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

2022

OMB No. 1545-007

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

Check only		Single Married filing jointly	_	ed filing separately (N		_				spou	lifying su use (QSS	5)	
one box.	-	ou checked the MFS box, enter the notion is a child but not your dependent	-	our spouse. If you c	hecke	ed the HOH or	r QSS	box, ente	r the o	child's	name if	the qu	alifying
Your first name	and mi	iddle initial	Last na	me					Y	our so	cial secu	ity nur	mber
ALI S			HUSS	AIN					1	02-	47-816	51	
If joint return, s	pouse's	s first name and middle initial	Last na	me					S	pouse'	s social s	curity	number
Home address	(numbe	er and street). If you have a P.O. box, see	instruction	ons.			- 1	Apt. no.	- 1		ntial Elect		
3790 CEI							. 1	2107			nere if you if filing jo		
,, , ,	ost offi	ce. If you have a foreign address, also co	mplete s	paces below.	Stat	te	ZIP c				this fund		
Dallas					TX	-	752				ow will no		ige
Foreign countr	y name		F	Foreign province/state/	count	у	Forei	gn postal co	de y	our tax	or refund		Spouse
Digital		ny time during 2022, did you: (a) rec			-		-				Yes		No
Assets		ange, gift, or otherwise dispose of a					asset)? (See in:	structi	ons.)	res		NO
Standard Deduction	_	eone can claim:		•		a dependent							
Age/Blindnes	You:	Were born before January 2, 1	958	Are blind Spo	use:	Was bo		ore Janua				olind	
Dependent	s (see	instructions):		(2) Social security		(3) Relationsh	hip (4) Check th	e box	if quali	fies for (se	e instru	uctions):
If more	(1) Fi	irst name Last name		number		to you		Child ta	x cred	it	Credit for o	ther de	pendents
than four													
dependents, see instruction	s											<u> </u>	
and check												<u>Ш</u>	
here L												Ш_	
Income	1a	Total amount from Form(s) W-2, b	•	•						1a		35 ,	752 .
A44 I- F (-)	b	Household employee wages not re								1b			
Attach Form(s) W-2 here. Also	С	Tip income not reported on line 1a	•	,						1c			
attach Forms	d	Medicaid waiver payments not rep			nstru	ctions)				1d			
W-2G and 1099-R if tax	е	Taxable dependent care benefits f								1e			
was withheld.	f	Employer-provided adoption bene								1f			
If you did not	g	Wages from Form 8919, line 6 .								1g			
get a Form W-2, see	h	Other earned income (see instruct	,			1	. i ·			1h	-		0.
instructions.	ı	Nontaxable combat pay election (s	see instr	ructions)		<u>1</u> i	I					2 -	750
		· · · · · · · · · · · · · · · · · · ·	 .		 L T.					1z		33,	752.
Attach Sch. B if required.	2a	'	2a			axable interes				2b			
	3a		3a 4a			rdinary divide axable amoun				3b 4b			
Standard	4a 5a		т а 5а			axable amoun				5b			
Deduction for—	6a		6a			axable amoun				6b			
Single or	C	If you elect to use the lump-sum e		method check here						OD			
Married filing separately,	7	Capital gain or (loss). Attach Sche			•	,				7			
\$12,950 Married filing	8	Other income from Schedule 1, lin		· · · · · · ·					. Ш	8			881.
jointly or	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7								9			633.
Qualifying surviving spouse,	10	Adjustments to income from Sche		=						10		,	
\$25,900 Head of	11	Subtract line 10 from line 9. This is								11		44 -	633.
household,	12	Standard deduction or itemized	-	-						12			950.
\$19,400 If you checked	13	Qualified business income deduct				5-A				13			
any box under Standard	14									14		12,	950.
Deduction, see instructions.	15	Subtract line 14 from line 11. If zer	o or less	s, enter -0 This is y	our t	axable incom	ne .			15			683.

