

Computation of Decrease in Tax (continued)	____ preceding tax year ended ▶		____ preceding tax year ended ▶		____ preceding tax year ended ▶	
	Before carryback	After carryback	Before carryback	After carryback	Before carryback	After carryback
	20 General business credit (see instructions) . . .					
21 Net premium tax credit (see instructions) . . .						
22 Other credits. Identify						
23 Total credits. Add lines 20 through 22 . . .						
24 Subtract line 23 from line 19						
25 Self-employment tax (see instructions) . . .						
26 Additional Medicare Tax (see instructions) . .						
27 Net Investment Income Tax (see instructions)						
28 Health care: individual responsibility (see instructions)						
29 Other taxes						
30 Total tax. Add lines 24 through 29						
31 Enter the amount from the "After carryback" column on line 30 for each year						
32 Decrease in tax. Line 30 minus line 31 . . .						
33 Overpayment of tax due to a claim of right adjustment under section 1341(b)(1) (attach computation)						

Under penalties of perjury, I declare that I have examined this application and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete.

Sign Here

Keep a copy of this application for your records.

Your signature 		Date
Spouse's signature. If Form 1045 is filed jointly, both must sign. 		Date

Paid Preparer Use Only	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN
	Print/Type preparer's name			
	Firm's name ▶	Firm's EIN ▶		
	Firm's address ▶	Phone no.		