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.

Submission Identification Number (SID)

Taxpay	ver's name	Social security numb	er
SAI	DEEPTHI PRIYA YALLA	786-52-7512	2
Spouse	e's name	Spouse's social secu	rity number
Par	t I Tax Return Information – Tax Year Ending December 31, 2022 (Enter	' year you are aut	horizing.)
Enter	whole dollars only on lines 1 through 5.		
Note:	Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.		
1	Adjusted gross income	1	81,900.
2	Total tax	2	10,792.
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099	3	15,385.
4	Amount you want refunded to you	4	4,593.
5	Amount you owe	5	

Taxpayer Declaration and Signature Authorization (Be sure you get and keep a copy of your return) Part II

Under penalties of perjury, I declare that I have examined a copy of the income tax return (original or amended) I am now authorizing, and to the best of my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above are the amounts from the income tax return (original or amended) I am now authorizing. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution to debit the entry to this account. This authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate the authorization. To revoke (cancel) a payment, I must contact the U.S. Treasury Financial Agent at **1-888-353-4537**. Payment cancellation requests must be received no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I further acknowledge that the personal identification number (PIN) below is my signature for the income tax return (original or amended) I am now authorizing and, if applicable, my Electronic Funds Withdrawal Consent.

Taxpayer's PIN: check one box only

Х	I authorize	GLOBAL	TAXES	LLC	to enter or generate my PIN	
				ERO firm name		

Enter five digits, but don't enter all zeros												
2	7	5	1	2								

my

as my

signature on the income tax return (original or amended) I am now authorizing.

I will enter my PIN as my signature on the income tax return (original or amended) I am now authorizing. Check this box only if you are entering your own PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Your signature

Date 🕨

Spouse's PIN: check one box only

I authorize

Enter five digits, but don't enter all zeros

signature on the income tax return (original or amended) I am now authorizing.

ERO firm name

I will enter my PIN as my signature on the income tax return (original or amended) I am now authorizing. Check this box only if you are entering your own PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Spouse's signature ► C	ate 🕨							
Practitioner PIN Method Returns Only—continue	bel	ow						
Part III 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	2		 6 all zer	 9	8 9	9

I certify that the above numeric entry is my PIN, which is my signature for the electronic individual income tax return (original or amended) I am now authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am submitting this return in accordance with the requirements of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers of Individual Income Tax Returns.

ERO's signature >			
	Retain This Form — Se Form to the IRS Unless		
For Paparwork Poduction Act Nation and your tax ratu	rn instructions	BEV 01/29/22 BBO	Earm 8879 (Pay 01 2021)

For Paperwork Reduction Act Notice, see your tax return instructions. BAA REV 01/28/23 PRO

