IRS e-file Signature Authorization

OMB No. 1545-0074

Department of the Treasury
Internal Revenue Service

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 RAHUL SHARMA 158-79-4945 Spouse's name Spouse's social security number 985-91-3659 RIDIMA SHARMA Tax Return Information – Tax Year Ending December 31, 2023 (Enter year you are authorizing.) Part I 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. 70,846. Adjusted gross income 1 1 4,535. 2 2 3 3 12,867. 4 4 8,332. 5 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

				FBO firm name		En
\mathbf{X}	l authorize	GLOBAL	TAXES	LLC	to enter or generate my PIN	Ľ
-			-			19

9	4	9	4	5	
Ent dor	er fiv n't er	ve dig nter a	gits, all ze	but	as

3

1

5

6

Enter five digits, but don't enter all zeros

9

as mv

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

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 below										
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	 	2	7	1
ERO's EFI	N/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN.	2	2			 6 nter a	 	2	7	1

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 🕨	
	Retain This Form — See Form to the IRS Unless		
For Paperwork Reduction Act Notice, see your tax retur	n instructions.	REV 01/21/24 PRO	Form 8879 (Rev. 01-2021)

Date

to enter or generate my PIN

1040		artment of the Treasury—Internal Revenue Servi S. Individual Income Tax		urn	202	3	OMB No. 1545-	-0074	IRS Use Only	–Do not w	rite or stap	ole in this space.
For the year Jan	. 1-Dec	a. 31, 2023, or other tax year beginning			, 2023, end	ing			, 20	See se	parate ir	nstructions.
Your first name	and mi	iddle initial	Last na	me						Your so	cial secu	urity number
RAHUL									158	79	4945	
	oouse's	s first name and middle initial									security number	
RIDIMA			SHARMA					985	91	3659		
	(numbe	er and street). If you have a P.O. box, see						A	Apt. no.			ction Campaign
2752 COS	STA N	MESA DR								Check I	nere if yo	ou, or your
		ce. If you have a foreign address, also co	mplete s	paces bel	ow.	Sta	te	ZIP co	ode			ointly, want \$3
LITTLE E	LM					TX	X	750	68			d. Checking a lot change
Foreign country	name		F	oreign pr	ovince/state/o	count	ty	Foreig	n postal code	1	or refur	0
											Yo	u 🗌 Spouse
Filing Status	; [Single					Head of ho	ouseh	old (HOH)			
Check only		Married filing jointly (even if only o	ne had ii	ncome)								
one box.		Married filing separately (MFS)					Qualifying	surviv	ing spouse	(QSS)		
	lf y	ou checked the MFS box, enter the	name o	of your sp	bouse. If you	ı che	ecked the HOH	l or QS	SS box, ente	er the chi	ild's nar	ne if the
	qu	alifying person is a child but not you	ır depen	ident:								
Digital	Atar	ny time during 2023, did you: (a) rec	eive (as	a rewarc	award or	navn	nent for prope	tv or	services): or	(b) sell		
Assets		ange, or otherwise dispose of a dig	•					•	,	. ,	∏Ye	s 🛛 No
Standard	-	eone can claim: You as a de		<u> </u>			a dependent	/ (- /		
Deduction	_	Spouse itemizes on a separate retur					•					
Age/Blindness	S You:	Were born before January 2, 1	959 🗌	Are bli	ind Spa	ouse	: 🗌 Was bor	n befc	ore January 2	2, 1959	∏ ls	blind
Dependents	-			(2) S	ocial security		(3) Relationsh	14			fies for (s	see instructions):
If more		irst name Last name		.,	number		to you		Child tax c	redit	Credit for	other dependents
than four												
dependents, see instructions												
and check	>											
here												
Income	1a	Total amount from Form(s) W-2, b	ox 1 (se	e instruc	tions)	• •				. 1a		89,410.
Attach Form(s)	b	Household employee wages not re	•		. ,	• •				. 1b	-	
W-2 here. Also	С	Tip income not reported on line 1a						• •		. <u>1</u> c	-	
attach Forms W-2G and	d	Medicaid waiver payments not rep		•	, ,	nstru	ictions)	• •		. 1d	-	
1099-R if tax	е	Taxable dependent care benefits f		-		• •		• •		. <u>1</u> e	-	
was withheld.	f	Employer-provided adoption bene			-			• •		. <u>1f</u>	-	
lf you did not get a Form	g	Wages from Form 8919, line 6 .				• •		• •		. <u>1g</u>	· · · · · · · · · · · · · · · · · · ·	
W-2, see	h	Other earned income (see instruct	,			• •		···		. <u>1</u> h	1	0.
instructions.	i	Nontaxable combat pay election (s	see instr	uctions)		•	1 i					00 110
		Add lines 1a through 1h	••••		· · · ·	 	• • • • •			. 1z	-	89,410.
Attach Sch. B if required.	2a		2a				axable interest			. 2b	-	
	<u>3a</u>		3a 4 -				ordinary divider axable amount			. 3b	-	
Standard	4a 5 a		4a				axable amount			. 4b	-	
Deduction for—	5a 6a		5a							. 5b	-	
 Single or Married filing 	6а с	Social security benefits	6a	nethod			axable amount		 Г	. 6b	'	
separately, \$13,850	7	Capital gain or (loss). Attach Scher				`	,	• •	· · · L	7		
 Married filing 	8	Additional income from Schedule						• •	· · · L	. 8	_	-18,564.
jointly or Qualifying	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7,	,					• •		. <u>o</u> . 9	-	70,846.
surviving spouse, \$27,700	9 10	Adjustments to income from Sche		-			• · · · · ·	• •		. 9 . 10		, , , , , , , , , , ,
 Head of 	11	Subtract line 10 from line 9. This is						• •		. 11		70,846.
household, [\$20,800	12	Standard deduction or itemized	•	-	-					. 12		27,700.
 If you checked any box under 	13	Qualified business income deduct					5-A			. 13		
Standard Deduction,	14	Add lines 12 and 13								. 14		27,700.
see instructions.	15	Subtract line 14 from line 11. If zer	o or less	s, enter -	0 This is v	ourt	axable incom	е.		. 15		43,146.
			-		,							

