

Virginia requires you to submit your pay

be made electronically because you met one of the thresholds listed in the instructions.

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2023 FORM 760ES - Voucher 1

Doc ID 762
VIRGINIA ESTIMATED INCOME TAX
PAYMENT VOUCHER FOR INDIVIDUALS

DUE: 05-01-23

- Check if this is a new address.
- Check here if this is your first payment for this taxable year.

REV 02/17/23 PRO 1555

LOCALITY NO.	FOR OFFICE USE
810	

6901187515 7621555 123056 810

Your Social Security Number (SSN) Spouses SSN (if filing a joint return)
690118751 839670231
VENKAT RAJEEV REDDY MALIPEDDI
KEERTHANA CHIT REDDY
260 WOODSIDE CT APT # 231

ROCHESTER HILLS MI 48307

Daytime Phone Number 937-979-7829

Mail your voucher and payment to the Virginia Department of Taxation, P. O. Box 1478, Richmond, VA 23218-1478, or see pages 7-8 and use the address listed for the city or county where you intend to file.

If you file with the Department, make your check payable to the Department of Taxation. If you file locally, make your check payable to your local Treasurer.

Amount of payment

550.00

Virginia requires you to submit your pay

be made electronically because you met one of the thresholds listed in the instructions.

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2023 FORM 760ES - Voucher 2

Doc ID 762

VIRGINIA ESTIMATED INCOME TAX
PAYMENT VOUCHER FOR INDIVIDUALS

DUE: 06-15-23

- Check if this is a new address.
 Check here if this is your first payment for this taxable year.

REV 02/17/23 PRO 1555

LOCALITY NO. 810	FOR OFFICE USE
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6901187515 7621555 123064 810

Your Social Security Number (SSN) Spouses SSN (if filing a joint return)
690118751 839670231
VENKAT RAJEEV REDDY MALIPEDDI
KEERTHANA CHIT REDDY
260 WOODSIDE CT APT # 231

ROCHESTER HILLS MI 48307

Daytime Phone Number 937-979-7829

Mail your voucher and payment to the Virginia Department of Taxation, P. O. Box 1478, Richmond, VA 23218-1478, or see pages 7-8 and use the address listed for the city or county where you intend to file.

If you file with the Department, make your check payable to the Department of Taxation. If you file locally, make your check payable to your local Treasurer.

Amount of payment

550.00

Virginia requires you to submit your pay

be made electronically because you met one of the thresholds listed in the instructions.

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2023 FORM 760ES - Voucher 3

Doc ID 762

VIRGINIA ESTIMATED INCOME TAX
PAYMENT VOUCHER FOR INDIVIDUALS

DUE: 09-15-23

- Check if this is a new address.
 Check here if this is your first payment for this taxable year.

REV 02/17/23 PRO 1555

LOCALITY NO.	FOR OFFICE USE
810	

6901187515 7621555 123099 810

Your Social Security Number (SSN) Spouses SSN (if filing a joint return)
690118751 839670231
VENKAT RAJEEV REDDY MALIPEDDI
KEERTHANA CHIT REDDY
260 WOODSIDE CT APT # 231

ROCHESTER HILLS MI 48307

Daytime Phone Number 937-979-7829

Mail your voucher and payment to the Virginia Department of Taxation, P. O. Box 1478, Richmond, VA 23218-1478, or see pages 7-8 and use the address listed for the city or county where you intend to file.

If you file with the Department, make your check payable to the Department of Taxation. If you file locally, make your check payable to your local Treasurer.

Amount of payment

550.00

Virginia requires you to submit your pay

be made electronically because you met one of the thresholds listed in the instructions.

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2023 FORM 760ES - Voucher 4

Doc ID 762

VIRGINIA ESTIMATED INCOME TAX
PAYMENT VOUCHER FOR INDIVIDUALS

DUE: 01-16-24

- Check if this is a new address.
 Check here if this is your first payment for this taxable year.