Tax (see instructions). Check if any from Form(s): 1 8814 2 4972 3 Amount from Schedule 2, line 3 Add lines 16 and 17 Child tax credit or credit for other dependents from Schedule 8812 Amount from Schedule 3, line 8 Add lines 19 and 20 Subtract line 21 from line 18. If zero or less, enter -0- Other taxes, including self-employment tax, from Schedule 2, line 21 Add lines 22 and 23. This is your total tax Federal income tax withheld from: Form(s) W-2 Form(s) 1099 Other forms (see instructions) Add lines 25a through 25c 2022 estimated tax payments and amount applied from 2021 return Earned income credit (EIC) Additional child tax credit from Schedule 8812	16 17 18 19 20 21 22 23 24 25d 26	Page 3,596. 3,596. 3,596. 0. 3,596.
Amount from Schedule 2, line 3 Add lines 16 and 17 Child tax credit or credit for other dependents from Schedule 8812 Amount from Schedule 3, line 8 Add lines 19 and 20 Subtract line 21 from line 18. If zero or less, enter -0- Other taxes, including self-employment tax, from Schedule 2, line 21 Add lines 22 and 23. This is your total tax Federal income tax withheld from: Form(s) W-2 Form(s) 1099 State 1	18 19 20 21 22 23 24	3,596. 0. 3,596.
Add lines 16 and 17	19 20 21 22 23 24 25d	3,596. 0. 3,596.
Amount from Schedule 3, line 8 Add lines 19 and 20 Subtract line 21 from line 18. If zero or less, enter -0- Other taxes, including self-employment tax, from Schedule 2, line 21 Add lines 22 and 23. This is your total tax Federal income tax withheld from: Form(s) W-2 Form(s) 1099 Other forms (see instructions) Add lines 25a through 25c Add lines 25a through 25c 2022 estimated tax payments and amount applied from 2021 return Earned income credit (EIC)	20 21 22 23 24 25d	3,596. 0. 3,596.
Add lines 19 and 20	21 22 23 24 25d	0. 3,596.
Add lines 19 and 20	22 23 24 25d	0. 3,596.
Other taxes, including self-employment tax, from Schedule 2, line 21 Add lines 22 and 23. This is your total tax Federal income tax withheld from: Form(s) W-2	23 24 25d	0. 3,596.
Other taxes, including self-employment tax, from Schedule 2, line 21 Add lines 22 and 23. This is your total tax Federal income tax withheld from: Form(s) W-2	24 25d	3,596.
Federal income tax withheld from: Form(s) W-2 25a 6,036 Form(s) 1099 25b 932 Other forms (see instructions) 25c Add lines 25a through 25c 2022 estimated tax payments and amount applied from 2021 return Earned income credit (EIC) 27	25d	
Federal income tax withheld from: Form(s) W-2 25a 6,036 Form(s) 1099 25b 932 Other forms (see instructions) 25c Add lines 25a through 25c 2022 estimated tax payments and amount applied from 2021 return Earned income credit (EIC) 27		6,968.
Form(s) 1099 25b 932 Other forms (see instructions) 25c Add lines 25a through 25c 2022 estimated tax payments and amount applied from 2021 return Earned income credit (EIC) 27		6,968.
Other forms (see instructions)		6,968.
Add lines 25a through 25c		6,968.
2022 estimated tax payments and amount applied from 2021 return		6,968.
Earned income credit (EIC)	26	
` '		
Additional child tax credit from Schedule 8812		
American opportunity credit from Form 8863, line 8		
Reserved for future use		
Amount from Schedule 3, line 15		
Add lines 27, 28, 29, and 31. These are your total other payments and refundable credits	32	
Add lines 25d, 26, and 32. These are your total payments	33	6,968.
If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid	34	3 , 372.
Amount of line 34 you want refunded to you . If Form 8888 is attached, check here	35a	3,372.
Amount of line 34 you want applied to your 2023 estimated tax		
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	
Estimated tax penalty (see instructions)		
o you want to allow another person to discuss this return with the IRS? See structions		X No
•• 5	rication	
1	Add lines 25d, 26, and 32. These are your total payments	Add lines 25d, 26, and 32. These are your total payments

пете	Your signature			Date	Your o	ccupation			If the IRS ser Protection P	,		,
Joint return?					CONS	SULTANT	ı		(see inst.)			
See instructions. Keep a copy for your records.	Spouse's signature. If	a joint return, t	ooth must sign.	Date	Spous	e's occupation	on		If the IRS ser Identity Prote (see inst.)	,		
	Phone no. (240)870-062	6	Email addre	s ALIS	HERHUSSA	IN34@GMAIL.C	OM				
Paid	Preparer's name		Preparer's signat	ture			Date	PT	IN	Check	if:	
	SYAM PRIYA RAM SAGAR	GUPTA TALLAM	SYAM PRIYA	RAM SAGA	R GUPTA	TALLAM	04/19/2023	P0	2082703	☐ Se	elf-empl	oyed
Preparer Use Only	Firm's name GL	OBAL TAX	XES LLC						Phone no. ((678)	965-S	9522
USE Offing	Firm's address 24	5 ROOMES	V CT F BRI	INSWICK	N.T ORS	216			Firm's FINI	Ω1.	-3171	065

