# 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

IIILEIIIAI F	levertue dei vice					
Submis	ssion Identification Number (SID)					
Taxpaye	r's name	Social secu	rity num	oer		
NARE	INDRA KUNCHALA	048-63	L-541	3		
Spouse's	s name	Spouse's so	cial sec	ırity nu	mber	
Part	, , ,	r year you	are au	thoriz	ing.)	
	whole dollars only on lines 1 through 5.					
	Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.		1	ı .	1 2 2	104
	Adjusted gross income		1	-		$\frac{104.}{0000}$
	Total tax		3			922.
	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		4			843.
	Amount you want refunded to you		5		3,_	921.
Part		ceen a co		OUR r	eturi	<u> </u>
	penalties of perjury, I declare that I have examined a copy of the income tax return (original or amended					
to send for any Agent to payment authoriz payment business taxes to persona	original or amended) I am now authorizing. I consent to allow my intermediate service provider, transming return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejudelay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U or initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account induit of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution action is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate at, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation required so days prior to the payment (settlement) date. I also authorize the financial institutions involved in the payment 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 as a fundamental withdrawal Consent.	ection of the .S. Treasury icated in the on to debit the the authoriuests must be processing on the control of	transminand its cand	ssion, (designation to this Forevolution to the contract of th	(b) the ated Fin softwaccoupke (cap later ic payredge t	reason inancial vare for nt. This ancel) a than 2 ment of hat the
	nic Funds Withdrawal Consent.					
	yer's PIN: check one box only	1	L   5   A	4   1	3	
X	I authorize GLOBAL TAXES LLC to enter or generate  ERO firm name	my PIN └	nter five	digits,	but	as my
	signature on the income tax return (original or amended) I am now authorizing.	d	on't ente	r all ze	ros	
	I will enter my PIN as my signature on the income tax return (original or amended) I am n if you are entering your own PIN <b>and</b> your return is filed using the Practitioner PIN meth below.					
Your si	gnature ▶ Date ▶					
Snous	e's PIN: check one box only	_				
Opous	I authorize to enter or generate	my DINI				ac my
	ERO firm name		nter five	digits.		as my
	signature on the income tax return (original or amended) I am now authorizing.		on't ente			
	I will enter my PIN as my signature on the income tax return (original or amended) I am n if you are entering your own PIN <b>and</b> your return is filed using the Practitioner PIN meth below.		_			_
Spouse	e's signature ▶ Date ▶					
	Practitioner PIN Method Returns Only—continue below					
Part I	Certification and Authentication — Practitioner PIN Method Only					
FRO's	<b>EFIN/PIN.</b> Enter your six-digit EFIN followed by your five-digit self-selected PIN. 2 2	2 4 9	6 6	1 9	8 8	9
	= 1.1 = 1.1 your on any and a relation of by your two digit out outdood into		nter all z	$\bot$		
authoriz	that the above numeric entry is my PIN, which is my signature for the electronic individual income to the tax year indicated above for the taxpayer(s) indicated above. I confirm that I am subments of the Practitioner PIN method and <b>Pub. 1345</b> , Handbook for Authorized IRS e-file Providers of Inc.	nitting this re	turn in a	accorda	anće v	
ERO's	signature ▶ Date ▶					
	ERO Must Retain This Form — See Instructions					
	Don't Submit This Form to the IRS Unless Requested To I	Do So				

