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

Submis	ssion Identification Number (SID)				
Taxpaye	r's name	Social securi	ty numl	per	
SEET	HARAM REDDY RAMIREDDY	210-73	-856	9	
Spouse's	s name	Spouse's soo	ial seci	urity numbe	r
Part	Tax Return Information — Tax Year Ending December 31, 2023 (Ente	_ er year you a	re au	thorizina)
	whole dollars only on lines 1 through 5.	n your you c	10 44	unonzing.	'/
	Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.				
	Adjusted gross income		1	27	,688.
	Total tax		2		,352.
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3	2	,883.
4	Amount you want refunded to you		4		,531.
5	Amount you owe		5		
Part	Taxpayer Declaration and Signature Authorization (Be sure you get and	keep a cop	y of y	our retu	rn)
my kno return (of to send for any Agent to payment authoriz payment business taxes to persona	penalties of perjury, I declare that I have examined a copy of the income tax return (original or amended wledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I about original or amended) I am now authorizing. I consent to allow my intermediate service provider, transmy return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for redelay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account induct of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation received to the payment (settlement) date. I also authorize the financial institutions involved in the all identification number (PIN) below is my signature for the income tax return (original or amended) I are Funds Withdrawal Consent.	ve are the amnitter, or electro- jection of the to J.S. Treasury a dicated in the to ion to debit the te the authorizates must be processing of payment. I fur	ounts for the counts of the co	from the incurrence turn original ssion, (b) the designated paration soot to this according to the control of t	come tax tor (ERO) ne reason Financial ftware for bunt. This (cancel) a er than 2 ayment of that the
	yer's PIN: check one box only				
X	-	my PIN	8 5	5 6 9	as my
	ERO firm name signature on the income tax return (original or amended) I am now authorizing.	ř En		digits, but er all zeros	aomy
	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 met below.				
Your si	ignature ▶ Date ▶				
Snous	e's PIN: check one box only				
	I authorize to enter or generate	my PIN			as my
	ERO firm name	En		digits, but	ao my
	signature on the income tax return (original or amended) I am now authorizing.	do	n't ente	er all zeros	
	I will enter my PIN as my signature on the income tax return (original or amended) I am if you are entering your own PIN and your return is filed using the Practitioner PIN metholow.				
Spouse	e's signature ▶ Date ▶				
	Practitioner PIN Method Returns Only—continue belov	V			
Part I	Certification and Authentication — Practitioner PIN Method Only				
ERO's	EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN. 2	2 4 9 Don't ent	6 0 er all ze	8 2 7	1
Landin					
authoriz	that the above numeric entry is my PIN, which is my signature for the electronic individual income to the file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am subments of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS e-file Providers of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers of the Pinch	nitting this retu	ırn in a	accordance	
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-NR Department of the Treasury-Internal Revenue Service U.S. Nonresident Alien Income Tax Return 2023 OMB No. 1545-0074