REV 02/17/23 PRO 1555

LOCALITY NO.	FOR OFFICE USE
810	

6901187515 7621555 124011 810

Your Social Security Number (SSN) Spouses SSN (if filing a joint return)
690118751 839670231
VENKAT RAJEEV REDDY MALIPEDDI
KEERTHANA CHIT REDDY
260 WOODSIDE CT APT # 231

ROCHESTER HILLS MI 48307

Daytime Phone Number 937-979-7829

Mail your voucher and payment to the Virginia Department of Taxation, P. O. Box 1478, Richmond, VA 23218-1478, or see pages 7-8 and use the address listed for the city or county where you intend to file.

If you file with the Department, make your check payable to the Department of Taxation. If you file locally, make your check payable to your local Treasurer.

Amount of payment

550.00

2022 Virginia Nonresident Income Tax Return

Due May 1, 2023



Enclose a complete copy of your federal tax return and all other required Virginia enclosures.

First Name VENKAT RAJEEV REDDY	MI	Last Name MALI PEDDI	Suffix	Your Social Security Number 690-11-8751	<input type="checkbox"/> Check if deceased
Spouse's First Name (Filing Status 2 Only) KEERTHANA	MI	Last Name CHIT REDDY	Suffix	Spouse's Social Security Number 839-67-0231	<input type="checkbox"/> Check if deceased
Present Home Address (Number and Street or Rural Route) 260 WOODSIDE CT APT 231			Your Birth Date (mm-dd-yyyy) 07 - 19 - 1992		
City, Town or Post Office ROCHESTER HILLS		State MI	ZIP Code 48307	Spouse's Birth Date (mm-dd-yyyy) 07 - 04 - 1997	
State of Residence TN	Important - Name of Virginia City or County in which principal place of business, employment, or income source is located. VIRGINIA BEACH				Locality Code 810
			<input checked="" type="checkbox"/> City OR <input type="checkbox"/> County		

Check Applicable Boxes	<input type="checkbox"/> Amended Return Reason Code <input type="checkbox"/>	<input type="checkbox"/> Name(s) or Address Different than Shown on 2021 VA Return	<input type="checkbox"/> Overseas on Due Date
	<input type="checkbox"/> Dependent on Another's Return	<input type="checkbox"/> Qualifying Farmer, Fisherman, or Merchant Seaman	EIC Claimed on federal return \$ _____ .00

Filing Status Enter Filing Status Code in box below.

- 1 = Single. Federal head of household? YES
- 2 = Married, Filing Joint Return - both must have Virginia income
- 3 = Married, Spouse Has No Income From Any Source
- 4 = Married, Filing Separate Returns

If Filing Status 3 or 4, enter spouse's SSN in the Spouse's Social Security Number box at top of form and enter Spouse's Name _____

Exemptions Add Sections 1 and 2. Enter the sum on Line 12.

You	Spouse if Filing Status 2 or 3	Dependents	Total Section 1	
<input type="text" value="1"/>	<input type="text" value="1"/>	<input type="text"/>	= <input type="text" value="2"/>	X \$930 = <input type="text" value="1860"/>
You 65 or over	Spouse 65 or over	You Blind	Spouse Blind	Total Section 2
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	= <input type="text"/> X \$800 = <input type="text"/>