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

OMB No. 1545-0074

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

Filing Status Check only	<b>X</b> S	Single Married filing jointly	Marrie	ed filing separately	MFS)	Head of	house	ehold (HOF	l)		ifying surv ıse (QSS)	iving
one box.		u checked the MFS box, enter the r on is a child but not your dependen		our spouse. If you	checke	ed the HOH or	r QSS	box, ente	r the c	hild's	name if th	e qualifying
Your first name	and mi	ddle initial	Last na	me					Yo	our so	cial security	y number
NARENDR <i>A</i>	A		KUNC	!HALA					04	48-6	51-5413	3
If joint return, sp	pouse's	first name and middle initial	Last na	me					Sp	ouse'	s social sec	urity number
Home address	(numbe	r and street). If you have a P.O. box, see	 e instruction	ons.				Apt. no.	- 1			n Campaign
_1291 AME	BER F	RIDGE ROAD, NORTHWEST					$\perp$				ere if you,	or your tly, want \$3
-	ost offic	ce. If you have a foreign address, also co	omplete s	paces below.	Stat		ZIP				this fund. (	
CONCORD					NC		<del></del>	)27	_		ow will not	change
Foreign country	name			Foreign province/state	/county	/	Forei	gn postal co	de yo	ur tax	or refund.	Spouse
Digital		y time during 2022, did you: (a) rec										
Assets		ange, gift, or otherwise dispose of					asset	)? (See ins	struction	ons.)	∐ Yes	⊠ No
Standard Deduction		eone can claim:	•			a dependent						
Age/Blindness	You:	Were born before January 2, 1	1958 [	Are blind Sp	ouse:	☐ Was bo		ore Janua			☐ Is bli	
Dependents	s (see	nstructions):		(2) Social securit	y	(3) Relationsh	nip (	4) Check th	e box if	qualif	ies for (see i	instructions):
If more	<b>(1)</b> Fi	rst name Last name		number		to you		Child ta	x credit	t	Credit for oth	er dependents
than four dependents,								L			L	
see instructions	s ——								<u> </u>		L	
and check								L			L	
here L		T. I						L				
Income	1a	Total amount from Form(s) W-2, b	,	,						1a		8,138.
Attach Form(s)	b	Household employee wages not r Tip income not reported on line 1a								1b 1c		
W-2 here. Also	d	Medicaid waiver payments not rep	•	•						1d		
attach Forms W-2G and	e	Taxable dependent care benefits		. ,	ii iSti ui					1e		
1099-R if tax	f	Employer-provided adoption bene		*						1f		
was withheld.	g	Wages from Form 8919, line 6.								1g		
If you did not get a Form	h	Other earned income (see instruct								1h		0.
W-2, see	i	Nontaxable combat pay election (	see instr	ructions)		1i	i					
instructions.	z	Add lines 1a through 1h	`							1z	14	8,138.
Attach Sch. B	2a	Tax-exempt interest	2a		<b>b</b> Ta	axable interes	it .			2b		
if required.	3a	Qualified dividends	3a		<b>b</b> O	rdinary divide	nds .			3b		
	4a	IRA distributions	4a		<b>b</b> Ta	axable amoun	nt			4b		
Standard	5a	<del>-</del>	5a		<b>b</b> Ta	axable amoun	nt			5b		
Deduction for— Single or	6a	Social security benefits	6a		<b>b</b> Ta	axable amoun	nt		. <u>.</u>	6b		
Married filing separately,	С	If you elect to use the lump-sum e		•	•	,			. 📙			
\$12,950	7	Capital gain or (loss). Attach Sche		frequired. If not rec	uired,	check here			. Ш	7		
Married filing jointly or	8	Other income from Schedule 1, lir								8		5,034.
Qualifying surviving spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7	-	•						9		3,104.
\$25,900	10	Adjustments to income from Sche								10		2 101
<ul> <li>Head of household,</li> </ul>	11	Subtract line 10 from line 9. This is	•	-						11		3,104.
\$19,400	12	Standard deduction or itemized  Qualified business income deduct								12		6,078.
If you checked any box under	13 14	Add lines 12 and 13								13		6 070
Standard Deduction,	15	Subtract line 14 from line 11. If ze								15		<u>.6,078.</u> .7,026.
see instructions.		Castaot into 14 nom into 11. Il 26	. 5 01 105	0, 011101 0 . 11113 13	y Cui L	andoic illocil				13	1 44	. , , 0 4 0 .