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

For the year Jar	ı. 1–D	ec. 31, 2023, or other tax year beginn	ing	, 2023,	ending	,	20	instructions.		
Your first name	and r	niddle initial				Your ide	our identifying number			
			(so				(see inst	(see instructions)		
SEETHARAM	1 RE	DDY	RAMIREDDY				210-	73-8569		
Home address	(numb	per and street). If you have a P.O. box	, see ins	tructions.			•	Apt. no.		
515 14TH	AVE	SE						B497-A		
City, town, or p	ost of	fice. If you have a foreign address, als	o comp	lete spaces below.		State		ZIP code		
MINNEAPOL						MN		554143954		
Foreign country	nam	9	Foreigr	n province/state/county		Foreign	oostal coc	le		
	1									
Filing Status	X	Single	rately (N	MFS) Qualifyi	ng surviving spouse	(QSS)	☐ Est	ate 🗌 Trust		
	lf :	ou checked the QSS box, enter the c	hild's na	ame if the qualifying pers	son is a child but not	your dep	endent:			
Check only one box.										
Digital Assets	At a	ny time during 2023, did you: (a) recei	ve (as a	reward, award, or paym	ent for property or se	ervices): o	r (b) sell. e	exchange, or		
2.g.ta. 7.00010		rwise dispose of a digital asset (or a f							lo	
Dependents						(4) Ch	eck the box	if qualifies for (see ins	st.):	
(see instructions):		(1) First name Last name		(2) Dependent's identifying number	(3) Relationship to yo	Chil	d tax credit	Credit for othe dependents	r	
		(i) i iii ii i		, , , , , , , , , , , , , , , , , , , ,	(c) Holding to ye	-			_	
If more than four							ī		_	
dependents, see instructions and									_	
check here										
Income	1a	Total amount from Form(s) W-2, box	1 (see i	nstructions)			. 1a	27,688		
Effectively	b	Household employee wages not rep	orted on	Form(s) W-2			. 1b			
Connected	С	Tip income not reported on line 1a (s	see instr	uctions)			. 1c			
With U.S.	d	Medicaid waiver payments not report		` ' ` ` `	,		. 1d			
Trade or	е	Taxable dependent care benefits fro		•			. 1e		_	
Business	f	Employer-provided adoption benefit		•			. 1f			
Attach	g h	Wages from Form 8919, line 6 Other earned income (see instruction					. 1g . 1h			
Form(s) W-2, 1042-S,	i	Reserved for future use	,							
SSA-1042-S,	i	Reserved for future use			· · <u> </u>		. 1j			
RRB-1042-S,	k	Total income exempt by a treaty from			tem L,				_	
and 8288-A here. Also		line 1(e)		,	1k					
attach	Z	Add lines 1a through 1h					. 1z	27,688		
Form(s) 1099-R if	2 a	Tax-exempt interest 2a	_	b Tax	cable interest		. 2b			
tax was	3a	Qualified dividends 3a			dinary dividends .		. 3b			
withheld.	4a -	IRA distributions 4a			kable amount				_	
If you did not get a Form	5a 6	Pensions and annuities 5a			cable amount					
W-2, see	7	Reserved for future use				_				
instructions.	8	Additional income from Schedule 1 (•					
	9	Add lines 1z, 2b, 3b, 4b, 5b, 7, and 8					T	27,688		
	10	Adjustments to income from Sched						, 133	_	
		income	,	,.						
	11	Subtract line 10 from line 9. This is y	our adj u	usted gross income			. 11	27,688	} .	
	12	Itemized deductions (from Schedu								
		deduction (see instructions)			1 1	India Tre	aty 12	13,850	<u>) .</u>	
	13a	Qualified business income deduction						I		
	b	Exemptions for estates and trusts or	• (,				1		
	C 1/	Add lines 13 and 13b						12 050		
	14 15	Add lines 12 and 13c Subtract line 14 from line 11. If zero						13,850 13,838		
			J. 1000,	one or thous your ta					•	

