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 number
SWAPNA TALLAPAKAM	002-27-	-0190
Part I Tax Return Information — Tax Year Ending December 31, 2023 (Enter	r year you ar	e 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 35,594.
2 Total tax		2 0.
3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3 6,611.
4 Amount you want refunded to you		4 6,611.
5 Amount you owe		5
Part II Taxpayer Declaration and Signature Authorization (Be sure you get and	keep a copy	of your return)
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, transit to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for refor any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account in 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 terminal payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation recount business 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.	nitter, or electro jection of the tra J.S. Treasury and dicated in the ta ion to debit the tethe authoriza quests must be processing of payment. I furth	nic return originator (ERC ansmission, (b) the reason it is designated Financiax preparation software foentry to this account. This tion. To revoke (cancel) received no later than the electronic payment cher acknowledge that the
Taxpayer's PIN: check one box only		
■ I authorize GLOBAL TAXES LLC to enter or generate	my PIN 6	1 5 1 1 as my
ERO firm name	Ente	er five digits, but 't enter all zeros
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 ame if you are entering your own PIN and your return is filed using the Practitioner PIN met below.		
Your signature ► Date ►		
Spouse's PIN: check one box only		
▼ I authorize GLOBAL TAXES LLC to enter or generate ■ ■ ■ ■ ■ ■ ■	- —	0 1 9 0 as my
signature on the income tax return (original or amended) I am now authorizing.		er five digits, but 't enter all zeros
I will enter my PIN as my signature on the income tax return (original or amended) I am if you are entering your own PIN and your return is filed using the Practitioner PIN metibelow.		
Spouse's signature ▶ Date ▶		
Practitioner PIN Method Returns Only—continue below	V	
Part III Certification and Authentication — Practitioner PIN Method Only	<u> </u>	
ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN.	2 4 9 6 Don't ente	
I certify that the above numeric entry is my PIN, which is my signature for the electronic individual income authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am subtrequirements of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS <i>e-file</i> Providers of	mitting this retu	rn in accordance with the
ERO's signature ▶ Date ▶		
FRO Must Retain This Form — See Instructions		

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

E1040 Department of the Treasury—Internal Revenue Service U.S. Individual Income Tax Return

£1040		artment of the Treasury—Internal Revenue Servi S. Individual Income Ta x		urn	202	3	OMB No. 1545	-0074	IRS Use	Only-	–Do not w	rite or sta	ple in thi	s space.
For the year Jar	n. 1–Dec	c. 31, 2023, or other tax year beginning			, 2023, end	ling			, 20		See se	oarate i	nstruct	tions.
Your first name	e and m	iddle initial	Last na	ame							Your so	cial sec	 urity ทเ	umber
KISHORE			TALI	LAPAKA	ΔM						704	66	1513	1
	pouse's	s first name and middle initial	Last na								Spouse'			y number
SWAPNA			TALL	LAPAKA	M						002	27	0190	0
	(numbe	er and street). If you have a P.O. box, see	•					Д	pt. no.					Campaign
12119 V	ANCE	JACKSON RD						1	.205	İ	Check h			. •
		ice. If you have a foreign address, also co	mplete s	spaces bel	low.	Sta	te	ZIP co						want \$3
SAN ANTO	OINC					TX	ζ	782	30		to go to box belo			_
Foreign countr				Foreign pr	rovince/state/	count	ty		n postal c	ode	your tax			rige
												☐ Yo	u 🗌	Spouse
Filing Status	s \square	Single					Head of he	ouseh	old (HOH	H)				
Check only		Married filing jointly (even if only o	ne had	income)										
one box.		Married filing separately (MFS)					☐ Qualifying	surviv	ing spot	use (QSS)			
	l f y	you checked the MFS box, enter the	name o	of your s	pouse. If you	ı che	ecked the HOF	or QS	SS box,	entei	the chi	ld's nar	ne if th	ne
	qu	ıalifying person is a child but not you	ır depei	ndent:										
 Digital	Δt aı	ny time during 2023, did you: (a) rec	eive (as	a reward	d award or	navr	ment for prope	rty or	services). or i	(h) sell			
Assets		nange, or otherwise dispose of a dig						-				☐Ye	s X	No
Standard	Som	neone can claim: You as a de	penden	t 🗆	Your spous	e as	a dependent				<u> </u>			
Deduction		— Spouse itemizes on a separate retur	n or you		·		·							
A ma /Dlimalmaa	- Va	: Were born before January 2, 1	050 [ام میں	ind One			b.afa	سما مس	· O	1050		اممالط	
		_ 	909 [_ Are bl	•	ouse		14			•		blind	tructions):
Dependent		instructions): irst name Last name		(2) 5	Social security number	′	(3) Relationsh to you	ip (4	Child t			•		lependents
If more	(1) [TIST HAITIE LAST HAITIE			Hamber		10 you		1			Orcalt loi		Срепаста
than four dependents,									l	┽			쓔	
see instruction	s			1					l	┽			쓔	
and check here [1 —								<u>_</u>	┽			쓔	
	10	Total amount from Form(s) W-2, b	ov 1 /cc	o instruc	rtions)				L				40	503.
Income	1a b	Household employee wages not re	•		•							_	<u> </u>	505.
Attach Form(s)		Tip income not reported on line 1a	•								1c	_		
W-2 here. Also attach Forms	c d	Medicaid waiver payments not rep			•						1d	_		
W-2G and	-	Taxable dependent care benefits f									1e	_		
1099-R if tax was withheld.	e f	Employer-provided adoption bene									1f	_		
If you did not	, ~	Wages from Form 8919, line 6.	1115 1101	II FOIIII 6	1009, 11116 29	•								
get a Form	9 h	_	ions)								1g			0.
W-2, see	h i	Other earned income (see instruct Nontaxable combat pay election (s		· · · ·				i ·			1h			
instructions.	z	Add lines 1a through 1h	355 IIISI	1 40 (10118)			!!				1z		40	503.
Attach Sch. B		1	2a		· · i	 Ь ^Т	axable interest				2b			
if required.	2a 3a	· —	3a				ordinary divider				3b			
	<u>3a_</u> 4a		4a				axable amoun				4b			
Standard	-та 5а	<u> </u>	5a				axable amoun			•	5b			
Deduction for— Single or	6a	<u> </u>	6a				axable amoun				6b			
Married filing	C	If you elect to use the lump-sum e		method	check here					· _	7			
separately, \$13,850	7	Capital gain or (loss). Attach Sche				•	•			·	7			
 Married filing 	8	Additional income from Schedule		•	•					٠ ـ	8			909.
jointly or Qualifying	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7									9	+		594.
surviving spouse, \$27,700	10	Add lines 12, 25, 35, 45, 35, 65, 7, Adjustments to income from Sche		•							10		,	<u> </u>
 Head of 	11	Subtract line 10 from line 9. This is									11		25	594.
household, \$20,800	12	Standard deduction or itemized							• •		12	+		700.
If you checked any box under	13	Qualified business income deduct		•		•	 5-Δ				13	_		700.
Standard	14						о - А				14	_	27	700.
Deduction, see instructions.	14	Subtract line 14 from line 11. If you									14			901

