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

Subm	nission Identification Number (SID)		-		
Taxpay	rer's name	Social securi	ty numb	er	
KIR	AN REDDY MALE	196-98	-1779	9	
Spouse	e's name	Spouse's soo	ial secu	ırity numbe	er
Part	Tax Return Information — Tax Year Ending December 31, 2023 (En	 ter year you a	re aut	horizing	J.)
	whole dollars only on lines 1 through 5.	, ,			, ,
Note:	Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.				
1	Adjusted gross income		1	40	0,863.
2	Total tax		2		3,023.
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3	4	4,031.
4	Amount you want refunded to you		4	-	1,008.
_ 5	Amount you owe		5		
Part	Taxpayer Declaration and Signature Authorization (Be sure you get an	d keep a cop	y of y	our retu	urn)
to send for any Agent payme author payme busine taxes person	(original or amended) I am now authorizing. I consent to allow my intermediate service provider, trans d my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for a delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account in ent of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation resist days prior to the payment (settlement) date. I also authorize the financial institutions involved in the receive confidential information necessary to answer inquiries and resolve issues related to the neal identification number (PIN) below is my signature for the income tax return (original or amended)	rejection of the to U.S. Treasury andicated in the tution to debit the late the authorizate the authorizate the processing of the processing of the programment. I fur	ransmised ax prepared to the control of the control	ssion, (b) to designated paration so this according to revoke wed no larectronic pknowledg	the reason of Financial oftware for count. This (cancel) a ter than 2 sayment of e that the
	onic Funds Withdrawal Consent. ayer's PIN: check one box only				1
Тахра		8 BL DIN	1 7	7 7 9	00 001
	ERO firm name signature on the income tax return (original or amended) I am now authorizing.	ř En		digits, but r all zeros	as my
	I will enter my PIN as my signature on the income tax return (original or amended) I am if you are entering your own PIN and your return is filed using the Practitioner PIN me below.	ethod. The ERC			
Yours	signature ► Date ►				
Spou	se's PIN: check one box only				1
	I authorize to enter or genera	te my PIN			as my
	ERO firm name			digits, but r all zeros	
	signature on the income tax return (original or amended) I am now authorizing.				
	I will enter my PIN as my signature on the income tax return (original or amended) I am if you are entering your own PIN and your return is filed using the Practitioner PIN me below.				
Spous	se's signature ▶ Date ▶				
	Practitioner PIN Method Returns Only—continue belo	w			
Part	III Certification and Authentication — Practitioner PIN Method Only				
EDO:	s EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN.	2 2 4 9	6 0	8 2	7 1
ERU	s EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN. 2	2 2 4 9 Don't ent		- -	/ 1
		Don't ent	o: uii 20		
author	fy that the above numeric entry is my PIN, which is my signature for the electronic individual income rized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am su ements of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers of	bmitting this retu	ırn in a	ccordanc	
ERO's	s signature ▶ Date ▶				
	ERO Must Retain This Form — See Instructions				
	Don't Submit This Form to the IRS Unless Requested To	Do So			

