8879. ▶ Go to www.irs.gov/Form8879 for the latest information.

Submission Identification Number (SID)

Taxpayer's name	Social security number				
KISHORE TALLAPAKAM	704-66-1511				
Spouse's name	Spouse's social security number				
SWAPNA TALLAPAKAM	002-27-0190				
Part I Tax Return Information – Tax Year Ending December 31, 2022 (Er	nter 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 65,546.				
2 Total tax	. 2 4,144.				
3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099	3 11,780.				
4 Amount you want refunded to you	4 7,636.				
5 Amount you owe	5				
Part II Taxpayer Declaration and Signature Authorization (Be sure you get and keep a copy of your return)					

Under penalties of periury. 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

~	1 ddthoh20			ERO firm name	to ontor or generate my r in	Er
X	l authorize	GLOBAL	TAXES	LLC	to enter or generate my PIN	6

Ent	er fiv	/e dig	 gits, all ze	but	as
6	1	5	1	1	

my

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 🕨

Spouse's PIN: check one box only

X lauthorize GLOBAL TAXES LLC ERO firm name to enter or generate my PIN

Date

7	0	1	9	0	as my
	er fiv n't er				

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 Date						 	 		
	Practitioner PIN Method Returns Only—continue	bel	ow						
Part III	Certification and Authentication – Practitioner PIN Method Only								
ERO's EFI	N/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN.	2	2		 	6 III zero	 98	3 9	

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 🕨	
D	ERO Must Retain This F on't Submit This Form to the I	 	
For Depenverk Deduction Act Not	tion one your toy return instructions	 REV/ 01/14/22 RRO	Form 8879 (Pov. 01 2021)

1040		artment of the Treasury—Internal Revenue Servi S. Individual Income Tax		urn 20	22	OMB No. 1545-	0074	IRS Use Only	v—Do not v	vrite or staple	in this space.
Filing Status Check only one box.	lf yo	Single X Married filing jointly u checked the MFS box, enter the na son is a child but not your dependent	ame of y	ed filing separate your spouse. If y					spo	lifying surv use (QSS) s name if th	0
Your first name	and mi	iddle initial	Last na	ime					Your so	cial securit	y number
KISHORE			TALI	APAKAM					704-	66-151	1
If joint return, sp	ouse's	s first name and middle initial	Last na	ime					Spouse	's social sec	curity numbe
SWAPNA			TALI	APAKAM					002-	27-0190	0
Home address (numbe	er and street). If you have a P.O. box, see	instructi	ons.			А	pt. no.	Preside	ntial Election	on Campaigr
5100 USA	A BI	LVD					7	12	1	here if you,	,
City, town, or po	ost offi	ce. If you have a foreign address, also co	mplete s	paces below.	Sta	te	ZIP co	ode			itly, want \$3
SAN ANTO	NIO				TX		782	40		ow will not	Checking a change
Foreign country	name			Foreign province/s	state/count	y .	Foreig	n postal code	1	x or refund.	0
Digital	At ar	ny time during 2022, did you: (a) rece		a reward award	1 or payr	nent for proper	tyor	eenvicee): or	(b) sell		
Digital Assets		ange, gift, or otherwise dispose of a								Yes	X No
Standard		eone can claim: You as a de	-			a dependent	10001	. (000 mone	201101101)		
Deduction		Spouse itemizes on a separate return				•					
Age/Blindness	You:	Were born before January 2, 1	958	Are blind	Spouse	: 🗌 Was borr	n befo	ore January 2	2, 1958	🔄 Is bl	ind
Dependents	(see	instructions):		(2) Social se		(3) Relationshi	p (4) Check the b	ox if quali	fies for (see	instructions):
If more	(1) Fi	irst name Last name		number	r	to you		Child tax c	redit	Credit for oth	her dependents
than four										[
dependents, see instructions										[
and check										[
here 🗌										[
Income	1a	Total amount from Form(s) W-2, be	ox 1 (se	e instructions)					. 1a	1 7	73,489.
moonio	b	Household employee wages not re	eported	on Form(s) W-2					. 1b)	
Attach Form(s) W-2 here. Also	с	Tip income not reported on line 1a	(see in	structions) .					. 10	;	
attach Forms	d	Medicaid waiver payments not rep	orted o	n Form(s) W-2 (s	see instru	ctions)			. 10	1	
W-2G and	е	Taxable dependent care benefits f	rom Foi	rm 2441, line 26					. 1e	•	
1099-R if tax was withheld.	f	Employer-provided adoption bene	fits fron	n Form 8839, lin	e29.				. 1f	:	
If you did not	g	Wages from Form 8919, line 6 .							. 19	1	
get a Form	h	Other earned income (see instruction	ons)						. 1h	1	0.
W-2, see instructions.	i	Nontaxable combat pay election (s	see insti	ructions)		1 i					
	z	Add lines 1a through 1h							. 1z	<u> </u>	73,489.
Attach Sch. B	2a	Tax-exempt interest	2a		b T	axable interest			. 2b)	
if required.	3a	Qualified dividends	3a		b O	rdinary dividen	ids .		. 3b)	
	4a	IRA distributions	4a		b T	axable amount			. 4b)	
Standard	5a		5a		bТ	axable amount			. 5b		_
Deduction for –	6a	Social security benefits	6a		ь т	axable amount			. 6b)	
 Single or Married filing 	с	If you elect to use the lump-sum e	lection i	method, check h	nere (see	instructions)		[
separately,	7	Capital gain or (loss). Attach Sche	dule D i	f required. If not	required	, check here		[7		
\$12,950 • Married filing	8	Other income from Schedule 1, lin							. 8	-	-7,943.
jointly or Qualifying	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7,							. 9		65,546.
surviving spouse,	10	Adjustments to income from Sche		•					. 10		
\$25,900 • Head of	11	Subtract line 10 from line 9. This is							. 11		65,546.
household,	12	Standard deduction or itemized							. 12		25,900.
\$19,400 • If you checked	13	Qualified business income deducti				5-A			. 13		
any box under	14	Add lines 12 and 13							. 14		25,900.
Standard Deduction,	15	Subtract line 14 from line 11. If zer				axable incom	 е		. 15		39,646.
see instructions.			0 01 100	e, ontor o . mie						<u>, </u>	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,

