

IRS e-file Signature Authorization

▶ ERO must obtain and retain completed Form 8879.
▶ Go to www.irs.gov/Form8879 for the latest information.

Submission Identification Number (SID) ▶

Taxpayer's name RANJITH KUMAR KONUKULA	Social security number 879-26-7912
Spouse's name	Spouse's social security number

Part I Tax Return Information – Tax Year Ending December 31, 2023 (Enter year you are authorizing.)

Enter 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	5,798.
2 Total tax	2	0.
3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099	3	107.
4 Amount you want refunded to you	4	107.
5 Amount you owe	5	

Part II Taxpayer Declaration and Signature Authorization (Be sure you get and keep a copy of your return)

Under penalties of perjury, I declare that I have examined a copy of the income tax return (original or amended) I am now authorizing, and to the best of my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above are the amounts from the income tax return (original or amended) I am now authorizing. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution to debit the entry to this account. This authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate the authorization. To revoke (cancel) a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation requests must be received no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I further acknowledge that the personal identification number (PIN) below is my signature for the income tax return (original or amended) I am now authorizing and, if applicable, my Electronic Funds Withdrawal Consent.

Taxpayer's PIN: check one box only

- I authorize GLOBAL TAXES LLC to enter or generate my PIN

6	7	9	1	2
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 as my 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 now authorizing. Check this box **only** if you are entering your own PIN **and** your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Your signature ▶ _____ Date ▶ _____

Spouse's PIN: check one box only

- I authorize _____ to enter or generate my PIN

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 as my 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 now authorizing. Check this box **only** if you are entering your own PIN **and** your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Spouse's signature ▶ _____ Date ▶ _____

Practitioner PIN Method Returns Only—continue below

Part III Certification and Authentication – Practitioner PIN Method Only

ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN.

2	2	2	4	9	6	0	8	2	7	1
---	---	---	---	---	---	---	---	---	---	---

Don't enter all zeros

I certify that the above numeric entry is my PIN, which is my signature for the electronic individual income tax return (original or amended) I am now authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am submitting this return in accordance with the requirements of the Practitioner PIN method and **Pub. 1345**, Handbook for Authorized IRS e-file Providers of Individual Income Tax Returns.

ERO's signature ▶ _____ Date ▶ _____

ERO Must Retain This Form – See Instructions
Don't Submit This Form to the IRS Unless Requested To Do So

For the year Jan. 1–Dec. 31, 2023, or other tax year beginning , 2023, ending , 20 See separate instructions.

Your first name and middle initial RANJITH KUMAR Last name KONUKULA Your social security number 879 26 7912

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. 5736 S FAIRWOOD DR Apt. no. 31 Presidential Election Campaign

City, town, or post office. If you have a foreign address, also complete spaces below. SALT LAKE CITY State UT ZIP code 84129 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.

Foreign country name Foreign province/state/county Foreign postal code You Spouse

Filing Status [X] Single [] Head of household (HOH) [] Married filing jointly (even if only one had income) [] Married filing separately (MFS) [] Qualifying surviving spouse (QSS) 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:

Digital Assets At any time during 2023, did you: (a) receive (as a reward, award, or payment for property or services); or (b) sell, exchange, or otherwise dispose of a digital asset (or a financial interest in a digital asset)? (See instructions.) [] Yes [X] 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, 1959 [] Are blind Spouse: [] Was born before January 2, 1959 [] Is blind

Table with 5 columns: (1) First name, Last name, (2) Social security number, (3) Relationship to you, (4) Check the box if qualifies for (see instructions): Child tax credit, Credit for other dependents. Includes rows for dependents.

Income section table with columns 1a-1z and 1a-1z. Rows include: Total amount from Form(s) W-2, box 1 (5,400); Household employee wages; Tip income; Medicaid waiver payments; Taxable dependent care benefits; Employer-provided adoption benefits; Wages from Form 8919, line 6; Other earned income (0); Nontaxable combat pay election (1i); Add lines 1a through 1h (5,400).

Table with columns 2a-2b, 3a-3b, 4a-4b, 5a-5b, 6a-6b. Rows include: Tax-exempt interest; Qualified dividends; IRA distributions; Pensions and annuities; Social security benefits; Taxable interest; Ordinary dividends; Taxable amount.

Table with columns 7-15. Rows include: Capital gain or (loss) (398); Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income (5,798); Adjustments to income from Schedule 1, line 26; Subtract line 10 from line 9. This is your adjusted gross income (5,798); Standard deduction or itemized deductions (from Schedule A) (13,850); Qualified business income deduction from Form 8995 or Form 8995-A; Add lines 12 and 13 (13,850); Subtract line 14 from line 11. If zero or less, enter -0-. This is your taxable income (0).