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



1040		artment of the Treasury—Internal Revenue Servi		urn	202	3	OMB No. 1545	-0074	IRS Use	Only-	-Do not w	rite or sta	aple in this space.	
For the year Jai	n. 1–Dec	c. 31, 2023, or other tax year beginning			, 2023, end	ling			, 20		See se	oarate i	instructions.	
Your first name	and m	iddle initial	Last nar	me							Your so	cial sec	curity number	-
KIRAN R	EDDY		MALE								196	98	1779	
		s first name and middle initial	Last nar										security numb	eı
Home address	(numbe	er and street). If you have a P.O. box, see	instruction	ons.				P	Apt. no.	- 1			ection Campaig	ηn
		EW DRIVE				10.		710					ou, or your jointly, want \$3	3
	oost offi	ice. If you have a foreign address, also co	omplete sp	paces bel	low.	Sta		ZIP c			•	_	nd. Checking a	
MOAB			1-			LU		845					not change	
Foreign countr	y name			-oreign pr	rovince/state/	count	ty	Foreig	ın postal c	ode	your tax	or refu	_	se
Filing Status	s X	Single					☐ Head of h	∟ ouseh	old (HOH	— ∃)				_
Check only		Married filing jointly (even if only o	ne had ii	ncome)					•	•				
one box.		Married filing separately (MFS)					☐ Qualifying	surviv	ing spou	use (C	QSS)			
	lf y	you checked the MFS box, enter the	name o	of your sp	pouse. If you	u che	ecked the HOH	or Q	SS box,	enter	the chi	ld's na	me if the	
	qu	ualifying person is a child but not you	ur depen	ident:										
Digital	At a	ny time during 2023, did you: (a) rec	eive (as	a reward	d, award, or	payr	ment for prope	rty or	services); or (b) sell,			_
Assets		nange, or otherwise dispose of a dig										□ Ye	es 🛛 No	
Standard	Som	neone can claim: You as a de	pendent	t 🗌	Your spous	e as	a dependent							
Deduction		Spouse itemizes on a separate retur	n or you	were a	dual-status	alien	l							
Age/Blindnes	s You	: Were born before January 2, 1	959	Are bli	ind Sp o	ouse	: Was bor	rn befo	ore Janua	ary 2,	1959		s blind	
Dependent	s (see	instructions):		(2) S	Social security	,	(3) Relationsh	nip (4) Check t	he bo	x if quali	fies for ((see instructions	s):
If more	(1) First name Last name				number		to you		Child t	ax cre	dit	Credit fo	or other dependen	ıts
than four									[
dependents, see instruction	. —								[
and check _	. —													
here L									[
Income	1a	Total amount from Form(s) W-2, b	•		,						1a		49,273.	_
Attach Form(s)	b	Household employee wages not re									1b			_
W-2 here. Also	С.	Tip income not reported on line 1a	•		•						1c			_
attach Forms W-2G and	d	Medicaid waiver payments not rep		•	,	nstru	ictions)				1d			_
1099-R if tax	e	Taxable dependent care benefits f									1e			_
was withheld.	f	Employer-provided adoption bene	etits trom	1 Form 8	839, line 29	•					1f			_
If you did not get a Form	g	Wages from Form 8919, line 6.									1g		0.	_
W-2, see	h :	Other earned income (see instruct	,				· · · · ·	i.			1h			_
instructions.	i	Nontaxable combat pay election (s	see instr	uctions)			<u>1i</u>				-		49,273.	
A# C ! 5	Z	Add lines 1a through 1h			· · i	 ьт	axable interes				1z			_
Attach Sch. B if required.	2a	· –	2a 3a				axable interes Ordinary divide				2b 3b			-
	<u>3a_</u> 4a	· · ·	4a				axable amoun				4b			_
Standard	1	_	4a 5a				axable amoun				5b			_
Deduction for— Single or	5a 6a	_	5а 6а				axable amoun axable amoun				6b			-
Married filing	C	If you elect to use the lump-sum e		method	check here					· ·]			_
separately, \$13,850	7	Capital gain or (loss). Attach Sche				•	,			. F	7			
Married filing jointly or	8	Additional income from Schedule		•	•		-				8		-8,410.	_
Qualifying	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7									9		40,863.	
surviving spouse, \$27,700	10	Adjustments to income from Sche		-							10			_
Head of household,	11	Subtract line 10 from line 9. This is									11		40,863.	_
\$20,800	12	Standard deduction or itemized	•	-	_						12		13,850.	
If you checked any box under	13	Qualified business income deduct				-					13			_
Standard Deduction,	14										14		13,850.	<u> </u>
see instructions.	15	Subtract line 14 from line 11. If zer									15		27 013	_

