## 8879 **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

internal nevertice Service	-	
Submission Identification Number (SID)		
Taxpayer's name	Social security	number
PRAVEENKUMAR GUNDLAPALLY	886-91-	2405
Spouse's name		al security number
Part I Tax Return Information — Tax Year Ending December 31, 2022 (E	nter year you are	e authorizing )
Enter whole dollars only on lines 1 through 5.	inter year you are	c additionizing.j
<b>Note:</b> Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.		
1 Adjusted gross income	1	1 85,666.
2 Total tax		2 11,617.
3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099	<b>⊢</b>	<b>3</b> 15,393.
4 Amount you want refunded to you	-	<b>4</b> 3,776.
5 Amount you owe		5
Part II Taxpayer Declaration and Signature Authorization (Be sure you get a	nd keep a copy	
Under penalties of perjury, I declare that I have examined a copy of the income tax return (original or amer		
to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason fo for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account payment 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 term payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation business days prior to the payment (settlement) date. I also authorize the financial institutions involved in 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 Electronic Funds Withdrawal Consent.	he U.S. Treasury and tindicated in the taxitation to debit the contract the authorizating requests must be the processing of the payment. I furth	d its designated Financial appreparation software for entry to this account. This ion. To revoke (cancel) a received no later than 2 the electronic payment of er acknowledge that the
Taxpayer's PIN: check one box only		
	rata my DIN	2 4 0 5
ERO firm name	Ente	er five digits, but
signature on the income tax return (original or amended) I am now authorizing.	don	t enter all zeros
I will enter my PIN as my signature on the income tax return (original or amended) I a if you are entering your own PIN <b>and</b> your return is filed using the Practitioner PIN n below.		
Your signature ▶ Date	<b></b>	
Spouse's PIN: check one box only		
☐ I authorize to enter or gener	rato my DIN	ac my
ERO firm name	-	er five digits, but
signature on the income tax return (original or amended) I am now authorizing.		t enter all zeros
I will enter my PIN as my signature on the income tax return (original or amended) I a if you are entering your own PIN <b>and</b> your return is filed using the Practitioner PIN n below.		
Spouse's signature ▶ Date	•	
Practitioner PIN Method Returns Only—continue be		
Part III Certification and Authentication — Practitioner PIN Method Only	1011	
<b>ERO's EFIN/PIN.</b> Enter your six-digit EFIN followed by your five-digit self-selected PIN. 2	2   2   4   9   6 Don't enter	
I certify that the above numeric entry is my PIN, which is my signature for the electronic individual incor authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am s requirements of the Practitioner PIN method and <b>Pub. 1345</b> , Handbook for Authorized IRS <i>e-file</i> Providers	submitting this return	n in accordance with the
ERO's signature ▶ Date	•	
FRO Must Retain This Form — See Instruction		