Form 1040-NR (2023)										Page 2
Tax and	16	Tax (see instructions). Check if any	y from For	rm(s): 1	814 2 [4972	2 3			16	1,439.
Credits	17	Amount from Schedule 2 (Form 1	1040), line	3						17	0.
	18	Add lines 16 and 17								18	1,439.
	19	Child tax credit or credit for other	r depende	ents from Sched	lule 8812 (Fo	orm 104	10) .			19	
	20	Amount from Schedule 3 (Form 1	1040), line	8						20	87.
	21	Add lines 19 and 20								21	87.
	22	Subtract line 21 from line 18. If ze	ero or less	s, enter -0						22	1,352.
	23a	Tax on income not effectively cor Schedule NEC (Form 1040-NR), I					23a				
	b	Other taxes, including self-emplo	oyment ta	x, from Schedu	le 2 (Form 1	040),				_	
		line 21				l	23b			_	
	C	Transportation tax (see instruction	,			,	23c			00.1	
	d	Add lines 23a through 23c								23d	1 250
	24	Add lines 22 and 23d. This is you		x	<u> </u>					24	1,352.
Payments Payments	25	Federal income tax withheld from									
	a	Form(s) W-2				1	25a		2,883.	_	
	b	Form(s) 1099				l	25b			_	
	С.	Other forms (see instructions) .				,	25c				2 002
	d	Add lines 25a through 25c								25d	2,883.
	e	Form(s) 8805								25e	
	f	Form(s) 8288-A								25f	
	g	Form(s) 1042-S								25g	
	26	2023 estimated tax payments an								26	
	27	Reserved for future use				- 1	27			-	
	28	Additional child tax credit from S		•	•	1	28				
	29	Credit for amount paid with Form				1	29			+	
	30	Reserved for future use				1	30				
	31	Amount from Schedule 3 (Form 1	,.				31	1:40			
	32 33	Add lines 28, 29, and 31. These a								32	2 002
Defend	34	Add lines 25d, 25e, 25f, 25g, 26, If line 33 is more than line 24, sub								33	2,883.
Refund	3 4 35а	Amount of line 34 you want refur					-	-		35a	1,531. 1,531.
Direct deposit?	ooa b	Routing number 0 7 5 0			c Type:		k nere Checkin		. L. Savings	SSA	1,331.
See instructions.		Account number 7 6 8 9			i i i	. <u> </u>		g ∟ !	Saviriys		
		If you want your refund check m			do tha Unita	d Ctata	o not ob		naga 1		
	е										
	26	Amount of line 34 you want appl i	iod to voi	ur 2024 octimat	od tav		36			-	
Amount	36 37	Subtract line 33 from line 24. This					50				
You Owe	01	For details on how to pay, go to		-		tions				37	
Tou Owe	38	Estimated tax penalty (see instru		-			38			0.	
Third		u want to allow another person to				instruc			es. Comp	lete be	low. 🗵 No
Party	Desig	•	4.004.00	Phone					nal identif		
Designee	name			ne	•				er (PIN)	ication	
	Under	penalties of perjury, I declare that I have they are true, correct, and complete. D	e examine	d this return and a				tatement	s, and to th		
Sign	Your	signature		Date	Your occu	pation			If the	e IRS s	ent you an Identity
Here		5.9.14.4.0		2410	. 54. 5554				Prot	ection	PIN, enter it here
					ASIC DESI	GN VERI	FICATIO	N ENGIN	EER (see	inst.)	
	Phone	e no.		Email address							
Paid	Prepa	rer's name	Preparer [*]	's signature			Date		PTIN		Check if:
Preparer	SYAM	I PRIYA RAM SAGAR GUPTA	SYAM I	PRIYA RAM	SAGAR GU	UPTA	04/10	/2024	P0208	2703	Self-employed
Use Only	Firm's	name GLOBAL TAXES I	LLC						Phone n	0. (6	78)965-9522
—————	Firm's	address 245 ROONEY C	T E BR	RUNSWICK N	J 08816				Firm's E	IN 8	4-3171965

BAA

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

2023
Attachment Sequence No. 03

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

Your social security number 210-73-8569

Par	Nonretundable Credits			
1	Foreign tax credit. Attach Form 1116 if required		1	
2	Credit for child and dependent care expenses from Form 2441, Form 2441	ine 11. Attach	2	
3	Education credits from Form 8863, line 19		3	
4	Retirement savings contributions credit. Attach Form 8880		4	87.
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	а		
b	Credit for prior year minimum tax. Attach Form 8801 6	o		
С	Adoption credit. Attach Form 8839			
d	Credit for the elderly or disabled. Attach Schedule R 6	b		
е	Reserved for future use	е		
f	Clean vehicle credit. Attach Form 8936	f		
g	Mortgage interest credit. Attach Form 8396	9		
h	District of Columbia first-time homebuyer credit. Attach Form 8859 6	า		
i	Qualified electric vehicle credit. Attach Form 8834 6	i		
j	Alternative fuel vehicle refueling property credit. Attach Form 8911	j		
k	Credit to holders of tax credit bonds. Attach Form 8912 6	k		
1	Amount on Form 8978, line 14. See instructions 6	I		
m	Credit for previously owned clean vehicles. Attach Form 8936 . 6r	n		
z	Other nonrefundable credits. List type and amount:			
	6	z		
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 104	0, 1040-SR, or		
	1040-NR, line 20		8	87.
		(co	ontinue	ed on page 2)