Form 1040 (2023	3)								Page 2
Tax and	16	Tax (see instructions). Check	if any from Form	n(s): 1 881	4 2 🗌 4972	3 🗌		16	788.
Credits	17	Amount from Schedule 2, lir	ie 3					17	
	18	Add lines 16 and 17						18	788.
	19	Child tax credit or credit for	other dependen	ts from Sched	ule 8812			19	
	20	Amount from Schedule 3, lir	·					20	788.
	21	Add lines 19 and 20						21	788.
	22	Subtract line 21 from line 18						22	0.
	23	Other taxes, including self-e						23	0.
	24	Add lines 22 and 23. This is						24	0.
Payments	25	Federal income tax withheld						24	
ayments	а	Form(s) W-2				 25a 6	,611.		
	b	Form(s) 1099				25b	,		
	c	Other forms (see instruction				25c			
	d	Add lines 25a through 25c	•			<u> </u>		25d	6,611.
	26	2023 estimated tax paymen						26	0,011.
If you have a \(\)\ qualifying child,		Earned income credit (EIC)				27		20	
attach Sch. EIC.	<u>27</u> 28	Additional child tax credit from							
						28			
	29	American opportunity credit				29			
	30	Reserved for future use .				30			
	31	Amount from Schedule 3, lir							
	32	Add lines 27, 28, 29, and 31	32	6 611					
	33	Add lines 25d, 26, and 32. T				<u>.</u>		33	6,611.
Refund	34	If line 33 is more than line 24	•			•	· <u>·</u>	34	6,611.
	35a	Amount of line 34 you want			3 is attached, che	ck here	. 🗆	35a	6,611.
Direct deposit?	b	Routing number 1 1 1	0 0 0 0	2 5		Checking 🔲 🕄	Savings		
See instructions.	d	Account number 5 8 6	0 3 7 9	6 8 7 :	1 0				
-	36	Amount of line 34 you want	applied to your	2024 estimate	ed tax	36			
Amount You Owe	37	Subtract line 33 from line 24 For details on how to pay, g						37	
	38	Estimated tax penalty (see in	nstructions) .			38			
Third Party		you want to allow another				See			
Designee		structions				_			⋉ No
	De nar	signee's ne		Phone no.			onal identifi ber (PIN)	cation	
Sign	Un	der penalties of perjury, I declare t ief, they are true, correct, and com		d this return and		dules and statement	s, and to th		
Here		ur signature	,	Date	Your occupation		If the	IRS ser	nt you an Identity IN, enter it here
Joint return?					SOFTWARE I	DEVELOPER	(see i		in, criter it riere
See instructions.	Sp	ouse's signature. If a joint return	ooth must sign.	Date	Spouse's occupat		If the	IBS ser	nt vour spouse an
Keep a copy for your records.	Spouse's signature. If a joint return, both must sign.				HOME MAKER	Identi	f the IRS sent your spouse an dentity Protection PIN, enter it here see inst.)		
	Ph	one no. (210) 712-674	8	Email address		AM@GMAIL.CO	 M		
Daid	Pre	eparer's name	Preparer's signat	ture		Date	PTIN		Check if:
Paid	SYAM	PRIYA RAM SAGAR GUPTA TALLAM	SYAM PRIYA	RAM SAGAR	GUPTA TALLAM	01/28/2024	P02082	_{:703}	Self-employed
Preparer							ne no. (678) 965-9522		
Use Only			Y CT E BRU	INSWICK N	J 08816		Firm's		84-3171965
Go to wave ire or		11040 for instructions and the late				DEV 04/01/01 DD 2	1		Form 1040 (2023)
GO TO WWW.IIS.go	, v, i 'OIII	TOTO TO THIS HACKOTIS AND THE TALE	st information.		BAA	REV 01/21/24 PRO			FOITH 1040 (2023)