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

Form **1040** (2023)

Form 1040 (2023	3)								Page 2
Tax and	16	Tax (see instructions). Check	if any from Form	(s): 1 🗌 881	4 2 4972	3		16	4,735.
Credits	17	Amount from Schedule 2, lin	e3				[17	
	18	Add lines 16 and 17					[18	4,735.
	19	Child tax credit or credit for	other dependent	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	4,535.
	23	Other taxes, including self-e	mployment tax,	from Schedule	e 2, line 21 .		[23	0.
	24	Add lines 22 and 23. This is					[24	4,535.
Payments	25	Federal income tax withheld							· · · · · ·
	а	Form(s) W-2				25a 12	,867.		
	b	Form(s) 1099				25b			
	с	Other forms (see instructions	s)			25c			
	d	Add lines 25a through 25c	<i>.</i>					25d	12,867.
If you have a	26	2023 estimated tax payment	s and amount a	pplied from 20)22 return		[26	· · · · · · · · · · · · · · · · · · ·
qualifying child,	27	Earned income credit (EIC)				27			
attach Sch. EIC.	28	Additional child tax credit fror				28			
	29	American opportunity credit	from Form 8863	8, line 8		29			
	30	Reserved for future use .				30			
	31	Amount from Schedule 3, lin				31			
	32	Add lines 27, 28, 29, and 31				undable credits		32	
	33	Add lines 25d, 26, and 32. T	•		-		[33	12,867.
Refund	34	If line 33 is more than line 24						34	8,332.
	35a	Amount of line 34 you want				•	. 🗆 🗄	35a	8,332.
Direct deposit?	b	Routing number 1 1 1					Savings		
See instructions.	d	Account number 3 9 1					Ŭ		
	36	Amount of line 34 you want a	applied to your	2024 estimate	ed tax	36			
Amount	37	Subtract line 33 from line 24	This is the amo	ount vou owe					
You Owe	•	For details on how to pay, g						37	
	38	Estimated tax penalty (see in				38			
Third Party	Do	you want to allow another	,			' See			
Designee		structions					omplete bel	ow.	X No
-		signee's		Phone			onal identifica	tion	
	nar			no.			per (PIN)		
Sign		der penalties of perjury, I declare the ief, they are true, correct, and com							
Here		· · · ·		Date	,			•	nt you an Identity
	10	ur signature		Dale	Your occupation				IN, enter it here
Joint return?					SENIOR CO	NSULTANT	(see ins	t.)	
See instructions.	Sp	ouse's signature. If a joint return, t	ooth must sign.	Date	Spouse's occupat	ion			nt your spouse an
Keep a copy for your records.							Identity (see ins		ection PIN, enter it here
your rooordor			-		SOFTWARE		`		
		one no. (972) 821-635		Email address	RAHUL1393SH	ARMA@GMAIL.CO			
Paid		eparer's name	Preparer's signat			Date	PTIN		Check if:
Preparer		I PRIYA RAM SAGAR GUPTA TALLAM		RAM SAGAR	GUPTA TALLAM	01/31/2024	P020827		Self-employed
Use Only		m's name GLOBAL TAX			- 00011				678)965-9522
			Y CT E BRU	NSWICK N			Firm's E	IN	84-3171965
Go to www.irs.go	ov/Forn	n1040 for instructions and the late	st information.		BAA	REV 01/21/24 PRO			Form 1040 (2023)