1	Adjusted Gross Income from federal return - <i>Not federal taxable income</i>	1	77459	00
2	Additions from Schedule 763 ADJ, Line 3.....	2		00
3	Add Lines 1 and 2	3	77459	00
4	Age Deduction (See instructions and the Age Deduction Worksheet)..... You	4a		00
	Enter Birth Dates above. Enter Your Age Deduction on Line 4a			
	and Your Spouse's Age Deduction on Line 4b..... Spouse	4b		00
5	Social Security Act and equivalent Tier 1 Railroad Retirement Act benefits reported on your federal return.	5		00
6	State income tax refund or overpayment credit reported as income on your federal return.	6		00
7	Subtractions from Schedule 763 ADJ, Line 7.....	7		00
8	Add Lines 4a, 4b, 5, 6, and 7	8		00
9	Virginia Adjusted Gross Income (VAGI). Subtract Line 8 from Line 3	9	77459	00
10	Itemized Deductions from Virginia Schedule A, if applicable. See instructions.....	10		00
11	If you do not claim itemized deductions on Line 10, enter standard deduction. See instructions.	11	16000	00
12	Exemption amount. Enter the total amount from the Exemption Sections 1 and 2 above.	12	1860	00
13	Deductions from Schedule 763 ADJ, Line 9.....	13		00
14	Add Lines 10, 11, 12 and 13	14	17860	00
15	Virginia Taxable Income computed as a resident. Subtract Line 14 from Line 9.....	15	59599	00
16	Percentage from Nonresident Allocation Section on Page 2 (Enter to one decimal place only).....	16	75.9	%
17	Nonresident Taxable Income. (Multiply Line 15 by percentage on Line 16).....	17	45236	00
18	Income Tax from Tax Table or Tax Rate Schedule.....	18	2344	00
19a	Your Virginia income tax withheld. Enclose Forms W-2, W-2G, 1099, and VK-1.....	19a	145	00

LTD

\$ _____

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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Your Name V MALIPEDDI & K CHIT REDDY	Your SSN 690-11-8751
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19b	Spouse's Virginia income tax withheld. Enclose Forms W-2, W-2G, 1099, and VK-1.	19b		00
20	2022 Estimated Tax Payments.	20		00
21	2021 overpayment credited to 2022 estimated tax.	21		00
22	Extension Payment - submitted using Form 760IP.	22		00
23	Credit for Low-Income Individuals or Virginia Earned Income Credit from Schedule 763 ADJ, Line 17.	23		00
24	Total credits from Schedule OSC.	24		00
25	Credits from Schedule CR, Section 5, Line 1A.	25		00
26	Total payments and credits. Add Lines 19a through 25.	26	145	00
27	If Line 18 is larger than Line 26, enter the difference. This is the INCOME TAX YOU OWE .	27	2199	00
28	If Line 26 is larger than Line 18, enter the difference. This is the OVERPAYMENT AMOUNT .	28		00
29	Amount of overpayment on Line 28 to be CREDITED TO 2023 ESTIMATED INCOME TAX.	29		00
30	Virginia529 and ABLE Contributions from Schedule VAC, Part I, Line 6.	30		00
31	Other Voluntary Contributions from Schedule VAC, Section II, Line 14.	31		00
32	Addition to Tax, Penalty, and Interest from enclosed Schedule 763 ADJ, Line 21. See instructions. Enclose 760C or 760F and check here. <input checked="" type="checkbox"/>	32	16	00
33	Sales and Use Tax is due on Internet, mail order, and out-of-state purchases (Consumer's Use Tax). See instructions. Check here if no sales and use tax is due. <input checked="" type="checkbox"/>	33		00
34	Add Lines 29 through 33.	34	16	00
35	If you owe tax on Line 27, add Lines 27 and 34 - OR - If you have an overpayment on Line 28 and Line 34 is larger than Line 28, enter the difference. AMOUNT YOU OWE . Enclose payment or pay at www.tax.virginia.gov . Check here if paying by credit or debit card - See instructions. <input type="checkbox"/>	35	2215	00
36	If Line 28 is larger than Line 34, subtract Line 34 from Line 28. This is the amount to be REFUNDED TO YOU .	36		00

If the Direct Deposit section below is not completed, your refund will be issued by check.

