## 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

Submission Identification Number (SID)		•	
Taxpayer's name	Social security	y number	
KISHORE TALLAPAKAM	704-66-	1511	
Spouse's name	Spouse's soci	al security nu	mber
SWAPNA TALLAPAKAM	002-27-	-0190	
Part I Tax Return Information — Tax Year Ending December 31, 2022 (Ente	r year you aı	e authoriz	ing.)
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.			
<b>1</b> Adjusted gross income		1	65,546.
<b>2</b> 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	<u> </u>	5	
Part II Taxpayer Declaration and Signature Authorization (Be sure you get and	keep a copy	y of your r	eturn)
my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I aboreturn (original or amended) I am now authorizing. I consent to allow my intermediate service provider, transmost of send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejor any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the UAgent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account ind payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminat payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation requipments days prior to the payment (settlement) date. I also authorize the financial institutions involved in the taxes to receive confidential information necessary to answer inquiries and resolve issues related to the personal identification number (PIN) below is my signature for the income tax return (original or amended) I a Electronic Funds Withdrawal Consent.	itter, or electro- ection of the trans. S. Treasury ar- icated in the ta- on to debit the e the authoriza- uests must be processing of payment. I furti-	nic return ori ansmission, ( nd its designa x preparation entry to this ition. To revo received no the electroni her acknowle	iginator (ERO) (b) the reason ated Financial in software for account. This oble (cancel) a bolater than 2 ic payment of edge that the
Taxpayer's PIN: check one box only			
X I authorize GLOBAL TAXES LLC to enter or generate signature on the income tax return (original or amended) I am now authorizing.	Ent	1 5 1 er five digits, l ''t enter all ze	
I will enter my PIN as my signature on the income tax return (original or amended) I am r if you are entering your own PIN <b>and</b> your return is filed using the Practitioner PIN methoelow.			
Your signature ► Kishors Date ►			
Spouse's PIN: check one box only			
I authorize GLOBAL TAXES LLC to enter or generate 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 rif you are entering your own PIN and your return is filed using the Practitioner PIN metholow.	Ent dor ow authorizir		ros nis box <b>only</b>
Spouse's signature ▶ Date ▶			
Practitioner PIN Method Returns Only—continue below			
Part III Certification and Authentication — Practitioner PIN Method Only			
ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN.		6 6 1 9	8 9
I certify that the above numeric entry is my PIN, which is my signature for the electronic individual income to authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am submarequirements of the Practitioner PIN method and <b>Pub. 1345</b> , Handbook for Authorized IRS e-file Providers of I	nitting this retu	rn in accorda	ance with the
ERO's signature ▶ Date ▶			
ERO Must Retain This Form — See Instructions			

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

E 1040 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.