Form 1040 (2022	2)								Pag	ge <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	21,922	2.
Credits	17	Amount from Schedule 2, line 3						17		
	18	Add lines 16 and 17						18	21,922	?
	19	Child tax credit or credit for other	dependent	ts 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 ze	ro or less,	enter -0				22	21,922	2.
	23	Other taxes, including self-emplo	yment tax,	from Schedule	2, line 21 .			23	0	).
	24	Add lines 22 and 23. This is your	total tax					24	21,922	2.
Payments	25	Federal income tax withheld from								
-	а	Form(s) W-2				<b>25a</b> 25	843.			
	b	Form(s) 1099				25b				
	С	Other forms (see instructions) .				25c				
	d	Add lines 25a through 25c						25d	25,843	}.
If you have a	26	2022 estimated tax payments and	d amount a	pplied from 20	21 return			26		
qualifying child,	27	Earned income credit (EIC)			No .	27				
attach Sch. EIC.	28	Additional child tax credit from Sch	nedule 8812			28				
	29	American opportunity credit from	Form 8863	8, line 8		29				
	30	Reserved for future use				30				
	31	Amount from Schedule 3, line 15				31				
	32	Add lines 27, 28, 29, and 31. The	se are your	total other pa	ayments and ref	undable credits		32		
	33	Add lines 25d, 26, and 32. These	are your to	tal payments				33	25,843	3.
Refund	34	If line 33 is more than line 24, sub	tract line 2	4 from line 33.	This is the amou	nt you <b>overpaid</b>		34	3,921	- •
riciana	35a	Amount of line 34 you want refur	ided to you	ı. If Form 8888	is attached, che	ck here		35a	3,921	- •
Direct deposit?	b	Routing number 2 1 1 3			c Type: 🛛	Checking	Savings			
See instructions.	d	Account number 4 6 0 2	6 8 1	1						
	36	Amount of line 34 you want applie	ed to your	2023 estimate	ed tax	36				
Amount You Owe	37	Subtract line 33 from line 24. This		•				07		
rou Owe	38	For details on how to pay, go to vestimated tax penalty (see instruc	_					37		
Third Party		you want to allow another pers	son to disc	cuss this retur	n with the IRS?					_
Designee		tructions					omplete b		⊠ No	
	De nai	signee's ne		Phone no.			onal identifi ber (PIN)	cation		$\neg$
Sign		der penalties of perjury, I declare that I h	nave examine		I accompanying sch		,	the bes	t of my knowledge	and
Here	bel	ef, they are true, correct, and complete.	Declaration of	of preparer (other		ased on all information				ge.
11010	Yo	ur signature		Date	Your occupation				nt you an Identity IN, enter it here	
Joint return?					SOFTWARE 1	FNCTNFFP	(see ii		IN, enter it riere	
See instructions.	Sp	ouse's signature. If a joint return, <b>both</b> r	nust sian.	Date	Spouse's occupat		If the	IRS ser	nt your spouse an	ш
Keep a copy for	Op	oues o eignaturer ir a jenn return, <b>cen</b> r	idot olgili		opouoo o occupa.		Identi	ty Prote	ection PIN, enter it h	nere
your records.							(see ir	ıst.)		
		one no. (848)219-5745		Email address	Kunchala.nar	endra@gmail.c	om			
Paid	Pre	parer's name Prep	oarer's signat	ure		Date	PTIN	7	Check if:	
Preparer	SYAM	PRIYA RAM SAGAR GUPTA TALLAM SYA	M PRIYA	RAM SAGAR	GUPTA TALLAM	02/25/2023	P02082	703	Self-employe	d
Use Only	Fir	n's name GLOBAL TAXES	LLC				Phone	e no. (	678)965-952	22
————	Fir	n's address 245 ROONEY C'	Γ E BRU	NSWICK NO	J 08816		Firm's	s EIN	84-317196	55
Go to www.irs.go	ov/Forn	1040 for instructions and the latest info	rmation.		BAA	REV 02/17/23 PRO			Form <b>1040</b> (2	2022)