DIRECT BANK DEPOSIT	Your Bank Routing Transit Number	Your Bank Account Number	Checking <input type="checkbox"/>	Savings <input type="checkbox"/>
Domestic Accounts Only No International Deposits	<input type="text"/>	<input type="text"/>		

Nonresident Allocation Percentage

		A - All Sources		B - Virginia Sources	
1. Wages, salaries, tips, etc.	1	81295	00	58795	00
2. Interest income.	2	3988	00	0	00
3. Dividends.	3		00		00
4. Alimony received.	4		00		00
5. Business income or loss.	5		00		00
6. Capital gain or loss/capital gain distributions.	6	212	00	0	00
7. Other gains or losses.	7		00		00
8. Taxable pensions, annuities and IRA distributions.	8	0	00		
9. Rents, royalties, partnerships, estates, trusts, S corporations, etc.	9	-8136	00	0	00
10. Farm income or loss.	10		00		00
11. Other income.	11	100	00	0	00
12. Interest on obligations of other states from Schedule 763 ADJ, Line 1.	12		00		
13. Lump-sum and accumulation distributions included on Sch. 763 ADJ, Line 3.	13		00		00
14. TOTAL - Add Lines 1 through 13 and enter each column total here.	14	77459	00	58795	00
15. Nonresident allocation percentage - Divide Line 14 B, by Line 14 A. <i>Compute percentage to one decimal place (e.g., 5.4%).</i> Enter on Page 1, Line 16.	15			75.9%	

I (We) authorize the Dept. of Taxation to discuss this return with my (our) preparer. I agree to obtain my Form 1099-G at www.tax.virginia.gov.

I (We), the undersigned, declare under penalty provided by law that I (we) have examined this return and to the best of my (our) knowledge, it is a true, correct, and complete return.

Your Signature		Your Phone Number (937) 979-7829		Date	
Spouse's Signature (If a joint return, both must sign)		Spouse's Phone Number		Preparer's PTIN P02082703	
Preparer's Name SYAM PRIYA RAM SAGAR GUPTA TALLAM		Firm's Name (or Yours if Self-Employed) GLOBAL TAXES LLC		Preparer's Phone Number (678) 965-9522	
				Vendor Code 1555	
				Filing Election Code	
				ID Theft PIN	

2022 Virginia Schedule 763 ADJ

Page 1



Your Name V MALIPEDDI & K CHIT REDDY	Your SSN 690-11-8751
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Additions to Adjusted Gross Income

1. Interest on obligations of other states, exempt from federal income tax, but not from state tax.	1		00
2. Other additions to adjusted gross income.			
2a. Fixed Date Conformity addition - See instructions	2a		00
2b - 2c. Refer to the Form 763 instructions for Other Addition Codes.			
		Code	
	2b	<input type="text"/>	00
	2c	<input type="text"/>	00
3. Total Additions. Add Lines 1, 2a - 2c. Enter here and on Form 763, Line 2.	3		00

Subtractions from Adjusted Gross Income

4. Income (interest, dividends or gains) from obligations or securities of the U.S. exempt from state income tax, but not from federal tax	4		00
5. Disability income reported as wages (or payments in lieu of wages) on your federal return. If claiming this subtraction you cannot also claim Age Deduction. Claim the one that benefits you most.			
5a. Enter YOUR disability subtraction on 5a.	5a		00
5b. Enter SPOUSE's disability subtraction on 5b, if claiming Filing status 2	5b		00
6. Other Subtractions as provided in instructions			
6a. Fixed Date Conformity subtraction. See instructions.....	6a		00
6b - 6d. Refer to the Form 763 instructions for Other Subtraction Codes.			
		Certification Number	Code
	6b	<input type="text"/>	<input type="text"/>
	6c	<input type="text"/>	<input type="text"/>
	6d	<input type="text"/>	<input type="text"/>
7. Total Subtractions. Add Lines 4, 5a, 5b, and 6a - 6d. Enter here and on Form 763, Line 7.	7		00

Deductions from Virginia Adjusted Gross Income

8. Refer to the Form 763 instructions for Deduction Codes.			
		Code	
	8a.	<input type="text"/>	00
	8b.	<input type="text"/>	00
	8c.	<input type="text"/>	00
9. Total Deductions. Add Lines 8a - 8c. Enter here and on Form 763, Line 13	9		00

Use Schedule ADJS if you are claiming more additions, subtractions or deductions than the Schedule 763 ADJ allows. Refer to the instructions for Other Codes.