SCHEDULE	1
(Form 1040)	

Department of the Treasury

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

2023 Attachment Sequence No. **01** ty number

Internal Revenue Service	Go to www.irs.gov/Form1040 for instructions and the latest information.		Sequenc
Name(s) shown on Fo	rm 1040, 1040-SR, or 1040-NR	Your soc	ial securit
RAHUL & RIDIMA	SHARMA	158-79	-4945

Par	t 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. Attach	Schedule E .	5	-18,564.
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	()	
е	Income from Form 8853	•		
f	Income from Form 8889			
g	Alaska Permanent Fund dividends			
h	Jury duty pay			
i	Prizes and awards			
j	Activity not engaged in for profit income			
k	Stock options			
1	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 8		_	
m	Olympic and Paralympic medals and USOC prize money (see			
	instructions)		- 1	
n	Section 951(a) inclusion (see instructions)		- 1	
0	Section 951A(a) inclusion (see instructions)		_	
р	Section 461(I) excess business loss adjustment		_	
q	Taxable distributions from an ABLE account (see instructions) 8c		-	
r	Scholarship and fellowship grants not reported on Form W-2		-	
S	Nontaxable amount of Medicaid waiver payments included on Form	(
_	1040, line 1a or 1d		<u>)</u>	
t	Pension or annuity from a nonqualifed deferred compensation plan or			
	a nongovernmental section 457 plan		- 1	
u	Wages earned while incarcerated		-	
Z	Other income. List type and amount:			
9	Total other income. Add lines 8a through 8z		9	
9 10	Combine lines 1 through 7 and 9. This is your additional income . Enter he		3	
10	1040, 1040-SR, or 1040-NR, line 8		10	-18,564.
For Pa	perwork Reduction Act Notice, see your tax return instructions.			le 1 (Form 1040) 2023

Part	Adjustments to Income				
11	Educator expenses			 11	
12	Certain business expenses of reservists, performing artists, and fee				
	officials. Attach Form 2106			 12	
13	Health savings account deduction. Attach Form 8889			13	
14	Moving expenses for members of the Armed Forces. Attach Form 3903			14	
15	Deductible part of self-employment tax. Attach Schedule SE			15	
16	Self-employed SEP, SIMPLE, and qualified plans			16	
17	Self-employed health insurance deduction			17	
18	Penalty on early withdrawal of savings			18	
19a	Alimony paid			19a	
b	Recipient's SSN				
-	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:		• •	 	
 a		24a			
-	Deductible expenses related to income reported on line 81 from the	210			
N		24b			
С	Nontaxable amount of the value of Olympic and Paralympic medals	- 10		-	
Ŭ	and USOC prize money reported on line 8m	24c			
d	Reforestation amortization and expenses	24d		-	
e	Repayment of supplemental unemployment benefits under the Trade	2.10		-	
C	Act of 1974	24e			
f	Contributions to section 501(c)(18)(D) pension plans	24f		-	
q	Contributions by certain chaplains to section 403(b) plans	24g		-	
	Attorney fees and court costs for actions involving certain unlawful	2-TY		 -	
	discrimination claims (see instructions)	24h			
:		2411		-	
	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			
:	Housing deduction from Form 2555	24i 24j			
ן ר	Excess deductions of section 67(e) expenses from Schedule K-1 (Form	24j			
ĸ		24k			
-	Other adjustments. List type and amount:	24N		-	
z	Other aujustitients. List type and antount.	24z			
25	Total other adjustments. Add lines 24a through 24z			25	
25 26	Add lines 11 through 23 and 25. These are your adjustments to income			 23	
20	Form 1040, 1040-SR, or 1040-NR, line 10			26	
	BAA		01/21/24 P		le 1 (Form 1040) 202

