# 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 number
HAKESH REDDY KONDAKINDI	596-29-0877
Spouse's name	Spouse's social security number
HAARIKA PANDURANGA REDDY	798-15-0286
Part I Tax Return Information — Tax Year Ending D	Pecember 31, 2022 (Enter year you are 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.
<b>1</b> Adjusted gross income	
2 Total tax	
3 Federal income tax withheld from Form(s) W-2 and Form(s)	
4 Amount you want refunded to you	
5 Amount you owe	
	ration (Be sure you get and keep a copy of your return) come tax return (original or amended) I am now authorizing, and to the best of
return (original or amended) I am now authorizing. I consent to allow my to send my return to the IRS and to receive from the IRS (a) an acknowle for any delay in processing the return or refund, and (c) the date of any reason to initiate an ACH electronic funds withdrawal (direct debit) entry to payment of my federal taxes owed on this return and/or a payment of est authorization is to remain in full force and effect until I notify the U.S. Transury Financial Agent at 1-888-3 business days prior to the payment (settlement) date. I also authorize that taxes to receive confidential information necessary to answer inquiries	clare that the amounts in Part I above are the amounts from the income tax intermediate service provider, transmitter, or electronic return originator (ERO) addressed to receipt or reason for rejection of the transmission, (b) the reason found. If applicable, I authorize the U.S. Treasury and its designated Financial of the financial institution account indicated in the tax preparation software for imated tax, and the financial institution to debit the entry to this account. This treasury Financial Agent to terminate the authorization. To revoke (cancel) as 53-4537. Payment cancellation requests must be received no later than 2 financial institutions involved in the processing of the electronic payment of and resolve issues related to the payment. I further acknowledge that the example of the electronic payment of and resolve issues related to the payment. I further acknowledge that the
Taxpayer's PIN: check one box only	
	to enter or generate my PIN 9 0 8 7 7 as my
ERO firm name	don't enter all zeros
signature on the income tax return (original or amended)	
	turn (original or amended) I am now authorizing. Check this box <b>only</b> using the Practitioner PIN method. The ERO must complete Part III
Your signature ►	Date ►
Spouse's PIN: check one box only	
X lauthorize GLOBAL TAXES LLC	to enter or generate my PIN 5 0 2 8 6 as my
ERO firm name signature on the income tax return (original or amended)	Enter five digits, but don't enter all zeros
	turn (original or amended) I am now authorizing. Check this box <b>only</b>
	I using the Practitioner PIN method. The ERO must complete Part III
Spouse's signature ▶	Date ►
<u> </u>	Returns Only—continue below
Part III Certification and Authentication — Practition	er PIN Method Only
ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-o	digit self-selected PIN.  2 2 2 4 9 6 6 1 9 8 9  Don't enter all zeros
	or the electronic individual income tax return (original or amended) I am now ted above. I confirm that I am submitting this return in accordance with the or Authorized IRS e-file Providers of Individual Income Tax Returns.
ERO's signature ▶	Date ►
	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

