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 securit	v numbor
AKHILA KANCHUKATLA Spouse's name	057-83- Spouse's soci	al security number
Down I Toy Detuy Information Toy Very Ending December 21	-tow.voor.vov.	ro outhorising \
, ,	nter year you a	re 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.		
1 Adjusted gross income		1 94,498.
2 Total tax		2 13,553.
3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3 13,256.
4 Amount you want refunded to you		4
5 Amount you owe		5 297.
Part II Taxpayer Declaration and Signature Authorization (Be sure you get an	nd keep a copy	
Under penalties of perjury, I declare that I have examined a copy of the income tax return (original or amen my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I a return (original or amended) I am now authorizing. I consent to allow my intermediate service provider, tra to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for 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 instituation 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.	above are the amount of the transmitter, or electron of the transmitter. Treasury are indicated in the tall ituition to debit the inate the authorizar requests must be the processing of the payment. I furtile	nunts from the income tax unic return originator (ERO) ansmission, (b) the reason and its designated Financial ex preparation software for entry to this account. This tion. To revoke (cancel) a received no later than 2 the electronic payment of the racknowledge that the
Taxpayer's PIN: check one box only		
	ate my PIN	5 1 2 4 as my
ERO firm name signature on the income tax return (original or amended) I am now authorizing.	ř Ent	er five digits, but i'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 and your return is filed using the Practitioner PIN m below.		
Your signature ► Date I	-	
Spouse's PIN: check one box only		
• _	oto my DIN	
I authorize to enter or gener		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 and your return is filed using the Practitioner PIN m below.		
Spouse's signature ▶ Date I	•	
Practitioner PIN Method Returns Only—continue be	low	
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	1-1-1-1-	6 6 1 9 8 9 er all zeros
I certify that the above numeric entry is my PIN, which is my signature for the electronic individual incon 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 Pub. 1345 , Handbook for Authorized IRS <i>e-file</i> Providers	ubmitting this retu	rn in accordance with the
ERO's signature ▶ Date I	-	
ERO Must Retain This Form — See Instructions	s To Do So	

Form 1040-V (2022) 2022 Page **2**

IF you live in	THEN use this address to send in your payment
Alabama, Florida, Georgia, Louisiana, Mississippi, North Carolina, South Carolina, Tennessee, Texas	Internal Revenue Service P.O. Box 1214 Charlotte, NC 28201-1214
Arkansas, Connecticut, Delaware, District of Columbia, Illinois, Indiana, Iowa, Kentucky, Maine, Maryland, Massachusetts, Minnesota, Missouri, New Hampshire, New Jersey, New York, Oklahoma, Rhode Island, Vermont, Virginia, West Virginia, Wisconsin	Internal Revenue Service P.O. Box 931000 Louisville, KY 40293-1000
Alaska, Arizona, California, Colorado, Hawaii, Idaho, Kansas, Michigan, Montana, Nebraska, Nevada, New Mexico, North Dakota, Ohio, Oregon, Pennsylvania, South Dakota, Utah, Washington, Wyoming	Internal Revenue Service P.O. Box 802501 Cincinnati, OH 45280-2501
A foreign country, American Samoa, or Puerto Rico (or are excluding income under Internal Revenue Code section 933), or use an APO or FPO address, or file Form 2555 or 4563, or are a dual-status alien or nonpermanent resident of Guam or the U.S. Virgin Islands	Internal Revenue Service P.O. Box 1303 Charlotte, NC 28201-1303

MAIL FORM 1040-V TO THE INTERNAL REVENUE SERVICE CENTER AT THE ADDRESS LISTED BELOW.

Form **1040-V 2022**

▼ Detach Here and Mail With Your Payment and Return ▼

Department of the Treasury Internal Revenue Service

2022

Form 1040-V Payment Voucher

- ▶ Use this voucher when making a payment with Form 1040.
- ► Do not staple this voucher or your payment to Form 1040.
- ► Make your check or money order payable to the 'United States Treasury.'
- ► Write your social security number (SSN) on your check or money order.