Department of the Treasury

Additional Credits and Payments

OMB No. 1545-0074 20

23

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

	Go to www.irs.gov/Form1040 for instructions and the latest information.				ttachment equence No. 03
		rm 1040, 1040-SR, or 1040-NR			ecurity number
Par	ul & RIDIMA	fundable Credits	128-	/9-4	940
1	Foreign tax	credit. Attach Form 1116 if required		1	
2	•	child and dependent care expenses from Form 2441, line 1	1. Attach		
	Form 2441			2	
3	Education c	redits from Form 8863, line 19		3	
4	Retirement	savings contributions credit. Attach Form 8880		4	200.
5a	Residential	clean energy credit from Form 5695, line 15		5a	
b	Energy effic	ient home improvement credit from Form 5695, line 32		5b	
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			
d	Credit for th	e elderly or disabled. Attach Schedule R 6d			
е	Reserved for	or future use			
f	Clean vehic	le credit. Attach Form 8936 6f			
g	Mortgage in	terest credit. Attach Form 8396 6g			
h	District of Co	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 6			
m	Credit for p	reviously owned clean vehicles. Attach Form 8936 . 6m			
z	Other nonre	fundable credits. List type and amount:			
		6z			
7	Total other	nonrefundable credits. Add lines 6a through 6z		7	
8		through 4, 5a, 5b, and 7. Enter here and on Form 1040, 104			
	1040-NR, lir	ne 20		8	200. led on page 2

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

Schedule 3 (Form 1040) 2023

Schedule 3 (Form 1040) 2023

Par	t II Other Payments and Refundable Credits			
9	Net premium tax credit. Attach Form 8962	9		
10	Amount paid with request for extension to file (see instructions) .	10		
11	Excess social security and tier 1 RRTA tax withheld	11		
12	Credit for federal tax on fuels. Attach Form 4136	12		
13	Other payments or refundable credits:			
а	Form 2439	13a		
b	Credit for repayment of amounts included in income from earlier years	13b		
С	Elective payment election amount from Form 3800, Part III, line 6, column (i)	13c		
d	Deferred amount of net 965 tax liability (see instructions)	13d		
z	Other payments or refundable credits. List type and amount:			
		13z		
14	Total other payments or refundable credits. Add lines 13a through	13z	14	
15	Add lines 9 through 12 and 14. Enter here and on Form 1040, 1040 line 31	15		
	BAA REV	01/21/24 PRO	Schedu	ule 3 (Form 1040) 2023

SCHEDULE E	
(Form 1040)	

Department of the Treasury Internal Revenue Service

Supplemental Income and Loss

OMB No. 1545-0074

Attach to Form 1040, 1040-SR, 1040-NR, or 1041. Go to www.irs.gov/ScheduleE for instructions and the latest information.

