#### 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	er's name	Social security number
ANI	LKUMAR KAIRAMKONDA	272-69-7451
Spouse	's name	Spouse's social security number
VAI	SHNAVI BHEEMANATHI	APPLIED FOR
Part	Tax Return Information – Tax Year Ending December 31, 2022 (Enter	er year you are authorizing.)
Enter	whole dollars only on lines 1 through 5.	
Note:	Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.	
1	Adjusted gross income	<b>1</b> 83,398.
2	Total tax	<b>2</b> 6,486.
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099	· · · · <b>3</b> 7,207.
4	Amount you want refunded to you	4 721.
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 periury. 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

			FBO firm name	, <u>,</u>	E
X	l authorize	GLOBAL TAXES	LLC	to enter or generate my PIN	2

9	7	4	5	1	as mv
Ent don	er fiv i't en	ve di nter a	gits, all ze	but ros	asiny

Enter five digits, but don't enter all zeros

as mv

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

### Spouse's PIN: check one box only

X lauthorize GLOBAL TAXES LLC to enter or generate my PIN ERO firm name

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.

Spouse's signature >	Date 🕨										
Practitioner PIN Method Returns Only—contin	ue bel	ow									
Part III Certification and Authentication – Practitioner PIN Method Only	'										
<b>ERO's EFIN/PIN.</b> Enter your six-digit EFIN followed by your five-digit self-selected PIN.	2	2	2			6 nter a			9	89	

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 >	Date 🕨	
	Must Retain This Form — See Instructions This Form to the IRS Unless Requested To Do So	
		70 (5 01 0001)

For Paperwork Reduction Act Notice, see your tax return instructions. BAA REV 02/24/23 PRO