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

OMB No. 1545-007

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

Filing Status Check only one box.		Single Married filing jointly uchecked the MFS box, enter the name	_	ed filing separately (I	,	_	,	,	spo	lifying survuse (QSS) and the contraction of the co	
		on is a child but not your dependent							1		
Your first name			Last nai							cial securit	•
PRAVEENI				LAPALLY					+	91-240	
If joint return, s	pouse's	first name and middle initial	Last nai	me					Spouse	's social sed	curity number
Home address	(numbe	er and street). If you have a P.O. box, see	instruction	ons.			Apt. no.		Preside	ntial Election	on Campaign
3999 SPI	RING	VALLEY RD								here if you,	
City, town, or p	ost offi	ce. If you have a foreign address, also co	mplete s <sub>l</sub>	paces below.	Stat	te	ZIP code				ntly, want \$3 Checking a
DALLAS					TX		75244			ow will not	
Foreign countr	y name		F	Foreign province/state/	count	у	Foreign posta	code	your ta	x or refund.	
										You	Spouse
Digital Assets		ny time during 2022, did you: (a) reco ange, gift, or otherwise dispose of a					-			X Yes	□No
Standard		eone can claim:  You as a de				a dependent	40001). (000				
<b>Deduction</b>	_	Spouse itemizes on a separate retur		·		и аоронаот					
Age/Blindnes	s You:	☐ Were born before January 2, 1	958	Are blind Sp	ouse:	: Was bo	rn before Jar	uary	2, 1958	☐ Is bl	ind
Dependent	s (see	instructions):		(2) Social security	,	(3) Relationsh	nip (4) Check	the b	oox if quali	fies for (see	instructions):
If more	(1) Fi	rst name Last name		number		to you	Chile	tax o	credit	Credit for otl	her dependents
than four										[	
dependents, see instruction	s ——										
and check	. —										
here L	]									[[	
Income	1a	Total amount from Form(s) W-2, b	ox 1 (see	e instructions) .					. 1a	1 9	91,153.
	b	Household employee wages not re	eported	on Form(s) W-2.					. 1b	)	
Attach Form(s) W-2 here. Also	С	Tip income not reported on line 1a	•	,					. 10		
attach Forms	d	Medicaid waiver payments not rep			nstru	ctions)			. 10	I	
W-2G and 1099-R if tax	е	Taxable dependent care benefits f							. 1e		
was withheld.	f	Employer-provided adoption bene							. 1f		
If you did not	g	Wages from Form 8919, line 6.							. 19		
get a Form W-2, see	h	Other earned income (see instructi	,			1		٠	. 1h	1	0.
instructions.	i	Nontaxable combat pay election (s	see instr	uctions)		<u>1</u> i					01 150
	<u>z</u>	Add lines 1a through 1h		· · · · · i				٠	. 1z		91,153.
Attach Sch. B if required.	2a	· -	2a			axable interes		٠	. 2b	_	14.
ii required.	3a		3a			rdinary divide		٠	. 3b		
24dd	4a		4a			axable amoun axable amoun		•	. 4b	_	
Standard Deduction for—	5a 6a		5a 6a			axable amoun			. 6b	_	
Single or	C	If you elect to use the lump-sum e		nethod check here			t		. 0.		
Married filing separately,	7	Capital gain or (loss). Attach Sche			•	,		•	7		3,689.
\$12,950 Married filing	8	Other income from Schedule 1, lin		· · · · · ·				•	. 8	_	-9,190.
jointly or	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7,						•	. 9		85,666.
Qualifying surviving spouse,	10	Adjustments to income from Sche						•	. 10		,,,,,,,,,
\$25,900 Head of	11	Subtract line 10 from line 9. This is							. 11		85 <b>,</b> 666.
household,	12	Standard deduction or itemized	-	-					. 12	<u> </u>	12 <b>,</b> 950.
\$19,400 If you checked	13	Qualified business income deducti				5-A			. 13		,,
any box under Standard	14								. 14		12,950.
Deduction, see instructions.	15	Subtract line 14 from line 11. If zer	o or less	s, enter -0 This is y	our <b>t</b>	axable incom	ne		. 15		72,716.
Joe mondellond.											

			Pa	ag	e <b>2</b>	
11	.,	6	1	7		
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11	- /	6	1	1	•	
11	. ,	6	1	7		
11		6	1	<u>0</u>	•	
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1 5	-	3	a	3		
1	,		)		•	-
						•
15	,	3	9	3	•	
3	3,	7	7	6		
	' '	/	/	0	•	
× No						

Form 1040 (2022) **Tax** (see instructions). Check if any from Form(s): **1** 8814 **2** 4972 3 16 16 Tax and **Credits** 17 Amount from Schedule 2, line 3 . . . . . 17 Add lines 16 and 17 . . . . . . . . . . . 18 18 19 Child tax credit or credit for other dependents from Schedule 8812 19 20 Amount from Schedule 3, line 8 . . . . . . . . 20 21 Add lines 19 and 20 . . . . . . . . . . . . 21 22 Subtract line 21 from line 18. If zero or less, enter -0-22 23 Other taxes, including self-employment tax, from Schedule 2, line 21 23 Add lines 22 and 23. This is your total tax 24 24 **Payments** 25 Federal income tax withheld from: 15,393. Form(s) W-2 . 25a а Form(s) 1099 . . . . 25b b Other forms (see instructions) 25c С 25d d Add lines 25a through 25c 26 2022 estimated tax payments and amount applied from 2021 return 26 If you have a 27 Earned income credit (EIC) . . . . . . . . . . . . . 27 qualifying child, attach Sch. EIC. 28 Additional child tax credit from Schedule 8812 28 29 American opportunity credit from Form 8863, line 8. 29 30 30 31 Amount from Schedule 3, line 15 . . . . . . . . . . . . . . . 31 32 Add lines 27, 28, 29, and 31. These are your total other payments and refundable credits 32 33 Add lines 25d, 26, and 32. These are your total payments 33 34 If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid 34 Refund Amount of line 34 you want refunded to you. If Form 8888 is attached, check here 35a 35a Routing number 0 6 3 1 0 0 2 7 7 Direct deposit? b **c** Type: X Checking Savings See instructions. Account number | 8 | 9 | 8 | 1 | 0 | 9 | 7 | 3 | 8 | 0 | 8 | d 36 Amount of line 34 you want applied to your 2023 estimated tax . . . 36 Amount 37 Subtract line 33 from line 24. This is the amount you owe. You Owe For details on how to pay, go to www.irs.gov/Payments or see instructions . 37 Estimated tax penalty (see instructions) . . . . Third Party Do you want to allow another person to discuss this return with the IRS? See instructions Yes. Complete below. Designee Designee's Phone Personal identification number (PIN) Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and Sign belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge. Here If the IRS sent you an Identity Your signature Date Your occupation Protection PIN, enter it here (see inst.) SOFTWARE ENGINEER Joint return? See instructions. If the IRS sent your spouse an Spouse's signature. If a joint return, both must sign. Date Spouse's occupation Keep a copy for Identity Protection PIN, enter it here your records. (see inst.) Phone no. (779)723 - 9040Email address PRAVEENKR528@GMAIL.COM Preparer's name Preparer's signature PTIN Check if: Date **Paid** Self-employed SYAM PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA RAM SAGAR GUPTA TALLAM 02/24/2023 P02082703 **Preparer** Phone no. (678) 965-9522 GLOBAL TAXES LLC Firm's name Use Only 245 ROONEY CT E BRUNSWICK NJ 08816 84-3171965 Firm's address Firm's EIN