For Disclosure, Privacy Act, and Paperwork Reduction Act Notice, see separate instructions.

Attach Sch. B if required.

Standard Deduction for— • Single or Married filing separately, \$13,850 • Married filing jointly or Qualifying surviving spouse, \$27,700 • Head of household, \$20,800 • If you checked any box under Standard Deduction, see instructions.

Table with 2 columns: Description and Amount. Rows 16-24: Tax and Credits. Total tax amount is 0.

Table with 2 columns: Description and Amount. Rows 25-33: Payments. Total payments amount is 107.

Table with 2 columns: Description and Amount. Rows 34-36: Refund. Amount of refund is 107.

Table with 2 columns: Description and Amount. Rows 37-38: Amount You Owe. Total amount owed is 0.

Third Party Designee section. Includes checkboxes for Yes/No and fields for name, phone, and PIN.

Sign Here section. Includes declaration of truthfulness and signature lines for taxpayer and spouse.

Paid Preparer Use Only section. Includes fields for preparer name, signature, date, PTIN, and firm information.

**SCHEDULE 1
(Form 1040)**

Department of the Treasury
Internal Revenue Service

Additional Income and Adjustments to Income

Attach to Form 1040, 1040-SR, or 1040-NR.

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

OMB No. 1545-0074

2023

Attachment
Sequence No. **01**

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

RANJITH KUMAR KONUKULA

Your social security number

879-26-7912

Part 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	398.
4	Other gains or (losses). Attach Form 4797		4	
5	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E		5	
6	Farm income or (loss). Attach Schedule F		6	
7	Unemployment compensation		7	
8	Other income:			
a	Net operating loss	8a ()		
b	Gambling	8b		
c	Cancellation of debt	8c		
d	Foreign earned income exclusion from Form 2555	8d ()		
e	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		
l	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	8l		
m	Olympic and Paralympic medals and USOC prize money (see instructions)	8m		
n	Section 951(a) inclusion (see instructions)	8n		
o	Section 951A(a) inclusion (see instructions)	8o		
p	Section 461(l) excess business loss adjustment	8p		
q	Taxable distributions from an ABL 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 ()		
t	Pension or annuity from a nonqualified deferred compensation plan or a nongovernmental section 457 plan	8t		
u	Wages earned while incarcerated	8u		
z	Other income. List type and amount: _____	8z		
9	Total other income. Add lines 8a through 8z		9	
10	Combine lines 1 through 7 and 9. This is your additional income . Enter here and on Form 1040, 1040-SR, or 1040-NR, line 8		10	398.

For Paperwork Reduction Act Notice, see your tax return instructions.

Schedule 1 (Form 1040) 2023

Part II Adjustments to Income

11	Educator expenses		11
12	Certain business expenses of reservists, performing artists, and fee-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		
c	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)	24a	
b	Deductible expenses related to income reported on line 8l from the rental of personal property engaged in for profit	24b	
c	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	
e	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: _____	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 and on Form 1040, 1040-SR, or 1040-NR, line 10		26

**SCHEDULE C
(Form 1040)**

**Profit or Loss From Business
(Sole Proprietorship)**

OMB No. 1545-0074

2023

Attachment
Sequence No. **09**

Department of the Treasury
Internal Revenue Service

**Attach to Form 1040, 1040-SR, 1040-SS, 1040-NR, or 1041; partnerships must generally file Form 1065.
Go to www.irs.gov/ScheduleC for instructions and the latest information.**

Name of proprietor RANJITH KUMAR KONUKULA		Social security number (SSN) 879-26-7912
A Principal business or profession, including product or service (see instructions) DOORDASH	B Enter code from instructions 4 8 5 3 0 0	
C Business name. If no separate business name, leave blank. DOORDASH	D Employer ID number (EIN) (see instr.)	
E Business address (including suite or room no.) <u>5736 S FAIRWOOD DR , Apt. 31</u> City, town or post office, state, and ZIP code <u>SALT LAKE CITY, UT 84129</u>		
F Accounting method: (1) <input checked="" type="checkbox"/> Cash (2) <input type="checkbox"/> Accrual (3) <input type="checkbox"/> Other (specify) _____		
G Did you "materially participate" in the operation of this business during 2023? If "No," see instructions for limit on losses . . . <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
H If you started or acquired this business during 2023, check here . . . <input type="checkbox"/>		
I Did you make any payments in 2023 that would require you to file Form(s) 1099? See instructions . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
J If "Yes," did you or will you file required Form(s) 1099? . . . <input type="checkbox"/> Yes <input type="checkbox"/> No		