Filing Status Check only	s 🗌 S	Single X Married filing jointly	Marrie	ed filing separately	/ (MFS)	Head of	household (HOH)		lifying sui	
one box.	•	u checked the MFS box, enter the n on is a child but not your dependent	,	our spouse. If you	ı check	ed the HOH or	QSS box, enter the		` '	,
Your first name	and mi	ddle initial	Last nar	me				Your so	cial secur	rity number
KISHORE TALLAPAKAM 70						704-66-1511				
If joint return, spouse's first name and middle initial Last name Sp						Spouse's social security number				
SWAPNA TALLAPAKAM 00						002-2	27-019	90		
Home address (number and street). If you have a P.O. box, see instructions.  Apt. no.  Pres						Preside	ntial Elect	tion Campaign		
								nere if you		
UTV TOWN OF DOST OTTICE. IT VOLL DAVE A TOTEIGN AGGRESS, ALSO COMPLETE SPACES DELOW. I STATE I ZIP CODE							1 '	0,	intly, want \$3 . Checking a	
0717 717801770						"	ow will no	•		
Foreign country	y name		F	oreign province/sta	te/count	ty	Foreign postal code	your tax	or refund	ıl.
									You	Spouse
Digital Assets		ny time during 2022, did you: (a) rec ange, gift, or otherwise dispose of a	`				,	. ,	☐ Yes	⊠ No
Standard		eone can claim: You as a de		<u>_</u>		a dependent	, ,			
Deduction		Spouse itemizes on a separate retur	•			•				
Age/Blindness	You:	☐ Were born before January 2, 1	958	Are blind	Spouse	: Was bor	n before January	2, 1958	☐ Is b	olind
Dependents	s (see	instructions):		(2) Social secu	rity	(3) Relationsh	ip (4) Check the b	ox if quali	fies for (see	e instructions):
If more		rst name Last name		number	,	to you	Child tax of	redit	Credit for o	other dependents
than four										
dependents,	<u> </u>									
see instructions and check	5 —									
here	]									
Income	1a	Total amount from Form(s) W-2, b	ox 1 (see	e instructions) .				. 1a		73,489.
	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 instructions)								
attach Forms	d	Medicaid waiver payments not reported on Form(s) W-2 (see instructions)								
W-2G and 1099-R if tax	е	Taxable dependent care benefits from Form 2441, line 26								
was withheld.	f	Employer-provided adoption benefits from Form 8839, line 29								
If you did not	g	Wages from Form 8919, line 6 .						. 1g		
get a Form	h	Other earned income (see instruct	Other earned income (see instructions)							0.
W-2, see instructions.	i	Nontaxable combat pay election (see instructions)								
	Z	Add lines 1a through 1h						. 1z		73,489.
Attach Sch. B	<b>2</b> a	· –	2a			axable interest		. 2b		
if required.	3a	Qualified dividends	3a		<b>b</b> C	ordinary divide	nds	. 3b		
	4a	<del>-</del>	4a			axable amoun		. 4b		
Standard Deduction for—	5a	<del>-</del>	5a			axable amoun		. 5b		
Single or	6a	,	6a			axable amoun	t	. 6b		
Married filing separately,	С	If you elect to use the lump-sum e			`	,				
\$12,950	7	Capital gain or (loss). Attach Sche								
<ul> <li>Married filing jointly or</li> </ul>	8	Other income from Schedule 1, lin						. 8		<del>-7,943.</del>
Qualifying surviving spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7		-				. 9		65,546.
\$25,900 \$25,900	10	Adjustments to income from Sche						. 10		
Head of household,	11	Subtract line 10 from line 9. This is	-					. 11		65,546.
\$19,400	12	Standard deduction or itemized		•	,			. 12		25,900.
If you checked any box under	13	Qualified business income deduct						. 13		
Standard Deduction,	14							. 14		25,900. 39,646.
see instructions.	15	Subtract line 14 from line 11. If zer	o or less	Subtract line 14 from line 11. If zero or less, enter -0 This is your <b>taxable income</b>						