Form 1040 (202)	3)								Page Z
Tax and	16	Tax (see instructions). Check if a	any from Form	(s): 1 881	4 2 🗌 4972	з 🗌		16	3,023.
Credits	17	Amount from Schedule 2, line 3	17						
	18	Add lines 16 and 17	18	3,023.					
	19	Child tax credit or credit for oth	ner dependent	s from Sched	ule 8812			19	
	20	Amount from Schedule 3, line 8	3					20	
	21	Add lines 19 and 20						21	
	22	Subtract line 21 from line 18. If	zero or less, e	enter -0				22	3,023.
	23	Other taxes, including self-emp	oloyment tax,	from Schedule	e 2, line 21			23	0.
	24	Add lines 22 and 23. This is you	ur total tax					24	3,023.
Payments	25	Federal income tax withheld from	om:						
•	а	Form(s) W-2				25a 4	1,031.		
	b	Form(s) 1099				25b			
	С	Other forms (see instructions)				25c			
	d	Add lines 25a through 25c .						25d	4,031.
If you have a	26	2023 estimated tax payments a	and amount a	oplied from 20)22 return			26	
qualifying child,	27	Earned income credit (EIC) .			No .	27			
attach Sch. EIC.	28	Additional child tax credit from S	Schedule 8812			28			
	29	American opportunity credit fro	m Form 8863	, line 8		29			
	30	Reserved for future use				30			
	31	Amount from Schedule 3, line 1							
	32	Add lines 27, 28, 29, and 31. The	32						
	33	Add lines 25d, 26, and 32. The	se are your to	tal payments	·			33	4,031.
Refund	34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid							1,008.
	35a	Amount of line 34 you want ref	unded to you	ı. If Form 8888	is attached, chec	ck here	🗆	35a	1,008.
Direct deposit?	b	Routing number 0 3 1 1	0 1 1	6 9	c Type:	Checking	Savings		
See instructions.	d	Account number 8 8 4	0 1 7	9 8 3 2	1 2 0 0				
	36	Amount of line 34 you want app	olied to your	2024 estimate	ed tax	36			
Amount	37	Subtract line 33 from line 24. The	his is the amo	unt you owe.					
You Owe		For details on how to pay, go to	o www.irs.gov	//Payments or	see instructions .			37	
	38	Estimated tax penalty (see instr	ructions) .			38			
Third Party		you want to allow another pe				_			
Designee		structions					•		X No
		signee's me		Phone no.			sonal iden ber (PIN)	tification	
Cian		der penalties of perjury, I declare that	I have examined		accompanying sche		, ,	the best	of my knowledge and
Sign		lief, they are true, correct, and comple							
Here	Yo	ur signature		Date	Your occupation		lf th	e IRS se	nt you an Identity
		.			·	Pro	tection P	IN, enter it here	
Joint return?					CLERK		(see	e inst.)	
See instructions. Keep a copy for your records.	Sp	ouse's signature. If a joint return, bot l	h must sign.	Date	Spouse's occupati	on	Ide		nt your spouse an ection PIN, enter it here
	Ph	one no. (435)259-2687		Email address	AVISUNNY02	@GMAIL.CO	<u></u>		
	Pre		reparer's signat	ure		Date	PTIN		Check if:
Paid	SYAM	M PRIYA RAM SAGAR GUPTA TALLAM SY	YAM PRIYA	RAM SAGAR	GUPTA TALLAM	02/16/2024	P0208	32703	Self-employed
Preparer									678)965-9522
Use Only		m's address 245 ROONEY		NSWICK N	J 08816			n's EIN	84-3171965
	<u></u>	10101					1		= 1010 (

SCHEDULE 1 (Form 1040)

Additional Income and Adjustments to Income

OMB No. 1545-0074

2023

Attachment
Sequence No. 01

Department of the Treasury Internal Revenue Service Attach to Form 1040, 1040-SR, or 1040-NR.

Go to www.irs.gov/Form1040 for instructions and the latest information.

Name	Name(s) shown on Form 1040, 1040-SR, or 1040-NR Your so							
KIRA	N REDDY MALE	8-17	779					
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			5	-8,410.			
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		-				
į	Prizes and awards	8i		-				
j	Activity not engaged in for profit income	8j		-				
k	Stock options	8k		-				
ı	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		-				
	Section 951(a) inclusion (see instructions)	8n		-				
0	Section 951A(a) inclusion (see instructions)	80 8p						
p	Taxable distributions from an ABLE account (see instructions)	8q		-				
q r	Scholarship and fellowship grants not reported on Form W-2	8r						
	Nontaxable amount of Medicaid waiver payments included on Form	OI .		-				
3	1040, line 1a or 1d	8s ()					
t	Pension or annuity from a nonqualifed deferred compensation plan or							
•	a nongovernmental section 457 plan	8t						
U	Wages earned while incarcerated	8u						
	Other income. List type and amount:							
_		8z						
9	Total other income. Add lines 8a through 8z			9				

10

-8,410.