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Form **1040** (2022)

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

SCHEDULE 1 (Form 1040)

Additional Income and Adjustments to Income

OMB No. 1545-0074

2022
Attachment
Sequence No. 01

Department of the Treasury Internal Revenue Service

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

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

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

102-47-8161

Par	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	
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		
- 1	Income from the rental of personal property if you engaged in the rental			
	for profit but were not in the business of renting such property	81		
m	Olympic and Paralympic medals and USOC prize money (see			
	instructions)	8m		
n	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 ()	
t	Pension or annuity from a nonqualifed deferred compensation plan or			
	a nongovernmental section 457 plan	8t	-	
	Wages earned while incarcerated	8u		
Z	Other income. List type and amount:	0.001		
•	Other Income from box 3 of 1099-Misc 8,881.	8z 8,881.	-	0 001
9	Total other income. Add lines 8a through 8z		9	8,881.
10	Combine lines 1 through 7 and 9. Enter here and on Form 1040, 1040-SR	. OT 1040-INK. IINĖ 8	10	8,881.

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

Par	Adjustments to Income			
11	Educator expenses		11	
12	Certain business expenses of reservists, performing artists, and fee-t			
	officials. Attach Form 2106		12	
13	Health savings account deduction. Attach Form 8889		13	
14	Moving expenses for members of the Armed Forces. Attach Form 3903		14	
15	Deductible part of self-employment tax. Attach Schedule SE		15	
16	Self-employed SEP, SIMPLE, and qualified plans		16	
17	Self-employed health insurance deduction		17	
18	Penalty on early withdrawal of savings		18	
19a	Alimony paid		19a	
b	Recipient's SSN			_
С	Date of original divorce or separation agreement (see instructions):			
20	IRA deduction		20	
21	Student loan interest deduction		21	
22	Reserved for future use		22	
23	Archer MSA deduction		23	
24	Other adjustments:			
а	Jury duty pay (see instructions)	24a		
b	Deductible expenses related to income reported on line 8I from the			
	rental of personal property engaged in for profit	24b		
С	Nontaxable amount of the value of Olympic and Paralympic medals			
		24c		
d		24d		
е	Repayment of supplemental unemployment benefits under the Trade			
		24e		
f		24f		
g	, , , , , , , , , , , , , , , , , , , ,	24g		
h	Attorney fees and court costs for actions involving certain unlawful			
	·	24h		
i	Attorney fees and court costs you paid in connection with an award			
	from the IRS for information you provided that helped the IRS detect	- 41		
	F	24i		
j	<u> </u>	24j		
K	Excess deductions of section 67(e) expenses from Schedule K-1 (Form	S.4.		
		24k		
Z	Other adjustments. List type and amount:			
05		24z	05	
25	Total other adjustments. Add lines 24a through 24z		25	
26	Add lines 11 through 23 and 25. These are your adjustments to income .		00	
	Form 1040 or 1040-SR, line 10, or Form 1040-NR, line 10a		26	