Form 1040 (2022	2)								Page 2
Tax and	16	Tax (see instructions). Check	if any from Form	n(s): <b>1</b> 881	4 <b>2</b> 🗌 4972	3 🗌		16	4,344.
Credits	17	Amount from Schedule 2, lin	e3					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, lin	e8					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 <b>total tax</b>					24	4,144.
Payments	25	Federal income tax withheld							
•	а	Form(s) W-2				<b>25a</b> 1	1,780.		
	b	Form(s) 1099				25b		7	
	С	Other forms (see instructions	s)			25c		7	
	d	Add lines 25a through 25c						25d	11,780.
.,	26	2022 estimated tax payment						26	
If you have a qualifying child,	27	Earned income credit (EIC)				27			
attach Sch. EIC.	28	Additional child tax credit from				28		7	
	29	American opportunity credit				29		1	
	30	Reserved for future use .		-		30			
	31	Amount from Schedule 3, lin				31		7	
	32	Add lines 27, 28, 29, and 31						32	
	33	Add lines 25d, 26, and 32. T	•	•	-			33	11,780.
D. ( l	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			c Type:		1	000	,
See instructions.	d	Account number 5 8 6					] 00190		
	36	Amount of line 34 you want a				36			
Amount You Owe	37	Subtract line 33 from line 24 For details on how to pay, g	. This is the <b>am</b> o	ount you owe.				37	
	38	Estimated tax penalty (see in	nstructions) .			38			
Third Party Designee		you want to allow another	person to disc	cuss this retu	n with the IRS		Complete	below.	⊠ No
· ·	De	signee's		Phone			sonal ident	ification	
	naı	ne		no.		nur	nber (PIN)		
Sign Here		der penalties of perjury, I declare t ief, they are true, correct, and com							
TICIC	Yo	ur signature	Date Your occupation			Prot	tection P	nt you an Identity IN, enter it here	
Joint return?						DEVELOPER	,	inst.)	
See instructions. Keep a copy for	Sp	ouse's signature. If a joint return, I	ooth must sign.	Date	Spouse's occupa	tion			nt your spouse an ection PIN, enter it here
your records.					HOME MAKE	R		inst.)	Scholl III, enter it here
	Ph	one no. (210) 712-674	<u> </u>	Email address		AM@GMAIL.C			
		eparer's name	Preparer's signat		NIALLAN	Date	PTIN		Check if:
Paid		I PRIYA RAM SAGAR GUPTA TALLAM			בווסיים יימדדאו			2703	Self-employed
Preparer		m's name GLOBAL TAX		IVALL DAGAK	OOLIA TAHLAK	1 01/24/2023			
Use Only			Y CT E BRU	M ALMBINI	J 08816			n's EIN	(678) 965-9522
				YIND NAT CIV IN				JUIN	88-2145487
Go to www.irs.go	ov/Forn	n1040 for instructions and the late	st information.		BAA	REV 01/14/23 PRO			Form <b>1040</b> (202)

#### **SCHEDULE 1** (Form 1040)

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

OMB No. 1545-0074 Attachment Sequence No. 01

Department of the Treasury Internal Revenue Service

Attach to Form 1040, 1040-SR, or 1040-NR. Go to www.irs.gov/Form1040 for instructions and the latest information.

Name	(s) shown on Form 1040, 1040-SR, or 1040-NR		Your so	cial s	ecurity number
KISH	ORE & SWAPNA TALLAPAKAM		704-6	66-15	11
Par	t I Additional Income				
1	Taxable refunds, credits, or offsets of state and local income taxes			1	
<b>2</b> a	Alimony received			2a	
b	Date of original divorce or separation agreement (see instructions):				
3	Business income or (loss). Attach Schedule C			3	
4	Other gains or (losses). Attach Form 4797			4	
5	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach S	chedule	Ε.	5	-7,943.
6	Farm income or (loss). Attach Schedule F			6	
7	Unemployment compensation			7	
8	Other income:				
а	Net operating loss		)		
b	Gambling				
С	Cancellation of debt				
d	Foreign earned income exclusion from Form 2555 8d		)		
е	Income from Form 8853				
f	Income from Form 8889				
g	Alaska Permanent Fund dividends 8g				
h	Jury duty pay				
i	Prizes and awards				
j	Activity not engaged in for profit income				
k	Stock options				
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)				
n	Section 951(a) inclusion (see instructions)				
0	Section 951A(a) inclusion (see instructions)				
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		)		
t	Pension or annuity from a nonqualifed deferred compensation plan or				
	a nongovernmental section 457 plan 8t				
u	Wages earned while incarcerated 8u				

Total other income. Add lines 8a through 8z . . . . . . . . . . . . .