AKHILA KANCHUKATLA

1125 PREWITT RANCH DRIVE
HOLLY SPRINGS NC 27540

INTERNAL REVENUE SERVICE P.O. BOX 1214
CHARLOTTE, NC 28201-1214

E 1040 Department of the Treasury—Internal Revenue Service U.S. Individual Income Tax Return



OMB No. 1545-007

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

Filing Status	s 🔀 🤅	Single $\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \$	Marrie	ed filing separately	(MFS)	Head of	househol	(HOH) b			ifying surv	riving
Check only one box.	If vo	ou checked the MFS box, enter the r	name of v	our apougo. If you	obook	ad tha UOU a	r OSS box	, ontor	the of		ise (QSS)	o auglifyina
one box.		son is a child but not your depender		our spouse. If you	CHECK	eu ille non o	1 433 00.	K, enter	tile Ci	iliu 5	name ii u	e qualifyirig
Your first name		· · ·	Last na	me					Yo	ur so	cial securit	v numher
AKHILA	and m	iddle ilitidi									3-512	-
	nouse,	s first name and middle initial	Last na	HUKATLA								± curity number
ii joint letain, s	pouse	s ili st riai ne ana miadie iliitiai	Lastria	ine					Op	ouse .	3 300iai 300	dirty indiriber
Home address	(numbe	er and street). If you have a P.O. box, se	_l e instructio	ons.			Apt.	no.	Pre	esider	ntial Flection	on Campaign
	,	I RANCH DRIVE					1		1		ere if you,	. •
		ce. If you have a foreign address, also c	omplete s	paces below.	Sta	te	ZIP code		sp	ouse	if filing join	tly, want \$3
HOLLY SI				,	NC		27540				this fund. ow will not	Checking a
Foreign countr			l F	Foreign province/state		-	Foreign p		_		or refund.	Change
3 3	,			3 p		,					You	Spouse
Digital	At ar	ny time during 2022, did you: (a) red	ceive (as	a reward, award, c	or navr	ment for prope	ertv or ser	vices):	or (b)	sell.		
Assets		ange, gift, or otherwise dispose of					-				Yes	⊠ No
Standard		eone can claim: You as a de					, ,					
Deduction	_	Spouse itemizes on a separate retu	•									
A /Dil	- V		1050 5	7 A Is live at		. 🗆 🗠			. 0. 10	250		
Age/Blindnes	-	-	1958		pouse		rn before				ls bl	instructions):
Dependent				(2) Social securi	ity	(3) Relationsh to you	iib I.,				•	ner dependents
If more than four	(1) F	irst name Last name		Hamber		to you		Child tax	creaii		Credit for oth	ier dependents
dependents,									<u>]</u>]		L	
see instruction	s								<u> </u> 	-	L	
and check here	1 —								<u> </u> 	\rightarrow	L	
	10	Total amount from Form(a) W. 2.	20 1 (20	o instructions)					J	1a		<u> </u>
Income	1a	Total amount from Form(s) W-2, I	,	,								94,498.
Attach Form(s)	b	Household employee wages not in							•	1b		
W-2 here. Also	c	Tip income not reported on line 1 Medicaid waiver payments not re	•	,					•	1c 1d		
attach Forms W-2G and	d				: 1115111	ictions)				_	+	
1099-R if tax	e f	Taxable dependent care benefits Employer-provided adoption ben								1e 1f	+	
was withheld.		Wages from Form 8919, line 6.			.9 .							
If you did not get a Form	g h	Other earned income (see instruc								1g 1h		0.
W-2, see		Nontaxable combat pay election	,						•			<u></u>
instructions.	z	Add lines 1a through 1h	(200 111211	uctions)		!!	•			1z		94,498.
Attach Sch. B	<u>2</u>	Tax-exempt interest	2a	<u>.</u>	 b Т	axable interes	+		•	2b		71,170.
if required.	3a	Qualified dividends	3a			ordinary divide				3b	1	
	4a	IRA distributions	4a			axable amoun				4b		
Standard	5a	Pensions and annuities	5a			axable amoun				5b		
Deduction for—	6a	Social security benefits	6a			axable amoun			•	6b		
Single or Married filing	C	If you elect to use the lump-sum		method check her					$\dot{\Box}$			
separately,	7	Capital gain or (loss). Attach Sche							П	7	1	
\$12,950 Married filing	8	Other income from Schedule 1, li							_	8		
jointly or Qualifying	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7								9		94,498.
surviving spouse,	10	Adjustments to income from Scho		•						10		-, -, -, -,
\$25,900 Head of	11	Subtract line 10 from line 9. This								11		94,498.
household,	12	Standard deduction or itemized	-	-						12		2,950.
\$19,400 If you checked	13	Qualified business income deduc				5-A				13		,
any box under Standard	14	Add lines 12 and 13								14		2,950.
Deduction,	15	Subtract line 14 from line 11. If ze								15		31,548.
see instructions.	l											