1040		artment of the Treasury—Internal Revenue Servi S. Individual Income Tax		rn 20 2	2	OMB No. 1545	-0074	IRS Use Onl	y—Do not v	vrite or staple in this space.
Filing Status Check only one box.		Single D Married filing jointly D warried filing jointly D warried the MFS box, enter the na	_	d filing separately (N		_			spo	lifying surviving use (QSS) s name if the qualifying
one box.	-	on is a child but not your dependent	-	our spouse. It you c	HECK		000	box, enter ti		s name ir the qualitying
Your first name	and mi	ddle initial	Last nam	ie					Your so	cial security number
SAI DEEP	THI	PRIYA	YALLA	Ą					786-	52-7512
lf joint return, sp	oouse's	first name and middle initial	Last nam	le					Spouse	's social security numbe
Home address	numbe	r and street). If you have a P.O. box, see	instructior	ns.			A	Apt. no.	Preside	ential Election Campaigr
6020 KIN	GS (CROSS LN					3	8611		here if you, or your
City, town, or po	ost offic	ce. If you have a foreign address, also co	mplete spa	aces below.	Sta	ite	ZIP c	ode		if filing jointly, want \$3 this fund. Checking a
CHARLOTT	Е				NC	C	282	13		low will not change
Foreign country	name		Fo	preign province/state/	coun	ty	Foreig	ın postal code	your ta:	x or refund.
Digital Assets		ny time during 2022, did you: (a) rece ange, gift, or otherwise dispose of a							. ,	Yes X No
Standard		eone can claim: You as a de	-			-		. (000		
Deduction	_	Spouse itemizes on a separate return		•		•				
Age/Blindness	You:	Were born before January 2, 1	958	Are blind Spo	ouse	: 🗌 Was bor		ore January		Is blind
Dependents	s (see i	instructions):		(2) Social security	<i>,</i>	(3) Relationsh	ip (4) Check the b	ox if quali	ifies for (see instructions):
If more	(1) Fi	rst name Last name		number		to you		Child tax o	credit	Credit for other dependents
than four dependents,										
see instructions	;									
and check										
here	4			·					4-	
Income	1a ⊾	Total amount from Form(s) W-2, be		,					. 1a . 1b	
Attach Form(s)	b c	Household employee wages not re Tip income not reported on line 1a					• •		. 10	
W-2 here. Also	d	Medicaid waiver payments not rep					• •		. 10	
attach Forms W-2G and	e	Taxable dependent care benefits f					• •		. 1e	
1099-R if tax	f	Employer-provided adoption bene					• •		. 1f	
was withheld.	g	Wages from Form 8919, line 6 .					• •		. 1g	
If you did not get a Form	9 h	Other earned income (see instructi					• •		. 1h	
W-2, see	i	Nontaxable combat pay election (s		ictions)		1 i				
instructions.	z	Add lines 1a through 1h							. 1z	91,519.
Attach Sch. B	2a		2a		bТ	axable interest			. 2b	
if required.	3a		3a			Ordinary divider			. 3b)
	4a		4a			axable amount			. 4b)
Standard	5a	Pensions and annuities	5a		bТ	axable amount	t		. 5b)
Deduction for –	6a	Social security benefits	6a		bТ	axable amount	t		. 6b)
 Single or Married filing 	с	If you elect to use the lump-sum el	lection m	ethod, check here	(see	instructions)				
separately, \$12,950	7	Capital gain or (loss). Attach Schee							7	
Married filing									. 8	-9,619.
jointly or Qualifying	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7,	and 8. T	his is your total in d	com	e			. 9	81,900.
surviving spouse, \$25,900	10	Adjustments to income from Sche	dule 1, lin	ne 26					. 10)
Head of	11	Subtract line 10 from line 9. This is	your adj	justed gross incor	ne				. 11	81,900.
household, \$19,400	12	Standard deduction or itemized		-					. 12	
If you checked	13	Qualified business income deducti	on from F	Form 8995 or Form	899	5-A			. 13	
any box under Standard	14	Add lines 12 and 13							. 14	12,950.
Deduction, see instructions.	15	Subtract line 14 from line 11. If zer	o or less,	, enter -0 This is y	our	taxable incom	е.		. 15	
)										

For Disclosure, Privacy Act, and Paperwork Reduction Act Notice, see separate instructions.

Form **1040** (2022)