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

Form **1040** (2022)

Form 1040 (2022	2)								Page 2
Tax and	16	Tax (see instructions). Check	if any from Form	(s): 1 🗌 881	4 2 4972	3		16	4,344.
Credits	17	Amount from Schedule 2, lir	ne3					17	
	18	Add lines 16 and 17						18	4,344.
	19	Child tax credit or credit for	other dependen	ts from Sched	ule 8812			19	
	20	Amount from Schedule 3, lir	ne8					20	200.
	21	Add lines 19 and 20						21	200.
	22	Subtract line 21 from line 18	. If zero or less,	enter -0				22	4,144.
	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 total tax					24	4,144.
Payments	25	Federal income tax withheld							
	а	Form(s) W-2				25a 1	1,780.		
	b	Form(s) 1099				25b			
	с	Other forms (see instruction				25c			
	d	Add lines 25a through 25c						25d	11,780.
15	26	2022 estimated tax paymen	ts and amount a	pplied from 20	21 return			26	
If you have a qualifying child,	27	Earned income credit (EIC)				27			
attach Sch. EIC.	28	Additional child tax credit from				28			
	29	American opportunity credit	from Form 8863	3, line 8		29			
	30	Reserved for future use .				30			
	31	Amount from Schedule 3, lir				31			
	32	Add lines 27, 28, 29, and 31				indable credits		32	
	33	Add lines 25d, 26, and 32. T			-			33	11,780.
Defund	34	If line 33 is more than line 24						34	7,636.
Refund	35a	Amount of line 34 you want						35a	7,636.
Direct deposit?	b	Routing number 1 1 1				_	Savings		
See instructions.	d	Account number 5 8 6					0		
	36	Amount of line 34 you want	applied to your	2023 estimate	ed tax	36			
Amount	37	Subtract line 33 from line 24	This is the am	ount vou owe					
You Owe	•	For details on how to pay, g						37	
	38	Estimated tax penalty (see in	nstructions) .			38			
Third Party	Do	you want to allow another	person to disc	cuss this retu	rn with the IRS?	See			
Designee		structions					Complete	below.	X No
		signee's		Phone			sonal identi	fication	
	nai			no.			nber (PIN)		
Sign		der penalties of perjury, I declare t ief, they are true, correct, and corr							
Here		, , , ,			1, 2, 7			• •	, 0
	YO	ur signature		Date	Your occupation				nt you an Identity IN, enter it here
Joint return?					SOFTWARE I	DEVELOPER	(see	inst.)	
See instructions.	Sp	ouse's signature. If a joint return,	both must sign.	Date	Spouse's occupati	on			nt your spouse an
Keep a copy for your records.					_			tity Prote inst.)	ection PIN, enter it here
your rocordo.					HOME MAKEF		,	ilisi.)	
		one no. (210) 712-674	1	Email address	KTALLAPAKA				
Paid		eparer's name	Preparer's signat			Date	PTIN		Check if:
Preparer		I PRIYA RAM SAGAR GUPTA TALLAM		RAM SAGAR	GUPTA TALLAM	01/24/2023	P0208		Self-employed
Use Only		m's name GLOBAL TA			- 0001.0				678)965-9522
			Y CT E BRU	NSWICK N			Firm	's EIN	88-2145487
Go to wanter inc. ~	ov/Form	n1040 for instructions and the late	et information			DEV/ 04/44/00 DDC			Form 1040 (2022)