2022
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OMB No. 1545-0074

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

	<b>5</b> 🗌 5	Single X Married filing jointly	Marrie	ed filing separatel	y (MFS)	☐ Head of	househo	old (HOH	l)		lifying surv	iving
Check only one box.	If vo	u checked the MFS box, enter the n	name of v	our spouse. If vo	u check	ed the HOH o	r OSS b	ox. ente	r the c		use (QSS) name if th	e qualifying
		on is a child but not your dependen		, , , .				,				- 4
Your first name	and mi	ddle initial	Last na	me					Yo	our so	cial security	y number
HAKESH F	REDDY	7	KOND	AKINDI					5	96-2	29-0877	7
		first name and middle initial	Last na						_			urity number
HAARIKA	PANI	DURANGA	REDD	Υ					7	98-1	15-0286	5
		r and street). If you have a P.O. box, see					Ap	t. no.				n Campaign
2434 APE	PLEDO	OWN DR							Ch	neck h	nere if you,	or your
		ce. If you have a foreign address, also co	omplete s	paces below.	Sta	te	ZIP cod	le				tly, want \$3
CARY					NC	:	2751	3			ow will not	Checking a change
Foreign country	name		F	Foreign province/sta	te/count	у	Foreign	postal co			or refund.	3.
											You	Spouse
Digital	At an	y time during 2022, did you: (a) rec	eive (as	a reward, award,	or payn	nent for prope	rty or se	ervices);	or (b)	sell,		
Assets		ange, gift, or otherwise dispose of					-				Yes	⊠ No
Standard	Som	eone can claim:	ependent	t Your spo	use as	a dependent						
<b>Deduction</b>		Spouse itemizes on a separate retui	rn or you	ı were a dual-stat	us alien							
Age/Blindness	You:	☐ Were born before January 2, 1	1958	Are blind	Spouse	: Was bo	rn befor	e Januai	ry 2, 1	958	☐ Is bli	nd
Dependents	s (see i	instructions):		(2) Social secu	ıritv	(3) Relationsh	nip (4)	Check the	e box i	f qualif	ies for (see	instructions):
If more	•	rst name Last name		number	,	to you		Child ta	x credi	t	Credit for oth	ner dependents
than four												
dependents,												
see instructions and check	· —											
here												
Income	1a	Total amount from Form(s) W-2, b	oox 1 (se	e instructions) .						1a	7	75,508.
meome	b	Household employee wages not r	eported	on Form(s) W-2.						1b		
Attach Form(s) W-2 here. Also	С	Tip income not reported on line 1a	a (see ins	structions)						1c		
attach Forms	d	Medicaid waiver payments not rep	ported o	n Form(s) W-2 (se	e instru	ctions)				1d		
W-2G and	е	Taxable dependent care benefits	from For	m 2441, line 26						1e		
1099-R if tax was withheld.	f	Employer-provided adoption bene	efits from	n Form 8839, line	29 .					1f		
If you did not	g	Wages from Form 8919, line 6 .								1g		
get a Form	h	Other earned income (see instruct	tions) .				, .			1h		0.
W-2, see instructions.	i	Nontaxable combat pay election (	(see instr	ructions)		<u>1</u> i	<u> </u>					
	Z	Add lines 1a through 1h								1z	7	75 <b>,</b> 508.
Attach Sch. B	<b>2</b> a	Tax-exempt interest	2a		b Ta	axable interes	t.			2b		
if required.	<u>3a</u>	Qualified dividends	3a		<b>b</b> 0	rdinary divide	nds .			3b		
	4a	IRA distributions	4a			axable amoun				4b		
Standard Deduction for—	5a		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		•					Ш	7		
Married filing jointly or	8	Other income from Schedule 1, lir								8		-8 <b>,</b> 995.
Qualifying surviving spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7		-						9		66,513.
\$25,900	10	Adjustments to income from Sche								10		
Head of household,	11	Subtract line 10 from line 9. This is	•							11		6,513.
\$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	Add lines 12 and 13								14		25,900.
see instructions.	15	Subtract line 14 from line 11. If ze	ro or les	s, enter -0 This i	s your <b>t</b>	axable incom	ne .			15	4	10,613.