10

Page **2** Schedule 1 (Form 1040) 2023

Par	t II Adjustments to Income				
11	Educator expenses			11	
12	Certain business expenses of reservists, performing artists, and fee	e-basis	government		
	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	· <u> </u>			
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:				
а	Jury duty pay (see instructions)	24a			
b	Deductible expenses related to income reported on line 8l from the				
	rental of personal property engaged in for profit	24b			
С	Nontaxable amount of the value of Olympic and Paralympic medals				
	and USOC prize money reported on line 8m	24c			
d	Reforestation amortization and expenses	24d			
е	Repayment of supplemental unemployment benefits under the Trade				
	Act of 1974	24e			
f	Contributions to section 501(c)(18)(D) pension plans	24f			
g	Contributions by certain chaplains to section 403(b) plans	24g			
h	Attorney fees and court costs for actions involving certain unlawful				
	discrimination claims (see instructions)	24h			
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	24i		_	
j	Housing deduction from Form 2555	24j		-	
K	Excess deductions of section 67(e) expenses from Schedule K-1 (Form				
	1041)	24k		-	
Z	Other adjustments. List type and amount:				
05		24z		0.5	
25 06	Total other adjustments. Add lines 24a through 24z			25	
26	Add lines 11 through 23 and 25. These are your adjustments to income Form 1040, 1040-SR, or 1040-NR, line 10			06	
				26	1 4 (5 4040) 2222
	BAA	REV 02/	11/24 PRO	Scnedu	ile 1 (Form 1040) 2023

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.

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service Name(s) shown on return

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

Your social security number								
	Attachment Sequence No. 13							
, , , , ,	2023							

KIR.	AN REDDY MALE						196-9	8-1779	,
Par									
	Note: If you are in the business of renting personal properental income or loss from Form 4835 on page 2, line 40.	rty, use	Schedul	e C . See	instru	ctions. If you	are an indi	vidual, rep	ort farm
Α	Did you make any payments in 2023 that would require you		Form(s)	10992.5	See in	structions			es X No
	If "Yes," did you or will you file required Form(s) 1099?								
	Physical address of each property (street, city, state, ZI						· · ·	· 🗆 · `	<u> </u>
1a			<u> </u>						
A	VAJRA 1APARTMENT 4TH FLOOR BHAGATH NAC	GAR	404 K	ARIMN.	AHGA	R TELANG	ANA IN	50500	1
B									
<u>C</u>							1		_
1b	Type of Property 2 For each rental real estate property				Fa	ir Rental		nal Use	QJV
	(from list below) above, report the number of fair personal use days. Check the Q					Days	Da	ays	
A	jersonal use days. Check the Q			Α		365		0	<u> </u>
В	qualified joint venture. See instru			В					<u> </u>
C				С					
	of Property:								
	Single Family Residence 3 Vacation/Short-Term Ren	ntal	5 Land			Self-Rental			
2	Multi-Family Residence 4 Commercial		6 Roy	alties	8	Other (desc	ribe)		
						Propert			
Incor	ne:			Α		В			С
3	Rents received	3		4	20.				
4	Royalties received	4							
Ехре	nses:								
5	Advertising	5							
6	Auto and travel (see instructions)	6							
7	Cleaning and maintenance	7		8	30.				
8	Commissions	8							
9	Insurance	9							
10	Legal and other professional fees	10							
11	Management fees	11		1,7	30.				
12	Mortgage interest paid to banks, etc. (see instructions)	12							
13	Other interest	13							
14	Repairs	14		1,8	70.				
15	Supplies	15		2,1	50.				
16	Taxes	16							
17	Utilities	17		2,2	50.				
18	Depreciation expense or depletion	18							
19	Other (list)	19							
20	Total expenses. Add lines 5 through 19	20		8,8	30.				
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		-8,4	10.				
22	Deductible rental real estate loss after limitation, if any,								
	on Form 8582 (see instructions)	22	(8,41	LO.)	()	()
23 a	Total of all amounts reported on line 3 for all rental prope				23a		420.		
b	Total of all amounts reported on line 4 for all royalty prop				23b				
С	Total of all amounts reported on line 12 for all properties				23c				
d	Total of all amounts reported on line 18 for all properties				23d				
е	Total of all amounts reported on line 20 for all properties				23e	8	3,830.		
24	Income. Add positive amounts shown on line 21. Do no		-				. 24	ļ	
25	Losses. Add royalty losses from line 21 and rental real estat							(8,410.
26	Total rental real estate and royalty income or (loss).								
	here. If Parts II, III, and IV, and line 40 on page 2 do no								
	Schedule 1 (Form 1040), line 5. Otherwise, include this a	ımount	in the to	tai on li	ne 41	on page 2	. 26		-8,410.