Check this box.



Your Name V MALIPEDDI & K CHIT REDDY	Your SSN 690-11-8751
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Tax Credit for Low-Income Individuals or Virginia Earned Income Credit - SEE INSTRUCTIONS

Family VAGI	Name	Social Security Number (SSN)	Guideline Income
	Yourself	- -	00
	Spouse	- -	00
	Dependent	- -	00
	Dependent	- -	00
10.	If more than 4 exemptions, enclose schedule listing the name, SSN & VAGI. Enter total Family Guideline Income here.		10 00
11.	Enter the total number of exemptions reported in the table above. Next, go to the Poverty Guidelines Table shown in the Form 763 instruction book for this Line to see if you qualify for this credit		11
12.	If you qualify, enter the number of personal and dependent exemptions reported on your Form 763 (see instructions)		12
13.	Multiply Line 12 by \$300. Enter the result on Line 13 and proceed to Line 14. If you do not qualify for the Tax Credit for Low-Income Individuals, but claimed an Earned Income Credit on your federal return, enter \$0 and proceed to Line 14		13 00
14.	Enter the amount of Earned Income Credit claimed on your federal return. If you did not claim an Earned Income Credit on your federal return, enter \$0		14 00
15.	Multiply Line 14 by 20% (.20)		15 00
16.	Enter the greater of Line 13 or Line 15		16 00
17.	Compare the amount on Line 16 above to the amount of tax on Form 763, Line 18. Enter the lesser of the two amounts here and on Form 763, Line 23. This is your credit amount		17 00

Addition to Tax, Penalty and Interest

18.	Addition to tax	18	16	00
19.	Penalty..... <input type="checkbox"/> Late Filing Penalty <input type="checkbox"/> Extension Penalty	19		00
20.	Interest (accrued on the tax you owe)	20		00
21.	Total Addition to Tax, Penalty and Interest (add Lines 18 - 20). Enter here and on Form 763, Line 32	21	16	00

2022 Schedule INC/CG

690118751



Report all W-2s, 1099s & VK-1s with VA Withholding

VENKAT RAJEE MALIPEDDI

KEERTHANA CHIT REDDY

Your/ Spouse SSN	Withholding Type	VA Withholding	Employer FEIN	VA Account Number	VA Wages, tips, other comp.
690118751	W	145.	546001805	30546001805F001	58795.

Total VA Withholding	SSN	VA Withholding
You	690118751	145.
Spouse		
Total # of W-2s,1099s & VK-1s	01	

To avoid delays - be sure to enter all information, including the Employer's FEIN.

760C - 2022 Underpayment of Virginia Estimated Tax by Individuals, Estates and Trusts



• Enclose this form with Form 760, 763, 760PY or 770.

Fiscal Year Filers: Enter beginning date _____ 20 _____, ending date _____ 20 _____, and check here

First Name, Middle Initial and Last Name (of Both If Joint) - OR - Name of Estate or Trust		Your Social Security Number or FEIN	
V MALIPEDDI & K CHIT REDDY		690-11-8751	
If Estate or Trust, Name and Title of Fiduciary		Spouse's Social Security Number	
		839-67-0231	
		Office Use SC	Office Use Payment

