D-400 (50) 8-16-23 Individual Income Tax Return 2023 < Staple All Pages of Your Return and W-2s Here North Carolina Department of Revenue Amended Return DOR Use Only															
For calendar year 2023, or fiscal year beginning SANTHOSH KUMA ALLADI RAMYA NANGUNUR SOURT SSN: 668599154 Were you a veteran? Yes No X No X Yes No X Yes No X Your SSN: 668599154 Were you granted an automatic extension to file you														No X	
CONCORD NC 28027 CABAR Filing Status 1. Single 4. Head of Household 2. Married Filing Jointly 5. Qualifying Widow(er) Spouse's SSN: 275970664 3. Married Filing Separately Year spouse died: Were you a resident of N.C. for the entire year? Yes No Return for deceased taxpayer. Date of death:														1040?	
Was you N.C. Ed your ove	ur spouse lucation Er erpayment	a resid ndowm to the	lent for the e ent Fund: Y Fund. To ma	entire year? ou may co ake a contr	ntribute ibution,	enclose	No .C. Edi Form I	Lication Endow NC-EDU and y	eturn for de ment Fund our paymer	eceased sp by making nt of \$	pouse. g a contribu	To designate	ith:		
to the Fund, enter the amount of your designation on Page 2, Line 31. (See instructions for information about the Fund.) Select box if you, or if married filing jointly, your spouse were out of the country on April 15, 2024, and a U.S. citizen or resident. Select box if return is filed and signed by Executor, Administrator, or Court-Appointed Personal Representative.															
FS 2	PP	Y		DT	N	OC	N	TPRES	Y S	SPRES	Y	VT N	SVT	N	
ALLA	600	5	28027	DS	N	EA	N	TD		5	SD		FDEX	T N	
SANTHOSH KUMA ALLA									66859	9154		CABAR			
RAMYA NANGU						I			27597	0664	NC	28027			
6005 REDWOOD PINE RD CONCORD															
06		1984	479		16			0		26C		0			
07			0		18	Y		0		26E		0		7020	
09			0		20A			5549		EU				500	
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15		82	217		26B			0							
TN	9255	6869	908		PN	6	789	559522		PP	P02	082703			
I declare and	Sign Return Below X Refund Due 301 Payment Due 0 I declare and certify that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Check here if you authorize the North Carolina Department of Revenue to discuss this return and attachments with the paid preparer below.														
Your Signatu	ure				Date	Spor	use's Sigr	nature (If filing join	t return, both m	ust sign.)	Date	92556 Contact Pho	86908 ne No. (Include ar	rea code)	
PAID PREPA	ARER USE O	NLY /i	f prepared by a _l	person other t	han taxpay	er, this cer	tification	is based on all info	rmation of whic	h the prepare	er has any kno	wledge.			
	AM PRIYA RAM SAGAR GUPT 02 15 24 Preparer's Signature Date (678) 965-9522 If REFUND, mail return to: N.C. DEPT. OF REVENUE, P.O. BOX R, RALEIGH, NC 2763											P02082703 Preparer's FEIN, SSN, or PTIN			
	If you ARE	NOT a		-				F REVENUE, P. 0V to: N.C. DE					27640-0640		

Last Name (First 10 Characters) ALLADI 668599154 Your Social Security Number **D-400 Line-by-Line Information** Federal Adjusted Gross Income 6. 198479 6. 7. 7. Additions to Federal Adjusted Gross Income 0 8. Add Lines 6 and 7 8. 198479 9. Deductions From Federal Adjusted Gross Income 9. 0 10. Child Deduction a. Enter the number of qualifying children for whom you were allowed a federal child tax credit 10a. 0 b. Enter the amount of the child deduction 10b. 0 11. N.C. Standard Deduction 11. Υ N.C. Itemized Deduction 11 11. Ν **Deduction amount** 11. 25500 11. 12a. 12. a. Add Lines 9, 10b, and 11 25500 b. Subtract Line 12a from Line 8 12b. 172979 Part-year Residents and Nonresidents Taxable Percentage 13. 13. 0.0000 14. N.C. Taxable Income 14. 172979 15. N.C. Income Tax 8217 15. 16. Tax Credits 16. 0 Subtract Line 16 from Line 15 17. 17. 8217 Consumer Use Tax 18. 18. 0 You certify that no Consumer Use Tax is due Υ 19. Add Lines 17 and 18 19. 8217 North Carolina Income Tax Withheld 20a. Your tax withheld 20a. 5549 20b. Spouse's tax withheld 20b. 2969 Other Tax Payments 21a. 2023 estimated tax 21a. 0 Paid with extension 0 21b. 21b. 0 21c. Partnership 21c. 21d. S Corporation 21d. 0 22. **Additional Payments** 22. 0 23. Add Lines 20a through 22 23. 8518 24. Previous Refunds 24. 0 8518 25. Subtract Line 24 from Line 23 25. Tax Due 26a. 26a. 0 26b. Penalties 26b. 0 26c. Interest 26c. 0 26d. Add Lines 26b and 26c and enter the total on 26d 26d. 0 EU Exception to Underpayment of Estimated Tax EU 26e. Interest on the Underpayment of Estimated Income Tax 26e. 0 27. Pay this Amount 27. 0 301 28. Overpayment 28. Amount of Refund to Apply to: 29. Amount of Line 28 to be applied to 2024 Estimated Income Tax 29. 0 30. N.C. Nongame and Endangered Wildlife Fund 30. 0 31. 0 31. N.C. Education Endowment Fund 0 32. N.C. Breast and Cervical Cancer Control Program 32. 33. 0 33. Add Lines 29 through 32 34. 301 34. Amount to be Refunded