Date

E1040		artment of the Treasury-Internal Revenue Serv S. Individual Income Tax		urn	202	2	OMB No. 1545	-0074	IRS Use C	)nly—D	)o not w	rite or staple i	n this space.
Filing Status Check only one box.	lf yo	Single X Married filing jointly [ u checked the MFS box, enter the n on is a child but not your dependent	ame of y	-			Head of				spou	ise (QSS)	-
Your first name	and mi	ddle initial	Last nar	me						Y	our so	cial securit	y number
ANILKUMA	R		KAIR	AMKON	DA					2	72-6	59-7451	1
If joint return, sp	oouse's	first name and middle initial	Last nar							S	pouse'	s social sec	urity number
VAISHNAV	Ί		BHEE	MANAT	ΉI					A	PPLI	LED FOR	ર
Home address (	(numbe	r and street). If you have a P.O. box, see	instructio	ons.				A	Apt. no.	Р	reside	ntial Electio	on Campaign
628 FIRE	BRIG	CK DRIVE										iere if you,	
City, town, or po CARY	ost offic	ce. If you have a foreign address, also co	omplete sp	paces bel	ow.	Stat NC		ZIP c 275		to	o go to		tly, want \$3 Checking a change
Foreign country	name		F	oreign pr	ovince/state/o	count	У	Foreig	n postal coo	de yo	our tax	or refund.	
												You	Spouse
Digital Assets	exch	ny time during 2022, did you: (a) rec ange, gift, or otherwise dispose of a	a digital a	asset (or	a financial i	ntere	est in a digital					Ves	X No
Standard	Som	eone can claim: 🗌 You as a de	ependent	: []	Your spouse	e as	a dependent						
Deduction	<u> </u>	Spouse itemizes on a separate retur	m or you	were a	dual-status	alien							
Age/Blindness	You:	Were born before January 2, 1	958	Are bl	ind Spo	ouse	: 🗌 Was bor	m befo	ore Januar	v 2, 1	958	🗌 ls bli	ind
Dependents				1	Social security		(3) Relationsh			<b>,</b> ,			instructions):
If more		rst name Last name		(_)	number		to you		Child tax	k cred	it	Credit for oth	ner dependents
than four													
dependents,										]		[	
see instructions and check	; ——									]		[	
here										]		[	
Income	1a	Total amount from Form(s) W-2, b	ox 1 (see	e instruc	tions)						1a	8	33,398.
income	b	Household employee wages not re	eported	on Form	(s) W-2						1b		
Attach Form(s)	с	Tip income not reported on line 1a	a (see ins	struction	s)						1c		
W-2 here. Also attach Forms	d	Medicaid waiver payments not rep	oorted or	n Form(s	) W-2 (see ir	nstru	ctions)				1d		
W-2G and	е	Taxable dependent care benefits f	from For	m 2441,	line 26						1e		
1099-R if tax was withheld.	f	Employer-provided adoption bene	efits from	Form 8	839, line 29						1f		
If you did not	g	Wages from Form 8919, line 6 .									1g		
get a Form	h	Other earned income (see instruct	ions) .					· ·			1h		0.
W-2, see instructions.	i	Nontaxable combat pay election (	see instr	uctions)		• •	<b>1</b> i						
	z	Add lines 1a through 1h									1z	6	33,398.
Attach Sch. B	<b>2</b> a	Tax-exempt interest	2a			<b>b</b> Ta	axable interes	t.			2b		
if required.	3a	Qualified dividends	3a				rdinary divide				3b		
	4a		4a				axable amoun				4b		
Standard Deduction for –	5a		5a			b Ta	axable amoun	t			5b		
Single or	6a	, _	6a				axable amoun	t		·	6b	_	
Married filing separately,	с	If you elect to use the lump-sum e				`	,	• •					
\$12,950	7	Capital gain or (loss). Attach Sche		•				• •			7		
<ul> <li>Married filing jointly or</li> </ul>	8	Other income from Schedule 1, lin						• •		•	8		
Qualifying spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7								·	9	8	33,398.
\$25,900	10	Adjustments to income from Sche	-					• •		•	10		
<ul> <li>Head of household,</li> </ul>	11	Subtract line 10 from line 9. This is		-	-			• •		•	11		<u>33,398.</u>
\$19,400 r	12	Standard deduction or itemized						• •		•	12		25,900.
<ul> <li>If you checked any box under</li> </ul>	13	Qualified business income deduct			and or form	899	р-А	• •		•	13		
Standard Deduction,	14 15	Add lines 12 and 13 Subtract line 14 from line 11. If zer				· ·				·	14		<u>25,900.</u>
see instructions.	10			s, enter -						•	15	5	57,498.

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

Form **1040** (2022)