Form 1040 (2022	2)							Page 2
Tax and	16	Tax (see instructions). Check if any from	n Form(s): 1 🗌 88	14 2 4972	3		16	10,792.
Credits	17	Amount from Schedule 2, line 3 .					17	
	18	Add lines 16 and 17					18	10,792.
	19	Child tax credit or credit for other dep	endents from Scheo	dule 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 of	less, enter -0				22	10,792.
	23	Other taxes, including self-employmer	nt tax, from Schedu	e 2, line 21 .			23	0.
	24	Add lines 22 and 23. This is your total	tax				24	10,792.
Payments	25	Federal income tax withheld from:						
	а	Form(s) W-2			25a 15	,385.		
	b	Form(s) 1099			25b			
	с	Other forms (see instructions)			25c			
	d	Add lines 25a through 25c					25d	15,385.
Here have a	26	2022 estimated tax payments and am	ount applied from 2	021 return			26	
If you have a qualifying child,	27	Earned income credit (EIC)			27			
attach Sch. EIC.	28	Additional child tax credit from Schedul			28		1	
	29	American opportunity credit from Forr	n 8863, line 8		29			
	30	Reserved for future use			30			
	31	Amount from Schedule 3, line 15 .			31		1	
	32	Add lines 27, 28, 29, and 31. These ar					32	
	33	Add lines 25d, 26, and 32. These are					33	15,385.
Defined	34	If line 33 is more than line 24, subtract					34	4,593.
Refund	35a	Amount of line 34 you want refunded				. 🗆	35a	4,593.
Direct deposit?	b	Routing number 0 5 3 0 0				Savings		
See instructions.	d	Account number 2 3 7 0 4				<u> </u>		
	36	Amount of line 34 you want applied to			36			
Amount	37	Subtract line 33 from line 24. This is the	-		-11			
You Owe	0.	For details on how to pay, go to www.					37	
	38	Estimated tax penalty (see instruction			38			
Third Party	Do	you want to allow another person t						
Designee						omplete b	elow.	X No
Ū	De	signee's	Phone	e		onal identif	cation	
	nai	ne	no.		numb	ber (PIN)		
Sign		der penalties of perjury, I declare that I have						
Here		ief, they are true, correct, and complete. Decla			ased on all informatic		• •	, ,
	Yo	ur signature	Date	Your occupation				nt you an Identity IN, enter it here
Joint return?				SOFTWARE	DEVELOPER	(see i		
See instructions.	Sp	ouse's signature. If a joint return, both must	sign. Date	Spouse's occupat		If the	IRS ser	nt your spouse an
Keep a copy for	- 1-					Ident	ity Prote	ection PIN, enter it here
your records.						(see i	nst.)	
	Ph	one no. (312) 539-2611	Email address	SAIDEEPTHI	4U@GMAIL.CO			
Paid	Pre	eparer's name Preparer's	signature		Date	PTIN		Check if:
Preparer	SYAM	I PRIYA RAM SAGAR GUPTA TALLAM SYAM PI	RIYA RAM SAGAR	GUPTA TALLAM	02/08/2023	P02082	2703	Self-employed
Use Only	Fir	m's name GLOBAL TAXES LL	С			Phon	e no. ((678) 965-9522
	Fir	m's address 245 ROONEY CT E	BRUNSWICK N	IJ 08816		Firm'	s EIN	84-3171965
Go to www.irs.go	ov/Forn	n1040 for instructions and the latest information	on.	BAA	REV 01/28/23 PRO			Form 1040 (2022

BAA

SCHEDULE	1
(Form 1040)	

Department of the Treasury

Additional Income and Adjustments to Income

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 2022

Attachment Sequence No. **01**

Internal Revenue Service Name(s) shown on Form 1040, 1040-SR, or 1040-NR Your social security number 786-52-7512 SAI DEEPTHI PRIYA YALLA

Par	t I Additional Income			
1	Taxable refunds, credits, or offsets of state and local income taxes		1	
2a	Alimony received		2 a	
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		5	-9,619.
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	-	
-	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	-	
	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	Scholarship and fellowship grants not reported on Form W-2	8q 8r	-	
r	Nontaxable amount of Medicaid waiver payments included on Form	or	-	
S	1040, line 1a or 1d	8s (
t	Pension or annuity from a nonqualifed deferred compensation plan or	05 (
Ľ	a nongovernmental section 457 plan	8t		
u	Wages earned while incarcerated	8u		
z	Other income. List type and amount:	<u>ou</u>		
~		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		10	-9,619.
	nerwark Deduction Act Nation, and vour toy return instructions		-	J 4 (F 40.40) 0000

For Paperwork Reduction Act Notice, see your tax return instructions.