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Control Contro	e All		of Yo	our	2022	_		ina D	ncome Department ended Return	-		DOR Use Only			
	lenda	ır year 2	2022, c	or fiscal yea		g		22	and ending			Are you a ve		Yes	No X
ALI 3790 DALL		DARPI TX 7			SAIN			2107	Your SS Spouse's SS			Were you gra		? Yes L omatic extension return, e.g., Fo	
Filing S	Statu		1. Sino	gle ad of Househo		1	ed Filing fying Wid	•	3. Marri	ed Filing	Separately	Year spou	Yes	No X	
1 1		resident	t of N.0	C. for the en	tire year?		Yes _	No	\neg \neg		r deceased ta	axpayer.	Date of c		
				ent for the e			Yes L to the N	.C. Edu	L R ucation Endow		r deceased s und by makin		Date of cution or des		ne or all of
your o	verpa	ayment t	o the F	Fund. To ma	ake a cont	ribution,	enclose	Form 1	NC-EDU and y (See instruct	our pay	ment of \$	0.	To design	nate your ove	
Se	lect l	oox if yo	u, or if	f married fili	ng jointly,	your spo	use wer	e out c	of the country of	on April	15, 2023, and	d a U.S. cit		dent.	
L Se	lect l	oox if ret	turn is	filed and signature	gned by E	xecutor,	<u>Adminis</u>	trator,	or Court-Appo	inted Pe	ersonal Repre	esentative.			
FS 1	L	PP	Y		DT	N	OC	N	TPRES	N	SPRES	N	VT	N SV	T N
HUSS		3790)	75209	DS	N	EA	N	TD		Š	SD		FD	EXT N
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												TX	7520	9	
3790	CE	DARE	PLAZ	ZA LN					2107	DA	LLAS				
06			446	533		16			0		26C			0	
07				0		18	Y		0		26E			0	7020
09				0		20A			758		EU				500
10A				0		20B			0		27			0	24
10B				0		21A			0		29		1	0	
11	S	Y	I	N		21B			0		30		ı	0	
11			127	750		21C			0		31		ı	0	
13			025	571		21D			0		32		ı	0	
14			81	L97		26A			0		34		34	9	
15			4	109		26B			0						
TN	2	4087	7006	526		PN	6	7896	659522		PP	P02	08270	3	
		tify that I h		mined this retur f, they are true,	efund D		nedules an	349 d stateme		ment Chec to dis	Due k here if you au cuss this return	uthorize the I	O North Carolin ments with th	a Department e paid prepare	of Revenue er below.
Your Signa	ature					Date	Spou	use's Sigr	nature (If filing join	t return, bo	oth must sign.)	Date		3700626 Phone No. (<i>Inclu</i>	de area code)
PAID PRE	PARE	R USE ON	ILY If	prepared by a p	person other t	han taxpay	er, this cer	tification	is based on all info	rmation of	which the prepare	er has any kno	wledge.		
			AM S	SAGAR GI	JPT 0	4 19	_		659522	/l	and a sector			2082703	DTIN
Paid Prepa	arer's (signature		If DE	ELIND mail	Date	· ·		ntact Phone Number			C 2763/ 00/	· ·	's FEIN, SSN, or	PIIN
	If y	ou ARE	NOT d		-				<i>OV to:</i> N.C. DEI					NC 27640-064	10