SCHEDULE 1 (Form 1040)

Additional Income and Adjustments to Income

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service

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

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

2023	
Attachment Sequence No. 01	

Your social security number

KISH	ORE & SWAPNA TALLAPAKAM			704-6	56-15	511
Par	t I Additional Income					
1	Taxable refunds, credits, or offsets of state and local income taxes				1	
2a	Alimony received				2a	1
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. Att				5	-4,909.
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				
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	81				
m	Olympic and Paralympic medals and USOC prize money (see					
	instructions)	8m				
n	Section 951(a) inclusion (see instructions)	8n				
0	Section 951A(a) inclusion (see instructions)	80				
р	Section 461(I) excess business loss adjustment	8р				
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:					
9	Total other income. Add lines 8a through 8z				9	
10	Combine lines 1 through 7 and 9. This is your additional income. Ente	r here	e and on	Form		1

10

Page 2 Schedule 1 (Form 1040) 2023

Par	II Adjustments to Income				
11	Educator expenses			11	
12	Certain business expenses of reservists, performing artists, and fee-			t 🗔	
	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	Contributions to section 501(c)(18)(D) pension plans	24f			
g	, , , , , , , , , , , , , , , , , , , ,	24g			
h	Attorney fees and court costs for actions involving certain unlawful	0415			
		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			
	Housing deduction from Form 2555	24i 24j			
j k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form	24)			
ĸ		24k			
z	Other adjustments. List type and amount:	24K			
_	other adjustifients, 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	· Fnter	· here and or		
	Form 1040, 1040-SR, or 1040-NR, line 10			ˈ ₂₆	
	BAA		/21/24 PRO		le 1 (Form 1040) 2023
	DAA	110	2.,24110		, , ,

SCHEDULE 3 (Form 1040)

Department of the Treasury

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

2023

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	Nonrefundable Credits					
1	Foreign tax credit. Attach Form 1116 if required			1		
2	Credit for child and dependent care expenses from Form 2441 Form 2441	l, line	e 11. Attach	2		
3	Education credits from Form 8863, line 19			3		
4	Retirement savings contributions credit. Attach Form 8880			4	788	
5a	Residential clean energy credit from Form 5695, line 15			5a		
b	Energy efficient home improvement credit from Form 5695, line 32			5b		
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	Reserved for future use	6e				
f	Clean 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	6 I				
m	Credit for previously owned clean vehicles. Attach Form 8936.	6m				
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 4, 5a, 5b, and 7. Enter here and on Form 1 1040-NR, line 20	040,	1040-SR, or	8	788	

Schedule 3 (Form 1040) 2023 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 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	

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.

