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

Subm	ission Identification Number (SID)			
Taxpay	er's name	Social securit	y number	
NAG.	A AKHIL VARMA ALLURI	499-73-	-4776	
Spouse	's name	Spouse's soc	al security	number
SRA	VANTHI JAMPANA	371-63	-9426	
Part	Tax Return Information — Tax Year Ending December 31, 2022 (Enter	year you a	e autho	rizing.)
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	78,082.
2	Total tax		2	5,844.
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3	8,435.
4	Amount you want refunded to you		4	2 , 591.
5	Amount you owe		5	
Part	II Taxpayer Declaration and Signature Authorization (Be sure you get and k	eep a cop	y of you	ır return)
return to send for any Agent payme authori payme busine taxes to person	owledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above (original or amended) I am now authorizing. I consent to allow my intermediate service provider, transmit dry return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for reject violation of the return or refund, and (c) the date of any refund. If applicable, I authorize the U. It initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indict into frame of the financial institution account indict into frame of the financial institution account indict in the financial in full force and effect until I notify the U.S. Treasury Financial Agent to terminate into I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation request days prior to the payment (settlement) date. I also authorize the financial institutions involved in the to receive confidential information necessary to answer inquiries and resolve issues related to the payment (PIN) below is my signature for the income tax return (original or amended) I amond the financial withdrawal Consent.	tter, or electroction of the tr S. Treasury are atted in the tan to debit the the authorizates must be brocessing of ayment. I furt	nic return ansmission of its des ax prepara entry to ti tion. To r received the elect her ackno	originator (ERC on, (b) the reaso ignated Financiation software for his account. This revoke (cancel) no later than ronic payment of byledge that the
	ayer's PIN: check one box only			
Х		ov DINI 3	4 7	7 6 as my
	ERO firm name	ř Ent	er five digi n't enter al	its, but
	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 not if you are entering your own PIN and your return is filed using the Practitioner PIN method below.			
Yours	signature ▶ Date ▶			
Spous	se's PIN: check one box only			
×		ny PIN 3	9 4	2 6 as m y
	ERO firm name		er five digi n't enter al	
	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 no if you are entering your own PIN and your return is filed using the Practitioner PIN method below.			
Spous	se's signature ▶ Date ▶			
Ороск	Practitioner PIN Method Returns Only—continue below			
Part	-			
ERO's	EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN. 2 2		6 6 1 er all zeros	9 8 9
author	y that the above numeric entry is my PIN, which is my signature for the electronic individual income ta ized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am submisements of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS e-file Providers of In	tting this retu	rn in acco	ordance with th
FRO'e	s signature ▶ Date ▶			
	ERO Must Retain This Form — See Instructions			