#### SCHEDULE 1 (Form 1040)

**Additional Income and Adjustments to Income** 

OMB No. 1545-0074

2022
Attachment
Sequence No. 01

Department of the Treasury Internal Revenue Service

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

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

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

Your social security number
886-91-2405

Par	t Additional Income			
1	Taxable refunds, credits, or offsets of state and local income taxes		1	0.
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. Atta	ch Schedule E .	5	-9,190.
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		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		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		8n		
0	, , , , , , , , , , , , , , , , , , , ,	80		
р		8p		
q	` ' '	8q		
r	· · · · · · · · · · · · · · · · · · ·	8r		
S	Nontaxable amount of Medicaid waiver payments included on Form			
	· · · · · · · · · · · · · · · · · · ·	8s (	)	
t	Pension or annuity from a nonqualifed deferred compensation plan or			
	· · · · · · · · · · · · · · · · · · ·	8t		
u		8u		
Z				
		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-SR,	or 1040-NR, line 8	10	-9,190.

Schedule 1 (Form 1040) 2022 Page **2** 

Par	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	Jury duty pay (see instructions)	24a		
b	Deductible expenses related to income reported on line 8I from the			
	rental of personal property engaged in for profit	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		24f		
g	, , , , , , , , , , , , , , , , , , , ,	24g		
h	Attorney fees and court costs for actions involving certain unlawful			
	·	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	- 41		
	F	24i		
j	<u> </u>	24j		
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form	S.4.		
		24k		
Z	Other adjustments. List type and amount:	<b></b>		
05		24z	05	
25	Total other adjustments. Add lines 24a through 24z		25	
26	Add lines 11 through 23 and 25. These are your <b>adjustments to income</b> .		00	
	Form 1040 or 1040-SR, line 10, or Form 1040-NR, line 10a		26	

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## SCHEDULE D (Form 1040)

#### **Capital Gains and Losses**

OMB No. 1545-0074

2022

Attachment Sequence No. **12** 

Department of the Treasury Internal Revenue Service Attach to Form 1040, 1040-SR, or 1040-NR.

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

Use Form 8949 to list your transactions for lines 1b, 2, 3, 8b, 9, and 10.

Name(s) shown on return Your social security number 886-91-2405 PRAVEENKUMAR GUNDLAPALLY Did you dispose of any investment(s) in a qualified opportunity fund during the tax year? If "Yes." attach Form 8949 and see its instructions for additional requirements for reporting your gain or loss. Part I Short-Term Capital Gains and Losses - Generally Assets Held One Year or Less (see instructions) See instructions for how to figure the amounts to enter on the (h) Gain or (loss) (g) Adjustments Subtract column (e) lines below. Proceeds Cost to gain or loss from from column (d) and This form may be easier to complete if you round off cents to (sales price) (or other basis) Form(s) 8949, Part I, combine the result whole dollars. line 2. column (a) with column (a) 1a Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b . 1b Totals for all transactions reported on Form(s) 8949 with Box A checked 130,796. -356. 126,809. 3,631. Totals for all transactions reported on Form(s) 8949 with Box B checked 25,085. 25,027. 58. . . . . . . . . . . . . . . 3 Totals for all transactions reported on Form(s) 8949 with Short-term gain from Form 6252 and short-term gain or (loss) from Forms 4684, 6781, and 8824 . . . 4 Net short-term gain or (loss) from partnerships, S corporations, estates, and trusts from 5 Short-term capital loss carryover. Enter the amount, if any, from line 8 of your Capital Loss Carryover 6 7 Net short-term capital gain or (loss). Combine lines 1a through 6 in column (h). If you have any longterm capital gains or losses, go to Part II below. Otherwise, go to Part III on the back . . . . . . . . . 7 3,689. Part II Long-Term Capital Gains and Losses – Generally Assets Held More Than One Year (see instructions) See instructions for how to figure the amounts to enter on the (g) (h) Gain or (loss) Adjustments Subtract column (e) (d) (e) lines below Proceeds to gain or loss from from column (d) and Cost This form may be easier to complete if you round off cents to (sales price) (or other basis) Form(s) 8949, Part II, combine the result whole dollars. line 2, column (a) with column (a) 8a Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b . . 8b Totals for all transactions reported on Form(s) 8949 with Box D checked . . . . . . . . . . . . . . Totals for all transactions reported on Form(s) 8949 with Box E checked 10 Totals for all transactions reported on Form(s) 8949 with 11 Gain from Form 4797, Part I; long-term gain from Forms 2439 and 6252; and long-term gain or (loss) 11 12 Net long-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1 12 13 14 Long-term capital loss carryover. Enter the amount, if any, from line 13 of your Capital Loss Carryover 14 15 Net long-term capital gain or (loss). Combine lines 8a through 14 in column (h). Then, go to Part III 15