# 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

NARENDRA KUNCHALA

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

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 048-61-5413

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	-15,034.
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 (	<u>)</u>	
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 10	Total other income. Add lines 8a through 8z		9	-15 034
W	Compine maes i mrodon / and 9 Enter here and on Form 1040-1040-58	OF TUAU-INE TIME &	1 10	- 15.034

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

Par	t II Adjustments to Income			
11	Educator expenses		11	
12	Certain business expenses of reservists, performing artists, and fee-basis govern			
	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:			
a	Jury duty pay (see instructions)			
b	Deductible expenses related to income reported on line 8l from the			
	rental of personal property engaged in for profit			
С	Nontaxable amount of the value of Olympic and Paralympic medals			
اء	and USOC prize money reported on line 8m			
d	Reforestation amortization and expenses			
е	Repayment of supplemental unemployment benefits under the Trade Act of 1974			
f	Contributions to section 501(c)(18)(D) pension plans			
-	Contributions by certain chaplains to section 403(b) plans			
g h	Attorney fees and court costs for actions involving certain unlawful			
"	discrimination claims (see instructions)			
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			
	tax law violations			
i	Housing deduction from Form 2555			
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form			
	1041)			
z	Other adjustments. List type and amount:			
	24z			
25	Total other adjustments. Add lines 24a through 24z		25	
26	Add lines 11 through 23 and 25. These are your adjustments to income. Enter here a			
	Form 1040 or 1040-SR, line 10, or Form 1040-NR, line 10a		26	
	<b>BAA</b> REV 02/17/23 PRO	5	Schedu	le 1 (Form 1040) 2022

### **SCHEDULE A** (Form 1040)

Department of the Treasury

Internal Revenue Service

**Itemized Deductions** 

Go to www.irs.gov/ScheduleA for instructions and the latest information. Attach to Form 1040 or 1040-SR.

Caution: If you are claiming a net qualified disaster loss on Form 4684, see the instructions for line 16.

Attachment Sequence No. 07

OMB No. 1545-0074

Name(s) shown on Form 1040 or 1040-SR Your social security number NARENDRA KUNCHALA 048-61-5413 Caution: Do not include expenses reimbursed or paid by others. Medical and 1 Medical and dental expenses (see instructions) . . . . . . . 1 **Dental** 2 Enter amount from Form 1040 or 1040-SR, line 11 | 2 | **Expenses 3** Multiply line 2 by 7.5% (0.075) . . . . . . . . . . . . . . . . 3 4 Subtract line 3 from line 1. If line 3 is more than line 1, enter -0-. 4 **Taxes You** 5 State and local taxes. **Paid** a State and local income taxes or general sales taxes. You may include either income taxes or general sales taxes on line 5a, but not both. If you elect to include general sales taxes instead of income taxes, 5a 6,657. **b** State and local real estate taxes (see instructions) . . . . . . . . 5<sub>b</sub> 2,353. **c** State and local personal property taxes . . . . . . . . . 5c 5d 9,010. e Enter the smaller of line 5d or \$10,000 (\$5,000 if married filing 5e 9,010. 6 Other taxes. List type and amount: 6 9,010. 8 Home mortgage interest and points. If you didn't use all of your home Interest You Paid mortgage loan(s) to buy, build, or improve your home, see Caution: Your instructions and check this box . . . . . . . . . . . . . . . mortgage interest a Home mortgage interest and points reported to you on Form 1098. deduction may be limited. See See instructions if limited . . . . . . . . . . . . . . . . . 8a 7,068. instructions. b Home mortgage interest not reported to you on Form 1098. See instructions if limited. If paid to the person from whom you bought the home, see instructions and show that person's name, identifying no., 8b c Points not reported to you on Form 1098. See instructions for special 8c 8d 8e 7,068. 9 Investment interest. Attach Form 4952 if required. See instructions . 9 7,068. Gifts to 11 Gifts by cash or check. If you made any gift of \$250 or more, see Charity 11 Caution: If you 12 Other than by cash or check. If you made any gift of \$250 or more, made a gift and see instructions. You **must** attach Form 8283 if over \$500. . . . 12 got a benefit for it. see instructions. 13 Casualty and theft loss(es) from a federally declared disaster (other than net qualified Casualty and 15 Theft Losses disaster losses). Attach Form 4684 and enter the amount from line 18 of that form. See 15 16 Other—from list in instructions. List type and amount: Other Itemized **Deductions** 16 Total 17 Add the amounts in the far right column for lines 4 through 16. Also, enter this amount on 17 Itemized 16,078. Deductions 18 If you elect to itemize deductions even though they are less than your standard deduction,