Don't Submit This Form to the IRS Unless Requested To Do So

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

2022

OMB No. 1545-0074

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

	s 🗌 S	Single X Married filing jointly	Marrie	ed filing separatel	y (MFS)	☐ Head of	household (HO	H) [fying surv se (QSS)	viving
	If yo	u checked the MFS box, enter the r	name of y	our spouse. If yo	u check	ed the HOH or	QSS box, ent	er the	•	` ,	ne qualifying
	pers	on is a child but not your dependen	t:								
Your first name	and mi	ddle initial	Last na	me				Y	our soc	ial securit	y number
NAGA AKI	IIL V	/ARMA	ALLU	RI				4	199-7	3-4776	б
If joint return, s	pouse's	first name and middle initial	Last na	me				s	pouse's	social sec	curity number
SRAVANTI	ΙΙ		JAMP	ANA				3	371-6	3-942	б
Home address	(numbe	r and street). If you have a P.O. box, see	e instructio	ons.			Apt. no.	Р	residen	tial Election	on Campaign
132 HORN	NBEAN	1 LANE								ere if you,	
City, town, or p	ost offic	ce. If you have a foreign address, also c	omplete s	paces below.	Sta	te	ZIP code				tly, want \$3 Checking a
MOORESV	ILLE				NC	2	28117			w will not	
Foreign country	y name		F	oreign province/sta	ate/count	У	Foreign postal c	ode y	our tax	or refund.	
										You	Spouse
							-				\sqrt{1}
							asset)? (See ir	struct	ions.)	Yes	⊠ No
			•			•					
Deduction		Spouse itemizes on a separate retu	rn or you	were a dual-stat	tus alien						
Age/Blindness	You:	☐ Were born before January 2,	1958	Are blind	Spouse	: Was bo	rn before Janu	ary 2,	1958	☐ Is bli	ind
Dependents	s (see	instructions):			urity	(3) Relationsh	nip (4) Check t	he box	if qualifi	es for (see	instructions):
If more	(1) Fi	rst name Last name		number		to you	Child t	ax crec	dit (Credit for oth	her dependents
	s ——										
Dependents (see instructions): (1) First name Last name (2) Social security number (3) Medical amount from Form(s) W-2, box 1 (see instructions) and check here Dependents, see instructions and check here Last name Total amount from Form(s) W-2, box 1 (see instructions) Last name Total amount from Form(s) W-2, box 1 (see instructions) Last name Total amount from Form(s) W-2, box 1 (see instructions) Last name Total amount from Form(s) W-2, box 1 (see instructions) Last name Total amount from Form(s) W-2, box 1 (see instructions) Last name Total amount from Form(s) W-2, box 1 (see instructions) Last name Total amount from Form(s) W-2, box 1 (see instructions) Last name Total amount from Form(s) W-2, box 1 (see instructions) Last name Total amount from Form(s) W-2, box 1 (see instructions) Last name Total amount from Form(s) W-2, box 1 (see instructions) Last name Total amount from Form(s) W-2, box 1 (see instructions) Last name Total amount from Form(s) W-2, box 1 (see instructions) Last name Total amount from Form(s) W-2, box 1 (see instructions) Last name Total amount from Form(s) W-2, box 1 (see instructions) Last name Total amount from Form(s) W-2, box 1 (see instructions) Last name Total amount from Form(s) W-2, box 1 (see instructions) Last name Total amount from Form(s) W-2, box 1 (see instructions) Last name Total amount from Form(s) W-2, box 1 (see instructions) Last name Total amount from Form(s) W-2, box 1 (see instructions) Last name Total amount from Form(s) W-2, box 1 (see instructions) Last name Total amount from Form(s) W-2, box 1 (see instructions) Last name Total amount from Form(s) W-2, box 1 (see instructions) Last name Total amount from Form(s) W-2, box 1 (see instructions) Last name Total amount from Form(s) W-2, box 1 (see instructions) Last name Total amount from Form(s) W-2, box 1 (see instructions) Last name Total amount from Form(s) W-2, box 1 (see instructions) Last name Total amount from Form(s) W-2, box 1 (see instructions)											
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A441- F(-)	b			. ,					1b 1c		
	d	• •		. ,	ee instru	ctions)			1d		
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was withheld.									1f		
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		, ,	(see instr	ructions)		<u>1</u> i			_		222
		<u> </u>		_. .					1z	1 3	92,722.
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						axable amoun			4b		
							t t		5b		
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separately,		,		,	`	,		. 📙	7	١.	-3 , 000.
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jointly or		-							8		L1,707.
				-					9	+ '	78 , 082.
\$25,900		•							10	+ -	70 000
household,			•						11		78,082.
	_					 5-Δ			13	4	25 , 900.
any box under	14	Add lines 12 and 13							14	 	25,900.
Standard Deduction,	15	Subtract line 14 from line 11. If ze							15		52 , 900.
see instructions.	10	Castract into 14 HOITI III C 11. II Ze	10 01 105	o, onto: '0 11115	is your i	LICON			13		12,102.