Part I Income

1	Gross receipts or sales. See instructions for line 1 and check the box if this income was reported to you on Form W-2 and the "Statutory employee" box on that form was checked . . . <input type="checkbox"/>	1	13,938.
2	Returns and allowances	2	
3	Subtract line 2 from line 1	3	13,938.
4	Cost of goods sold (from line 42)	4	
5	Gross profit. Subtract line 4 from line 3	5	13,938.
6	Other income, including federal and state gasoline or fuel tax credit or refund (see instructions)	6	
7	Gross income. Add lines 5 and 6	7	13,938.

Part II Expenses. Enter expenses for business use of your home **only** on line 30.

8	Advertising	8		18	Office expense (see instructions)	18	
9	Car and truck expenses (see instructions)	9	3,930.	19	Pension and profit-sharing plans	19	
10	Commissions and fees	10		20	Rent or lease (see instructions):	20a	
11	Contract labor (see instructions)	11		a	Vehicles, machinery, and equipment	20a	
12	Depletion	12		b	Other business property	20b	5,600.
13	Depreciation and section 179 expense deduction (not included in Part III) (see instructions)	13		21	Repairs and maintenance	21	1,600.
14	Employee benefit programs (other than on line 19)	14		22	Supplies (not included in Part III)	22	
15	Insurance (other than health)	15		23	Taxes and licenses	23	
16	Interest (see instructions):			24	Travel and meals:		
a	Mortgage (paid to banks, etc.)	16a		a	Travel	24a	
b	Other	16b		b	Deductible meals (see instructions)	24b	1,050.
17	Legal and professional services	17		25	Utilities	25	1,360.
18	Total expenses before expenses for business use of home. Add lines 8 through 27b	18		26	Wages (less employment credits)	26	
28		28	13,540.	27a	Other expenses (from line 48)	27a	
29	Tentative profit or (loss). Subtract line 28 from line 7	29	398.	b	Energy efficient commercial bldgs deduction (attach Form 7205)	27b	
30	Expenses for business use of your home. Do not report these expenses elsewhere. Attach Form 8829 unless using the simplified method. See instructions. Simplified method filers only: Enter the total square footage of (a) your home: _____ and (b) the part of your home used for business: _____. Use the Simplified Method Worksheet in the instructions to figure the amount to enter on line 30	30					
31	Net profit or (loss). Subtract line 30 from line 29. • If a profit, enter on both Schedule 1 (Form 1040), line 3 , and on Schedule SE, line 2 . (If you checked the box on line 1, see instructions.) Estates and trusts, enter on Form 1041, line 3 . • If a loss, you must go to line 32.	31	398.				
32	If you have a loss, check the box that describes your investment in this activity. See instructions. • If you checked 32a, enter the loss on both Schedule 1 (Form 1040), line 3 , and on Schedule SE, line 2 . (If you checked the box on line 1, see the line 31 instructions.) Estates and trusts, enter on Form 1041, line 3 . • If you checked 32b, you must attach Form 6198 . Your loss may be limited.			32a	<input type="checkbox"/> All investment is at risk.		
				32b	<input type="checkbox"/> Some investment is not at risk.		

Part III Cost of Goods Sold (see instructions)

33 Method(s) used to value closing inventory: **a** Cost **b** Lower of cost or market **c** Other (attach explanation)

34 Was there any change in determining quantities, costs, or valuations between opening and closing inventory? If "Yes," attach explanation **Yes** **No**

35 Inventory at beginning of year. If different from last year's closing inventory, attach explanation . . .	35
36 Purchases less cost of items withdrawn for personal use	36
37 Cost of labor. Do not include any amounts paid to yourself	37
38 Materials and supplies	38
39 Other costs	39
40 Add lines 35 through 39	40
41 Inventory at end of year	41
42 Cost of goods sold. Subtract line 41 from line 40. Enter the result here and on line 4	42

Part IV Information on Your Vehicle. Complete this part **only** if you are claiming car or truck expenses on line 9 and are not required to file Form 4562 for this business. See the instructions for line 13 to find out if you must file Form 4562.