Your social security number

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

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

Attachment Sequence No. 13

OMB No. 1545-0074

KIS	HORE & SWAPNA TALLAPAKAM						704-6	6-1511	
Pai									
	Note: If you are in the business of renting personal proper	ty, use	Schedul	e C. See	instru	ctions. If you a	are an ind	vidual, rep	ort farm
	rental income or loss from Form 4835 on page 2, line 40.	to file		10000	\	aturations.			- VINA
A	Did you make any payments in 2023 that would require you								
<u>B</u>	•				• •			. 🗌 Ye	s U No
1a	Physical address of each property (street, city, state, ZIF	ode	e)						
Α	813, GANAPATHY NAGAR COLONY SEMMENCHERY	Z HOT	USING	BOARI	D, 0	MR ROAD,	CHENN	AI IN	600119
В									
С									
1b)				Fa	ir Rental	Perso	nal Use	QJV
	(from list below) above, report the number of fair	rental	and			Days	D	ays	QUV
A	personal use days. Check the Quif you meet the requirements to f			Α		365		0	
B	qualified joint venture. See instru			В					
<u>C</u>				С					
	e of Property:								
	Single Family Residence 3 Vacation/Short-Term Ren	tal	5 Land	-		Self-Rental			
2	Multi-Family Residence 4 Commercial		6 Roy	alties	8	Other (desc	ribe)		
						Propert	ies:		
Inco	me:			Α		В			С
3	Rents received	3		3	80.				
4	Royalties received	4							
Ехре	enses:								
5	Advertising	5							
6	Auto and travel (see instructions)	6							
7	Cleaning and maintenance	7		4	80.				
8	Commissions	8							
9	Insurance	9							
10	Legal and other professional fees	10							
11	Management fees	11		9	50.				
12	Mortgage interest paid to banks, etc. (see instructions)	12							
13	Other interest	13							
14	Repairs	14			59.				
15	Supplies	15		1,8	50.				
16	Taxes	16							
17	Utilities	17		8	50.				
18	Depreciation expense or depletion	18							
19	Other (list)	19							
20	Total expenses. Add lines 5 through 19	20		5,2	89.				
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			4 0	_				
	file Form 6198	21		-4,9	09.				
22	Deductible rental real estate loss after limitation, if any,		,	4 00		,	,	,	,
•	on Form 8582 (see instructions)	22	[(4,90		(200)[()
23a					23a		380.	-	
b	1 3 31 1	erties		•	23b			-	
C	, , ,			•	23c				
d	, , ,			•	23d	-	- 000		
e					23e		5,289.		
24	Income. Add positive amounts shown on line 21. Do not					 Mallance !:	. 24	/	4 000 \
25	Losses. Add royalty losses from line 21 and rental real estate								4,909.)
26	Total rental real estate and royalty income or (loss).								
	here. If Parts II, III, and IV, and line 40 on page 2 do no Schedule 1 (Form 1040) line 5. Otherwise, include this at						on		-4 909

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 shouse

Name(s) shown on return

KISHORE & SWAPNA

Your social security number 704-66-1511

(a) You



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

TALLAPAKAM

- 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).

							(a) You	ı	(b) Your spouse
1			ontributions, and ABI 023 . Do not include rol		•	1			
_	•								
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) 2								
3	Add lines 1 an	d2				3	3,9	30.	
4	Certain distrik	outions receive	ed after 2020 and	before the due da	te (including				
	extensions) of	your 2023 tax	return (see instruction	ns). If married filing jo	intly, include				
	both spouses	' amounts in b e	oth co l umns. See instr	ructions for an excep	tion	4			
5	Subtract line 4	from line 3. If	zero or less, enter -0-			5	3,9	30.	
6	In each colum	n, enter the sn	naller of line 5 or \$2,00	00		6	2,0	00.	
7	Add the amou	nts on line 6. If	zero, stop ; you can't	take this credit				7	2,000.
8	Enter the amo	unt from Form	1040, 1040-SR, or 104	40-NR, line 11*	8		35,594.		
9	Enter the appl	icable decimal	amount from the table	e below.					
	If line	8 is-	Α	nd your filing status	s is—				
		But not	Married	Head of	Single, Marr	ied filing	g		
	Over-	over—	filing jointly	household	separate				
			Enter on	line 9—	Qualifying survi	ving spo	ouse		
		\$21,750	0.5	0.5	0.5				
	\$21,750	\$23,750	0.5	0.5	0.2				
	\$23,750	\$32,625	0.5	0.5	0.1			9	x .5
	\$32,625	\$35,625	0.5	0.2	0.1				
	\$35,625	\$36,500	0.5	0.1	0.1				
	\$36,500	\$43,500	0.5	0.1	0.0				
	\$43,500	\$47,500	0.2	0.1	0.0				
	\$47,500	\$54,750	0.1	0.1	0.0				
	\$54,750	\$73,000	0.1	0.0	0.0				
	\$73,000		0.0	0.0	0.0				
		Note:	f line 9 is zero, stop ; y	ou can't take this cre	edit.				
10	Multiply line 7	by line 9 .						10	1,000.
11	Limitation bas	ed on tax liabil	ity. Enter the amount f	rom the Credit Limit	Worksheet in t	he inst	ructions	11	788.
12	Credit for qua	alified retirem	ent savings contribu	ıtions. Enter the sm	aller of line 10	or lin	e 11 here		

^{*} 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.

12

788.

and on Schedule 3 (Form 1040), line 4