Form 1040 (2022	2)								Page 2
Tax and	16	Tax (see instructions). Check if a	ny from Form(s	s): 1 881	4 2 4972	3 🗌		. 16	5,844.
Credits	17	Amount from Schedule 2, line 3						. 17	
	18	Add lines 16 and 17						. 18	5,844.
	19	Child tax credit or credit for oth	er dependents	s from Sched	ule 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, e	nter -0				. 22	5,844.
	23	Other taxes, including self-emp	loyment tax, fr	rom Schedule	2, line 21 .			. 23	0
	24	Add lines 22 and 23. This is you	ır total tax					. 24	5,844.
Payments	25	Federal income tax withheld fro							
-	а	Form(s) W-2				25a	8,4	35.	
	b	Form(s) 1099				25b			
	С	Other forms (see instructions)				25c			
	d	Add lines 25a through 25c .						. 25d	8,435.
If you have a	26	2022 estimated tax payments a	nd amount ap	plied from 20	21 return			. 26	
If you have a qualifying child,	27	Earned income credit (EIC) .			No .	27			
attach Sch. EIC.	28	Additional child tax credit from S	chedule 8812			28			
	29	American opportunity credit from	m Form 8863,	line 8		29			
	30	Reserved for future use				30			
	31	Amount from Schedule 3, line 1	5			31			
	32	Add lines 27, 28, 29, and 31. Th				undable cre	dits .	. 32	
	33	Add lines 25d, 26, and 32. Thes	•	•	-			. 33	8,435.
Refund	34	If line 33 is more than line 24, so							2,591.
Returia	35a	Amount of line 34 you want refu		2,591.					
Direct deposit?	b	Routing number 1 2 1 0				Checking	Sav		
See instructions.	d	Account number 3 2 5 0							
	36	Amount of line 34 you want app	lied to your 2	023 estimate	d tax	36			
Amount	37	Subtract line 33 from line 24. Th							
You Owe	0.	For details on how to pay, go to	www.irs.gov/	Payments or	see instructions			. 37	
	38	Estimated tax penalty (see instr	uctions) .			38			
Third Party Designee		you want to allow another pestructions					es. Comp	olete below.	X No
		signee's		Phone				identification	
		me		no.			number (
Sign		der penalties of perjury, I declare that ief, they are true, correct, and complet							
Here	Yo	ur signature		Date	Your occupation			If the IRS se	nt you an Identity
		5			•				IN, enter it here
Joint return?					TERADATA I		ER	(see inst.)	
See instructions. Keep a copy for	Sp	ouse's signature. If a joint return, both	n must sign.	Date	Spouse's occupat	ion			nt your spouse an ection PIN, enter it here
your records.					HOME MAKE		(see inst.)		
		one no. (669) 292-9198		Email address			TT COM	,	
			eparer's signatu		IAMAKHILTERA	Date	PT	īN	Check if:
Paid		I PRIYA RAM SAGAR GUPTA TALLAM SY			רווסיים יימודא א			2082703	Self-employed
Preparer		m's name GLOBAL TAXE:		ATT DUGUI	COLIM INDUM	102/20/2	020 10		(678) 965-9522
Use Only		m's address 245 ROONEY		JSWICK N.	T 08816			Firm's EIN	
0-1	1 III	21040 for instructions and the last 11	of II DIVUI	VOVI OIL INC				I IIIII S LIIV	84-3171965