Name	(First 10 Characters) HUSSAIN Your Social Security Number	10247	78161
	D-400 Line-by-Line Information		
6.	Federal Adjusted Gross Income	6.	44633
7.	Additions to Federal Adjusted Gross Income	7.	0
8.	Add Lines 6 and 7	8.	44633
9.	Deductions From Federal Adjusted Gross Income	9.	11055
10.	Child Deduction	J.	
10.	a. Enter the number of qualifying children for whom you were allowed a federal child tax credit	10a.	C
	b. Enter the amount of the child deduction	10b.	C
11.	N.C. Standard Deduction	11.	Y
11.	N.C. Itemized Deduction	11.	N
11.	Deduction amount	11.	12750
12.	a. Add Lines 9, 10b, and 11	12a.	12750
	b. Subtract Line 12a from Line 8	12b.	31883
13.	Part-year Residents and Nonresidents Taxable Percentage	13.	0.2571
14.	N.C. Taxable Income	14.	8197
15.	N.C. Income Tax	15.	409
16.	Tax Credits	16.	(
17.	Subtract Line 16 from Line 15	17.	409
18.	Consumer Use Tax	18.	C
	You certify that no Consumer Use Tax is due		λ
19.	Add Lines 17 and 18	19.	409
North			
North 20a.	Carolina Income Tax Withheld Your tax withheld	20a.	758
20a. 20b.	Your tax withheld Spouse's tax withheld	20a. 20b.	758 0
20a. 20b. Other	Your tax withheld Spouse's tax withheld Tax Payments	20b.	(
20a. 20b. Other 21a.	Your tax withheld Spouse's tax withheld Tax Payments 2022 estimated tax	20b. 21a.	(
20a. 20b. Other 21a. 21b.	Your tax withheld Spouse's tax withheld Tax Payments 2022 estimated tax Paid with extension	20b. 21a. 21b.	(
20a. 20b. Other 21a. 21b. 21c.	Your tax withheld Spouse's tax withheld Tax Payments 2022 estimated tax Paid with extension Partnership	20b. 21a. 21b. 21c.	(
20a. 20b. Other 21a. 21b. 21c. 21d.	Your tax withheld Spouse's tax withheld Tax Payments 2022 estimated tax Paid with extension Partnership S Corporation	20b. 21a. 21b. 21c. 21d.	()
20a. 20b. Other 21a. 21b. 21c. 21d. 22.	Your tax withheld 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. 23.	Your tax withheld 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.	(((((758
20a. 20b. Other 21a. 21b. 21c. 21d. 22. 23. 24.	Your tax withheld 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.	((((758
20a. 20b. Other 21a. 21b. 21c. 21d. 22. 23. 24. 25.	Your tax withheld 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.	758 758
20a. 20b. Other 21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a.	Your tax withheld 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.	758 (0
20a. 20b. Other 21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b.	Your tax withheld 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.	758 758
20a. 20b. Other 21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c.	Your tax withheld 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.	758 (758 (000)
20a. 20b. Other 21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. 26d.	Your tax withheld 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.	758 (758 (000)
20a. 20b. Other 21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. 26d. EU	Your tax withheld 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	758 () () () ()
20a. 20b. Other 21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. 26d. EU 26e.	Your tax withheld 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	758 758 ()
20a. 20b. Other 21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. 26d. EU 26e. 27.	Your tax withheld 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.	758 758 ()
20a. 20b. Other 21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. 26d. EU 26e. 27. 28.	Your tax withheld Spouse's tax withheld Tax Payments 2022 estimated tax Paid with extension Partnership S Corporation Additional Payments Add Lines 20a through 22 Previous Refunds Subtract Line 24 from Line 23 Tax Due Penalties Interest Add Lines 26b and 26c and enter the total on 26d Exception to Underpayment of Estimated Tax Interest on the Underpayment of Estimated Income Tax Pay this Amount Overpayment	21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. 26d. EU	
20a. 20b. Other 21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. 26d. EU 26e. 27. 28.	Your tax withheld 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.	758 758 ()
20a. 20b. Other 21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. 26d. EU 26e. 27. 28.	Your tax withheld Spouse's tax withheld Tax Payments 2022 estimated tax Paid with extension Partnership S Corporation Additional Payments Add Lines 20a through 22 Previous Refunds Subtract Line 24 from Line 23 Tax Due Penalties Interest Add Lines 26b and 26c and enter the total on 26d Exception to Underpayment of Estimated Tax Interest on the Underpayment of Estimated Income Tax Pay this Amount Overpayment	21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. 26d. EU 26e. 27.	758 (0 758 (0 (0 (0 (0 (0 (0 (349
20a. 20b. Other 21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. 26d. EU 26e. 27. 28. Amou	Your tax withheld Spouse's tax withheld Tax Payments 2022 estimated tax Paid with extension Partnership S Corporation Additional Payments Add Lines 20a through 22 Previous Refunds Subtract Line 24 from Line 23 Tax Due Penalties Interest Add Lines 26b and 26c and enter the total on 26d Exception to Underpayment of Estimated Tax Interest on the Underpayment of Estimated Income Tax Pay this Amount Overpayment unt of Refund to Apply to:	21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. 26d. EU 26e. 27. 28.	758 () 758 () () () ()
20a. 20b. Other 21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. 26d. EU 26e. 27. 28.	Your tax withheld 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 and of Refund to Apply to:	21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. 26d. EU 26e. 27. 28.	758 (758 (6) (758 (6) (6) (758 (758)
20a. 20b. Other 21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. 26d. EU 26e. 27. 28. Amou 29. 30.	Your tax withheld 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	21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. 26d. EU 26e. 27. 28.	758 (0 758 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0
20a. 20b. Other 21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. 26d. EU 26e. 27. 28. Amou 29. 30. 31.	Your tax withheld Spouse's tax withheld Tax Payments 2022 estimated tax Paid with extension Partnership S Corporation Additional Payments Add Lines 20a through 22 Previous Refunds Subtract Line 24 from Line 23 Tax Due Penalties Interest Add Lines 26b and 26c and enter the total on 26d Exception to Underpayment of Estimated Tax Interest on the Underpayment of Estimated Income Tax Pay this Amount Overpayment unt of Refund to Apply to: Amount of Line 28 to be applied to 2023 Estimated Income Tax N.C. Nongame and Endangered Wildlife Fund N.C. Education Endowment Fund	20b. 21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. 26d. EU 26e. 27. 28.	758 758 0