#### **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, Attachment

Department of the Treasury Internal Revenue Service

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

Sequence No. 13

OMB No. 1545-0074

Name(s) shown on return Your social security number NARENDRA KUNCHALA 048-61-5413 Part I **Income or Loss From Rental Real Estate and Royalties** Note: If you are in the business of renting personal property, use Schedule C. See instructions. If you are an individual, report farm rental income or loss from Form 4835 on page 2, line 40. Did you make any payments in 2022 that would require you to file Form(s) 1099? See instructions . . . . . 1a Physical address of each property (street, city, state, ZIP code) SURARAM COLONY, QUTBULLAPUR HYDERABAD TELANGANA IN 500055 Α В C 1b Type of Property **Fair Rental Personal Use** For each rental real estate property listed QJV (from list below) above, report the number of fair rental and Davs **Davs** personal use days. Check the QJV box only Α Α 365 0 if you meet the requirements to file as a В В qualified joint venture. See instructions. С C Type of Property: 3 Vacation/Short-Term Rental 1 Single Family Residence 7 Self-Rental 5 Land 8 Other (describe) 2 Multi-Family Residence 4 Commercial 6 Royalties **Properties:** Α В C Income: 3 600. 4 Royalties received 4 **Expenses:** 5 5 Advertising 6 Auto and travel (see instructions) 6 7 Cleaning and maintenance. 7 1,000. 8 Commissions 8 9 9 Insurance . . 10 10 Legal and other professional fees 11 Management fees . . . . . . . . 11 800. 12 Mortgage interest paid to banks, etc. (see instructions) 12 13 13 3,750. 14 14 Repairs . . . 15 Supplies 15 2,675. 16 16 Taxes 17 17 4,500. 18 2,909. 18 Depreciation expense or depletion . . . . . . . . 19 19 Other (list) 20 20 Total expenses. Add lines 5 through 19 . . . . . . 15,634. 21 Subtract line 20 from line 3 (rents) and/or 4 (royalties). If result is a (loss), see instructions to find out if you must file Form 6198 . . . . . . . . . . . . . . . . . . 21 -15,034. 22 Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions) . . . . . . . . . 15,034.) 600. 23a Total of all amounts reported on line 3 for all rental properties Total of all amounts reported on line 4 for all royalty properties 23b Total of all amounts reported on line 12 for all properties 23c 2,909. 23d Total of all amounts reported on line 18 for all properties 15,634. Total of all amounts reported on line 20 for all properties 23e 24 **Income.** Add positive amounts shown on line 21. **Do not** include any losses 24 25 Losses. Add royalty losses from line 21 and rental real estate losses from line 22. Enter total losses here 25 15,034.

Total rental real estate and royalty income or (loss). Combine lines 24 and 25. Enter the result

here. If Parts II, III, IV, and line 40 on page 2 do not apply to you, also enter this amount on Schedule 1 (Form 1040), line 5. Otherwise, include this amount in the total on line 41 on page 2 ...

-15,034.