Form 1040 (2022	2)								Page <b>2</b>
Tax and	16	Tax (see instructions). Check	if any from Form	(s): <b>1</b> 🗌 881	4 <b>2</b> 4972	3		16	6,486.
Credits	17	Amount from Schedule 2, lir	ne3					17	
	18	Add lines 16 and 17						18	6,486.
	19	Child tax credit or credit for	other dependent	ts from Sched	ule 8812			19	
	20	Amount from Schedule 3, lir	ne8					20	
	21	Add lines 19 and 20						21	
	22	Subtract line 21 from line 18						22	6,486.
	23	Other taxes, including self-e	mployment tax,	from Schedule	e 2, line 21			23	0.
	24	Add lines 22 and 23. This is	your total tax					24	6,486.
Payments	25	Federal income tax withheld							
	а	Form(s) W-2				25a	,207.		
	b	Form(s) 1099				25b		1	
	с	Other forms (see instruction	s)			25c		1	
	d	Add lines 25a through 25c						25d	7,207.
If	26	2022 estimated tax paymen	ts and amount a	pplied from 20	21 return			26	
If you have a l qualifying child,	27	Earned income credit (EIC)				27			
attach Sch. EIC.	28	Additional child tax credit from				28			
	29	American opportunity credit	from Form 8863	3, line 8		29		1	
	30	Reserved for future use .				30			
	31	Amount from Schedule 3, lir				31			
	32	Add lines 27, 28, 29, and 31				undable credits		32	
	33	Add lines 25d, 26, and 32. T	hese are your <b>to</b>	tal payments	· · · · ·			33	7,207.
Refund	34	If line 33 is more than line 24	4, subtract line 2	4 from line 33.	This is the amou	nt you <b>overpaid</b>		34	721.
neiuliu	35a	Amount of line 34 you want	refunded to you	J. If Form 8888	is attached, che	ck here	. 🗆	35a	721.
Direct deposit?	b	Routing number 0 1 1					Savings		
See instructions.	d	Account number 3 8 5	0 1 9 3	4 3 4 3	3   1		-		
	36	Amount of line 34 you want	applied to your	2023 estimate	ed tax	36			
Amount	37	Subtract line 33 from line 24	. This is the <b>amo</b>	ount vou owe					
You Owe		For details on how to pay, g	o to <i>www.irs.go</i> u	//Payments or	see instructions .			37	
	38	Estimated tax penalty (see in	nstructions) .			38			
Third Party	Do	you want to allow another	person to disc	cuss this retu	rn with the IRS?	See			
Designee	ins	tructions				. 🗌 Yes. C	omplete l	below.	X No
		signee's		Phone			onal identi ber (PIN)	fication	
	nai			no.			. ,		
Sign		der penalties of perjury, I declare t ief, they are true, correct, and corr							
Here		ur signature		Date	Your occupation		1		nt you an Identity
	10	ar olghataro		Duto					IN, enter it here
Joint return?					SOFTWARE I	DEVELOPER	(see	inst.)	
See instructions. Keep a copy for	Sp	ouse's signature. If a joint return,	<b>both</b> must sign.	Date	Spouse's occupat	ion			nt your spouse an
your records.					HOME MAKET	0		inst.)	ection PIN, enter it here
	Dh	one no. (203)928-092	0	Email address	HOME MAKE		,	- /	
		one no. (203)928-092 parer's name	Preparer's signat		ANILVARMAL	11@GMAIL.CO	PTIN		Check if:
Paid		PRIYA RAM SAGAR GUPTA TALLAM						2702	Self-employed
Preparer		n's name GLOBAL TA		TAUAN JAGAR	JULIA IAUUAM	05/07/2025			678)965-9522
Use Only			Y CT E BRU	NGWICK N	J 08816			ie no. ( 's EIN	· · · · · · · · · · · · · · · · · · ·
		a1040 for instructions and the late		TIONICIC IN	D 08810		1		84-3171965

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

**BAA** REV 02/24/23 PRO

Form **1040** (2022)

Form <b>W-7</b>
(Rev. August 2019)
Department of the Treasury Internal Revenue Service

# Application for IRS Individual Taxpayer Identification Number For use by individuals who are not U.S. citizens or permanent