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 NEC (Form 1040-NR)

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

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service

Name shown on Form 1040-NR

Attach to Form 1040-NR. Go to www.irs.gov/Form1040NR for instructions and the latest information. Attachment Sequence No. 7B

Your identifying number

SEETHARAM REDDY RAMIREDDY 210-73-8569 Enter amount of income under the appropriate rate of tax. See instructions. (d) Other (specify) **Nature of Income** (a) 10% **(b)** 15% (c) 30% % % Dividends and dividend equivalents: Dividends paid by U.S. corporations 1a 1b Dividend equivalent payments received with respect to section 871(m) transactions 1c 2 Interest: 2a 2b 2c 3 4 Motion picture or TV copyright royalties 5 Real property income and natural resources royalties 6 7 8 9 10 Gambling-Residents of Canada only. Enter net income in column (c). If zero or less, enter -0-. Winnings _____ 10c Losses Gambling-Residents of countries other than Canada. 11 Other (specify): 12 12 13 Add lines 1a through 12 in columns (a) through (d) 13 14 14 Tax on income not effectively connected with a U.S. trade or business. Add columns (a) through (d) of line 14. Enter the total here and on Form 1040-NR, line 23a 15 Capital Gains and Losses From Sales or Exchanges of Property Enter only the capital gains and (f) LOSS 16 (a) Kind of property and description (g) GAIN (b) Date acquired (c) Date sold (d) Sales price (e) Cost or losses from property sales or (if necessary, attach statement of If (e) is more than (d), If (d) is more than (e), mm/dd/yyyy mm/dd/yyyy other basis exchanges that are from sources subtract (d) from (e). descriptive details not shown below) subtract (e) from (d). within the United States and not effectively connected with a U.S. business. Do not include a gain or loss on disposing of a U.S. real property interest; report these gains and losses on Schedule D (Form 1040). Report property sales or exchanges that are effectively connected with a U.S. business on Schedule D (Form 1040). 18 Capital gain. Combine columns (f) and (g) of line 17. Enter the net gain here and on line 9 above. If a loss, enter -0-18 Form 4797, or both.

SCHEDULE OI (Form 1040-NR)

Other Information

Attach to Form 1040-NR.

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

Answer all questions.