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

BAA REV 01/14/23 PRO

Form **1040** (2022)

SCHEDULE	1
(Form 1040)	

Department of the Treasury

Internal Revenue Service

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

Attachment Sequence No. 01

Name(s) shown on Form 1040, 1040-SR, or 1040-NR	Your so	cial s	ecurity number		
KISHORE & SWAPNA TALLAPAKAM	704-66-1511				
Part 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. Atta	ch Schedule E	5	-7,943.
6	Farm income or (loss). Attach Schedule F.		6	
7	Unemployment compensation		7	
8	Other income:			
а	Net operating loss	8a ()		
b	Gambling	8b		
С	Cancellation of debt	8c		
d	Foreign earned income exclusion from Form 2555	8d ()		
е	Income from Form 8853	8e		
f	Income from Form 8889	8f		
g	Alaska Permanent Fund dividends	8g		
h	Jury duty pay	8h		
i	Prizes and awards	8i		
j	Activity not engaged in for profit income	8j		
k	Stock options	8k		
I	Income from the rental of personal property if you engaged in the rental			
	for profit but were not in the business of renting such property	81		
m	Olympic and Paralympic medals and USOC prize money (see			
	instructions)	8m		
n	Section 951(a) inclusion (see instructions)	8n		
ο	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. Enter here and on Form 1040, 1040-SR,	or 1040-NR, line 8	10	-7,943.

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

Schedule 1 (Form 1040) 2022

Par	t II Adjustments to Income					
11	Educator expenses				11	
12	Certain business expenses of reservists, performing artists, and fee	e-basi	s gov	ernment		
	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 8I 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:					
		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	e. Ente	er here	and on		
	Form 1040 or 1040-SR, line 10, or Form 1040-NR, line 10a	<u>.</u> .		<u> </u>	26	
	ВАА	REV	01/14/23 P	RO	Schedu	le 1 (Form 1040) 2022

Department of the Treasury

Additional Credits and Payments

OMB No. 1545-0074

2

2

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

	nent of the Treasury Revenue Service	Go to www.irs.gov/Form1040 for instructions and the late	st infor	mation.			Attachment Sequence No. 03
	()	rm 1040, 1040-SR, or 1040-NR					security number
Pa	HORE & SWAI	PNA TALLAPAKAM fundable Credits			704-6	6-1	511
1		credit. Attach Form 1116 if required				1	
2	0	child and dependent care expenses from Form 244					
-	Form 2441		• •			2	
3	Education c	redits from Form 8863, line 19..........				3	
4	Retirement	savings contributions credit. Attach Form 8880			[4	200.
5	Residential	[5				
6	Other nonre	fundable credits:					
а	General bus	siness credit. Attach Form 3800	6a				
b	Credit for p	rior year minimum tax. Attach Form 8801	6b				
с	Adoption cr	edit. Attach Form 8839	6c				
d	Credit for th	e elderly or disabled. Attach Schedule R	6d				
е	Alternative r	motor vehicle credit. Attach Form 8910	6e				
f	Qualified plu	ug-in motor vehicle credit. Attach Form 8936	6f				
g	Mortgage ir	terest credit. Attach Form 8396	6g				
h	District of C	olumbia first-time homebuyer credit. Attach Form 8859	6h				
i	Qualified ele	ectric vehicle credit. Attach Form 8834	6i				
j	Alternative f	uel vehicle refueling property credit. Attach Form 8911	6j				
k	Credit to ho	Iders of tax credit bonds. Attach Form 8912	6k				
I	Amount on	Form 8978, line 14. See instructions	61				
z	Other nonre	fundable credits. List type and amount:					
			6z				
7	Total other	nonrefundable credits. Add lines 6a through 6z]	7	
8		through 5 and 7. Enter here and on Form 1040, 1040	-SR,	or 1040-	NR,		
	line 20				••[8	200.
Fer D	monuoul: Deale - 1						ued on page 2)
FUL Pa		ion Act Notice, see your tax return instructions. BAA	RE	EV 01/14/23 PRO	כ כ	cned	ule 3 (Form 1040) 2022

Schedule 3 (Form 1040) 2022

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 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 h	Reserved for future use	13g 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 REV	01/14/23 PRO	Schedule 3 ((Form 1040) 20