40301 1555

Address

Utah State Tax Commission

Utah Individual Income Tax Return

All state income tax dollars support education, children and individuals with disabilities.

· Amended Return - enter code:

(see instructions)

INTUIT Full-yr Resident?

2023

TC-40

Your Social Security No. 196981779 Spouse's Soc. Sec. No.

Your first name KIRAN REDDY Spouse's first name

Your last name MALE Spouse's last name Y/N Υ

40863

40863

1900

If deceased, complete page 3, Part 1

524 CLIFFVIEW DRIVE

City

State ZIP+4 MOAB 84532 UT

Telephone number

Foreign country (if not U.S.)

1 Filing Status - enter code	• 2 Qualifying Dependents	3 Election Campaign Fund
1 = Single	a Dependents age 16 and under	Does not increase your tax or reduce your refund.
• 1 2 = Married filing jointly	b Other dependents	Enter the code for the Yourself Spouse
3 = Married filing separately	c Dependents born in 2023	party of your choice. • •
4 = Head of household	d 0 Total (add lines a, b and c)	See instructions for
5 = Qualifying surviving spouse		code letters or go to incometax.utah.gov/elect.
If using code 2 or 3, enter spouse's name and SSN above	See instructions.	If no contribution, enter N.
4 Federal adjusted gross income from federal	al return	• 4 40863
5 Additions to income from TC-40A, Part 1 (attach TC-40A, page 1)	• 5

lf u	sing code 2 or 3, enter spouse's name and SSN above	See instructions.		If no contribution, en	ter N			
				· · · · · · · · · · · · · · · · · · ·				
4	Federal adjusted gross income from federal	al return		•	4			
5	Additions to income from TC-40A, Part 1 (a	attach TC-40A, page 1)		•	5			
6	Total income - add line 4 and line 5				6			
7	7 State tax refund included on federal form 1040, Schedule 1, line 1 (if any)							
		, , , , , , , , , , , , , , , , , , , ,						
8	Subtractions from income from TC-40A, Pa	art 2 (attach TC-40A, page 1)		•	8			
9	Utah taxable income/loss - subtract the s	sum of lines 7 and 8 from line 6		•	9			
10	Utah tax - multiply line 9 by 4.65% (.0465)	(not less than zero)		•	10			
11	Utah personal exemption (multiply line 2d b	y \$1,941)	• 11	0				
12	Prederal standard or itemized deductions		• 12	13850	Electronic is quick, ea			
13	Add line 11 and line 12		13	13850	free, and			
14	State income tax included in federal itemiz	ed deductions	• 14		To learn n			
15	Subtract line 14 from line 13		15	13850	go to			
16	initial credit before phase-out - multiply line	∍ 15 by 6% (.06)	• 16	831				
17	Enter: \$16,742 (single or married filing sep	*** * * *	• 17	16742				
18	household); or \$33,484 (married filing Income subject to phase-out - subtract line		ıse) 18	24121				
19	Phase-out amount - multiply line 18 by 1.3	% (.013)	• 19	314				

ic filing asy and nd will ur refund.