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

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

NAGA AKHIL VARMA ALLURI & SRAVANTHI JAMPANA

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

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

Your social security number 499–73–4776

Par	t I Additional Income			
1	Taxable refunds, credits, or offsets of state and local income taxes		1	
2a	Alimony received		2a	
b	Date of original divorce or separation agreement (see instructions):			
3	Business income or (loss). Attach Schedule C		3	
4	Other gains or (losses). Attach Form 4797		4	
5	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Atta	ach Schedule E .	5	-11,707.
6	Farm income or (loss). Attach Schedule F		6	
7	Unemployment compensation		7	
8	Other income:			
а	Net operating loss	8a ()	
b	Gambling	8b		
С	Cancellation of debt	8c		
d	Foreign earned income exclusion from Form 2555	8d ()	
е	Income from Form 8853	8e		
f	Income from Form 8889	8f		
g	Alaska Permanent Fund dividends	8g		
h	Jury duty pay	8h		
i	Prizes and awards	8i		
j	Activity not engaged in for profit income	8j		
k	Stock options	8k		
ı	Income from the rental of personal property if you engaged in the rental			
	for profit but were not in the business of renting such property	81		
m	Olympic and Paralympic medals and USOC prize money (see			
	instructions)	8m		
n	Section 951(a) inclusion (see instructions)	8n	-	
0	Section 951A(a) inclusion (see instructions)	80	-	
р	Section 461(I) excess business loss adjustment	8p	-	
q	Taxable distributions from an ABLE account (see instructions)	8q	-	
r	Scholarship and fellowship grants not reported on Form W-2	8r	-	
S	Nontaxable amount of Medicaid waiver payments included on Form			
	1040, line 1a or 1d	8s (4	
t	Pension or annuity from a nonqualifed deferred compensation plan or			
	a nongovernmental section 457 plan	8t	-	
u	Wages earned while incarcerated	8u		
Z	Other income. List type and amount:			
_	T. I.	8z		
9	Total other income. Add lines 8a through 8z		9	44 50-
10	Combine lines 1 through 7 and 9. Enter here and on Form 1040, 1040-SR	, or 1040-NK, line 8	10	-11,707.

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

Par	II Adjustments to Income			
11	Educator expenses		11	
12	Certain business expenses of reservists, performing artists, and fee-b			
	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 8l 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	41-		
_	,	4k	_	
Z	Other adjustments. List type and amount:	4z		
25			05	
25 26	Total other adjustments. Add lines 24a through 24z		25	
26	Add lines 11 through 23 and 25. These are your adjustments to income . E		26	
	Form 1040 or 1040-SR, line 10, or Form 1040-NR, line 10a	<u> </u>		

SCHEDULE D (Form 1040)

Department of the Treasury

Capital Gains and Losses

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.

OMB No. 1545-0074

2022

Attachment Sequence No. **12**

Internal Revenue Service Name(s) shown on return Your social security number 499-73-4776 NAGA AKHIL VARMA ALLURI & SRAVANTHI JAMPANA 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. Short-Term Capital Gains and Losses – Generally Assets Held One Year or Less (see instructions) Part I 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. with column (g) line 2. 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 146,730. 204,689. 29,019. -28,940. Totals for all transactions reported on Form(s) 8949 with Box B checked 1,175. 1,704. -529. 3 Totals for all transactions reported on Form(s) 8949 with Box C checked 1,140. 2,719. -1,579.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 -31,048. 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 (h) Gain or (loss) (g) 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 3,259. 1,063. 1,545. -651. 9 Totals for all transactions reported on Form(s) 8949 with 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

15 Net long-term capital gain or (loss). Combine lines 8a through 14 in column (h). Then, go to Part III

BAA

-651.

14

15

Schedule D (Form 1040) 2022 Page 2

Part III Summary 16 Combine lines 7 and 15 and enter the result 16 -31,699. • If line 16 is a gain, 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 loss, skip lines 17 through 20 below. Then, go to line 21. Also be sure to complete • If line 16 is zero, 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 both gains? ☐ **Yes.** Go to line 18. No. Skip lines 18 through 21, and go to line 22. 18 If you are required to complete the 28% Rate Gain Worksheet (see instructions), enter the 18 19 If you are required to complete the Unrecaptured Section 1250 Gain Worksheet (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. If line 16 is a loss, enter here and on Form 1040, 1040-SR, or 1040-NR, line 7, the smaller of: 21 • The loss on line 16; or 21 3,000.) • (\$3,000), or if married filing separately, (\$1,500) **Note:** When figuring which amount is smaller, treat both amounts as positive numbers. Do you have qualified dividends on Form 1040, 1040-SR, or 1040-NR, line 3a? 22 X Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 16. No. Complete the rest of Form 1040, 1040-SR, or 1040-NR.