SCHEDULE E (Form 1040)		Supplemental Income and Loss (From rental real estate, royalties, partnerships, S corporations, estates, trusts, REMICs, etc.)							OMB No. 1545-0074				
Departm	ent of the Treasury	Attach to Form 1040, 1040-SR, 1040-NR, or 1041.							20 22 Attachment				
Internal Revenue Service Go to www.irs.gov/ScheduleE for					' instru	uctions an	d the la	itest in	formation.		Sequen	ce No. 13	
Name(s) shown on return									al security				
-	KISHORE & SWAPNA TALLAPAKAM 704-6 Part I Income or Loss From Rental Real Estate and Royalties 704-6							6-1511					
Part	Note: If yo	u are in	the business of r	enting personal proper 35 on page 2, line 40.			C . See	instru	ctions. If you a	re an indiv	vidual, rep	ort farm	
Α				at would require you	to file	Form(s) 1	099? 5	See ins	structions .		. Yes X No		
				d Form(s) 1099? .		()							
1a				street, city, state, ZIF									
A						RA PRAE	FCU	TN 5	17507				
B	1-12E, AV.			I) IIRUFAII A		A FRAL		IN J	1/50/				
C													
	Type of Prope	rtv 2	For each ren	tal real estate prope	rtv list	ed		Fa	ir Rental	Person	al Use		
10	(from list below			t the number of fair i				10	Days	Days		QJV	
Α	3			days. Check the QJ		ox only 🛛 🗛		365			0		
В				he requirements to fi t venture. See instru			В						
С			quaimed join	t venture. See instru	CLIONS	i.	С						_
Туре	of Property:	-							·				
1	Single Family R	esidenc	e 3 Vacat	ion/Short-Term Rent	tal	5 Land			Self-Rental				
2	Multi-Family Re	sidence	e 4 Comr	nercial		6 Roya	lties	8	Other (descr	ibe)			
									Propertie	es:			
Incom	ie:						Α		В			С	_
3	Rents received	1			3		5	10.				-	-
4					4								_
Exper													_
5	Advertising .				5								
6	Auto and trave	l (see in	structions) .		6								_
7	Cleaning and r	ing and maintenance					8	73.					_
8	Commissions				8								
9	Insurance				9								
10	Legal and othe	er profes	ssional fees .		10								
11	-				11		1,1	29.					
12	00		,	(see instructions)	12								
13					13								
14	1				14		2,1						
15	_ • •				15		2,4	75.					
16					16			~ -					
17					17		1,8	27.					
18	-		-		18 19								
19 20	Other (list)		ince 5 through	19	20		8,4	52					_
20 21	•		•	id/or 4 (royalties). If	20		0,4	55.					
				ind out if you must	-								
					21		-7,9	43.					
22				er limitation, if any,	22	(7,94	3.)	()	()
23a		mounts reported on line 3 for all rental proper						23a		510.			
b				4 for all royalty prop				23b					
С			•	12 for all properties				23c					
d				18 for all properties				23d					
е				20 for all properties						,453.			
24				vn on line 21. Do no						. 24	1		<u>,</u>
25	Losses. Add ro							(7,943.)			
26				v income or (loss). (on page 2 do not a									
				wise, include this ar						. 26		-7,943.	

-7,943.

Department of the Treasury

KISHORE & SWAPNA

Internal Revenue Service Name(s) shown on return

Credit for Qualified Retirement Savings Contributions

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

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

OMB No. 1545-0074

(b) Your spouse

2,000.

Your social security number

(a) You

7,203.

7,203.

7,203.

2,000.

.

65,546.

REV 01/14/23 PRO

7

1

2

3

4

5

6

8

10 11 12 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).

- Traditional and Roth IRA contributions, and ABLE account contributions by the designated beneficiary for 2022. Do not include rollover contributions
 Election defenses to a 401(1) and the merilification and here explanately account of the second sec
- 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) . .
- 5 Subtract line 4 from line 3. If zero or less, enter -0-
- 6 In each column, enter the **smaller** of line 5 or \$2,000
- 7 Add the amounts on line 6. If zero, **stop**; you can't take this credit .
- 8 Enter the amount from Form 1040, 1040-SR, or 1040-NR, line 11*
- 9 Enter the applicable decimal amount from the table below.

TALLAPAKAM

If line	8 is—	And your filing status is –					
Over-	But not over—	Married filing jointly	Head of household line 9–	Single, Married filing separately, or Qualifying surviving spouse			
	\$20,500	0.5	0.5	0.5			
\$20,500	\$20,000	0.5	0.5	0.2			
\$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 o	credit.			
ultiply line 7	by line 9 .				. 10		200
nitation bas	ed on tax liabil	ity. Enter the amount	from the Credit Lim	it Worksheet in the instruction	ns 11	4	,344
		-		maller of line 10 or line 11 h			
d on Sched	ule 3 (Form 104	40), line 4			· 12		200

* 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.

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

Form **8880** (2022)