ICs, etc.)	20 23 Attachment Sequence No. 13					
Your social security number						

Name(s) shown on return Your social securit						al security	number			
RAHU	UL & RIDIMA SHARMA						158-79-4945			
Part I Income or Loss From Rental Real Estate and Royalties Note: If you are in the business of renting personal property, use Schedule C. See instructions. If you are an individual, report farm rental income or loss from Form 4835 on page 2, line 40.										
Α [Did you make any payments in 2023 that would require you to file Form(s) 1099? See instructions						s 🛛 No			
	f "Yes," did you or will you file required Form(s) 1099?									
1a	Physical address of each property (street, city, state, ZIF									
A	2439, ST NO 03, DHARAMPURA AMRITSAR PU		-	12001						
 	2459, 51 NO 05, DIARAMPORA AMATISAR PC	MOAI		13001						
1b							QJV			
Α	above, report the name of the			Α			0			
B	if you meet the requirements to f	ile as	a	B				0		
	qualified joint venture. See instru	ictions	s.	C						
	of Property:			•						
	Single Family Residence 3 Vacation/Short-Term Ren	tal	5 Lanc	1	7	Self-Rental				
	Multi-Family Residence 4 Commercial	-cai	6 Roya			Other (descri	be)			
					0					
						Propertie	es:			
Incon				<u>A</u>		В			С	
3		3		5	73.					
_4	Royalties received	4								
Exper		-								
5		5								
6	Auto and travel (see instructions)	6		2 4	E 4					
7	Cleaning and maintenance	7		Ζ,4	54.					
8		8								
9 10		10								
11	Legal and other professional fees	11		2 7	84.					
12	Mortgage interest paid to banks, etc. (see instructions)	12		Ζ, Ι	04.					
13	Other interest	13								
14	Repairs	14		37	84.					
15		15			61.					
16		16		572	01.					
17		17		3.4	15.					
18	Depreciation expense or depletion	18			39.					
19	Other (list)	19		- /						
20	Total expenses. Add lines 5 through 19	20		19,1	37.					
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 Form 6198	21		-18,5	64.					
22	Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions)	22		18,56		()	()	
23a	Total of all amounts reported on line 3 for all rental prope				23a	<u>.</u>	573.		7	
b	Total of all amounts reported on line 4 for all royalty prop				23b					
С	Total of all amounts reported on line 12 for all properties				23c					
d	Total of all amounts reported on line 18 for all properties									
е	Total of all amounts reported on line 20 for all properties 23e 19,137.									
24	Income. Add positive amounts shown on line 21. Do not include any losses									
25	Losses. Add royalty losses from line 21 and rental real estate losses from line 22. Enter total losses here 25 (18,564.)						18,564.)			
26										
	Schedule 1 (Form 1040), line 5. Otherwise, include this ar						26		-18,564.	
For Pa	perwork Reduction Act Notice, see the separate instructions.		NE			-18,564			orm 1040) 2023	

Form 8880

Department of the Treasury

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

Your social security number

158-79-4945

Internal Revenue Service Name(s) shown on return

RAHUL & RIDIMA SHARMA

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



10

11

12

• The amount on Form 1040, 1040-SR, or 1040-NR, line 11, is more than \$36,500 (\$54,750 if head of household; \$73,000 if married filing jointly).

• The person(s) who made the qualified contribution or elective deferral (a) was born after January 1, 2006; (b) is claimed as a dependent on someone else's 2023 tax return; or (c) was a **student** (see instructions).

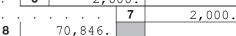
- Traditional and Roth IRA contributions, and ABLE account contributions by the designated beneficiary for 2023. **Do not** include rollover contributions
 Elective deferrals to a 401(k) or other gualified employer plan, voluntary employee
- 2 Elective deferrals to a 401(k) or other qualified employer plan, voluntary employee contributions, and 501(c)(18)(D) plan contributions for 2023 (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.
 - If line 8 is -And your filing status is -Married Head of Single, Married filing But not Overfiling jointly household separately, or over-Qualifying surviving spouse Enter on line 9-0.5 \$21,750 0.5 0.5 \$21,750 \$23,750 0.5 0.5 0.2 0.5 0.5 0.1 \$23,750 \$32,625 9 .1 х \$32,625 \$35,625 0.5 0.2 0.1 \$36,500 0.5 0.1 0.1 \$35,625 \$36,500 \$43,500 0.5 0.1 0.0 \$47,500 0.2 0.0 \$43,500 0.1 0.0 \$47,500 \$54.750 0.1 0.1 \$54,750 0.1 0.0 0.0 \$73,000 \$73,000 0.0 0.0 0.0 Note: If line 9 is zero, stop; you can't take this credit. 10 200. Multiply line 7 by line 9 Limitation based on tax liability. Enter the amount from the Credit Limit Worksheet in the instructions 11 4,735. Credit for qualified retirement savings contributions. Enter the smaller of line 10 or line 11 here 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** (2023)

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		(a) You	(b) Your spouse
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	5	3,667.	
	6	3,667. 2,000.	



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