Schedule 1 (Form 1040) 2022

Par	t II Adjustments to Income			
11	Educator expenses		11	
12	Certain business expenses of reservists, performing artists, and fee-b	basis government	: 🗌	
	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		4a		
b	Deductible expenses related to income reported on line 8I from the			
		4b		
С	Nontaxable amount of the value of Olympic and Paralympic medals			
		4c		
d		4d		
е	Repayment of supplemental unemployment benefits under the Trade			
		4e	_	
f		24f	_	
g		4g	_	
h	Attorney fees and court costs for actions involving certain unlawful			
_		4h	_	
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			
		24i	_	
J	•	24j	_	
K	Excess deductions of section 67(e) expenses from Schedule K-1 (Form			
_		24k	_	
Z	Other adjustments. List type and amount:			
0E		4z	05	
25	Total other adjustments. Add lines 24a through 24z		25	
26	Add lines 11 through 23 and 25. These are your adjustments to income . I			
			26	
	BAA	REV 01/28/23 PRO	Schedu	le 1 (Form 1040) 2022

	DULE E					Supplement	al Inc	come a	nd Lo	SS			OMB No	э. 1545 [.]	-0074
(Form	1040)	(Fron	n rent	al re	al estate,	royalties, partner	ships,	S corpora	tions, e	states	, trusts, REMI	Cs, etc.)	20)2 (2
	ent of the Treasury			. .		tach to Form 104					e		Attachment Sequence No. 13		
	Revenue Service			Goto	o www.irs	.gov/ScheduleE f	or insti	ructions a	nd the la	atest i	nformation.				
. ,	shown on return	T 3273 3	7 N T T	7									al security		r
	DEEPTHI PR				Dontol	Deal Estate a	nd Da	walting				/86-5	2-7512		
Part	Note: If yo	ou are ir	n the b	ousin	ness of rent	Real Estate a ting personal prop on page 2, line 40	erty, us		le C. See	e instri	uctions. If you	are an indi	vidual, rep	ort far	m
Α						would require yo		e Form(s)	1099?	See in	structions .		. 🗌 Ye	s X	No
						orm(s) 1099?									No
1a						eet, city, state, Z									
Α	-			•		EAVEN APARTME		,	TH FIIN	CTTO	A HAT.T. KHAN	MMAM TET	ANGANA	TN 5	07002
B		1, 0			10100 111			• 1010171	111 1 010	01101				110 0	01002
1b	Type of Prope	rtv	2 F	or ea	ach renta	l real estate prop	pertv lis	sted		E	air Rental	Persor	nal Use		
	(from list below		a	bove	e, report t	he number of fai	r renta	l and			Days	Da	iys	ų	δJΛ
Α	3					ays. Check the (Α		365		0]	
В						requirements to renture. See instr			В					[
C			4						С					[
	of Property:			_						_					
	Single Family R					n/Short-Term Re	ental	5 Lan			Self-Rental				
2	Multi-Family Re	sidenc	e	4	Comme	rcial		6 Roy	alties	8	Other (desc	ribe)			
											Propert	ies:			
Incom	ne:								Α		В			С	
3									Г С	550.					
4		ived.		•			. 4								
Expen															
5	-														
6										250.					
7	•								5	390.					
8 9															
10															
11	0	•							1.2	250.					
12	-					see instructions)	12		- / -						
13		•					. 13								
14									3,0)50.					
15									2,8	364.					
16	Taxes						. 16								
17								-	1,8	365.					
18	•	xpens	e or c	deple	etion										
19	Other (list)							-							
20	•				0				10,1	169.					
21	result is a (los	s), see	instr	uctic	ons to find	or 4 (royalties). I d out if you mus	t		-9,6	519.					
22	Deductible ren	ntal rea	l esta	ate lo	oss after	limitation, if any	,	(9,6	19.)()	()
23a		•			-	for all rental prop		1		23a		550.			,
b						for all royalty pro				23b					
с	Total of all am	ounts r	repor	ted o	on line 12	for all properties	s.			23c					
d									23d						
е			•			for all properties				23e	10),169.			
24		•				on line 21. Do n		•				. 24	1		1.0.
25	Losses. Add r	oyaity I	osses	s tror	m line 21 a	and rental real est	ate los	ses trom l	ine 22. I	Enter 1	otal losses he	ere 25	1	9,6	519.)

26	Total rental real estate and royalty income or (loss). Com	bine lines 24 and 25.	Enter the result
	here. If Parts II, III, IV, and line 40 on page 2 do not apply		
	Schedule 1 (Form 1040), line 5. Otherwise, include this amour	nt in the total on line	11 on page 2 .
For Pa	perwork Reduction Act Notice, see the separate instructions.	NPA	-9,619.