Department of the Treas Internal Revenue Service		ividuals who are r ► See sepa	not U.S. citiz arate instruc		nanent res	siden	ts.		
An IRS individual	l taxpayer identification num	ber (ITIN) is for	U.S. feder	al tax purp	oses onl	y.		on type (check	
<ul> <li>Before you begin</li> <li>Don't submit th</li> </ul>	<b>::</b> iis form if you have, or are eligi	ble to get, a U.S.	. social sec	urity numbe	er (SSN).			ply for a new l new an existin	
	ubmitting Form W-7. Read th								<b>,</b> or <b>g, you</b>
_	ederal tax return with Form \			of the exce	<b>ptions</b> (s	see in	structions	5).	
	alien required to get an ITIN to classified and the second s		etit						
_	alien filing a U.S. federal tax retur at alien <b>(based on days present ir</b>		s) filing a LL	S fodoral tay	return				
	of U.S. citizen/resident alien		, 0			e instr	ructions) 🕨		
e 🛛 Spouse of U		<b>d</b> or <b>e,</b> enter name ANILKUMAR KA					lien (see ins	structions) ► 272-69-	7451
f 🗌 Nonresident	alien student, professor, or resea	rcher filing a U.S. f	ederal tax re	turn or claim	ing an exc	ceptio	n		
g 🗌 Dependent/s	spouse of a nonresident alien hold	ling a U.S. visa							
	nstructions) ►								
	on for <b>a</b> and <b>f</b> : Enter treaty country		lle name	and trea	aty article				
Name	1a First name VAISHNAVI	IVIICO	lie name			ast na BHE	ame EMANATH	т	
(see instructions) Name at birth if	<b>1b</b> First name	Mido	lle name			ast na		**	
different ►									
Applicant's Mailing	2 Street address, apartment nu 628 FIREBRICK DR		e number. <b>If</b>	you have a	P.O. box,	sees	separate ir	structions.	
Address	City or town, state or provinc	e, and country. Inc	clude ZIP co	de or postal (			propriate.	0 1 0	
	CARY					USA		27519	
Foreign (non-	3 Street address, apartment nu	imper, or rural rout	e number. D	ion't use a P	.O. box h	umbe	er.		
U.S.) Address (see instructions)	City or town, state or provinc	e and country. Inc	lude nostal	code where :	annronriat	<u> </u>			
		io, and obtaining. Inc	nuuo pootui		appropriat	0.			
Birth	4 Date of birth (month / day / year)	Country of birth		City and sta	ate or prov	ince	(optional)	5 Male	
Information	04/12/1998	INDIA						🗙 Female	
Other Information	6a Country(ies) of citizenship INDIA	6b Foreign tax I.I	D. number (il	f any) 6c	Type of U.	.S. vis	a (if any), ni	umber, and expir	ation date
	6d Identification document(s) su	Ibmitted (see instru	ictions) 🛛 🔁	Passport	🗌 Dr	iver's	license/Sta	ate I.D.	
	USCIS documentation	Other					Date of en	try into	
		TTO 20 C 21 0	_	02	100/202		the United		
	Issued by: INDIA 1 6e Have you previously received	No.: V8206219		p. date: 03,				YYY):	
	No/Don't know. Skip li		mai Revenue	e Service Inul	mber (IRSI	IN) ?			
	Yes. Complete line 6f. I		st on a sheet	and attach t	o this form	n (see	instructior	ıs).	
	6f Enter ITIN and/or IRSN ► I	TIN			IRSN				and
	name under which it was iss	sued ►							
			t name		ddle name	)		Last name	
	6g Name of college/university of	r company (see ins	structions) 🕨						
	City and state				gth of stay				
Sign Here	Under penalties of perjury, I (appli documentation and statements, and information with my acceptance ager	d to the best of my	knowledge a	nd belief, it is	s true, corre	ect, a	nd complete	e. I authorize the	IRS to share
Keep a copy for your records.	Signature of applicant (if de	legate, see instruct	tions)	Date (month	/ day / yeai	r) I	Phone num	ber	
-	Name of delegate, if applica	able (type or print)		Delegate's ro to applicant			_	Court-appoin	ited guardian
Acceptance	Signature			Date (month	/ day / year	r) [	Phone		
Acceptance Agent's		-				I	Fax		
Use ONLY	Name and title (type or print	t)	Name of co	ompany	EIN			PTIN	
	🔽				Off	ice co	ode		