43 When did you place your vehicle in service for business purposes? (month/day/year) 02/02/2023

44 Of the total number of miles you drove your vehicle during 2023, enter the number of miles you used your vehicle for:

a Business 6,000 **b** Commuting (see instructions) _____ **c** Other 3,800

45 Was your vehicle available for personal use during off-duty hours? **Yes** **No**

46 Do you (or your spouse) have another vehicle available for personal use?. **Yes** **No**

47a Do you have evidence to support your deduction? **Yes** **No**

b If "Yes," is the evidence written? **Yes** **No**

Part V Other Expenses. List below business expenses not included on lines 8–26, line 27b, or line 30.

48 **Total other expenses.** Enter here and on line 27a **48**

Additional Information From 2023 Federal Tax Return**Schedule C (DOORDASH): Profit or Loss from Business****Line 25****Itemization Statement**

Description	Amount
GAS	640.
INTERNET	420.
MOBILE	300.
Total	1,360.

40301

1555

Utah State Tax Commission
Utah Individual Income Tax Return
 All state income tax dollars support education,
 children and individuals with disabilities.

**2023
TC-40**

INTUIT

• Amended Return - enter code: (see instructions)

Full-yr Resident?

Your Social Security No. Your first name Your last name
 879267912 RANJITH KUMAR KONUKULA
 Spouse's Soc. Sec. No. Spouse's first name Spouse's last name

Y/N
Y

If deceased, complete page 3, Part 1

Address Telephone number
 5736 S FAIRWOOD DR , APT 31 385-900-3919
 City State ZIP+4 Foreign country (if not U.S.)
 SALT LAKE CITY UT 84129

1 Filing Status - enter code 1 = Single • 1 2 = Married filing jointly 3 = Married filing separately 4 = Head of household 5 = Qualifying surviving spouse <small>If using code 2 or 3, enter spouse's name and SSN above</small>	• 2 Qualifying Dependents a Dependents age 16 and under b Other dependents c Dependents born in 2023 d 0 Total (add lines a, b and c) See instructions.	3 Election Campaign Fund Does not increase your tax or reduce your refund. Enter the code for the Yourself Spouse party of your choice. • • See instructions for code letters or go to incometax.utah.gov/elect . If no contribution, enter N .
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4	Federal adjusted gross income from federal return	• 4	5798
5	Additions to income from TC-40A, Part 1 (attach TC-40A, page 1)	• 5	
6	Total income - add line 4 and line 5	6	5798
7	State tax refund included on federal form 1040, Schedule 1, line 1 (if any)	• 7	
8	Subtractions from income from TC-40A, Part 2 (attach TC-40A, page 1)	• 8	
9	Utah taxable income/loss - subtract the sum of lines 7 and 8 from line 6	• 9	5798
10	Utah tax - multiply line 9 by 4.65% (.0465) (not less than zero)	• 10	270
11	Utah personal exemption (multiply line 2d by \$1,941)	• 11	0
12	Federal standard or itemized deductions	• 12	13850
13	Add line 11 and line 12	13	13850
14	State income tax included in federal itemized deductions	• 14	
15	Subtract line 14 from line 13	15	13850
16	Initial credit before phase-out - multiply line 15 by 6% (.06)	• 16	831
17	Enter: \$16,742 (single or married filing separately); \$25,114 (head of household); or \$33,484 (married filing jointly or qualifying surviving spouse)	• 17	16742
18	Income subject to phase-out - subtract line 17 from line 9 (not less than zero)	18	0
19	Phase-out amount - multiply line 18 by 1.3% (.013)	• 19	0
20	Taxpayer tax credit - subtract line 19 from line 16 (not less than zero)	• 20	831
21	If you are a qualified exempt taxpayer, enter "X" (complete worksheet in instr.)	• 21	X
22	Utah income tax - subtract line 20 from line 10 (not less than zero)	• 22	0

**Electronic filing
is quick, easy and
free, and will
speed up your refund.**

**To learn more,
go to
tap.utah.gov**

Utah Individual Income Tax Return (continued)

