

Taxpayer

Johnny R Hughes
XXX-XX-7569

3273 GREEN GLADE RD
Sophia, NC 27350

2022 Federal Return Information

Prepared: 03-09-2023

Filing Status: Head of Household

Wages, Salaries, Tips, etc.: \$ 0
Total Income: \$ 0
Deductions: \$ 0
Adjusted Gross Income: \$ 0
Contributions: \$ 21,150
QBI Amount: \$ 0
Taxable Income: \$ 0
Tax (before credits): \$ 0
Total Non-Refundable Credits: \$ 0
Tax (after credits): \$ 0
Earned Income Credit: \$ 0
Total Payments & Refundable Credits: \$ 0
Total Tax Paid: \$ 0
Your Tax Refund: \$ 0
Refund You Applied to 2023: \$ 0
Amount of Tax Owed (balance due): \$ 0
Tax Rate (percentage): 10

State Return Information

Resident State: NC

State	AGI	Taxable Income	Tax	Refund	Balance Due
NC		\$ (19,125)			

Filing Status ☐ Single ☐ Married filing jointly ☐ Married filing separately (MFS) ☒ Head of household (HOH) ☐ Qualifying surviving spouse (QSS)
Check only one box. If you checked the MFS box, enter the name of your spouse. If you checked the HOH or QSS box, enter the child's name if the qualifying person is a child but not your dependent:

Your first name and middle initial **Johnny R** Last name **Hughes** Your social security number **245-90-7569**
If joint return, spouse's first name and middle initial Last name Spouse's social security number

Home address (number and street). If you have a P.O. box, see instructions. **3273 GREEN GLADE RD** Apt. no.
City, town, or post office. If you have a foreign address, also complete spaces below. State **NC** ZIP code **27350** **Sophia**
Foreign country name Foreign province/state/county Foreign postal code **Presidential Election Campaign**
Check here if you, or your spouse if filing jointly, want \$3 to go to this fund. Checking a box below will not change your tax or refund. ☐ You ☐ Spouse

Digital Assets At any time during 2022, did you: (a) receive (as a reward, award, or payment for property or services); or (b) sell, exchange, gift, or otherwise dispose of a digital asset (or a financial interest in a digital asset)? (See instructions.) ☐ Yes ☐ No

Standard Deduction **Someone can claim:** ☐ You as a dependent ☐ Your spouse as a dependent ☐ Spouse itemizes on a separate return or you were a dual-status alien

Age/Blindness **You:** ☒ Were born before January 2, 1958 ☐ Are blind **Spouse:** ☐ Was born before January 2, 1958 ☐ Is blind

Dependents (see instructions):		(2) Social security number	(3) Relationship to you	(4) Check the box if qualifies for (see instructions):	
(1) First name	Last name			Child tax credit	Credit for other dependents
If more than four dependents, see instructions and check here <input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

Income	1a Total amount from Form(s) W-2, box 1 (see instructions)	1a
	b Household employee wages not reported on Form(s) W-2	1b
	c Tip income not reported on line 1a (see instructions)	1c
	d Medicaid waiver payments not reported on Form(s) W-2 (see instructions) . . .	1d
	e Taxable dependent care benefits from Form 2441, line 26	1e
	f Employer-provided adoption benefits from Form 8839, line 29	1f
	g Wages from Form 8919, line 6	1g
	h Other earned income (see instructions)	1h
	i Nontaxable combat pay election (see instructions) 1i	
	z Add lines 1a through 1h	1z
	2a Tax-exempt interest 2a	b Taxable interest 2b
	3a Qualified dividends 3a	b Ordinary dividends 3b
	4a IRA distributions 4a	b Taxable amount 4b
	5a Pensions and annuities 5a	b Taxable amount 5b
	6a Social security benefits 6a	b Taxable amount 6b
	c If you elect to use the lump-sum election method, check here (see instructions) <input type="checkbox"/>	
	7 Capital gain or (loss). Attach Schedule D if required. If not required, check here <input type="checkbox"/>	7

Standard DeductionSee *Standard Deduction Chart* on the last page of this form.