D-400 Sch PN (50)

d. IRC Section 179 Expense

Total Additions

e. Other Additions to Federal Adjusted Gross Income That Relate to Gross Income

8-17-22

2022 Part-Year Resident and Nonresident Schedule

North Carolina Department of Revenue

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

Last N	Name (First 10 Characters)	HUSSAI	N		Your S	Social Security Num	ber 102478161
sources	ear resident or a nonresident that is subject to N.C. tax. Y became a resident of anoth	ou are a "part er state during	-year resident" if you m	noved to N.C. a	nd became a	resident during the target a resident of N.C. a	ax year, or you moved out o
	NRT Y	PYT N				22	11477
	NRS N	PYS N				23	44633
Part A	A. Residency Status						
☐ Fu	Taxpayer is: (Se III-Year Resident X Non I.C. residency began	resident Date	Part-Year Resident N.C. residency ended	Date N.C. ı	ar Resident residency bega		Part-Year Resident ate N.C. residency ended
	u and your spouse were both B. Allocation of Income				Parts B and C	Do not attach Sch	edule PN to Form D-400.
	Income	, ioi i dite iot	a Residents and No	mediaenta	Т	COLUMN A otal Income m all sources	COLUMN B Amount of Column A subject to N.C. tax
1.	Wages, Salaries, Tips, Etc				1.	35752	2596
2.	Taxable Interest				2.	0	0
3.	Taxable Dividends				3.	0	0
4.	Taxable Refunds, Credits,	or Offsets					
	of State and Local Income	Taxes			4.	0	0
5.	Alimony Received				5.	0	0
6.	Business Income or (Loss))			6.	0	0
7.	Capital Gain or (Loss)			7 0.2	7.	0	0
8.	Other Gains or (Losses) Taxable Amount of IRA Dis			200	8.	0	0
9.				9 5	9.	0	0
10.	Taxable Amount of Pension and Annuities	ns			10.	0	0
11.	Rental Real Estate, Royali	ties Partnershi	ns	4	10.	O	O
'''	S-Corps, Estates, Trusts, E		PO,		11.	0	0
12.	Farm Income or (Loss)	_10.			12.	0	0
13.	Unemployment Compensa	ation			13.	0	0
14.	Taxable Portion of Social S						
	and Railroad Retirement B	Benefits			14.	0	0
15.	Other Income				15.	8881	8881
16.	Total Income				16.	44633	11477
North	Carolina Adjustments				Enter	COLUMN A the amount from 0-400 Schedule S	COLUMN B Amount of Column A subject to N.C. tax
17.	Additions						
	a. Interest Income From C	Obligations of S	tates Other Than N.C.		17a.	0	0
	b. Deferred Gains Reinve	sted Into an Op	portunity Fund		17b.	0	0
	 c. Bonus Depreciation 				17c.	0	0

17d.

17e.

18.

0

0

0

0

0

Last Name (First 10 Characters) HUSSAIN Your Social Security Number 102478161

		C	OLUMN A	COLUMN B
			he amount from 0-400 Schedule S	Amount of Column A subject to N.C. tax
19.	Deductions			
	a. State or Local Income Tax Refund	19a.	0	0
	b. Interest Income From Obligations of the United States			
	or United States' Possessions	19b.	0	0
	c. Taxable Portion of Social Security and			
	Railroad Retirement Benefits	19c.	0	0
	d. Retirement Benefits Received by Vested N.C. State Government, N.C.	19d.	0	0
	Local Government, or Federal Government Retirees, i.e. Bailey Settlement			
	e. Bonus Asset Basis	19e.	0	0
	f. Bonus Depreciation	19f.	0	0
	g. IRC Section 179 Expense	19g.	0	0
	h. Other Deductions From Federal Adjusted Gross			
	Income That Relate to Gross Income	19h.	0	0
20.	Total Deductions	20.	0	0
21.	Total Income Modified by N.C. Adjustments	21.	44633	11477
art (C. Part-Year Residents and Nonresidents Taxable Percentage			
22.	Enter the Amount From Column B, Line 21		22	11477
23.	Enter the Amount From Column A, Line 21		23	
24.	Part-Year Residents and Nonresident Taxable Percentage		24	. 0.551

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