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

	-					
Submi	ission Identification Number (SID)					
Taxpaye	er's name	Social secur	ity numl	ber		
NEEL	RAJA KARETI	680-89	-899	2		
Spouse'	's name	Spouse's so	cial sec	urity numb	er	
Part	Tax Return Information — Tax Year Ending December 31, 2021 (Ente	r vear vou a	are au	thorizino	a.)	
	whole dollars only on lines 1 through 5.	,	0 0.0.		9-/	
	Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.					
1	Adjusted gross income		1	5	0,33	39.
2	Total tax		2		4,29	8.
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3		8,54	17.
4	Amount you want refunded to you		4		5,64	19.
5	Amount you owe		5			
Part	II Taxpayer Declaration and Signature Authorization (Be sure you get and	keep a cop	y of y	our ret	urn)	
return (to send for any Agent t paymen authori paymen busines taxes t person	owledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I abortogriginal or amended) I am now authorizing. I consent to allow my intermediate service provider, transmid my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for redelay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account into the financial 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 the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation recessed as a payment to the payment (settlement) date. I also authorize the financial institutions involved in the conference of the interval of the conference of the income tax return (original or amended) I and the Withdrawal Original or amended) I are the Withdrawal Original or amended or the original or the original or the original or the original or amended or the original or the original or the original or the	nitter, or electrice of the tall. S. Treasury a dicated in the tall on to debit the tall the authorizations of the authorization of the the authorizations. If the processing of payment. I fur	onic reransminand its cax prepare entry ation. The entry of the electrical receivance of the acceivance of the acceivance of the acceivance of the electrical receivance of the electrical rec	turn origin ssion, (b) designated caration so to this according to the total design of	ator (Interpretation of the property of the pr	ERO) ason ncial re for This cel) a an 2 nt of the
	nic Funds Withdrawal Consent. Nyer's PIN: check one box only				1	
X		my PIN	8 9	9 9 2	36	my
	ERO firm name signature on the income tax return (original or amended) I am now authorizing.	ř Er		digits, but er all zeros	as	iiiy
	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 metibelow.					
Your s	signature ▶ Date ▶					
Spous	se's PIN: check one box only				,	
	I authorize to enter or generate	mv PIN			as	my
	ERO firm name	Er		digits, but	_	,
	signature on the income tax return (original or amended) I am now authorizing.	do	n't ente	er all zeros		
	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 metibelow.					
Spous	e's signature ▶ Date ▶					
	Practitioner PIN Method Returns Only—continue below	V				
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. 5 8	7 2 7 Don't en	8 6		8 9	
authori	y that the above numeric entry is my PIN, which is my signature for the electronic individual income to zed to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am subments of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS e-file Providers of	tax return (orig	inal or urn in a	amended) accordanc		
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				

Department of the Treasury—Internal Revenue Service (99)
U.S. Individual Income Tax Return

IRS Use Only-Do not write or staple in this space.