26

	( <b>50)</b> 8- Il Pages of Y and W-2s He			Car <u>oli</u> na		Tax Return t of Revenue	DOR Use Only			
For calend	ar year 2022, RA	or fiscal year be KUNCH. SE ROAD, NO	ALA	22	2 and ending	SN: 048615413		teran? se a veteran? nted an automatic	Yes No	
	NC 2802	7WAKE		ed Filing Joir	Spouse's S		, ,	income tax return  Yes No	e.g., Form 1040	, I
	4. He	ad of Household  C. for the entire	5. Qualif	ying Widow	(er) No	Return for deceased	Year spoustaxpayer.	se died: Date of death		
N.C. Educa	ation Endowm		nay contribute t	to the N.C.	Education Endov	Return for deceased wment Fund by maki	ng a contribu	Date of death tion or designat		l of
to the Fund	d, enter the an	nount of your de	signation on Pa	age 2, Line	31. (See instruc	your payment of \$	about the Fu	ınd.)	our overpayme	ent ——
						on April 15, 2023, an pinted Personal Rep		zen or resident.		
FS 1	PP Y		DT N	OC 1	N TPRES	Y SPRES	S N	VT N	SVT	N
KUNC	1291	28027	DS N	EA N	I TD		SD		FDEXT	N
NARENDI	RA	K	UNCHALA			048615413		WAKE		
							NC	28027		
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06	133	104	16		0	26C		0		<b>=</b> 7
07		0	18	Y	0	26E		0		0201
09		0	20A		6657	EU				5002
10A		0	20B		0	27		0		# # #
10B		0	21A		0	29		0		
11 S	Y I	N	21B		0	30		0		
11	12	750	21C		0	31		0		
13	00	000	21D		0	32		0		
14	120		26A		0	34		651		
15		006	26B		0					
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	eturn Belov ertify that I have ex- nowledge and beli	X Refu	nd Due d accompanying sch ect, and complete.			/ment Due Check here if you a to discuss this retu	authorize the N	nents with the paid	preparer below.	nue
Your Signature PAID PREPARE	ER LISE ONLY	f nrenared by a nerso	Date			nt return, both must sign.) prmation of which the prepa	Date		5745 No. (Include area c	code)
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Name	(First 10 Characters) KUNCHALA Your Social Security Number	04863	15413
	D-400 Line-by-Line Information		
6.	Federal Adjusted Gross Income	6.	13310
7.	Additions to Federal Adjusted Gross Income	7.	(
8.	Add Lines 6 and 7	8.	13310
9.	Deductions From Federal Adjusted Gross Income	9.	10010
10.	Child Deduction	٠.	
	a. Enter the number of qualifying children for whom you were allowed a federal child tax credit	10a.	
	b. Enter the amount of the child deduction	10b.	
11.	N.C. Standard Deduction	11.	
11.	N.C. Itemized Deduction	11.	
11.	Deduction amount	11.	1275
12.	a. Add Lines 9, 10b, and 11	12a.	1275
	b. Subtract Line 12a from Line 8	12b.	12035
13.	Part-year Residents and Nonresidents Taxable Percentage	13.	0.000
14.	N.C. Taxable Income	14.	12035
15.	N.C. Income Tax	15.	600
16.	Tax Credits	16.	000
17.	Subtract Line 16 from Line 15	17.	600
18.	Consumer Use Tax	18.	000
10.	You certify that no Consumer Use Tax is due	10.	
19.	Add Lines 17 and 18	19.	600
North 20a. 20b.	Your tax withheld Spouse's tax withheld	20a. 20b.	665
20a. 20b.			665
20a. 20b. <b>Other</b>	Spouse's tax withheld  Tax Payments	20b.	665
20a. 20b. <b>Other</b> 21a.	Spouse's tax withheld  Tax Payments  2022 estimated tax	20b. 21a.	665
20a. 20b. <b>Other</b> 21a. 21b.	Spouse's tax withheld  Tax Payments  2022 estimated tax Paid with extension	20b. 21a. 21b.	665
20a. 20b. <b>Other</b> 21a. 21b. 21c.	Spouse's tax withheld  Tax Payments  2022 estimated tax Paid with extension Partnership	20b. 21a. 21b. 21c.	665
20a. 20b. <b>Other</b> 21a. 21b. 21c. 21d.	Spouse's tax withheld  Tax Payments  2022 estimated tax Paid with extension Partnership S Corporation	21a. 21b. 21c. 21d.	665
20a. 20b. <b>Other</b> 21a. 21b. 21c. 21d.	Spouse's tax withheld  Tax Payments  2022 estimated tax Paid with extension Partnership S Corporation Additional Payments	21a. 21b. 21c. 21d. 22.	