Combine lines 1 through 7 and 9. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 8

**z** Other income. List type and amount:

**-7**,943.

9

10

8z

Schedule 1 (Form 1040) 2022 Page **2** 

Par	t II Adjustments to Income			
11	Educator expenses		11	
12	Certain business expenses of reservists, performing artists, and fee-	-basis government		
	officials. Attach Form 2106		12	
13	Health savings account deduction. Attach Form 8889		13	
14	Moving expenses for members of the Armed Forces. Attach Form 3903		14	
15	Deductible part of self-employment tax. Attach Schedule SE		15	
16	Self-employed SEP, SIMPLE, and qualified plans		16	
17	Self-employed health insurance deduction		17	
18	Penalty on early withdrawal of savings		18	
19a	Alimony paid		19a	
b	Recipient's SSN			
С	Date of original divorce or separation agreement (see instructions):			
20	IRA deduction		20	
21	Student loan interest deduction		21	
22	Reserved for future use		22	
23	Archer MSA deduction		23	
24	Other adjustments:			
а	, , , , , , , , , , , , , , , , , , ,	24a		
b	Deductible expenses related to income reported on line 8I from the			
		24b		
С	Nontaxable amount of the value of Olympic and Paralympic medals			
	• • • • • • • • • • • • • • • • • • • •	24c		
d	' '	24d		
е	Repayment of supplemental unemployment benefits under the Trade			
		24e	_	
f		24f	-	
g	• • • • • • • • • • • • • • • • • • • •	24g	-	
h	Attorney fees and court costs for actions involving certain unlawful			
	·	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			
		24i	-	
j		24j	-	
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form			
		24k	-	
Z	Other adjustments. List type and amount:	0.4		
0-		24z	0.5	
25	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> .	. Enter here and on		
	Form 1040 or 1040-SR, line 10, or Form 1040-NR, line 10a		26	

# 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 KISHORE & SWAPNA TALLAPAKAM

Your social security number 704-66-1511

Par	Nonrelundable Credits				
1	Foreign tax credit. Attach Form 1116 if required			1	
2	Credit for child and dependent care expenses from Form 2441 Form 2441	-		2	
3	Education credits from Form 8863, line 19			3	
4	Retirement savings contributions credit. Attach Form 8880			4	200.
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	6c			
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			
-1	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	•	)-NR, 	8	200.

(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	13z	14	
15	Add lines 9 through 12 and 14. Enter here and on Form 1040, 1040 line 31		15	

# 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.

Attachment Sequence No. 11

2022 Attachment Sequence No. 13

Your social security number

OMB No. 1545-0074

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

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

KIS	HORE & SWAPNA TALLAPAKAM					7	04-66	-1511		
Par										
	<b>Note:</b> If you are in the business of renting personal proper rental income or loss from <b>Form 4835</b> on page 2, line 40.	ty, use	Schedule	<b>C</b> . See	instru	ctions. If you are	an indivi	dual, rep	ort farm	
Α	Did you make any payments in 2022 that would require you	to file	Form(s) 1	1099? 5	See ins	structions		Y€	s XI	No
						No				
1a										
Α										
В	TIZE, AVIDADA (VIDUALOSI) TINOTATI A	יווועוווי	M IIML	711011	IIV J	17307				
C										
1b	Type of Property 2 For each rental real estate prope	rty liet	od		E	ir Rental	Persona	al Heo		
110	(from list below) above, report the number of fair i	rental:	eu and			Days	Day		QJ,	V
Α	gersonal use days. Check the Qu			Α		365		0		1
В	if you meet the requirements to f			В		300				i
C	qualified joint venture. See instru	ictions	-	C						<u>'</u>
	of Property:									
	Single Family Residence 3 Vacation/Short-Term Rent	tal	5 Land	1	7	Self-Rental				
	Multi-Family Residence 4 Commercial		6 Roya			Other (describe	e)			
			,							
						Properties	:		_	
Incor				Α		В			С	
3	Rents received	3		5	10.					
4	Royalties received	4								
-	nses:									
5	Advertising	5								
6	Auto and travel (see instructions)	6								
7	Cleaning and maintenance	7		8	373.					
8	Commissions	8								
9	Insurance	9								
10	Legal and other professional fees	10								
11	Management fees	11		1,1	29.					
12	Mortgage interest paid to banks, etc. (see instructions)	12								
13	Other interest	13								
14	Repairs	14			49.					
15	Supplies	15		2,4	75.					
16	Taxes	16		1 0	.07					
17	Utilities	17		1,8	327.					
18	Depreciation expense or depletion	18								
19	Other (list)  Total expenses. Add lines 5 through 19	19		0 4	F 2					
20		20		8,4	53.					
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		<b>-7,</b> 9	143					
22	Deductible rental real estate loss after limitation, if any,	21		1,7	10.					
22	on <b>Form 8582</b> (see instructions)	22	(	7,94	13 \	(	)(			١
23a	Total of all amounts reported on line 3 for all rental proper		(	1, 35	23a	1	510.			
20a b	Total of all amounts reported on line 4 for all royalty proper				23b	,	310.			
C	Total of all amounts reported on line 12 for all properties	011100			23c					
d	Total of all amounts reported on line 12 for all properties  Total of all amounts reported on line 18 for all properties				23d					
e	Total of all amounts reported on line 20 for all properties				23e	Ω,	453.			
24	Income. Add positive amounts shown on line 21. <b>Do no</b>	tinclu	de anvilo		200	0,.	24			
25	Losses. Add royalty losses from line 21 and rental real estat		•		nter t	ntal losses here	25 (		7,94	3 1
26	Total rental real estate and royalty income or (loss).						20 (			<u> </u>
20	here. If Parts II, III, IV, and line 40 on page 2 do not a									
	Schedule 1 (Form 1040), line 5. Otherwise, include this ar						26		<b>-7,</b> 9	43.