Part I - Compute Your Underpayment

1. 2022 Income Tax Liability After Spouse Tax Adjustment and Tax Credits. See instructions. (If \$150 or less, you are not required to file Form 760C)	1.	2,344.
2. Enter 90% of the Amount Shown on Line 1	2.	2,110.
3. 2021 Income Tax Liability After Spouse Tax Adjustment and Tax Credits	3.	418.
4. Enter the Amount From Line 2 or Line 3, Whichever is Less	4.	418.
5. Enter the Number of Installment Periods for Which You Were Liable to Make Payments	5.	4

Line 6 Through 14: Complete Each Line Across All Columns Before Continuing to Next Line

	A	B	C	D
6. Due Dates of Installment Payments	May 1, 2022	June 15, 2022	Sept. 15, 2022	Jan. 15, 2023
7. Tax Liability (Divide the amount on Line 4 by the number of installments reported on Line 5 and enter the result in the appropriate columns)	104.	104.	105.	105.
8. Enter the Income Tax Withheld for Each Installment Period	36.	36.	36.	37.
9. Enter the Overpayment Credit from Your 2021 Income Tax Return				
10. Enter the Amount of Any Timely Payment Made for Each Installment Period in the Appropriate Column (Do not enter any late payments)				
11. Underpayment or [Overpayment] (Subtract Lines 8, 9 and 10 from Line 7. See instructions for overpayment)	68.	68.	69.	68.
12. Other Payments (Enter the payments from the Late Payment/Overpayment Table below, beginning with the earliest payment recorded. Do not enter more than the underpayment in any column.)				
	Date	Amount		
a. First Payment				
b. Second Payment				
c. Third Payment				
d. Fourth Payment				
13. Enter the Total Timely Payments Made as of Each Installment Due Date From Lines 8, 9, 10 and 12 (For ex., in Column A enter all payments made by May 1, 2022)	36.	36.	36.	37.
14. Subtract Line 13 from Line 7 (If the sum of all underpayments (do not include any OVERPAYMENTS) reported is \$150 or less, stop here; you are not subject to an addition to tax. If your underpayments total more than \$150, proceed to Part II)	68.	68.	69.	68.

Continued on Back →

Late Payment/Overpayment Table (See Instructions for Lines 11 and 12.)

Date of Payment	Date of Payment	Date of Payment	Date of Payment
Payment Amount	Payment Amount	Payment Amount	Payment Amount
\$	\$	\$	\$



Part II - Exceptions That Void the Addition to Tax

		A May 1, 2022	B June 15, 2022	C Sept. 15, 2022	D Jan. 15, 2023	
15.	Total Amount Paid and Withheld from January 1, 2022 through the Installment Date Indicated	36.	72.	108.	145.	
16.	Exception 1: Prior Year's Tax (Multiply the 2021 tax by the percentage in each col.)	100% of 2021 Tax 418.	25% 105.	50% 209.	75% 314.	100% 418.
17.	Exception 2: Tax on Prior Year's Income Using the 2022 Rates and Exemptions (Multiply the 2021 tax by the percentage in each col.)	100% of Tax 3,531.	25% 883.	50% 1,766.	75% 2,648.	100% 3,531.
18.	Exception 3 Worksheet: Tax on Annualized 2022 income (Use the formula below to compute the amount on Lines 18a, b and c for each col.)					
	Lines 18a, b and c:	April 30 column:	Multiply the actual amount for the period ended April 30, 2022, by 3.			
		May 31 column:	Multiply the actual amount for the period ended May 31, 2022, by 2.4.			
		August 31 column:	Multiply the actual amount for the period ended August 31, 2022, by 1.5.			
	From January 1 to:	April 30	May 31	August 31		
a.	Annualized Virginia Adjusted Gross Income (VAGI) for Each Period				Note Estates and trusts should use end dates of March 31, April 30 & July 31.	
b.	Compute the Annualized Itemized Deductions Using the Formula Above OR Enter the Full Standard Deduction in Each Column if You Did Not Claim Itemized Deductions					
c.	Compute the Annualized Child and Dependent Care Expenses and Other Deductions for Each Period					
d.	Total Dollar Amount of Exemptions Claimed on Your Return					
e.	Virginia Taxable Income (Subtract Lines 18b, c and d from Line 18a)					
f.	Virginia Tax (Enter the Virginia income tax for the amount(s) on Line 18e)				Note Exceptions 3 and 4 do not apply to the fourth installment period.	
g.	Multiply Line 18f by the Percentage Shown for Each Period	22.5%	45%	67.5%		
19.	Exception 4 Worksheet: Tax on 2022 Income Over a 4, 5 and 8 Month Period* (* 3, 4 and 7 months for estates and trusts)					
	From January 1 to:	April 30	May 31	August 31		
a.	Enter Your Virginia Adjusted Gross Income (VAGI) for Each Period				Note Exceptions 3 and 4 do not apply to the fourth installment period.	
b.	Enter the Itemized Deductions Claimed for Each Period OR (If Greater) the Full Standard Deduction					
c.	Enter the Child and Dependent Care Expenses and Other Deductions for Each Period					
d.	Enter the Total Dollar Amount of Exemptions Claimed on Your Return					
e.	Virginia Taxable Income (Subtract Lines 19b, c and d from Line 19a)					
f.	Virginia Tax (Enter the Virginia income tax for the amount(s) on Line 19e)					
g.	Multiply Line 19f by 90% (.90) for Each Period					