20a. 20b. <b>Other</b> 21a. 21b. 21c. 21d. 22.	Tax Payments  2022 estimated tax Paid with extension Partnership S Corporation Additional Payments Add Lines 20a through 22	20b. 21a. 21b. 21c. 21d. 22. 23.	
20a. 20b. 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.	665
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.	665
20a. 20b. Other 21a. 21b. 21c. 22l. 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.	665
20a. 20b. 21b. 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.	665
20a. 20b. 21a. 21a. 21b. 21c. 22. 23. 24. 25. 26a. 26b. 26c.	Tax Payments  2022 estimated tax Paid with extension Partnership S Corporation Additional Payments Add Lines 20a through 22 Previous Refunds Subtract Line 24 from Line 23 Tax Due Penalties Interest	21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b.	665
20a. 20b. Other 21a. 21b. 21c. 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.	665
20a. 20b. Other 21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. EU	Tax Payments  2022 estimated tax Paid with extension Partnership S Corporation Additional Payments Add Lines 20a through 22 Previous Refunds Subtract Line 24 from Line 23 Tax Due Penalties Interest Add Lines 26b and 26c and enter the total on 26d Exception to Underpayment of Estimated Tax	21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. 26d. EU	665
20a. 20b. Other 21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. 26d. EU	Tax Payments  2022 estimated tax Paid with extension Partnership S Corporation Additional Payments Add Lines 20a through 22 Previous Refunds Subtract Line 24 from Line 23 Tax Due Penalties Interest Add Lines 26b and 26c and enter the total on 26d Exception to Underpayment of Estimated Tax Interest on the Underpayment of Estimated Income Tax	21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. 26d. EU	665
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.	665 665
20a. 20b. Other 21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. 26d. EU	Tax Payments  2022 estimated tax Paid with extension Partnership S Corporation Additional Payments Add Lines 20a through 22 Previous Refunds Subtract Line 24 from Line 23 Tax Due Penalties Interest Add Lines 26b and 26c and enter the total on 26d Exception to Underpayment of Estimated Tax Interest on the Underpayment of Estimated Income Tax	21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. 26d. EU	665 665
20a. 20b. 21a. 21b. 21c. 21d. 22. 23. 24. 25. 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.	665 665
20a. 20b. 21a. 21b. 21c. 21d. 22. 23. 24. 25. 26d. EU 26e. 27. 28.	Tax Payments  2022 estimated tax Paid with extension Partnership S Corporation Additional Payments Add Lines 20a through 22 Previous Refunds Subtract Line 24 from Line 23  Tax Due Penalties Interest Add Lines 26b and 26c and enter the total on 26d Exception to Underpayment of Estimated Tax Interest on the Underpayment of Estimated Income Tax Pay this Amount Overpayment	21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. 26d. EU 26e. 27.	665 665
20a. 20b. 21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 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  int of Refund to Apply to:	20b.  21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. 26d. EU 26e. 27. 28.	665 665
20a. 20b. Other 21a. 21b. 21c. 21d. 22. 25. 26a. 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  Int of Refund to Apply to:  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.	665 665
20a. 20b. 21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. 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  and 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.	665 665
20a. 20b. 21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 27c. 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  and 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.	665 665