### **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

KISHORE & SWAPNA

TALLAPAKAM

Your social security number

704-66-1511

(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) You		(b) Your spouse						
1	Traditional and Roth IRA contributions, and ABLE account contributions by the designated beneficiary for 2022. <b>Do not</b> include rollover contributions														
2	Flective defer	deferrals to a 401(k) or other qualified employer plan, voluntary employee													
_			(D) plan contributions	7,20	3.										
3	Add lines 1 an	d2				3	7,20	3.							
4	Certain distrib	outions receive	ed after 2019 and	before the due date	te (including										
	extensions) of	your 2022 tax	return (see instructio	ns). If married filing jo	intly, include										
	both spouses	' amounts in <b>b</b> e	<b>oth</b> columns. See inst	ructions for an excep	tion	4									
5	Subtract line 4	from line 3. If	zero or less, enter -0-			5	7,20	3.							
6	In each colum	n, enter the <b>sn</b>	naller of line 5 or \$2,0	00		6	2,00	0.							
7	Add the amou	nts on line 6. If	f zero, <b>stop</b> ; you can't	take this credit				7	2,000.						
8	Enter the amo	unt from Form	1040, 1040-SR, or 10	040-NR, line 11*	8	65	,546.								
9	Enter the appl	icable decimal	amount from the tabl	e below.											
	If line	8 is-	Į –	And your filing status	is—										
		But not Married Head of Single, Married filing				ied filing									
	Over—	over—	filing jointly	household	separate										
			Enter or	n line 9—	Qualifying survi	ving spouse									
		\$20,500	0.5	0.5	0.5										
	\$20,500	\$22,000	0.5	0.5	0.2										
	\$22,000	\$30,750	0.5	0.5	0.1	0.1		0.1		9	x .1				
	\$30,750	\$33,000	0.5	0.2	0.1		0.1		0.1		0.1				
	\$33,000	\$34,000	0.5	0.1	0.1										
	\$34,000	\$41,000	0.5	0.1	0.0		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:	If line 9 is zero, <b>stop</b> ;	you can't take this cre	edit.										
10	Multiply line 7	,					_	10	200.						
11			,	from the Credit Limit				11	4,344.						
12				utions. Enter the sm											
	and on Sched	ule 3 (Form 10	40), line 4					12	200.						

<sup>\*</sup> 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.