Form 1040 (2022	2)									Page 2
Tax and	16	Tax (see instructions). Check	if any from Form	(s): <b>1</b> 881	4 <b>2</b> 🗌 4972	3 🗌		. 16	4	,464.
Credits	17	Amount from Schedule 2, lin	e3					. 17		
	18	Add lines 16 and 17						. 18	4	,464.
	19	Child tax credit or credit for	other dependen	ts from Sched	ule 8812			. 19		
	20	Amount from Schedule 3, lin	e8					. 20		
	21	Add lines 19 and 20						. 21		
	22	Subtract line 21 from line 18	If zero or less,	enter -0				. 22	4	,464.
	23	Other taxes, including self-en	mployment tax,	from Schedule	e 2, line 21 .			. 23		0.
	24	Add lines 22 and 23. This is	our total tax					. 24	4	,464.
Payments	25	Federal income tax withheld								
•	а	Form(s) W-2				25a	11,28	2.		
	b	Form(s) 1099				25b				
	С	Other forms (see instructions	s)			25c				
	d	Add lines 25a through 25c	·					. 25d	11	,282.
16	26	2022 estimated tax payment	s and amount a	pplied from 20	21 return			. 26		
If you have a qualifying child,	27	Earned income credit (EIC)				27				
attach Sch. EIC.	28	Additional child tax credit from	n Schedule 8812			28				
	29	American opportunity credit	from Form 8863	3, line 8		29				
	30	Reserved for future use .				30				
	31	Amount from Schedule 3, lin	e 15			31				
	32	Add lines 27, 28, 29, and 31.	These are your	total other pa	ayments and re	fundable cred	dits .	. 32		
	33	Add lines 25d, 26, and 32. T	nese are your <b>to</b>	tal payments				. 33	11	,282.
Refund	34	If line 33 is more than line 24							6	,818.
neiulia	35a	Amount of line 34 you want i	efunded to you	ی. If Form 8888	is attached, ch	eck here .	[	35a	6	,818.
Direct deposit?	b	Routing number 1 2 1				X Checking	Savin			
See instructions.	d	Account number 3 2 5					_			
	36	Amount of line 34 you want a	pplied to your	2023 estimate	ed tax	36				
Amount You Owe	37	Subtract line 33 from line 24 For details on how to pay, go				S		. 37		
	38	Estimated tax penalty (see in	structions) .			38				
Third Party Designee		you want to allow another	person to disc	cuss this retu	n with the IRS	S? See	s. Comple	ete below.	⊠ No	
· ·		signee's		Phone				lentification		
	nar	ne		no.			number (PI	N)		
Sign Here		der penalties of perjury, I declare tief, they are true, correct, and com								
TICIC	Yo	ur signature		Date	Your occupation		1	Protection F	ent you an Ide PIN, enter it h	
Joint return?						ENGINEER	(	(see inst.)		
See instructions. Keep a copy for	Sp	ouse's signature. If a joint return, b	oth must sign.	Date	Spouse's occup	ation			ent your spou tection PIN, e	
your records.					HOME MAKI	סיב	I .	see inst.)	ection File, e	Titler it flere
	————	one no. (858) 408-582		Email address	HAKESHV1		M	•		
		eparer's name	Preparer's signat		TIANESTIVI	Date	PTIN	ı	Check if:	
Paid		PRIYA RAM SAGAR GUPTA TALLAM			מווסיים יים דות			082703		mployed
Preparer		n's name GLOBAL TAX		IVIII DAGAN	OOLIII IAHIA	11 02/00/20			(678) 965	
Use Only		m's address 245 ROONE		INSMTCK N	J 08816			Firm's EIN		
0-1				TADAAT CIK IN				IIIII S LIIV		45487
GO TO WWW.Irs.go	v/r-orn	11040 for instructions and the late	st information.		BAA	REV 01/28/23 F	-KO		Form I	040 (2022)

# SCHEDULE 1 (Form 1040)

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

OMB No. 1545-0074

2022

Attachment
Seguence No. 01

Department of the Treasury Internal Revenue Service

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

HAKESH REDDY KONDAKINDI & HAARIKA PANDURANGA REDDY

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

Go to www.irs.gov/Form1040 for instructions and the latest information.

n.		Sequence No. <b>01</b>
	Your soc	ial security number
	596-29	-0877

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. Att	ach Schedule E .	5	-8,995.
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		
I	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	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	8s (	<u>)</u>	
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:			
	T. I.	8z		
9	Total other income. Add lines 8a through 8z		9	
10	Combine lines 1 through 7 and 9. Enter here and on Form 1040, 1040-SE	or 1040-NR line 8	10	-8.995

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 gov			
	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	Jury duty pay (see instructions)			
b	Deductible expenses related to income reported on line 8l from the			
	rental of personal property engaged in for profit			
С	Nontaxable amount of the value of Olympic and Paralympic medals			
	and USOC prize money reported on line 8m			
d	Reforestation amortization and expenses		-	
е	Repayment of supplemental unemployment benefits under the Trade			
	Act of 1974		-	
f	Contributions to section 501(c)(18)(D) pension plans			
g	Contributions by certain chaplains to section 403(b) plans 24g		-	
h	Attorney fees and court costs for actions involving certain unlawful			
	discrimination claims (see instructions)		-	
- 1	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			
	<u> </u>		-	
J				
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form 1041)			
-	Other adjustments. List type and amount:			
Z	04-			
25	Total other adjustments. Add lines 24a through 24z		25	
25 26	Add lines 11 through 23 and 25. These are your <b>adjustments to income</b> . Enter here		23	
20	Form 1040 or 1040-SR, line 10, or Form 1040-NR, line 10a		26	
		· · ·		

#### **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.

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.