orm 1040 (2022)			Page 2
ax and	16	Tax (see instructions). Check if any from Form(s): 1 8814 2 4972 3	16	13,553.
redits	17	Amount from Schedule 2, line 3	17	
	18	Add lines 16 and 17	18	13,553.
	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	13,553.
	23	Other taxes, including self-employment tax, from Schedule 2, line 21	23	0.
	24	Add lines 22 and 23. This is your total tax	24	13,553.
ayments	25	Federal income tax withheld from:		
-	а	Form(s) W-2		
	b	Form(s) 1099		
	С	Other forms (see instructions)		
	d	Add lines 25a through 25c	25d	13,256.
you have a	26	2022 estimated tax payments and amount applied from 2021 return	26	
ualifying child,	27	Earned income credit (EIC)		
tach Sch. EIC.	22 Subtract line 21 from line 18. If zero or less, enter -0			
	29	American opportunity credit from Form 8863, line 8		
	30	Reserved for future use		
	31	Amount from Schedule 3, line 15		
	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	13,256.
efund	34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid	34	
iorana	35a	Amount of line 34 you want refunded to you . If Form 8888 is attached, check here	35a	
irect deposit?	b	Routing number X X X X X X X X X X X X X X X X X X X		
ee instructions.	d	Account number X X X X X X X X X		
	36	Amount of line 34 you want applied to your 2023 estimated tax		
mount ou Owe	37	Subtract line 33 from line 24. This is the amount you owe . For details on how to pay, go to <i>www.irs.gov/Payments</i> or see instructions	37	297.
	38	Estimated tax penalty (see instructions)		
hird Party esignee		you want to allow another person to discuss this return with the IRS? See tructions	elow.	X No
•		signee's Phone Personal identif ne no. number (PIN)	ication	

	name			no.		num	iber (PIN)			\perp
Sign		s of perjury, I declare true, correct, and com								
Here	Your signature			Date	Your occupation		If the IRS se Protection F			
Joint return?					JAVA DEVEL	OPER	(see inst.)			\top
See instructions. Keep a copy for your records.	Spouse's signa	ature. If a joint return, I	both must sign.	Date	Spouse's occupation	on	If the IRS se Identity Prot			
your records.							(see inst.)		$\perp \perp \perp$	
	Phone no.	(816) 679-058	8	Email address	AKHILAK339	6@GMAIL.CO	MC			
Date	Preparer's nam	ne	Preparer's signat	ture		Date	PTIN	Check i	f:	
Paid	SYAM PRIYA RAM	SAGAR GUPTA TALLAM	SYAM PRIYA	RAM SAGAR GUPTA TALLA		02/25/2023	P02082703	Sel	f-employ	yed
Preparer	Firm's name	GLOBAL TA	XES LLC				Phone no.	(678)9	65-95	522
Use Only	F: 1 11	OVE DOOME	יומת יו וווי ע	INICIATOR NI	T 00016	·	F: 1 FIN	0.4	21710) C F