Supplemental Income and Loss

OMB No. 1545-0074

-			
Name(s)	shown	on	retu

D-40		(50) Pages		8-22	2022						Tax Return	DOR Use		
		nd W-2				NOILI			nded R			Only		
					ear beginnir	ng		22 a	and end	ding		Are you a		Yes 🗌 No 🗵
		PTHI NGS (ALLA			3611		/our S	N: 786527512		ouse a veteran?	Yes No
				S LN <u>3 MECKI</u>	L			2011		se's SS				atic extension to file you irn, e.g., Form 1040?
Filing		37	1. Sing			2. Mari	ied Filing	Jointly			ed Filing Separately]		lo X
				ad of Hous		5. Qua	lifying Wi						use died:	
	•				entire year? e entire yea	~ ?	Yes Xes	No No	HI		eturn for deceased eturn for deceased		Date of dea Date of dea	
									cation					nating some or all of
your	overpa	ayment	to the I	Fund. To	make a con	tribution	enclose	e Form N	IC-EDU	J and y	our payment of \$	0.	To designate	e your overpayment
											ions for information			-1
		-								-	on April 15, 2023, a inted Personal Rep			nt.
FS	1	PP	Y		DI	'N	OC	Ν	TPR	ES	Y SPRES	5 N	VT N	SVT
YALI		6020)	2821	3 DS	N	EA	Ν	TD			SD		FDEXT
	-	002	5	2021	0 20				10			02		
SAI	DEE	IPTH:	ΙP		YALI	A					786527512		MECKL	
												NC	28213	
												NO	20210	
6020) KI	NGS	CRO	DSS L	N				3	611	CHARLOTI	Έ		
06			819	200		16				0	26C		0	
00			013	900		ΤŪ				0	200		0	
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09				0		20A			40	68	EU			
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10A				0		20E	5			0	27		0	
10B				0		21A				0	29		0	
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13			000	000		210)			0	32		0	
14			691	L50		26A				0	34		617	
15			34	151		26E	5			0				
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					<u> </u>			C1 0	, –					
		turn B			Refund E eturn and accom rue, correct, and		chedules a	617 nd stateme			Check here if you	authorize the	0 North Carolina D	Department of Revenue
the best	of my kr	nowledge a	and belie	f, they are t	rue, correct, and	complete.				L	to discuss this retu	Irn and attach	ments with the p	aid preparer below.
Vour Oil	noture					Dat-			ature //	filing	roturn both must size '	Data	<u>31253</u>	
Your Sig		R USE ON	NLY If	prepared by	a person other	Date than taxpa				•••	t return, both must sign.) rmation of which the prep	Date arer has any kr		ne No. (<i>Include area code</i>
		IYA R Signature		SAGAR	GUPT ()2 08 Date		67896			er (Include area code)			82703 EIN, SSN, or PTIN

If REFUND, mail return to: N.C. DEPT. OF REVENUE, P.O. BOX R, RALEIGH, NC 27634-0001 If you ARE NOT due a refund, mail return, any payment, and D-400V to: N.C. DEPT. OF REVENUE, P.O. BOX 25000, RALEIGH, NC 27640-0640

D-400 2022 Page 2 (50)