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Schedule D (Form 1040) 2022 Page **2** 

#### Part III Summary

16	Combine lines 7 and 15 and enter the result	16		3,689.
	• If line 16 is a <b>gain</b> , enter the amount from line 16 on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 17 below.			
	• If line 16 is a <b>loss</b> , skip lines 17 through 20 below. Then, go to line 21. Also be sure to complete line 22.			
	• If line 16 is <b>zero</b> , skip lines 17 through 21 below and enter -0- on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 22.			
17	Are lines 15 and 16 <b>both</b> gains?  ☐ <b>Yes.</b> Go to line 18.  ☑ <b>No.</b> Skip lines 18 through 21, and go to line 22.			
18	If you are required to complete the <b>28% Rate Gain Worksheet</b> (see instructions), enter the amount, if any, from line 7 of that worksheet	18		
19	If you are required to complete the <b>Unrecaptured Section 1250 Gain Worksheet</b> (see instructions), enter the amount, if any, from line 18 of that worksheet	19		
20	Are lines 18 and 19 both zero or blank and you are not filing Form 4952?  ☐ Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 16. Don't complete lines 21 and 22 below.			
	■ No. Complete the Schedule D Tax Worksheet in the instructions. Don't complete lines 21 and 22 below.			
21	If line 16 is a loss, enter here and on Form 1040, 1040-SR, or 1040-NR, line 7, the <b>smaller</b> of:			
	• The loss on line 16; or • (\$3,000), or if married filing separately, (\$1,500)	21	(	)
	Note: When figuring which amount is smaller, treat both amounts as positive numbers.			
22	Do you have qualified dividends on Form 1040, 1040-SR, or 1040-NR, line 3a?			
	☐ <b>Yes.</b> Complete the <b>Qualified Dividends and Capital Gain Tax Worksheet</b> in the instructions for Form 1040, line 16.			
	➤ No. Complete the rest of Form 1040, 1040-SR, or 1040-NR.			

## 8949 Form

#### **Sales and Other Dispositions of Capital Assets**

Go to www.irs.gov/Form8949 for instructions and the latest information.

File with your Schedule D to list your transactions for lines 1b, 2, 3, 8b, 9, and 10 of Schedule D.

2022 Attachment Sequence No. 12A

OMB No. 1545-0074

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

Social security number or taxpayer identification number

PRAVEENKUMAR GUNDLAPALLY

886-91-2405

Before you check Box A, B, or C below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your broker and may even tell you which box to check.

Part I

**Short-Term.** Transactions involving capital assets you held 1 year or less are generally short-term (see instructions). For long-term transactions, see page 2.

**Note:** You may aggregate all short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 1a; you aren't required to report these transactions on Form 8949 (see instructions).

You must check Box A, B, or C below. Check only one box. If more than one box applies for your short-term transactions, complete a separate Form 8949, page 1, for each applicable box. If you have more short-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

<ul><li>★ (A) Short-term transactions</li><li>(B) Short-term transactions</li><li>(C) Short-term transactions</li></ul>	reported on	Form(s) 1099	9-B showing bas	•		•	<del>2</del> )
1 (a) Description of property	(b) Date acquired	(c) Date sold or	<b>(d)</b> Proceeds	(e) Cost or other basis See the <b>Note</b> below	If you enter an enter a c	f any, to gain or loss amount in column (g), ode in column (f). arate instructions.	(h) Gain or (loss) Subtract column (e)
(Example: 100 sh. XYZ Co.)	(Mo., day, yr.)	disposed of (Mo., day, yr.)	(sales price) (see instructions)	and see Column (e) in the separate instructions.	(f) Code(s) from instructions	(g) Amount of adjustment	from column (d) and combine the result with column (g).
ROBINHOOD SECURITES LLC	01/01/22	12/31/22	130,796.	126,809.	Е	-356.	3,631.
2 Totals. Add the amounts in columns negative amounts). Enter each tota Schedule D, line 1b (if Box A above above is checked), or line 3 (if Box C	I here and inc is checked), <b>lir</b>	lude on your ne 2 (if Box B	130.796	126.809		-356	3.631

**Note:** If you checked Box A above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See *Column* (g) in the separate instructions for how to figure the amount of the adjustment.