245 ROONEY CT E BRUNSWICK NJ 08816

Firm's address

Firm's EIN

	ole Al	(50) I Pages nd W-2:	of Yo	our	2022			<u>l</u> ina D		Tax Retuin		DOR Use Only				
				or fiscal year	beginning	1			and ending		Are	e you a ve	eteran?	Υe	es 🔲	No X
AKH					CHUKAT	LA				ov. 0570051			se a veterar			No 📙
		REWITT SNC 2		NCH DRI WAKE	VE				Your S Spouse's S	SN: 05783512 SN:	- 1		anted an aut income tax			
	Statu	ıs X	1. Sin	gle			ed Filing	-		ied Filing Separatel			Yes	No X		
10/200				ad of Househo			fying Wic			Return for deceas		ear spou		d 11		
	•			C. for the ent ent for the e	•		Yes L	No No	\neg	Return for deceas		•	Date of O			
					-					vment Fund by m	_					I
1 '		•								your payment of ctions for informat		0. out the Fi		nate your	overpa	yment
	Select	box if yo	u, or i	f married filir	ng jointly, y	our spo	use wei	re out o	of the country	on April 15, 2023	, and a	U.S. citi		ident.		
	Select	box if ret	urn is	filed and sig	ned by Ex	<u>kecutor,</u>	Adminis	strator, o	or Court-Appo	ointed Personal R	<u>leprese</u>	ntative.				
FS	1	PP	Y		DT	N	OC	N	TPRES	Y SPR	ES	N	VT	N	SVT	N
KANC		1125)	27540	DS	N	ΕA	N	TD		SD)			FDEX	T N
AKH]	ILA				KANCI	HUKA'	TLA			05783512	24		WAKE		_	
												NC	2754	0		
1125	5 PF	REWIT	T F	RANCH I	DRIVE					HOLLY S	SPRI	NGS				
06			944	198		16			0	260	C			0		
07				0		18	Y		0	261	Ξ			0		0201
09				0		20A			4135	EU						5002
10A				0		20B			0	27				0		4
10B				0		21A			0	29				0		
11	S	Y	I	N		21B			0	30				0		
11			127	750		21C			0	31				0		
13			000	000		21D			0	32				0		
14			817	748		26A			0	34			5	6		
15			4 (079		26B			0							
TN	}	31667	905			PN	6		559522 	PP		P02	08270	3		
		turn Bortify that I hanowledge a		Mined this return of, they are true,	efund D n and accomp correct, and o		nedules an	5 (nd stateme		/ment Due Check here if you to discuss this re	ou autho eturn ar	orize the Nad attachn	O North Carolin nents with th	na Departn ne paid pre	nent of Reparer be	Revenue elow.
Your Sig	ınature					Date	Spoi	use's Siar	nature (If filing ioi	nt return, both must sign	n.)	Date		679058 Phone No.		rea code)
		R USE ON	LY If	prepared by a p	erson other to					ormation of which the p						
						_										
		IYA R Signature	AM S	SAGAR GU	JPT 0:	2 25 Date			659522 ntact Phone Numb	per (Include area code)				208270 r's FEIN, SS		N
	lf y	ou ARE l	NOT d							O. BOX R, RALEIG				NC 27640	-0640	•

Name	(First 10 Characters) KANCHUKATL Your Social Security Number	05783	33124
	D-400 Line-by-Line Information		
6.	Federal Adjusted Gross Income	6.	9449
7.	Additions to Federal Adjusted Gross Income	7.	
8.	Add Lines 6 and 7	8.	9449
9.	Deductions From Federal Adjusted Gross Income	9.	7117
10.	Child Deduction	0.	
	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.	8174
13.	Part-year Residents and Nonresidents Taxable Percentage	13.	0.000
14.	N.C. Taxable Income	14.	8174
15.	N.C. Income Tax	15.	407
16.	Tax Credits	16.	
17.	Subtract Line 16 from Line 15	17.	407
18.	Consumer Use Tax	18.	10
	You certify that no Consumer Use Tax is due		
19.	Add Lines 17 and 18	19.	40
	Your tax withhold	202	/11 ·
North 20a. 20b.	Your tax withheld Spouse's tax withheld	20a. 20b.	413
20a. 20b.			413
20a. 20b.	Spouse's tax withheld		413
20a. 20b. Other	Spouse's tax withheld Tax Payments	20b.	413
20a. 20b. Other 21a. 21b.	Spouse's tax withheld Tax Payments 2022 estimated tax	20b. 21a.	413
20a. 20b. Other 21a. 21b. 21c.	Spouse's tax withheld Tax Payments 2022 estimated tax Paid with extension Partnership	20b. 21a. 21b. 21c.	413
20a. 20b. Other 21a. 21b. 21c. 21d.	Spouse's tax withheld Tax Payments 2022 estimated tax Paid with extension Partnership S Corporation	20b. 21a. 21b. 21c. 21d.	413
20a. 20b. Other 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. Other 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.	
20a. 20b. Other 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.	413
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	21a. 21b. 21c. 21d. 22. 23. 24. 25.	413
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 Tax Due	21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a.	413
20a. 20b. 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 Penalties	21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a.	413
20a. 20b. 21a. 21b. 21c. 22ld. 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.	413
20a. 20b. 21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c.	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.	413
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	413
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	413
20a. 20b. 21a. 21b. 21c. 21d. 22. 23. 24. 25. 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.	413
20a. 20b. Other 21a. 21b. 21c. 21d. 22. 23. 26a. 26b. 26c. 26d. EU 26e. 27. 28.	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	413
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.	413
20a. 20b. Other 21a. 21b. 21c. 21d. 22. 23. 26a. 26b. 26c. 26d. EU 26e. 27. 28.	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. 27.	413
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.	413
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.	413
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.	413
20a. 20b. 21a. 21b. 21c. 22d. 22. 23. 24. 25. 26a. EU 26e. 27. 28. Amou 29. 30. 31.	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 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	21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. 26d. EU 26e. 27. 28.	413