INTUIT

**TC-40
2023**

Pg. 2

40302 SSN 879267912 Last name KONUKULA

23	Enter tax from TC-40, page 1, line 22	23	0	
24	Apportionable nonrefundable credits from TC-40A, Part 3 (attach TC-40A, page 1)	• 24		
25	Full-year resident, subtract line 24 from line 23 (not less than zero) Non or Part-year resident, complete and enter the UTAH TAX from TC-40B, line 41	• 25	0	
26	Nonapportionable nonrefundable credits from TC-40A, Part 4 (attach TC-40A, page 1)	• 26		
27	Subtract line 26 from line 25 (not less than zero)	27	0	
28	Voluntary contributions from TC-40, page 3, Part 4 (attach TC-40, page 3)	• 28		
29	AMENDED RETURN ONLY - previous refund	• 29		
30	Recapture of low-income housing credit	• 30		
31	Utah use tax	• 31		
32	Total tax, use tax and additions to tax (add lines 27 through 31)	32	0	
33	Total withholding - If you have mineral production withholding or pass-through entity withholding, complete page 3, Part 5. If not, enter on line 33 the total of TC-40W, Part 1.	• 33	234	
34	Credit for Utah income taxes prepaid from TC-546 and 2022 refund applied to 2023	• 34		
35	AMENDED RETURN ONLY - previous payments	• 35		
36	Nonapportionable refundable credits from TC-40A, Part 5 (attach TC-40A, page 2)	• 36		
37	Apportionable refundable credits from TC-40A, Part 6, line c (attach TC-40A, page 2)	• 37		
38	Total withholding and refundable credits - add lines 33 through 37	38	234	
39	TAX DUE - subtract line 38 from line 32 (not less than zero)	• 39		
40	Penalty and interest (see instructions)	40		
41	TOTAL DUE - PAY THIS AMOUNT - add line 39 and line 40	• 41		
42	REFUND - subtract line 32 from line 38 (not less than zero)	• 42	234	
43	Voluntary subtractions from refund (not greater than line 42) Enter the total from page 3, Part 6	• 43		
44	REMAINING REFUND DIRECT DEPOSIT - your account information (see instructions for foreign accounts)	checking	savings	foreign
	• Routing number 124002971 • Account number 7171346443	Type: • <input checked="" type="checkbox"/>	• <input type="checkbox"/>	• <input type="checkbox"/>

Under penalties of perjury, I declare to the best of my knowledge and belief, this return and accompanying schedules are true, correct and complete.

SIGN Your signature _____ Date _____ Spouse's signature (if filing jointly) _____ Date _____
HERE

Third Party Designee	Name of designee (if any) you authorize to discuss this return	Designee's telephone number	Designee PIN
Paid Preparer's Section	Preparer's signature SYAM PRIYA RAM SAGAR G Firm's name and address GLOBAL TAXES LLC 245 ROONEY CT E BRUNSWICK	Date 03/11/24 Preparer's telephone number 6789659522	Preparer's PTIN P02082703 Preparer's EIN 843171965
			NJ 08816

Attach page 3 if you: are filing for a deceased taxpayer, are filing a fiscal year return, filed IRS form 8886, are making contributions, want to deposit into a my529 account, want to apply all/part of your refund to next year's taxes, have mineral production or pass-through entity withholding, or no longer qualify for a homeowner's exemption.

Part 1 - Utah Withholding Tax Schedule

40309 SSN 879-26-7912

Last name KONUKULA

INTUIT

**TC-40W
2023**

Pg. 1

Line Explanations	IMPORTANT
1 Employer/payer ID number from W-2 box "b" or 1099 2 Utah withholding ID number from W-2 box "15" or 1099 (14 characters, ending in WTH, no hyphens) 3 Employer/payer name and address from W-2 box "c" or 1099 4 Enter "X" if reporting Utah withholding from form 1099 5 Employee's Social Security number from W-2 box "a" or 1099 6 Utah wages or income from W-2 box "16" or 1099 7 Utah withholding tax from W-2 box "17" or 1099	<p>Do not send your W-2s or 1099s with your return. Instead enter W-2 or 1099 information below, but only if there is Utah withholding on the form.</p> <p>Use additional forms TC-40W if you have more than four W-2s and/or 1099s with Utah withholding tax.</p> <p>Enter mineral production withholding from TC-675R in Part 2 of TC-40W; enter pass-through entity withholding in Part 3 of TC-40W.</p>
<p>First W-2 or 1099</p> 1 874724465 2 15810359002WTH (14 characters, no hyphens) 3 IPAAS CONSULTING LLC 13010 MORRIS ROAD SUITE 650 ALPHARETTA GA30004 4 5 879267912 6 5400 7 234	<p>Second W-2 or 1099</p> 1 2 (14 characters, no hyphens) 3 4 5 6 7
<p>Third W-2 or 1099</p> 1 2 (14 characters, no hyphens) 3 4 5 6 7	<p>Fourth W-2 or 1099</p> 1 2 (14 characters, no hyphens) 3 4 5 6 7

Total Utah withholding tax from all lines 7:

234

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.

Submit page ONLY if data entered.

Attach completed schedule to your Utah Income Tax Return.

Do not attach W-2s or 1099s to your Utah return.