Sales and Other Dispositions of Capital Assets

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

OMB No. 1545-0074 Attachment

Social security number or taxpayer identification number

499-73-4776

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

NAGA AKHIL VARMA ALLURI & SRAVANTHI JAMPANA

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

Sequence No. 12A

Before you check Box A, B, or C belo statement will have the same informa broker and may even tell you which b	tion as Form	er you receive 1099-B. Either	ed any Form(s) 109 will show whether	99-B or substitute er your basis (usua	statement(s ally your cost	s) from your broke t) was reported to	r. A substitute the IRS by your
Part I Short-Term. Trans instructions). For lo Note: You may agg reported to the IRS Schedule D, line 1a	ng-term tra pregate all s and for wh	nsactions, s hort-term tr ich no adjus	see page 2. ansactions rep stments or coc	oorted on Form les are required	(s) 1099-E d. Enter th	showing basi e totals directly	s was y on
You must check Box A, B, or C I complete a separate Form 8949, p for one or more of the boxes, com (A) Short-term transactions (B) Short-term transactions (C) Short-term transactions	page 1, for ea aplete as mar reported on reported on	ach applicabl ny forms with Form(s) 1099 Form(s) 1099	le box. If you ha the same box of B-B showing bas B-B showing bas	ve more short-te checked as you r sis was reported	rm transacheed. to the IRS ted to the IF	tions than will fit (see Note above RS	on this page
1 (a)	(b)	(c) Date sold or	(d) Proceeds	(e) Cost or other basis See the Note below	If you enter an enter a c	if any, to gain or loss amount in column (g), ode in column (f). parate instructions.	(h) Gain or (loss) Subtract column (e)
Description of property (Example: 100 sh. XYZ Co.)	Date acquired (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).
APEX CLEARING	01/01/22	12/31/22	18,501.	21,977.	W	969.	-2,507.
ROBINHOOD SECURITIES LLC	01/01/22	12/31/22	128,229.	182,712.	W	28,050.	-26,433.
2 Totals. Add the amounts in columns negative amounts). Enter each total							

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.

146,730.

Schedule D, line 1b (if Box A above is checked), line 2 (if Box B above is checked), or line 3 (if Box C above is checked).

204,689.

Attachment Sequence No. 12A Form 8949 (2022)

Name(s) shown on return. Name and SSN or taxpayer identification no. not required if shown on other side NAGA AKHIL VARMA ALLURI & SRAVANTHI JAMPANA

Social security number or taxpayer identification number 499-73-4776

Before you check Box D. E. or F 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

Part II

broker and may even tell you which box to check.

Long-Term. Transactions involving capital assets you held more than 1 year are generally long-term (see instructions). For short-term transactions, see page 1.

Note: You may aggregate all long-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 8a; you aren't required to report these transactions on Form 8949 (see instructions).

You must check Box D, E, or F below. Check only one box. If more than one box applies for your long-term transactions, complete a separate Form 8949, page 2, for each applicable box. If you have more long-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.

★ (D) Long-term transactions(E) Long-term transactions(F) Long-term transactions	reported on	Form(s) 1099	-B showing bas	•			·)
(a) Description of property	(b) Date acquired	(c) Date sold or	(d) Proceeds	(e) Cost or other basis See the Note below	If you enter an enter a co	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 SECURITIES LLC	01/01/22	12/31/22	1,545.	3,259.	W	1,063.	-651.
2 Totals. Add the amounts in columns negative amounts). Enter each tota Schedule D, line 8b (if Box D above above is checked), or line 10 (if Box	al here and inc is checked), lir	lude on your ne 9 (if Box E	1,545.	3,259.		1,063.	-651.

Note: If you checked Box D 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.

Sales and Other Dispositions of Capital Assets

Social security number or taxpayer identification number

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

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. Attachment Sequence No. 12A