OMB No. 1545-0074

2023

Attachment
Sequence No. 7C

Department of the Treasury Internal Revenue Service

Name sl	nown on Form 1040-NR				Your identifying	number	
SEET	HARAM REDDY RAMIREDI	YC			210-73-85	69	
Α	Of what country or countries w						
В	In what country did you claim	residence for tax purpose	s during the tax y	ear? United States			
С	Have you ever applied to be a	green card holder (lawful p	ermanent residen	t) of the United States? .		☐ Yes	⊠ No
D	Were you ever:						
1.	A U.S. citizen?					☐ Yes	⊠ No
2.	A green card holder (lawful per						⊠ No
	If you answer "Yes" to (1) or (2), see Pub. 519, chapter 4,	for expatriation ru	les that apply to you.			
E	If you had a visa on the last of immigration status on the last of		•	you didn't have a visa, er	•		
F	Have you ever changed your v If you answered "Yes," indicat		tus) or U.S. immig			☐ Yes	⊠ No
G	List all dates you entered and	left the United States durin					
	Note: If you're a resident of C				ent intervals,		
	check the box for Canada or	Mexico and skip to item I	<u>1.</u> ₋	\square Canada	☐ Mexico		
	Date entered United States	Date departed United Stat	es	Date entered United State			d States
	mm/dd/yy	mm/dd/yy		mm/dd/yy	m	ım/dd/yy	
Н	Give number of days (including						
		, 20222				_	_
ı	Did you file a U.S. income tax					⊠ Yes	☐ No
	If "Yes," give the latest year ar						
J	Are you filing a return for a trus					_ Yes	⊠ No
	If "Yes," did the trust have a U						
	U.S. person, or receive a conti					∐ Yes	□No
K	Did you receive total compens					Yes	⊠ No
	If "Yes," did you use an alterna			•		∐ Yes	☐ No
L	Income Exempt From Tax—If complete (1) through (3) below				tax treaty with	a foreign	country,
					alaimad tha tra	atı banafi	t and the
١.	Enter the name of the country, amount of exempt income in the				ciaimed the tre	aty benen	i, and the
	<u> </u>		•) (d) Ame	ount of ove	mnt
	(a) Cou	ntry	(b) Tax treaty art	icle (c) Number of month claimed in prior tax ye		ount of exe	•
	(e) Total. Enter this amount o	n Form 1040-NR, line 1k. D	o not enter it any	where else on line 1			
2.	Were you subject to tax in a fo					☐ Yes	☐ No
	Are you claiming treaty benefit					☐ Yes	⊠ No
	If "Yes," attach a copy of the C	•	-				
M	Check the applicable box if:	•					
1.	This is the first year you are mouth a U.S. trade or business u						onnected
2.	You have made an election in	` '					ne United
	States as effectively connected						