REV 02/24/23 PRO

<b>D-400</b> < Staple A Return	• •	s of Yo	our	2022	-		<u>li</u> na D		ent of	<b>x Return</b> Revenue	DOR Use Only				
For calen	dar year 2		or fiscal year				22	and ending			Are you a ve			Yes	No X
ANILKU 628 FI		CK DI		RAMKONI	AC	VZ	AISHN			3HEEMANA 272697451	Is your spou Were you gra				No X
CARY	NC 2	27519	DURHA	V				Spouse's	SSN: 7	APPLIED F		l income ta	x return, e	.g., Form	
Filing Sta	tus 📙	1. Sing 4. Hea	gle Id of Househo			ied Filing ifying Wic	-	L 3. M	arried Fil	ing Separately	Year spou	Yes L	No 2	<u>[</u>	
		t of N.C	C. for the ent	ire year?		Yes X	No			for deceased	taxpayer.	Date of	f death:		
			ent for the e			Yes X	_			n for deceased t Fund by makin			f death:		or all of
your over	payment	to the F	<sup>-</sup> und. To ma	ike a contr	ibution,	enclose	Form	NC-EDU an	d your p	ayment of \$	0.	To desig	-	-	
						-				for information oril 15, 2023, ar			sident		
	-									Personal Rep					
FS 2	PP	Y		DT	Ν	OC	Ν	TPRES	Y	SPRES	S Y	VT	Ν	SVT	N
KAIR	628		27519	DS	Ν	ΕA	Ν	TD			SD			FDEX	KT N
ANILKU	JMAR			KAIRA	AMKO	NDA			27	2697451		DURI	HA		
VAISHN	IAVI			BHEEN	MANA	THI			AI	PPLIED F	NC	2753	19		
628 FI	REBRI	ICK	DRIVE						C	CARY					
06		833	898		16			C		26C			0		<b>_</b> ,
07			0		18	Y		C		26E			0		70201
09			0		20A			3495		EU					5002
10A			0		20B			C		27			0		
10B			0		21A			C		29			0		
11 S	S Y	I	Ν		21B			C		30			0		
11		255	500		21C			C		31			0		
13		000	000		21D			C		32			0		
14		578	898		26A			C		34		60	06		
15		28	89		26B			C							
TN	20392	2809	29		PN	б	7896	559522		PP	P02	20827	03		
I declare and o	eturn B	nave exal	mined this return f, they are true,	fund Di	anying sci	hedules an	606 ad stateme			nt Due heck here if you a					
the best of my	KIIOwieuge a		i, illey ale ilue,	correct, and c	ompiete.				L to	discuss this retu	rn and attachi				elow.
Your Signature					Date					n, both must sign.)	Date	Contac	392809 ct Phone No		area code)
PAID PREPAR	RER USE ON	NLY If	prepared by a p	erson other th	nan taxpay	ver, this cer	rtification	is based on all	informatio	n of which the prepa	arer has any kno	wledge.			
SYAM P		AM S	SAGAR GU	JPT 03	307 Date			659522 ntact Phone Nu	mber (Inc	lude area code)			) 2 0 8 2 7 rer's FEIN, 3		IN
h	f you ARE	NOT du								)X R, RALEIGH, I F REVENUE, P.C			I, NC 2764	40-0640	

### D-400 2022 Page 2 (50)

Last Name (First 10 Characters)	KAIRAMKOND
	ICH I I I I I I I I I I I I I I I I I I