## 8949 **8949**

#### **Sales and Other Dispositions of Capital Assets**

Go to www.irs.gov/Form8949 for instructions and the latest information.

File with your Schedule D to list your transactions for lines 1b, 2, 3, 8b, 9, and 10 of Schedule D.

OMB No. 1545-0074

2022

Attachment
Sequence No. 12A

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

Social security number or taxpayer identification number

PRAVEENKUMAR GUNDLAPALLY

886-91-2405

Before you check Box A, B, or C below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your broker and may even tell you which box to check.

Part I

**Short-Term.** Transactions involving capital assets you held 1 year or less are generally short-term (see instructions). For long-term transactions, see page 2.

**Note:** You may aggregate all short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 1a; you aren't required to report these transactions on Form 8949 (see instructions).

You *must* check Box A, B, *or* C below. Check only one box. If more than one box applies for your short-term transactions, complete a separate Form 8949, page 1, for each applicable box. If you have more short-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

<ul><li>☐ (A) Short-term transactions</li><li>☒ (B) Short-term transactions</li><li>☐ (C) Short-term transactions</li></ul>	reported on	Form(s) 1099	9-B showing bas	•		•	<del>e</del> )	
(a) Description of property	(b) Date acquired	(c) Date sold or	Date sold or Proceeds See the Note below See the separate instructions.		(d) Cost or other basis or Proceeds See the <b>Note</b> below		amount in column (g), ode in column (f).	(h) Gain or (loss) Subtract column (e)
(Example: 100 sh. XYZ Co.)	(Mo., day, yr.)	disposed of (Mo., day, yr.)	(sales price) (see instructions)	and see Column (e) in the separate instructions.	(f) Code(s) from instructions	<b>(g)</b> Amount of adjustment	from column (d) and combine the result with column (g).	
ROBINHOOD CRYPTO LLC	01/01/22	06/01/22	25,085.	25,027.			58.	
2 Totals. Add the amounts in columns negative amounts). Enter each total Schedule D, line 1b (if Box A above above is checked), or line 3 (if Box C	al here and inc is checked), <b>lir</b>	lude on your ne 2 (if Box B	25,085.	25,027.			58.	

**Note:** If you checked Box A above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See *Column* (g) in the separate instructions for how to figure the amount of the adjustment.

## 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.

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

OMB No. 1545-0074

2022

Attachment Sequence No. 13

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

Your social security number

PRA	VEENKUMAR GUNDLAPALLY						886-9	11-2405	)
Pa	Income or Loss From Rental Real Estate and Note: If you are in the business of renting personal property rental income or loss from Form 4835 on page 2, line 40.			C. See	instru	ctions. If you a	are an indi	vidual, rep	oort farm
Α	Did you make any payments in 2022 that would require you to	to file Fo	orm(s) 1	099? S	ee ins	tructions .		. 🗌 Ye	es 🗵 No
В	If "Yes," did you or will you file required Form(s) 1099? .							. 🗌 Ye	es 🗌 No
1a	Physical address of each property (street, city, state, ZIP	code)							
Α	7-35CHANDUPATLA NAKREKAL NALGONDA, TELAN	NGANA	IN	5082	11				
В									
C									
1b	(from list below) above, report the number of fair re	ental an	nd		Fa	ir Rental Days		nal Use ays	QJV
Α	personal use days. Check the QJV		nly	Α		355		0	
В	if you meet the requirements to fil qualified joint venture. See instruc			В					
С				С					
1	of Property: Single Family Residence Multi-Family Residence  3 Vacation/Short-Term Renta 4 Commercial		5 Land 6 Roya	lties		Self-Rental Other (desc			
						Properti	ies:		
Inco		-		Α		В			С
3	Rents received	3		5	40.				
4	Royalties received	4							
	enses:	_							
5	Advertising	5 6							
6	Auto and travel (see instructions)	7		1,1	10				
7 8	Cleaning and maintenance	8		⊥, ⊥	40.				
9	Insurance	9							
10	Legal and other professional fees	10							
11	Management fees	11		1 2	40.				
12	Mortgage interest paid to banks, etc. (see instructions)	12		1,2	40.				
13	Other interest	13							
14	Repairs	14		2.4	00.				
15	Supplies	15		3,5					
16	Taxes	16		-,-					
17	Utilities	17		1,4	50.				
18	Depreciation expense or depletion	18							
19	Other (list)	19							
20	Total expenses. Add lines 5 through 19	20		9,7	30.				
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		-9,1	90.				
22	Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions)	22 (		9,19		(	)	)(	)
<b>23</b> a	Total of all amounts reported on line 3 for all rental proper	ties .			23a		540.		
b	, , , , ,				23b				
C					23c				
d					23d				
е					23e	9	730.		
24	Income. Add positive amounts shown on line 21. Do not		-				. 24		
25	Losses. Add royalty losses from line 21 and rental real estate							(	9,190.)
26	Total rental real estate and royalty income or (loss). C								
	here. If Parts II, III, IV, and line 40 on page 2 do not a Schedule 1 (Form 1040), line 5. Otherwise, include this am						on   · <b>26</b>		-9,190.