Attachment Sequence No. 13 Your social security number

HAKE	SH REDDY KONDAKINDI & HAARIKA PANDURANG	GA RI	EDDY				596-	29-0877	7
Part	Income or Loss From Rental Real Estate an Note: If you are in the business of renting personal proper rental income or loss from Form 4835 on page 2, line 40.	nd Ro	yalties Schedule	e C. See	instrud	ctions. If you ar	re an in	dividual, rep	oort farm
	Did you make any payments in 2022 that would require you								
B I	f "Yes," did you or will you file required Form(s) 1099? .							. 🗌 Y	es 🗌 No
1a	Physical address of each property (street, city, state, Zlf	P code	e)						
Α	2-1-299, CHANDRANNAKUNTA SURYAPET TELA	ANGAI	NA IN 5	508213	 3				
В									
С									
1b	Type of Property (from list below)  2 For each rental real estate properabove, report the number of fair	rental	and		Fa	ir Rental Days		onal Use Days	QJV
Α	personal use days. Check the Q			Α		365		0	
В	if you meet the requirements to find qualified joint venture. See instru	IIIe as	a	В					
С	quaimed joint venture. See institu	CLIOITS	J.	С					
	of Property:								
	Single Family Residence 3 Vacation/Short-Term Ren Multi-Family Residence 4 Commercial	ital	5 Land 6 Roya			Self-Rental Other (descri	ibe)		
						Propertie	es:		
Incon	ne:			Α		В			С
3	Rents received	3		7	68.				
4	Royalties received	4							
Exper									
5	Advertising	5							
6	Auto and travel (see instructions)	6							
7	Cleaning and maintenance	7		1,8	64.				
8	Commissions	8							
9	Insurance	9							
10	Legal and other professional fees	10							
11	Management fees	11		1,4	44.				
12	Mortgage interest paid to banks, etc. (see instructions)	12							
13	Other interest	13							
14	Repairs	14		2,3					
15	Supplies	15		1,7	54.				
16	Taxes	16			2.0				
17	Utilities	17		2,3	39.				
18	Depreciation expense or depletion	18							
19 20	Other (list)  Total expenses. Add lines 5 through 19	19		9,7	6.2				
		20		9, 1	03.				
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		-8,9	95.				
22	Deductible rental real estate loss after limitation, if any, on <b>Form 8582</b> (see instructions)	22	(	8,99		(		)(	)
23a	Total of all amounts reported on line 3 for all rental prope	erties			23a		768.		
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				23d				
е	Total of all amounts reported on line 20 for all properties				23e	9,	<b>,</b> 763.		
24	Income. Add positive amounts shown on line 21. Do no	<b>t</b> inclu	ude any lo	osses			. 24		
25	Losses. Add royalty losses from line 21 and rental real esta-	te loss	ses from li	ne 22. E	nter to	tal losses her	e <b>25</b>	5 (	8,995.)
26	Total rental real estate and royalty income or (loss).								
	here. If Parts II, III, IV, and line 40 on page 2 do not Schedule 1 (Form 1040), line 5. Otherwise, include this at						n . <b>2</b> 6	3	-8,995.