8	Other income from Schedule 1, line 10	8	
9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income	9	0
10	Adjustments to income from Schedule 1, line 26	10	
11	Subtract line 10 from line 9. This is your adjusted gross income	11	0
12	Standard deduction or itemized deductions (from Schedule A)	12	21,150
13	Qualified business income deduction from Form 8995 or Form 8995-A	13	
14	Add lines 12 and 13	14	21,150
15	Subtract line 14 from line 11. If zero or less, enter -0-. This is your taxable income	15	0

Tax and Credits

16	Tax (see instructions). Check if any from: 1 <input type="checkbox"/> Form(s) 8814 2 <input type="checkbox"/> Form(s) 4972 3 <input type="checkbox"/>	16	0
17	Amount from Schedule 2, line 3	17	
18	Add lines 16 and 17	18	0
19	Child tax credit or credit for other dependents from Schedule 8812	19	
20	Amount from Schedule 3, line 8	20	
21	Add lines 19 and 20	21	0
22	Subtract line 21 from line 18. If zero or less, enter -0-	22	0
23	Other taxes, including self-employment tax, from Schedule 2, line 21	23	
24	Add lines 22 and 23. This is your total tax	24	0

Payments

25	Federal income tax withheld from:		
a	Form(s) W-2	25a	
b	Form(s) 1099	25b	
c	Other forms (see instructions)	25c	
d	Add lines 25a through 25c	25d	
26	2022 estimated tax payments and amount applied from 2021 return	26	
27	Earned income credit (EIC) ^{NO}	27	
28	Additional child tax credit from Schedule 8812	28	
29	American opportunity credit from Form 8863, 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. These are your total other payments and refundable credits	32	0
33	Add lines 25d, 26, and 32. These are your total payments	33	0

If you have a qualifying child, attach Sch. EIC.

Refund	34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid	34	0
	35a	Amount of line 34 you want refunded to you . If Form 8888 is attached, check here <input type="checkbox"/>	35a	0
Direct deposit? See instructions.	b	Routing number <input type="text"/>	c Type: <input type="checkbox"/> Checking <input type="checkbox"/> Savings	
	d	Account number <input type="text"/>		
	36	Amount of line 34 you want applied to your 2023 estimated tax	36	
Amount You Owe	37	Subtract line 33 from line 24. This is the amount you owe . For details on how to pay, go to www.irs.gov/Payments or see instructions	37	0
	38	Estimated tax penalty (see instructions)	38	

Third Party Designee	Do you want to allow another person to discuss this return with the IRS? See instructions <input type="checkbox"/> Yes . Complete below. <input checked="" type="checkbox"/> No		
Designee's name	Phone no.	Personal identification number (PIN)	<input type="text"/>

Sign Here	Under penalties of perjury, I declare 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. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.			
Joint return? See instructions. Keep a copy for your records.	Your signature	Date	Your occupation	If the IRS sent you an Identity Protection PIN, enter it here (see inst.) <input type="text"/>
	Spouse's signature. If a joint return, both must sign.	Date	Spouse's occupation	If the IRS sent your spouse an Identity Protection PIN, enter it here (see inst.) <input type="text"/>
	Phone no. 336-653-9040	Email address		

Paid Preparer Use Only	Preparer's signature	Date	PTIN	Check if: <input type="checkbox"/> Self-employed
	Preparer's name	Phone no.		
	Firm's name	Firm's EIN		
	Firm's address			

Go to www.irs.gov/Form1040SR for instructions and the latest information.Form **1040-SR** (2022)

EEA

D-400 (45) 8-8-22

< Staple All Pages of Your
Return and W-2s Here

2022 Individual Income Tax Return

North Carolina Department of Revenue

Amended Return

DOR
Use
Only

For calendar year 2022, or fiscal year beginning		22 and ending		Are you a veteran? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	
JOHNNY R HUGHES		Your SSN: 245907569		Is your spouse a veteran? Yes <input type="checkbox"/> No <input type="checkbox"/>	
3273 GREEN GLADE RD		Spouse's SSN:		Were you granted an automatic extension to file your 2022 federal income tax return, e.g., Form 1040?	
SOPHIA NC 27350 RAND				Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	
Filing Status		1. Single <input checked="" type="checkbox"/> 2. Married Filing Jointly <input type="checkbox"/> 3. Married Filing Separately <input type="checkbox"/> 4. Head of Household <input type="checkbox"/> 5. Qualifying Widow(er) <input type="checkbox"/>		Year spouse died:	
Were you a resident of N.C. for the entire year? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>		Return for deceased taxpayer.		Date of death:	
Was your spouse a resident for the entire year? Yes <input type="checkbox"/> No <input type="checkbox"/>		Return for deceased spouse.		Date of death:	
N.C. Education Endowment Fund: You may contribute to the N.C. Education Endowment Fund by making a contribution or designating some or all of your overpayment to the Fund. To make a contribution, enclose Form NC-EDU and your payment of \$ 0. To designate your overpayment to the Fund, enter the amount of your designation on Page 2, Line 31. (See instructions for information about the Fund.)					
<input type="checkbox"/> Select box if you, or if married filing jointly, your spouse were out of the country on April 15, 2023, and a U.S. citizen or resident. <input type="checkbox"/> Select box if return is filed and signed by Executor, Administrator, or Court-Appointed Personal Representative.					