OMB No. 1545-0074

NAGA AKHIL VARMA ALLUR	I & SRAVA	NTHI JAM	PANA	499-73	-4776		
Before you check Box A, B, or C below statement will have the same informations broker and may even tell you which the same information in the same information.	ation as Form						
Part I Short-Term. Transinstructions). For long to the IRS Schedule D, line 1a	ong-term tra gregate all s S and for wh	nsactions, s hort-term tr ich no adjus	see page 2. ansactions rep stments or coo	oorted on Form les are required	(s) 1099-E d. Enter th	3 showing basi e totals directly	s was y on
You must check Box A, B, or C complete a separate Form 8949, for one or more of the boxes, con	page 1, for ean plete as mar	ach applicab ny forms with	le box. If you had the same box o	ve more short-te checked as you r	rm transac need.	tions than will fit	on this page
☐ (A) Short-term transactions☒ (B) Short-term transactions☐ (C) Short-term transactions	s reported on	Form(s) 1099	9-B showing bas	•			2)
1 (a) Description of property	(b) Date acquired	(c) Date sold or	(d) Proceeds	(e) Cost or other basis See the Note below	If you enter an enter a c	if any, to gain or loss amount in column (g), ode in column (f). parate 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 CRYPTO LLC	01/01/22	12/31/22	1,175.	1,704.			-529.

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.

1,175.

-529.

2 Totals. Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts). Enter each total here and include on your Schedule D, line 1b (if Box A above is checked), line 2 (if Box B

above is checked), or line 3 (if Box C above is checked).

1,704.

Sales and Other Dispositions of Capital Assets

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

OMB No. 1545-0074 Attachment

Social security number or taxpayer identification number

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

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

Sequence No. 12A

NAGA AKHIL VARMA ALLURI	[& SRAVA	NTHI JAM	PANA	499-73	-4776		
Before you check Box A, B, or C belo statement will have the same informa broker and may even tell you which b	tion as Form 1						
Part I Short-Term. Transa instructions). For low Note: You may agg reported to the IRS Schedule D, line 1a	ng-term tra regate all s and for whi	nsactions, s hort-term tr ich no adjus	see page 2. ansactions rep stments or cod	oorted on Form les are required	(s) 1099-E d. Enter th	showing basi e totals directly	s was / on
You must check Box A, B, or C k complete a separate Form 8949, p for one or more of the boxes, com (A) Short-term transactions (B) Short-term transactions (C) Short-term transactions	pelow. Checo page 1, for ea plete as mar reported on reported on	k only one bach applicable of the second of	box. If more than e box. If you have the same box of D-B showing bas D-B showing bas	n one box applies we more short-te checked as you r sis was reported	s for your s rm transacheed. to the IRS	hort-term transa tions than will fit (see Note above	ctions, on this page
(a) Description of property (Example: 100 sh. XYZ Co.)	(b) Date acquired	(c) Date sold or disposed of	(d) Proceeds (sales price)	(e) Cost or other basis See the Note below and see <i>Column</i> (e)	If you enter an enter a c See the sep	if any, to gain or loss amount in column (g), ode in column (f). parate instructions.	(h) Gain or (loss) Subtract column (e) from column (d) and
(Example: 100 Srl. A12 Co.)	(Mo., day, yr.)	(Mo., day, yr.)	(see instructions)	in the separate instructions.	Code(s) from instructions	(g) Amount of adjustment	combine the result with column (g).
COIN BASE	01/01/22	12/31/22	1,140.	2,719.			-1,579.
2 Totals. Add the amounts in columns negative amounts). Enter each total							

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.

1,140.

Schedule D, line 1b (if Box A above is checked), line 2 (if Box B above is checked), or line 3 (if Box C above is checked).

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.

Attachment Sequence No.