Form **8880**

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

2023

Attachment
Sequence No. 54

Name(s) shown on return

Your social security number

210-73-8569

SEETHARAM REDDY RAMIREDDY

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 \$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		(b) You	rspous
designated be	neficiary for 20	ontributions, and ABI 23. Do not include ro	llover contributions .		1					
	` ') or other qualified er (D) plan contributions		, ,	2		Q	65.		
			•		3					
		ed after 2020 and		to (including	3		8	65.		
extensions) of	your 2023 tax	return (see instruction oth columns. See inst	ns). If married filing jo	ointly, include						
			•		4			<u> </u>		
		zero or less, enter -0-			5			65.		
		naller of line 5 or \$2,00			6		8	65. -		
		zero, stop ; you can't		1				7		865
		1040, 1040-SR, or 10		8		27,	688.			
enter the appl	icable decimal	amount from the table	e below.							
If line	8 is-	Α	and your filing status	s is—						
If line	But not	Married filing jointly	nd your filing status Head of household	Sis — Single, Marr separate		ng				
		Married	Head of household	Single, Marr	ly, or					
	But not over—	Married filing jointly	Head of household	Single, Marr separate	ly, or ving sp					
Over—	But not over— \$21,750	Married filing jointly Enter on	Head of household	Single, Marr separate Qualifying surviv	ly, or ving sp					
Over— \$21,750	But not over— \$21,750 \$23,750	Married filing jointly Enter on 0.5	Head of household line 9—	Single, Marr separate Qualifying surviv 0.5	ly, or ving sp			9	×	.1
Over—	But not over— \$21,750	Married filing jointly Enter on 0.5 0.5	Head of household line 9— 0.5 0.5	Single, Marr separate Qualifying surviv 0.5 0.2	ly, or ving sp			9	x	. 1
Over— \$21,750 \$23,750 \$32,625	But not over— \$21,750 \$23,750 \$32,625 \$35,625	Married filing jointly Enter on 0.5 0.5 0.5	Head of household line 9— 0.5 0.5 0.5	Single, Marr separate Qualifying surviv 0.5 0.2	ly, or ving sp			9	x	. 1
Over— \$21,750 \$23,750	But not over— \$21,750 \$23,750 \$32,625	Married filing jointly Enter on 0.5 0.5 0.5 0.5	Head of household line 9— 0.5 0.5 0.5 0.5 0.5	Single, Marr separate Qualifying surviv 0.5 0.2 0.1 0.1	ly, or ving sp			9	×	.1
Over— \$21,750 \$23,750 \$32,625 \$35,625	But not over— \$21,750 \$23,750 \$32,625 \$35,625 \$36,500	Married filing jointly Enter on 0.5 0.5 0.5 0.5 0.5 0.5	Head of household line 9— 0.5 0.5 0.5 0.2 0.1	Single, Marr separate Qualifying surviv 0.5 0.2 0.1 0.1	ly, or ving sp			9	×	. 1
Over— \$21,750 \$23,750 \$32,625 \$35,625 \$36,500	But not over— \$21,750 \$23,750 \$32,625 \$35,625 \$36,500 \$43,500	Married filing jointly Enter on 0.5 0.5 0.5 0.5 0.5 0.5 0.5 0.5 0.5	Head of household line 9— 0.5 0.5 0.5 0.2 0.1 0.1	Single, Marr separate Qualifying surviv 0.5 0.2 0.1 0.1 0.1	ly, or ving sp			9	х	. 1
Over— \$21,750 \$23,750 \$32,625 \$35,625 \$36,500 \$43,500	But not over— \$21,750 \$23,750 \$32,625 \$35,625 \$36,500 \$43,500 \$47,500	Married filing jointly Enter on 0.5 0.5 0.5 0.5 0.5 0.5 0.5 0.	Head of household line 9— 0.5 0.5 0.5 0.2 0.1 0.1 0.1	Single, Marr separate Qualifying surviv 0.5 0.2 0.1 0.1 0.0 0.0	ly, or ving sp			9	х	. 1
S21,750 \$23,750 \$23,750 \$32,625 \$35,625 \$36,500 \$43,500 \$47,500 \$54,750	But not over— \$21,750 \$23,750 \$32,625 \$35,625 \$36,500 \$43,500 \$47,500 \$54,750	Married filing jointly Enter on 0.5 0.5 0.5 0.5 0.5 0.5 0.5 0.	Head of household line 9— 0.5 0.5 0.5 0.2 0.1 0.1 0.1 0.1	Single, Marr separate Qualifying surviv 0.5 0.2 0.1 0.1 0.0 0.0 0.0	ly, or ving sp			9	x	. 1
Over— \$21,750 \$23,750 \$32,625 \$35,625 \$36,500 \$43,500 \$47,500	But not over— \$21,750 \$23,750 \$32,625 \$35,625 \$36,500 \$43,500 \$47,500 \$54,750 \$73,000	Married filing jointly Enter on 0.5 0.5 0.5 0.5 0.5 0.5 0.5 0.1 0.1 0.0	Head of household line 9— 0.5 0.5 0.5 0.2 0.1 0.1 0.1 0.1 0.0 0.0	Single, Marr separate Qualifying surviv 0.5 0.2 0.1 0.1 0.0 0.0 0.0 0.0 0.0	ly, or ving sp			9	х	.1
S21,750 \$23,750 \$23,750 \$32,625 \$35,625 \$36,500 \$43,500 \$47,500 \$54,750	But not over— \$21,750 \$23,750 \$32,625 \$35,625 \$36,500 \$43,500 \$47,500 \$54,750 \$73,000 Note: If	Married filing jointly Enter on 0.5 0.5 0.5 0.5 0.5 0.5 0.5 0.1 0.1	Head of household Iine 9— 0.5 0.5 0.5 0.2 0.1 0.1 0.1 0.1 0.0 0.0 vou can't take this creater to the second of t	Single, Marr separate Qualifying survivants 0.5 0.2 0.1 0.1 0.0 0.	ly, or ving sp			9	x	. 1

^{*} 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.

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and on Schedule 3 (Form 1040), line 4