FS	4	PP	N	DT	N	OC	N	TPRES	Y	SPRES	N	VT	N	SVT	N
HUGH	3273	27350	DS	N	EA	N	TD			SD				FDEXT	N
JOHNNY	R	HUGHES							245907569		RAND				
											NC	27350			
3273	GREEN	GLADE	RD							SOPHIA					
06		0		16				0		26C			0		
07		0		18	Y			0		26E			0		
09		0		20A				0		EU					
10A		0		20B				0		27			0		
10B		0		21A				0		29			0		
11	S	Y	I	N				0		30			0		
11		19125		21C				0		31			0		
13		00000		21D				0		32			0		
14		-19125		26A				0		34			0		
15		0		26B				0							
TN		3366539040		PN						PP					



Sign Return Below		Refund Due		0		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.					<input type="checkbox"/> Check here if you authorize the North Carolina Department of Revenue to discuss this return and attachments with the paid preparer below.				
Your Signature: _____		Date: _____		Spouse's Signature (If filing joint return, both must sign.) _____		Date: _____		Contact Phone No. (Include area code) 336-653-9040	
PAID PREPARER USE ONLY If prepared by a person other than taxpayer, this certification is based on all information of which the preparer has any knowledge.									
Paid Preparer's Signature: _____		Date: _____		Preparer's Contact Phone Number (Include area code) _____		Preparer's FEIN, SSN, or PTIN _____			
If REFUND, mail return to: N.C. DEPT. OF REVENUE, P.O. BOX R, RALEIGH, NC 27634-0001 If you ARE NOT due a refund, mail return, any payment, and D-400V to: N.C. DEPT. OF REVENUE, P.O. BOX 25000, RALEIGH, NC 27640-0640									

Last Name (First 10 Characters) HUGHES

Your Social Security Number

245907569

D-400 Line-by-Line Information

6.	Federal Adjusted Gross Income	6.	0
7.	Additions to Federal Adjusted Gross Income	7.	0
8.	Add Lines 6 and 7	8.	0
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.	Y
11.	N.C. Itemized Deduction	11.	N
11.	Deduction amount	11.	19125
12.	a. Add Lines 9, 10b, and 11	12a.	19125
	b. Subtract Line 12a from Line 8	12b.	-19125
13.	Part-year Residents and Nonresidents Taxable Percentage	13.	0.0000
14.	N.C. Taxable Income	14.	-19125
15.	N.C. Income Tax	15.	0
16.	Tax Credits	16.	0
17.	Subtract Line 16 from Line 15	17.	0
18.	Consumer Use Tax	18.	0
	You certify that no Consumer Use Tax is due		Y
19.	Add Lines 17 and 18	19.	0

North Carolina Income Tax Withheld

20a.	Your tax withheld	20a.	0
20b.	Spouse's tax withheld	20b.	0

Other Tax Payments

21a.	2022 estimated tax	21a.	0
21b.	Paid with extension	21b.	0
21c.	Partnership	21c.	0
21d.	S Corporation	21d.	0
22.	Additional Payments	22.	0
23.	Add Lines 20a through 22	23.	0
24.	Previous Refunds	24.	0
25.	Subtract Line 24 from Line 23	25.	0
26a.	Tax Due	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
28.	Overpayment	28.	0

Amount of Refund to Apply to:

29.	Amount of Line 28 to be applied to 2023 Estimated Income Tax	29.	0
30.	N.C. Nongame and Endangered Wildlife Fund	30.	0
31.	N.C. Education Endowment Fund	31.	0
32.	N.C. Breast and Cervical Cancer Control Program	32.	0
33.	Add Lines 29 through 32	33.	0
34.	Amount to be Refunded	34.	0