	ole Ali	<b>(50)</b> Pages nd W-2s	of Yo	our	022			<u>l</u> ina D	ncome Departmen			DOR Use Only				
				or fiscal year	peginnin	9			and ending			Are you a	veteran?		Yes 🔲	No X
1		KUMAR			LAPAL	LY				00			ouse a vetera			No 🔲
399		RING TX 7		LEY RD					Your S Spouse's S		6912405		granted an au al income ta			
	Statu		1. Sing			2. Marri	ed Filing	Jointly			Separately	2022 10001	Yes [	No [		1010.
<u> </u>				id of Household	1	5. Quali	fying Wic	1					ouse died:			
1	•			C. for the entir ent for the en	•		Yes L	No No	-		r deceased to		Date of Date of			
								_	ucation Endov						ng some o	or all of
your	overpa	ayment to	the F	und. To mak	e a cont	ibution,	enclose	Form I	NC-EDU and	your pay	ment of \$	0	. To design	-	our overpa	
									(See instruc					oid ont		
		-				-			of the country or Court-Appo	-				siderit.		
	1										~~~~				~	
FS	1	PP	Y		DT	N	OC	N	TPRES	N	SPRES	N	VT	N	SVT	N
GUNE	)	3999		75244	DS	N	EA	N	TD			SD			FDEX	XT N
PRAV	EEN	IKUMA	R		GUND	LAPA:	LLY			886	912405					
												TX	7524	44		
3999	) SE	RING	VP	ALLEY R	D					DA	LLAS					
06			856	566		16			0		26C			0		
07				0		18	Y		0		26E			0		0201
09				0		20A			1645		EU					5002
10A				0		20B			0		27			0		
10B				0		21A			0		29			0		
11	S	Y	Ι	N		21B			0		30			0		
11			127	750		21C			0		31			0		
13			043			21D			0		32			0		
14			320	)47		26A			0		34		2	46		
15				599		26B			0							
TN		7972				PN	6		659522		PP	P0	208270	)3 		
		turn Be tify that I ha nowledge ar		mined this return f, they are true, co	fund D and accomporrect, and		nedules an	4 ( nd stateme		/ment Chec to dis	Due k here if you a cuss this retu	uthorize the	O North Carol hments with	lina Depa the paid p	rtment of F preparer be	Revenue Flow.
														72390		
Your Sig		R USE ONI	Y If	prepared by a ne	rson other t	Date			nature (If filing join is based on all info			Date		ct Phone N	o. (Include a	rea code)
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SYAM	I PR	IYA R	AM_S	SAGAR GU	PT 0	2 24	<u>2</u> 3	6789	659522				<u> </u>	2082	703	
Paid Pre	parer's	Signature				Date	Prepa	arer's Co	ntact Phone Numb	oer (Include	area code)		Prepar	rer's FEIN,	SSN, or PTI	N
	lf y	ou ARE N	IOT di						F REVENUE, P <b>0V to:</b> N.C. DE					I, NC 276	340-0640	