2022 Attachment Sequence No. 13

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service

Name(s) shown on return

Your social security number

	A AKHIL VARMA ALLURI & SRAVANTHI JAMPANA					4	<u> 199-7</u>	3-4776		
Part						<u> </u>				
	Note: If you are in the business of renting personal proper			c . See	instru	ctions. If you are	an indi	vidual, rep	ort farn	n
	rental income or loss from Form 4835 on page 2, line 40.									
	Did you make any payments in 2022 that would require you									
<u>B</u>	f "Yes," did you or will you file required Form(s) 1099? .							. <u> </u>)S	No
1a	Physical address of each property (street, city, state, ZIF	ode	e)							
Α	1-101, MOGALLAMURU ALLAVARAM MANDAL,	FACT	, CODAI	77 D T	חחות	DV DDVDECH	TNI	 533217		
B	1 101, MOGADDAMONO ADDAVANAM MANDAD,	TADI	GODA	/AIXI , /	וועווה	INA I NADESII	LIN			
C										
	Town of Donasta O F				_					
1b	Type of Property (from list below) 2 For each rental real estate properabove, report the number of fair				Fa	ir Rental Days		nal Use nys	Q,	JV
Α.	gersonal use days. Check the Qu			Α.		-				
A B	if you meet the requirements to f			A B		365		0	┾	┽—
	qualified joint venture. See instru			С					┝	┽─
_ <u>C</u>	<u> </u>			C						
	of Property:		5 .		_	0 16 D 1 1				
	Single Family Residence 3 Vacation/Short-Term Ren	tai	5 Lanc			Self-Rental	,			
2	Multi-Family Residence 4 Commercial		6 Roya	alties	8	Other (describ	e)			
						Properties	s:			
Incon	ne:			Α		В			С	
3	Rents received	3		6	68.					
4	Royalties received	4								
Exper									-	
5	Advertising	5								
6	Auto and travel (see instructions)	6								
7	Cleaning and maintenance	7		2,9	78.					
8	Commissions	8		,_						
9	Insurance	9								
10	Legal and other professional fees	10								
11	Management fees	11		1,7	96					
12	Mortgage interest paid to banks, etc. (see instructions)	12								
13	Other interest	13								
14	Repairs	14		2,4	53.					
15	Supplies	15		2,5						
16	Taxes	16		2,0	<u> </u>					
17	Utilities	17		2,6	17					
18	Depreciation expense or depletion	18								
19	Other (list)	19								
20	Total expenses. Add lines 5 through 19	20		12,3	75					
21	Subtract line 20 from line 3 (rents) and/or 4 (royalties). If			12,0	70.					
21	result is a (loss), see instructions to find out if you must									
	file Form 6198	21		-11, 7	07.					
22	Deductible rental real estate loss after limitation, if any,	<u> </u>		, .	-					
	on Form 8582 (see instructions)	22	(11,70	ار . 1	()	(,
23a	Total of all amounts reported on line 3 for all rental prope			,	23a		668.			
b	Total of all amounts reported on line 4 for all royalty prop				23b					
C	Total of all amounts reported on line 12 for all properties				23c					
d	Total of all amounts reported on line 18 for all properties				23d					
e	Total of all amounts reported on line 20 for all properties				23e	12 -	375.			
24	Income. Add positive amounts shown on line 21. Do no					12,	24			
25	Losses. Add royalty losses from line 21 and rental real estate		•		nter to	otal losses here	25	(11,70	0.7
26	Total rental real estate and royalty income or (loss).								, /	<u> </u>
20	here. If Parts II, III, IV, and line 40 on page 2 do not									
	Schedule 1 (Form 1040), line 5. Otherwise, include this ar						26		-11,7	707.