<b>D-40</b> < Staple	e All	• •	of Yo		2022	_		įna D		Tax Retu t of Revenue		DOR Use Only				
For call HAKE: 2434 CARY Filing S Were y Was you N.C. E your ov to the I	enda SH AP Status You a Dur s duca Verpa Fund	REDD PLEDO NC 2 s	Y OWN 27513 1. Sin 4. Hea t of N. a resid downed to the the am	or fiscal y  KC  DR  3 WAKE gle ad of House C. for the ent for the ent Fund: Fund. To nount of y	entire year? e entire year? You may co make a contr our designati	2. Marrio 5. Quali ntribute ibution, on on Pa	ed Filing fying Wid Yes X Yes X to the N enclose age 2, L	Jointly low(er) No No .C. Edu Form N ine 31.	And ending  Your Standard  Spouse's Standard  3. Marri  Response in the standard  AC-EDU and your Standard  (See instruction	REDDY SN: 5962908 SN: 7981502 ied Filing Separate Return for decease whent Fund by more payment of tions for information April 15, 2023	77 Wer 86 202:  Ye sed taxpased spounaking a \$ tion about	ear spous ayer. ise. contribu	nted an autincome tax Yes se died: Date of Date of tion or de To designal.)	n? Yotomatic expression of the control of the contr	es l	r all of
		-							-	ointed Personal F			zen or res	siderit.		
FS 2	2	PP	Y		DT	N	OC	N	TPRES	Y SPR	ES	Y	VT	N	SVT	N
KOND		2434	4	2751	3 DS	N	EΑ	N	TD		SD				FDEX	T N
HAKES	SH	REDI	ΣY		KOND	AKIN	DI			5962908	77		WAKE	]		
HAARI	ΙKΑ	. PAi	NDU		REDD'	Y				7981502	86	NC	2751	.3		
2434	AP	PLEI	IWOC	N DR						CARY						
06			665	513		16			0	26	С			0		
07				0		18	Y		0	26	E			0		7020
09				0		20A			3193	EU						1500
10A				0		20B			0	27				0		24
10B				0		21A			0	29				0		
11	S	Y	I	N		21B			0	30				0		
11			25	500		21C			0	31				0	<del></del>	
13			000	000		21D			0	32				0		
14			410	013		26A			0	34			114	6		
15			20	047		26B			0							
TN	8	5840	0858	325		PN	6	7896	559522	PP		P02	08270	13		
I declare a	nd cen	urn B	ave exa	mined this re	Refund Deturn and accompanie, correct, and co	anying sch		1146 d stateme		Check here if y to discuss this	ou authoreturn and	rize the N	nents with t	he paid p	reparer be	evenue low.
Your Signa		R USE ON	ILY #	f prepared hu	a person other ti	Date				nt return, both must sig		Date	Contac	40858 t Phone No	∠ ⊃ . (Include al	rea code)
	PR.	IYA F		SAGAR	·	2 06 Date	<u>2</u> 3	6789	659522	er (Include area code,			P0	20827 er's FEIN, S	03 SSN, or PTII	,
	If v	ou ARE	NOT d							O. BOX R, RALEIC				, NC 2764	10-0640	•

