D-400 (50) 8-16-23 < Staple All Pages of Your Return and W-2s Here	ndividual Inc North Card [ome Tax Ret olina Department Amended Return		DOR Use Only	
For calendar year 2023, or fiscal year		23 and ending SREEJA Your SS Spouse's SS	RAJARAM <u>I</u> :N: 383978387 v	023 federal income tax r	matic extension to file your
Were you a resident of N.C. for the ent Was your spouse a resident for the end N.C. Education Endowment Fund: Your overpayment to the Fund. To mate to the Fund, enter the amount of your Select box if you, or if married filing Select box if return is filed and significant was selected.	5. Qualifying Ware year? Yes ntire year? Yes umay contribute to the ke a contribution, enclose designation on Page 2, ng jointly, your spouse ware	No X Re No X Re N.C. Education Endown See Form NC-EDU and you Line 31. (See instruction Reference out of the country of	eturn for deceased tageturn for deceased specturn for deceased specturn for deceased specturn for deceased specturn payment of \$ for information along April 15, 2024, and	Year spouse died: xpayer. Date of d ouse. Date of d a contribution or des 0. To designa bout the Fund.) a U.S. citizen or resid	eath: eath: gnating some or all of ate your overpayment
FS 2 PP Y	DT N OC	N TPRES	N SPRES	N VT I	N SVT N
KART 5103 28081	DS N EA	N TD	S	D	FDEXT N
VIGNESH KUMAR	KARTHIKEYAN		383978387	CABAI	2
SREEJA	RAJARAM		968981582	NC 28083	
5103 BRAILEY CIR			KANNAPOLI	S	
06 118861	16	0	26C	(
07 0	18 Y	0	26E	(
09 0	20A	5276	EU		5 0 0 0
10A 0	20B	0	27	(
10B 0	21A	0	29	(
11 S Y I N	21B	0	30	(
11 25500	21C	0	31	()
13 09882	21D	0	32	()
14 92259	26A	0	34	894	1
15 4382	26B	0			
TN 4432641096	PN	6789659522	PP	P02470833	3
Sign Return Below X Re	efund Due n and accompanying schedules a correct, and complete.		ment Due Check here if you aut to discuss this return	O horize the North Carolina and attachments with the	a Department of Revenue e paid preparer below.
Your Signature	<u> </u>	ouse's Signature (If filing joint		Date Contact F	641096 Phone No. (Include area code)
VENKATA SAI PAVAN KUMAF		(678)965-9522	2	P02	470833
Paid Preparer's Signature If REF If you ARE NOT due a refund, I	UND, mail return to: N.C.		D. BOX R, RALEIGH, NO	27634-0001	S FEIN, SSN, or PTIN

Last Name (First 10 Characters) KARTHIKEYA 383978387 Your Social Security Number **D-400 Line-by-Line Information** Federal Adjusted Gross Income 6. 118861 6. 7. 7. Additions to Federal Adjusted Gross Income 0 8. Add Lines 6 and 7 8. 118861 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. 12. a. Add Lines 9, 10b, and 11 12a. 25500 b. Subtract Line 12a from Line 8 12b. 93361 Part-year Residents and Nonresidents Taxable Percentage 13. 13. 0.9882 14. N.C. Taxable Income 14. 92259 15. N.C. Income Tax 15. 4382 16. Tax Credits 16. 0 Subtract Line 16 from Line 15 17. 4382 17. Consumer Use Tax 18. 18. 0 You certify that no Consumer Use Tax is due Υ 19. Add Lines 17 and 18 19. 4382 North Carolina Income Tax Withheld 20a. Your tax withheld 20a. 5276 20b. Spouse's tax withheld 20b. 0 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. 5276 24. Previous Refunds 24. 0 25. Subtract Line 24 from Line 23 25. 5276 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. 0 894 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. 894 34. Amount to be Refunded

D-400 Sch PN (50)

8-16-23

7.

Capital Gain or (Loss)

Total Additions

2023 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 2023, 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 Name (First 10 Characters)) KART	'HIKEYA	You	ır Social Security N	umber 383978387
Last Name (First 10 Characters)	, 1011101		100	ii Goolal Goodilly 14	
A part-year resident or a nonreside sources that is subject to N.C. tax.			•	•	•
N.C. and became a resident of ano			•		at any time during the tax year
	<u>lr</u>	mportant: Refer to the Instruc	ctions before completing this	form.	
NRT Y	PYT	N		22	121614
NRS Y	PYS	N		23	123071
Part A. Residency Status					
Taxpay <u>er i</u> s: (Select applicable	e box)	Spou	Se is: (Select applicable	e box)
Full-Year Resident X N	onresident	Part-Year Resident	☐ Full-Year Resident	X Nonresiden	it Part-Year Resident
Date N.C. residency began	1	Date N.C. residency ended	Date N.C. residency be	egan	Date N.C. residency ended
			<u> </u>		
If you and your spouse were bo				C. Do not attach S	Schedule PN to Form D-400.
Part B. Allocation of Incom	ne for Pari	- tear Residents and No	onresidents	COLUMN A	COLUMN B
Total Income				Total Income	Amount of Column A
Total income			f	rom all Sources	Attributable to N.C.
			·	rom an oources	Attributable to N.O.
Wages, Salaries, Tips, E	tc.		1.	121614	121614
Taxable Interest			2.	1257	0
Taxable Dividends			3.	0	0
4. Taxable Refunds, Credit	s, or Offsets				
of State and Local Incon	ne Taxes		4.	0	0
Alimony Received			5.	0	0
6. Business Income or (Los	ss)		6.	0	0

8.	Other Gains or (Losses)	8.	0	0	
9.	Taxable Amount of IRA Distributions	9.	0	0	
10.	Taxable Amount of Pensions				
	and Annuities	10.	0	0	
11.	Rental Real Estate, Royalties, Partnerships,				
	S-Corps, Estates, Trusts, Etc.	11.	0	0	
12.	Farm Income or (Loss)	12.	0	0	
13.	Unemployment Compensation	13.	0	0	
14.	Taxable Portion of Social Security				
	and Railroad Retirement Benefits	14.	0	0	
15.	Other Income	15.	0	0	
16.	Total Income	16.	123071	121614	
		COLUMN A		COLUMN B	
North	North Carolina Adjustments		ount from Form	Amount of Column A	
	•	D-4	00 Schedule S	Attributable to N.C.	
17.	Additions				
	a. Interest Income From Obligations of States Other Than N.C.		0	0	
	b. Deferred Gains Reinvested Into an Opportunity Fund	17b.	0	0	
	c. Bonus Depreciation	17c.	0	0	
	d. IRC Section 179 Expense	17d.	0	0	
	e. Other Additions to Federal Adjusted Gross Income That Relate to Gross Income	17e.	0	0	

0

200

7.

18.

Last Name (First 10 Characters) KARTHIKEYA Your Social Security Number 383978387

		COLUMN A Amount from Form D-400 Schedule S		COLUMN B Amount of Column A Attributable to N.C.
19.	Deductions		0	0
	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. Local Government, or Federal Government Retirees, i.e. <i>Bailey Settlement</i> 	19d.	0	0
	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.	123071	121614
art (C. Part-Year Residents and Nonresidents Taxable Percentage			
22.	Enter the Amount From Column B, Line 21		2	22. 121614
23.	Enter the Amount From Column A, Line 21		_	23. 123071
24.	Part-Year Residents and Nonresident Taxable Percentage		_	24. 0.9882

REV 12/13/23 PRO