D-40 < Stap Retu	le All	Pages		ur	2022			įna D		ent of F	Return Revenue	DOI Use Only				
NAGF 132 MOOF Filing Were Was y N.C. I your c to the	A AKI HORI RESV Status your a r your sp Educat overpa Fund, elect b	NC 2 resident	VA M LAI 28117 1. Sing 4. Hea t of N.C a reside dowme to the F the amo	MECKL alle d of Househo c for the entent for the entent Fund: Y fund. To made ount of you married fili	URI irre year? ntire year? ou may col ake a contr r designation ng jointly, y	2. Marric 5. Qualification, on on Paragraphs	ed Filing fying Wic Yes X to the N enclose age 2, L use wer	Jointly low(er) No .C. Edu Form Nine 31.	Your Spouse's 3. Ma	SSN: 49 SSN: 3 arried Filin Return to Return to the second	AMPANA 99734776 71639426 g Separately for deceased for deceased for deceased for deceased for deceased for information for information for information for the formation for the formation for the formation for the formation f	Is your so Were you 2022 fede Year sp taxpayer. spouse. Ing a contract about the and a U.S.	preal income ta Yes Douse died: Date or Date or Distribution or de D. To desire Fund.) Citizen or re	an? utomatic e x return, e No f death: f death: esignatir gnate yo	Yes No extension to file e.g., Form 104	ill of
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11			255	00		21C			0		31			0		
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15			26	524		26B			0							
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			elow have exam and belief	X Romined this return, they are true,	efund Dun and accomp		nedules an	1224 d stateme		aymen Che	t Due eck here if you a liscuss this retur	authorize the	0 ne North Caro chments with	lina Depa the paid p	ortment of Revo	enue v.
Your Sigr	nature					Date	Spor	use's Sigr	nature (If filing)	ioint return,	both must sign.)	Date		029292 ct Phone N	198 o. (Include area	code)
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Paid Prep					J. I. U.	Date			ntact Phone Nu	mber (Inclu	de area code)				SSN, or PTIN	
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Name	(First 10 Characters) ALLURI Your Social Security Number	49973	34 / / 6
	D-400 Line-by-Line Information		
6.	Federal Adjusted Gross Income	6.	78082
7.	Additions to Federal Adjusted Gross Income	7.	, , , ,
8.	Add Lines 6 and 7	8.	7808
9.	Deductions From Federal Adjusted Gross Income	9.	7000
10.	Child Deduction	0.	
10.	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.	2550
12.	a. Add Lines 9, 10b, and 11	12a.	2550
	b. Subtract Line 12a from Line 8	12b.	5258
13.	Part-year Residents and Nonresidents Taxable Percentage	13.	0.000
14.	N.C. Taxable Income	14.	5258
15.	N.C. Income Tax	15.	262
16.	Tax Credits	16.	202
17.	Subtract Line 16 from Line 15	17.	262
18.	Consumer Use Tax	18.	202
	You certify that no Consumer Use Tax is due		
19.	Add Lines 17 and 18	19.	262
	Carolina Income Tax Withheld		
North			
North 20a.	Your tax withheld	20a.	384
20a. 20b.	Spouse's tax withheld	20a. 20b.	
20a. 20b. Other	Spouse's tax withheld Tax Payments	20b.	
20a. 20b. Other 21a.	Spouse's tax withheld Tax Payments 2022 estimated tax	20b. 21a.	
20a. 20b. Other 21a. 21b.	Spouse's tax withheld Tax Payments 2022 estimated tax Paid with extension	20b. 21a. 21b.	
20a. 20b. Other 21a. 21b. 21c.	Spouse's tax withheld Tax Payments 2022 estimated tax Paid with extension Partnership	21a. 21b. 21c.	
20a. 20b. Other 21a. 21b. 21c. 21d.	Spouse's tax withheld Tax Payments 2022 estimated tax Paid with extension Partnership S Corporation	21a. 21b. 21c. 21d.	
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	21a. 21b. 21c. 21d. 22.	
20a. 20b. Other 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.	384
20a. 20b. Other 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.	384
20a. 20b. Other 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.	384
20a. 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 Tax Due	21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a.	384
20a. 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.	384 384
20a. 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.	384 384
20a. 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.	384 384
20a. 20b. Other 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	384
20a. 20b. Other 21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. 26d. EU 26e.	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	384 384
20a. 20b. Other 21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. 26d. EU 26e. 27.	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.	384 384
20a. 20b. Other 21a. 21b. 21c. 21d. 22. 23. 24. 25. 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	384 384
20a. 20b. Other 21a. 21b. 21c. 21d. 22. 23. 24. 25. 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	21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. 26d. EU 26e. 27.	384 384
20a. 20b. Other 21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 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	20b. 21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. 26d. EU 26e. 27. 28.	384 384
20a. 20b. Other 21a. 21b. 21c. 21d. 22. 23. 24. 25. 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 unt of Refund to Apply to:	20b. 21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. 26d. EU 26e. 27. 28.	384 384
20a. 20b. Other 21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 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:	20b. 21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. 26d. EU 26e. 27. 28.	384 384
20a. 20b. Other 21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. 26d. EU 26e. 27. 28. Amount 29. 30.	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.	384 384
20a. 20b. Other 21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. 26d. EU 26e. 27. 28. Amount 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 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	20b. 21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. 26d. EU 26e. 27. 28.	384 384 384