	e (First 10 Characters) KONDAKINDI	Your Social Security Number	59629	90877
	D-400 Line-by-Line	Information		
6.	Federal Adjusted Gross Income		6.	6651
7.	Additions to Federal Adjusted Gross Income		7.	
8.	Add Lines 6 and 7		8.	6651
9.	Deductions From Federal Adjusted Gross Income		9.	
10.	Child Deduction			
	a. Enter the number of qualifying children for whom you were allow	ed a federal child tax credit	10a.	
	b. Enter the amount of the child deduction		10b.	
11.	N.C. Standard Deduction		11.	
11.	N.C. Itemized Deduction		11.	
11.	Deduction amount		11.	2550
12.	a. Add Lines 9, 10b, and 11		12a.	2550
	b. Subtract Line 12a from Line 8		12b.	4101
13.	Part-year Residents and Nonresidents Taxable Percentage		13.	0.000
14.	N.C. Taxable Income		14.	4101
15.	N.C. Income Tax		15.	204
16.	Tax Credits		16.	201
17.	Subtract Line 16 from Line 15		17.	204
18.	Consumer Use Tax		18.	209
10.			10.	
19.	You certify that no Consumer Use Tax is due Add Lines 17 and 18		19.	204
				20.
<u>North</u>	Carolina Income Tax Withheld			
20a.	Your tax withheld		20a.	319
	Charles to the weight had d			
	Spouse's tax withheld  Tax Payments		20b.	
	Tax Payments			
<b>Other</b> 21a.	Tax Payments 2022 estimated tax		21a.	
<b>Other</b> 21a. 21b.	Tax Payments  2022 estimated tax Paid with extension		21a. 21b.	
<b>Other</b> 21a. 21b. 21c.	2022 estimated tax Paid with extension Partnership		21a. 21b. 21c.	
Other 21a. 21b. 21c. 21d.	2022 estimated tax Paid with extension Partnership S Corporation		21a. 21b. 21c. 21d.	
Other 21a. 21b. 21c. 21d. 22.	2022 estimated tax Paid with extension Partnership S Corporation Additional Payments		21a. 21b. 21c. 21d. 22.	
Other 21a. 21b. 21c. 21d. 22. 23.	2022 estimated tax Paid with extension Partnership S Corporation Additional Payments Add Lines 20a through 22		21a. 21b. 21c. 21d. 22. 23.	319
Other 21a. 21b. 21c. 21d. 22. 23. 24.	2022 estimated tax Paid with extension Partnership S Corporation Additional Payments Add Lines 20a through 22 Previous Refunds		21a. 21b. 21c. 21d. 22. 23. 24.	
Other  21a. 21b. 21c. 21d. 22. 23. 24. 25.	2022 estimated tax Paid with extension Partnership S Corporation Additional Payments Add Lines 20a through 22 Previous Refunds Subtract Line 24 from Line 23		21a. 21b. 21c. 21d. 22. 23. 24. 25.	
Other  21a. 21b. 21c. 21d. 22. 23. 24. 25.	2022 estimated tax Paid with extension Partnership S Corporation Additional Payments Add Lines 20a through 22 Previous Refunds Subtract Line 24 from Line 23 Tax Due		21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a.	
21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a.	2022 estimated tax Paid with extension Partnership S Corporation Additional Payments Add Lines 20a through 22 Previous Refunds Subtract Line 24 from Line 23		21a. 21b. 21c. 21d. 22. 23. 24. 25.	
21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a.	2022 estimated tax Paid with extension Partnership S Corporation Additional Payments Add Lines 20a through 22 Previous Refunds Subtract Line 24 from Line 23 Tax Due		21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a.	
21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b.	2022 estimated tax Paid with extension Partnership S Corporation Additional Payments Add Lines 20a through 22 Previous Refunds Subtract Line 24 from Line 23 Tax Due Penalties		21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a.	
21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b.	2022 estimated tax Paid with extension Partnership S Corporation Additional Payments Add Lines 20a through 22 Previous Refunds Subtract Line 24 from Line 23 Tax Due Penalties Interest		21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b.	
21a. 21b. 21c. 22d. 22. 23. 24. 25. 26a. 26b. 26c. 26d. EU	2022 estimated tax Paid with extension Partnership S Corporation Additional Payments Add Lines 20a through 22 Previous Refunds Subtract Line 24 from Line 23 Tax Due Penalties Interest Add Lines 26b and 26c and enter the total on 26d		21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. 26d.	
21a. 21b. 21c. 22ld. 22. 23. 24. 25. 26a. 26b. 26c. 26d. EU	2022 estimated tax Paid with extension Partnership S Corporation Additional Payments Add Lines 20a through 22 Previous Refunds Subtract Line 24 from Line 23 Tax Due Penalties Interest Add Lines 26b and 26c and enter the total on 26d Exception to Underpayment of Estimated Tax		21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. 26d. EU	