Part III - Compute the Addition to Tax

If an exception has been met (Part II) for any installment period, complete the column for that period as follows: write "Exception" and the exception number (1, 2, 3, or 4) on Line 20; skip Lines 21 through 23; and enter "0" on Line 24. For all other periods, complete each line as instructed below.

	A May 1, 2022	B June 15, 2022	C Sept. 15, 2022	D Jan. 15, 2023
20. Amount of Underpayment from Part I, Line 14	68.	68.	69.	68.
21. Date of Payment from Part I, Line 12 (If no payments were entered on Line 12, enter the actual date of payment or May 1, 2023 whichever is earlier.)	05/01/2023	05/01/2023	05/01/2023	05/01/2023
22. a. Number of Days After Installment Due Date Through Date Paid or June 30, 2022, Whichever Is Earlier (If June 30, 2022, is earlier, enter 60 & 15 respectively)	60	15		
b. Number of Days After June 30, 2022, (September 15, 2022 for 3rd installment) through Date Paid or September 30, 2022, Whichever Is Earlier (If September 30, 2022, is earlier, enter 92, 92 and 15)	92	92	15	
c. Number of Days After September 30, 2022, through Date Paid or December 31, 2022, Whichever Is Earlier (If December 31, 2022, is earlier, enter 92, 92 and 92)	92	92	92	
d. Number of Days After December 31, 2022, (January 15, 2023 for 4th installment) through Date Paid or May 1, 2023, Whichever Is Earlier (If May 1, 2023, is earlier, enter 121, 121, 121 and 106)	121	121	121	106
23. a. Multiply the Number of Days in Each Column on Line 22a by the Daily Rate .00016 (6% Per Annum)	0.00960	0.00240		
b. Multiply the Number of Days in Each Column on Line 22b by the Daily Rate .00019 (7% Per Annum)	0.01748	0.01748	0.00285	
c. Multiply the Number of Days in Each Column on Line 22c by the Daily Rate .00022 (8% Per Annum)	0.02024	0.02024	0.02024	
d. Multiply the Number of Days in Each Column on Line 22d by the Daily Rate .00025 (9% Per Annum)	0.03025	0.03025	0.03025	0.02650
e. Add Lines 23a, thru 23d in Each Column and Enter the Total Here	0.07757	0.07037	0.05334	0.02650
24. Multiply the Amount on Line 20 by Line 23e for Each Column	5.27	4.79	3.68	1.80
25. Addition to Tax (Total the amounts on Line 24. Enter here and on the "Addition to Tax" line on your income tax return)				16.