Name	(First 10 Characters) GUNDLAPALL Your Social Security Number	88691	2405
	D-400 Line-by-Line Information		
6.	Federal Adjusted Gross Income	6.	8566
7.	Additions to Federal Adjusted Gross Income	7.	
8.	Add Lines 6 and 7	8.	8566
9.	Deductions From Federal Adjusted Gross Income	9.	
10.	Child Deduction	٠.	
	a. Enter the number of qualifying children for whom you were allowed 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.	1275
12.	a. Add Lines 9, 10b, and 11	12a.	1275
	b. Subtract Line 12a from Line 8	12b.	7291
13.	Part-year Residents and Nonresidents Taxable Percentage	13.	0.439
14.	N.C. Taxable Income	14.	3204
15.	N.C. Income Tax	15.	159
16.	Tax Credits	16.	13.
17.	Subtract Line 16 from Line 15	17.	159
18.	Consumer Use Tax	17.	103
10.	You certify that no Consumer Use Tax is due	10.	
19.	Add Lines 17 and 18	19.	159
	Carolina Income Tax Withheld		
North			
	Vana tan with hald	20-	1.0
20a. 20b.	Your tax withheld Spouse's tax withheld  Tax Payments	20a. 20b.	164
20a. 20b. <b>Other</b>	Spouse's tax withheld  Tax Payments	20b.	164
20a. 20b. <b>Other</b> 21a.	Spouse's tax withheld  Tax Payments  2022 estimated tax	20b. 21a.	164
20a. 20b. <b>Other</b> 21a. 21b.	Spouse's tax withheld  Tax Payments  2022 estimated tax Paid with extension	20b. 21a. 21b.	164
20a. 20b. <b>Other</b> 21a. 21b. 21c.	Spouse's tax withheld  Tax Payments  2022 estimated tax Paid with extension Partnership	20b. 21a. 21b. 21c.	164
20a. 20b. <b>Other</b> 21a. 21b. 21c. 21d.	Spouse's tax withheld  Tax Payments  2022 estimated tax Paid with extension Partnership S Corporation	20b. 21a. 21b. 21c. 21d.	164
20a. 20b. <b>Other</b> 21a. 21b. 21c. 21d.	Spouse's tax withheld  Tax Payments  2022 estimated tax Paid with extension Partnership S Corporation Additional Payments	20b. 21a. 21b. 21c. 21d. 22.	164
20a. 20b. <b>Other</b> 21a. 21b. 21c. 21d.	Spouse's tax withheld  Tax Payments  2022 estimated tax Paid with extension Partnership S Corporation	20b. 21a. 21b. 21c. 21d.	
20a. 20b. <b>Other</b> 21a. 21b. 21c. 21d.	Spouse's tax withheld  Tax Payments  2022 estimated tax Paid with extension Partnership S Corporation Additional Payments	20b. 21a. 21b. 21c. 21d. 22.	
20a. 20b. <b>Other</b> 21a. 21b. 21c. 21d. 22.	Spouse's tax withheld  Tax Payments  2022 estimated tax Paid with extension Partnership S Corporation Additional Payments Add Lines 20a through 22	20b.  21a. 21b. 21c. 21d. 22. 23.	164
20a. 20b. <b>Other</b> 21a. 21b. 21c. 221d. 22. 23. 24. 25.	Spouse's tax withheld  Tax Payments  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.	164
20a. 20b. 21a. 21b. 21c. 21d. 22. 23. 24. 25.	Spouse's tax withheld  Tax Payments  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.	164
20a. 20b. 21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a.	Spouse's tax withheld  Tax Payments  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.	164
20a. 20b. 21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b.	Spouse's tax withheld  Tax Payments  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.	164
20a. 20b. 21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b.	Spouse's tax withheld  Tax Payments  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. 26c.	164
20a. 20b. Other 21a. 21b. 21c. 22d. 22. 23. 24. 25. 26a. 26b. 26c. 26d. EU	Spouse's tax withheld  Tax Payments  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	20b.  21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. 26d.	164
20a. 20b. Other 21a. 21b. 21c. 22d. 22. 23. 24. 25. 26a. 26b. 26c. 26d. EU	Tax Payments  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	164
20a. 20b. 21a. 21b. 21c. 23d. 22. 23. 24. 25. 26a. 26b. 26c. 26d. EU 26e.	Spouse's tax withheld  Tax Payments  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	164
20a. 20b. Other 21a. 21b. 21c. 21d. 22. 23. 26a. 26b. 26c. 26d. EU 26e. 27. 28.	Spouse's tax withheld  Tax Payments  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.	164
20a. 20b. 21a. 21b. 21c. 22d. 22. 23. 24. 25. 26a. 26c. 26d. EU 26e. 27. 28. Amou	Tax Payments  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. 28.	164
20a. 20b. Other 21a. 21b. 21c. 22d. 25. 26a. 26c. 26d. EU 26e. 27. 28. Amou	Tax Payments  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. 28.	164
20a. 20b. Other 21a. 21b. 21c. 21d. 22. 23. 24. 25. 26d. EU 26e. 27. 28. Amou	Tax Payments  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.	164
20a. 20b. 21a. 21b. 21c. 22d. 22. 23. 24. 25. 26a. EU 26e. 27. 28. Amou 29. 30. 31.	Tax Payments  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  ant 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	20b.  21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. 26d. EU 26e. 27. 28.	164
20a. 20b. 21a. 21b. 21c. 23d. 22. 23. 24. 25. 26a. EU 26e. 27. 28. Amou 29. 30. 31. 32.	Spouse's tax withheld  Tax Payments  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	20b.  21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. 26d. EU 26e. 27. 28.	164
20a. 20b. 21a. 21b. 21c. 22d. 22. 23. 24. 25. 26a. EU 26e. 27. 28. Amou 29. 30. 31.	Tax Payments  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  ant 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	20b.  21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. 26d. EU 26e. 27. 28.	164