Other  21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. EU 26e.	2022 estimated tax Paid with extension Partnership S Corporation Additional Payments Add Lines 20a through 22 Previous Refunds Subtract Line 24 from Line 23 Tax Due Penalties Interest Add Lines 26b and 26c and enter the total on 26d Exception to Underpayment of Estimated Tax Interest on the Underpayment of Estimated Income Tax		21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. 26d. EU	319
Other 21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. 26d. EU 26e. 27. 28.	2022 estimated tax Paid with extension Partnership S Corporation Additional Payments Add Lines 20a through 22 Previous Refunds Subtract Line 24 from Line 23 Tax Due Penalties Interest Add Lines 26b and 26c and enter the total on 26d Exception to Underpayment of Estimated Tax Interest on the Underpayment of Estimated Income Tax Pay this Amount		21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. 26d. EU 26e. 27.	319
Other 21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. 26d. EU 26e. 27. 28.	2022 estimated tax Paid with extension Partnership S Corporation Additional Payments Add Lines 20a through 22 Previous Refunds Subtract Line 24 from Line 23 Tax Due Penalties Interest Add Lines 26b and 26c and enter the total on 26d Exception to Underpayment of Estimated Tax Interest on the Underpayment of Estimated Income Tax Pay this Amount Overpayment unt of Refund to Apply to:		21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. 26d. EU 26e. 27.	319
21a. 21b. 21c. 23l. 22. 23. 24. 25. 26c. 26d. EU 26e. 27. 28. Amou	2022 estimated tax Paid with extension Partnership S Corporation Additional Payments Add Lines 20a through 22 Previous Refunds Subtract Line 24 from Line 23 Tax Due Penalties Interest Add Lines 26b and 26c and enter the total on 26d Exception to Underpayment of Estimated Tax Interest on the Underpayment of Estimated Income Tax Pay this Amount Overpayment  unt of Refund to Apply to:  Amount of Line 28 to be applied to 2023 Estimated Income Tax		21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. 26d. EU 26e. 27. 28.	319
Other 21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26d. EU 26e. 27. 28.  Amou	2022 estimated tax Paid with extension Partnership S Corporation Additional Payments Add Lines 20a through 22 Previous Refunds Subtract Line 24 from Line 23 Tax Due Penalties Interest Add Lines 26b and 26c and enter the total on 26d Exception to Underpayment of Estimated Tax Interest on the Underpayment of Estimated Income Tax Pay this Amount Overpayment  unt of Refund to Apply to:  Amount of Line 28 to be applied to 2023 Estimated Income Tax N.C. Nongame and Endangered Wildlife Fund		21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. 26d. EU 26e. 27. 28.	319
21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. 27. 28. <b>Amot</b> 29. 30. 31.	2022 estimated tax Paid with extension Partnership S Corporation Additional Payments Add Lines 20a through 22 Previous Refunds Subtract Line 24 from Line 23 Tax Due Penalties Interest Add Lines 26b and 26c and enter the total on 26d Exception to Underpayment of Estimated Tax Interest on the Underpayment of Estimated Income Tax Pay this Amount Overpayment  unt of Refund to Apply to:  Amount of Line 28 to be applied to 2023 Estimated Income Tax N.C. Nongame and Endangered Wildlife Fund N.C. Education Endowment Fund		21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. 26d. EU 26e. 27. 28.	319
21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. 27. 28. Amou	2022 estimated tax Paid with extension Partnership S Corporation Additional Payments Add Lines 20a through 22 Previous Refunds Subtract Line 24 from Line 23 Tax Due Penalties Interest Add Lines 26b and 26c and enter the total on 26d Exception to Underpayment of Estimated Tax Interest on the Underpayment of Estimated Income Tax Pay this Amount Overpayment  unt of Refund to Apply to:  Amount of Line 28 to be applied to 2023 Estimated Income Tax N.C. Nongame and Endangered Wildlife Fund N.C. Education Endowment Fund N.C. Breast and Cervical Cancer Control Program		21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. 26d. EU 26e. 27. 28.	319
21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. 27. 28. <b>Amot</b> 29. 30. 31.	2022 estimated tax Paid with extension Partnership S Corporation Additional Payments Add Lines 20a through 22 Previous Refunds Subtract Line 24 from Line 23 Tax Due Penalties Interest Add Lines 26b and 26c and enter the total on 26d Exception to Underpayment of Estimated Tax Interest on the Underpayment of Estimated Income Tax Pay this Amount Overpayment  unt of Refund to Apply to:  Amount of Line 28 to be applied to 2023 Estimated Income Tax N.C. Nongame and Endangered Wildlife Fund N.C. Education Endowment Fund		21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. 26d. EU 26e. 27. 28.	319