Last Name (First 10 (Characters) YA	LLA

786527512

e	Enders Adjusted Creas Income	^	01000
6. 7	Federal Adjusted Gross Income	6.	81900
7.	Additions to Federal Adjusted Gross Income	7.	01.000
8.	Add Lines 6 and 7	8.	81900
9.	Deductions From Federal Adjusted Gross Income	9.	С
10.	Child Deduction	10-	<i>.</i>
	a. Enter the number of qualifying children for whom you were allowed a federal child tax credit	10a.	C
	b. Enter the amount of the child deduction	10b.	C
11.	N.C. Standard Deduction	11.	Y
11.	N.C. Itemized Deduction	11.	N
11.	Deduction amount	11.	12750
12.	a. Add Lines 9, 10b, and 11	12a.	12750
	b. Subtract Line 12a from Line 8	12b.	69150
13.	Part-year Residents and Nonresidents Taxable Percentage	13.	0.0000
14.	N.C. Taxable Income	14.	69150
15.	N.C. Income Tax	15.	3451
16.	Tax Credits	16.	0
17.	Subtract Line 16 from Line 15	17.	3451
18.	Consumer Use Tax	18.	0
	You certify that no Consumer Use Tax is due		Y
19.	Add Lines 17 and 18	19.	3451
20a.	Your tax withheld	20a.	4068
20b.	Spouse's tax withheld	20b.	C
20b.		20b.	C
20b.	Spouse's tax withheld	20b. 21a.	
20b. <u>Other</u>	Spouse's tax withheld Tax Payments		C
20b. <u>Other</u> 21a.	Spouse's tax withheld Tax Payments 2022 estimated tax	21a.	C
20b. <u>Other</u> 21a. 21b.	Spouse's tax withheld Tax Payments 2022 estimated tax Paid with extension	21a. 21b.	0 0 0
20b. <u>Other</u> 21a. 21b. 21c.	Spouse's tax withheld Tax Payments 2022 estimated tax Paid with extension Partnership	21a. 21b. 21c.	0 0 0 0
20b. <u>Other</u> 21a. 21b. 21c. 21d.	Spouse's tax withheld Tax Payments 2022 estimated tax Paid with extension Partnership S Corporation	21a. 21b. 21c. 21d.	
20b. <u>Other</u> 21a. 21b. 21c. 21d. 22.	Spouse's tax withheld Tax Payments 2022 estimated tax Paid with extension Partnership S Corporation Additional Payments	21a. 21b. 21c. 21d. 22.	0 0 0 0 0 0 4068
20b. <u>Other</u> 21a. 21b. 21c. 21d. 22. 23.	Spouse's tax withheld Tax Payments 2022 estimated tax Paid with extension Partnership S Corporation Additional Payments Add Lines 20a through 22	21a. 21b. 21c. 21d. 22. 23.	0 0 0 0 0 0 4068 0
20b. <u>Other</u> 21a. 21b. 21c. 21d. 22. 23. 24.	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. 25.	0 0 0 0 4068 0 4068
20b. Other 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	21a. 21b. 21c. 21d. 22. 23. 24.	0 0 0 0 4068 0 4068 0
20b. Other 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. 26b.	0 0 0 0 4068 0 4068 0 4068 0 0
20b. Other 21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c.	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.	0 0 0 0 4068 0 4068 0 0 0 0 0 0 0 0
20b. Other 21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. 26d.	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	21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. 26d.	C C C C C C C C C C C C C C C C C C C
20b. 21a. 21b. 21c. 21d. 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 Exception to Underpayment of Estimated Tax	21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. 26d. EU	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
20b. Other 21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. 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 26e.	0 0 0 0 4068 0 4068 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
20b. Other 21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. 26d. EU 26e. 27.	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.	0 0 0 0 0 0 4068 0 4068 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
20b. Other 21a. 21b. 21c. 21d. 22. 23. 24. 25. 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 Overpayment	21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. 26d. EU 26e.	0 0 0 0 4068 0 4068 0 0 0 0 0 0 0 0 0 0 0 0
20b. Other 21a. 21b. 21c. 21d. 22. 23. 24. 25. 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.	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
20b. Other 21a. 21b. 21c. 21d. 22. 23. 24. 25. 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 Overpayment nt 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.	0 0 0 0 0 0 4068 0 4068 0 0 0 0 0 0 0 0 0 0 0
20b. Other 21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. 26d. EU 26e. 27. 28. Amou	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 nt 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.	0 0 0 0 0 4068 0 4068 0 0 0 0 0 0 0 0 0 0 0 0 0
20b. Other 21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. 26d. EU 26e. 27. 28. Amou	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 nt 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.	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
20b. Other 21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. 26d. EU 26e. 27. 28. Amou 29. 30.	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 nt 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. 29. 30.	

D-400 Line-by-Line Information

This page must be filed with the first page of this form.

Amount to be Refunded

34.

617

34.

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