### D-400 Sch PN (50)

**Total Additions** 

8-17-22

# 2022 Part-Year Resident and Nonresident Schedule

North Carolina Department of Revenue

DOR Use Only			

If you enter a taxable percentage on Form D-400, Line 13 because you or your spouse, if married filing jointly, were not full-year residents of North Carolina during tax year 2022, you must attach this schedule to Form D-400. Importantly, you must attach both pages of this schedule to Form D-400. If you do not, the Department may be unable to process your return.

Last N	Name (First 10 Characters) GUNDLAPALL	You	ır Social Security Num	ber 886912405
sources	ear resident or a nonresident who receives income from N.C. sources must co that is subject to N.C. tax. You are a "part-year resident" if you moved to N became a resident of another state during the tax year. You are a "nonresident of the Instructions before the instructions before the instructions before the instructions before the instructions.	I.C. and became ent" if you were r	a resident during the not a resident of N.C. a	tax year, or you moved out o
	NRT N PYT Y 07 01 22 1	12 31 22	22	37653
	NRS N PYS N		23	85666
Part A	A. Residency Status			
Date N		ull-Year Resident N.C. residency b	egan D	Part-Year Resident rate N.C. residency ended
	3. Allocation of Income for Part-Year Residents and Nonresider		d C. DO HOLARIACH SCI	ledule FIN to FOIII D-400.
	Income		COLUMN A Total Income from all sources	COLUMN B Amount of Column A subject to N.C. tax
1.	Wages, Salaries, Tips, Etc.	1.	91153	37653
2.	Taxable Interest	2.	14	0
3.	Taxable Dividends	3.	0	0
4.	Taxable Refunds, Credits, or Offsets			
	of State and Local Income Taxes	4.	0	0
5.	Alimony Received	5.	0	0
6.	Business Income or (Loss)	6.	0	0
7.	Capital Gain or (Loss)	7.	3689	0
8.	Other Gains or (Losses)	8.	0	0
9.	Taxable Amount of IRA Distributions	9.	0	0
10.	Taxable Amount of Pensions			
	and Annuities	10.	0	0
11.	Rental Real Estate, Royalties, Partnerships,			
	S-Corps, Estates, Trusts, Etc.	11.	-9190	0
12.	Farm Income or (Loss)	12.	0	0
13.	Unemployment Compensation	13.	0	0
14.	Taxable Portion of Social Security			2
4=	and Railroad Retirement Benefits	14.	0	0
15.	Other Income	15.	0	0
16.	Total Income	16.	85666	37653
North Carolina Adjustments			COLUMN A er the amount from n D-400 Schedule S	COLUMN B Amount of Column A subject to N.C. tax
17.	Additions		•	^
	a. Interest Income From Obligations of States Other Than N.C.	17a.	0	0
	b. Deferred Gains Reinvested Into an Opportunity Fund	17b.	0	0
	c. Bonus Depreciation	17c.	0	0
	d. IRC Section 179 Expense  Other Additions to Federal Adjusted Gross Income That Polate to Gross	17d.	0	0
		Income 1/A	l I	U

18.

Last Name (First 10 Characters) GUNDLAPALL Your Social Security Number 886912405

		C	OLUMN A	COLUMN B	
		Enter t	he amount from	Amount of Column A	
		Form D	-400 Schedule S	subject to N.C. tax	
19.	Deductions				
	a. State or Local Income Tax Refund	19a.	0	0	
	b. Interest Income From Obligations of the United States				
	or United States' Possessions	19b.	0	0	
	c. Taxable Portion of Social Security and				
	Railroad Retirement Benefits	19c.	0	0	
	d. Retirement Benefits Received by <b>Vested</b> N.C. State Government, N.C.	19d.	0	0	
	Local Government, or Federal Government Retirees, i.e. Bailey Settlement				
	e. Bonus Asset Basis	19e.	0	0	
	f. Bonus Depreciation	19f.	0	0	
	g. IRC Section 179 Expense	19g.	0	0	
	h. Other Deductions From Federal Adjusted Gross				
	Income That Relate to Gross Income	19h.	0	0	
20.	Total Deductions	20.	0	0	
21.	Total Income Modified by N.C. Adjustments	21.	85666	37653	
art (	C. Part-Year Residents and Nonresidents Taxable Percentage				
22.	Enter the Amount From Column B, Line 21		22	37653	
23.	Enter the Amount From Column A, Line 21		23		
23. 24.	Part-Year Residents and Nonresident Taxable Percentage		23		

REV 01/26/23 PRO