Your Social Security Number

272697451

~		•	00000
6.	Federal Adjusted Gross Income	6.	83398 0
7.	Additions to Federal Adjusted Gross Income	7.	-
8.	Add Lines 6 and 7	8.	83398
9. 10	Deductions From Federal Adjusted Gross Income Child Deduction	9.	0
10.		10a.	0
	a. Enter the number of qualifying children for whom you were allowed a federal child tax credit		0
11.	b. Enter the amount of the child deduction	10b. 11.	0
	N.C. Standard Deduction	11.	Y
11.	N.C. Itemized Deduction		N
11.	Deduction amount	11.	25500
12.	a. Add Lines 9, 10b, and 11 b. Subtract Line 12a from Line 8	12a.	25500
10		12b.	57898
13.	Part-year Residents and Nonresidents Taxable Percentage	13.	0.0000
14.	N.C. Taxable Income	14.	57898
15.	N.C. Income Tax	15.	2889
16.	Tax Credits	16.	0
17.	Subtract Line 16 from Line 15	17.	2889
18.	Consumer Use Tax	18.	0
	You certify that no Consumer Use Tax is due		Y
19.	Add Lines 17 and 18	19.	2889
<u>North</u>	Carolina Income Tax Withheld		
		20a.	3495
20a	Your tax withheld		
20a. 20b. <b>Other</b>	Your tax withheld Spouse's tax withheld Tax Payments	20a. 20b.	0
20b. <u>Other</u>	Spouse's tax withheld Tax Payments	20b.	0
20b. <u>Other</u> 21a.	Spouse's tax withheld Tax Payments 2022 estimated tax	20b. 21a.	0
20b. <u>Other</u> 21a. 21b.	Spouse's tax withheld Tax Payments 2022 estimated tax Paid with extension	20b. 21a. 21b.	0
20b. <u>Other</u> 21a. 21b. 21c.	Spouse's tax withheld Tax Payments 2022 estimated tax Paid with extension Partnership	20b. 21a. 21b. 21c.	0
20b. <u>Other</u> 21a. 21b. 21c. 21d.	Spouse's tax withheld Tax Payments 2022 estimated tax Paid with extension Partnership S Corporation	20b. 21a. 21b. 21c. 21d.	0
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	20b. 21a. 21b. 21c. 21d. 22.	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
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	20b. 21a. 21b. 21c. 21d. 22. 23.	0 0 0 0 0 0 3495
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	20b. 21a. 21b. 21c. 21d. 22. 23. 24.	0 0 0 0 0 0 3495 0
20b. <b>Other</b> 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	20b. 21a. 21b. 21c. 21d. 22. 23. 24. 25.	0 0 0 0 0 0 3495 0 3495
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	20b. 21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a.	0 0 0 0 0 0 3495 0 3495 0
20b. <b>Other</b> 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	20b. 21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b.	0 0 0 0 0 0 3495 0 3495
20b. <b>Other</b> 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	20b. 21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c.	0 0 0 0 0 3495 0 3495 0
20b. 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	20b. 21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b.	0 0 0 0 0 0 0 3495 0 3495 0 0 0
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	20b. 21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c.	0 0 0 0 0 0 3495 0 3495 0 3495 0 0 0 0
20b. Other 21a. 21b. 21c. 21d. 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	20b. 21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. 26d. EU 26e.	0 0 0 0 0 0 3495 0 3495 0 3495 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	20b. 21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. 26d. EU 26e. 27.	0 0 0 0 0 0 3495 0 3495 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.	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	20b. 21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. 26d. EU 26e.	0 0 0 0 0 0 3495 0 3495 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	20b. 21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. 26d. EU 26e. 27.	0 0 0 0 0 0 3495 0 3495 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 mt of Refund to Apply to:	20b. 21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. 26d. EU 26e. 27.	0 0 0 0 0 0 3495 0 3495 0 0 0 0 0 0 0 0 0
20b. 21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. 26d. EU 26e. 27. 28. <b>Amou</b>	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 Tax Interest on the Underpayment of Estimated Income Tax Pay this Amount Overpayment Amount of Line 28 to be applied to 2023 Estimated Income Tax	20b. 21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. 26d. EU 26e. 27. 28.	0 0 0 0 0 0 3495 0 3495 0 3495 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 mt of Refund to Apply to:	20b. 21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. 26d. EU 26e. 27. 28.	0 0 0 0 0 0 3495 0 3495 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
20b. 21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. 26d. EU 26e. 27. 28. <b>Amou</b> 29.	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 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. 29. 30.	0 0 0 0 0 0 3495 0 3495 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. 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 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	20b. 21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. 26d. EU 26e. 27. 28. 29. 30. 31.	0 0 0 0 0 0 3495 0 3495 0 3495 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0

D-400 Line-by-Line Information

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