> more, h.gov

20 Taxpayer tax credit - subtract line 19 from line 16 (not less than zero)

21 If you are a qualified exempt taxpayer, enter "X" (complete worksheet in instr.) • 21

22 Utah income tax - subtract line 20 from line 10 (not less than zero)

• 22

• 20

1383

517

403	Uta 302 SSN			Return (continue	•	INTUIT	TC-40 2023	Pg. 2
23	Enter tax fro	m TC-40, pag	e 1, line 22	•			23	1383
24	Apportionab	le nonrefundal	ble credits from TC-4	0A, Part 3 (attach TC-40A	, page 1)		• 24	
25	•	•	t line 24 from line 23 complete and enter t	(not less than zero) he UTAH TAX from TC-40	B, line 41		• 25	1383
26	Nonapportio	nable nonrefu	ndable credits from T	C-40A, Part 4 (attach TC-	40A, page 1)		• 26	
27	Subtract line	26 from line 2	25 (not less than zero)			27	1383
28	Voluntary co	ntributions fro	m TC-40, page 3, Pa	rt 4 (attach TC-40, page 3)		• 28	
29	AMENDED I	RETURN ONL	Y - previous refund				• 29	
30	Recapture o	f low-income h	nousing credit				• 30	
31	Utah use tax	(• 31	
32	Total tax, us	se tax and ad	ditions to tax (add li	nes 27 through 31)			32	1383
33		0 ,	•	on withholding or pass-thro	,	nholding,	• 33	2339
34		•		the total of TC-40W, Part 546 and 2022 refund appli			• 34	
35	AMENDED I	RETURN ONL	Y - previous paymen	ts			• 35	
36	Nonapportio	nable refunda	ble credits from TC-4	0A, Part 5 (attach TC-40A	., page 2)		• 36	
37	Apportionab	le refundable (credits from TC-40A,	Part 6, line c (attach TC-4	0A, page 2)		• 37	
38	Total withhol	ding and refur	ndable credits - add li	nes 33 through 37			38	2339
39	TAX DUE - s	subtract line 38	8 from line 32 (not les	ss than zero)			• 39	
40	Penalty and	interest (see i	nstructions)				40	
41	TOTAL DUE	- PAY THIS A	AMOUNT - add line 3	9 and line 40			• 41	
42	REFUND - s	ubtract line 32	2 from line 38 (not les	s than zero)			• 42	956
43	Voluntary su	btractions fror	m refund (not greater	than line 42)			• 43	
	Enter the tot	al from page 3	3, Part 6	ur account information (se	e instructions fo	or foreign accounts)	checking s	avings foreign
	Routing no		•	,	40179831	,	· ·	•
			to the best of my knowl	edge and belief, this return ar			t and complete.	
SIG	N Your signat RE	ure		Date	Spouse's signatu	ure (if filing jointly)		Date
		e of designee (if	any) you authorize to d	iscuss this return	Desig	gnee's telephone number	Designee PIN	
Des	signee	oror'o olar -t		Data	D	arar'a talanhana	Property's DT/N	
Р		arer's signature Ƴ∆M DR T`	YA RAM SAGA	Date AR G 02/16/2		arer's telephone number 789659522	Preparer's PTIN •	P02082703
	<u> </u>	's name	GLOBAL TAX		1 0	, 0 , 0 , 3 , 3 , 4 , 4	Preparer's EIN	102002703
Sec	ction and	address	245 ROONE					843171965

Pg. 1

40309

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SSN 196-98-1779

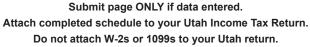
Last name MALE

Line Explanations IMPORTANT 1 Employer/payer ID number from W-2 box "b" or 1099 Do not send your W-2s or 1099s with your return. Instead enter Utah withholding ID number from W-2 box "15" or 1099 W-2 or 1099 information below, but only if there is Utah withholding (14 characters, ending in WTH, no hyphens) on the form. 3 Employer/payer name and address from W-2 box "c" or 1099 Enter "X" if reporting Utah withholding from form 1099 Use additional forms TC-40W if you have more than four W-2s and/or 5 Employee's Social Security number from W-2 box "a" or 1099 1099s with Utah withholding tax. Utah wages or income from W-2 box "16" or 1099 Utah withholding tax from W-2 box "17" or 1099 Enter mineral production withholding from TC-675R in Part 2 of TC-40W; enter pass-through entity withholding in Part 3 of TC-40W. First W-2 or 1099 Second W-2 or 1099 1 205637217 2 (14 characters, no hyphens) (14 characters, no hyphens) 12469016004WTH 3 MAA KRUPA HOSPITALITY, LLC 426 N MAIN 4352594468 MOAB UT84532 4 4 5 196981779 6 6 49273 7 7 2339 Third W-2 or 1099 Fourth W-2 or 1099 1 1 2 (14 characters, no hyphens) 2 (14 characters, no hyphens) 3 3

Total Utah withholding tax from all lines 7:

If you have nothing to enter on TC-40W, page 2, enter this total on TC-40, page 2, line 33. If you have entries on TC-40W, page 2, enter this total on TC-40, page 3, Part 5, line 1.

2339



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