Filing Status Check only one box.	If yo	Single Married filing jointly unchecked the MFS box, enter the roon is a child but not your dependent	name of	ed filing separately your spouse. If yo	, ,	_		, ,	_	, ,	` , ` ,	
Your first name	and mi	ddle initial	Last na	ame					Your so	cial securit	ty number	
NEERAJA			KARI	ETI					680-	89-899	2	
If joint return, s	pouse's	first name and middle initial	Last na	st name					Spouse's social security number			
Home address	(numbe	er and street). If you have a P.O. box, see	inetruct	ione				Apt. no.	Dunnida	Procidential Floation Compaign		
701 N L	,		, iiioti uot	10113.				523	Presidential Election Campaign Check here if you, or your			
		ce. If you have a foreign address, also co	omplete s	spaces below.	Sta	te	ZIP c		spouse	spouse if filing jointly, want \$3		
THE COL		,,,,,			T			056	_	this fund. ow will not	Checking a	
Foreign country				Foreign province/sta			_	ign postal code		k or refund.		
				0 1		,				You	Spouse	
At any time du	ring 20	021, did you receive, sell, exchange	, or other	erwise dispose of	any fina	ancial interest i	n any	virtual curre	ncy?	Yes	⊠ No	
Standard Someone can claim: You as a dependent Your spouse as a dependent Deduction Spouse itemizes on a separate return or you were a dual-status alien												
Age/Blindness	You:	Were born before January 2, 1	957	Are blind	Spouse	: Was bor	n bet	fore January 2	2, 1957	☐ Is bl	ind	
Dependents	s (see	instructions):		(2) Social secu	ırity	(3) Relationsh	iip	(4) ✓ if qı	ualifies fo	r (see instru	ections):	
If more		rst name Last name		number		to you		Child tax cr		1	her dependents	
than four												
dependents, see instruction	s ——											
and check												
here ►										[
A 1	_1_	Wages, salaries, tips, etc. Attach	Form(s)	W-2					. 1	!	52,987.	
Attach Sch. B if	2a	Tax-exempt interest	2a		b T	b Taxable interest			. 2b			
required.	<u>3a</u>	Qualified dividends	3a		b C	Ordinary divider	nds		. 3b			
	4a	IRA distributions	4a		b T	axable amount	t		. 4b			
	5a	Pensions and annuities	5a		b T	axable amount	t		. 5b			
Standard	6a	Social security benefits	6a		b T	axable amount	t		. 6b			
Deduction for— Single or	7	Capital gain or (loss). Attach Sche	dule D i	if required. If not re	equired	, check here	-	▶ ∟	7		-148.	
Married filing	8	Other income from Schedule 1, lir					-		. 8			
separately, \$12,550	9	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7,	and 8.	This is your total i	ncome				9		52,839.	
Married filing jointly or	10	Adjustments to income from Sche	edule 1,	line 26					. 10		2,500.	
Qualifying	11	Subtract line 10 from line 9. This is	s your a	idjusted gross in	come		· 1		▶ 11		50,339.	
widow(er), \$25,100	12a	Standard deduction or itemized	deduct	tions (from Sched	ule A)	12a	а	12,550	0.			
Head of	b	Charitable contributions if you take	the sta	ndard deduction (s	ee instr	ructions) 12	b	300	0.			
household, \$18,800	С	Add lines 12a and 12b							. 12)	12,850.	
If you checked any box under	13	Qualified business income deduct	tion fron	n Form 8995 or Fo	rm 899	05-A			. 13	1		
Standard	14	Add lines 12c and 13							. 14		12,850.	
Deduction, see instructions.	15	Taxable income. Subtract line 14	from lir	ne 11. If zero or les	ss, ente	er -0			. 15		37,489.	

Form 1040 (2021)								Page 2		
	16	Tax (see instructions). Check	if any from Form	ı(s): 1 881	4 2 4972	3 🗌		16	4,298.		
	17	Amount from Schedule 2, lin	e3					17			
	18	Add lines 16 and 17						18	4,298.		
	19	Nonrefundable child tax cred	dit or credit for c	ther depender	nts from Schedule	e 8812		19			
	20	Amount from Schedule 3, lin	e8					20			
	21	Add lines 19 and 20						21			
	22	Subtract line 21 from line 18	. If zero or less,	enter -0				22	4,298.		
	23	Other taxes, including self-en	mployment tax,	from Schedule	2, line 21 .			23	0.		
	24	Add lines 22 and 23. This is	your total tax				▶	24	4,298.		
	25	Federal income tax withheld	from:								
	а	Form(s) W-2				25a	8,547.				
	b	Form(s) 1099				25b					
	С	Other forms (see instructions	s)			25c					
	d	Add lines 25a through 25c						25d	8,547.		
If you have a	26	2021 estimated tax payment						26			
If you have a L qualifying child,	27a	Earned income credit (EIC)			No	27a					
attach Sch. EIC.		Check here if you were by January 2, 2004, and you taxpayers who are at least as	satisfy all the	e other requi	rements for						
	b	Nontaxable combat pay elec	tion	. 27b							
	С	Prior year (2019) earned inco									
	28	Refundable child tax credit or	Refundable child tax credit or additional child tax credit from Schedule 8812 28								
	29	American opportunity credit	from Form 8863	B, line 8		29					
	30	Recovery rebate credit. See	instructions .			30	1,400.				
	31	Amount from Schedule 3, lin	e 15			31					
	32	Add lines 27a and 28 throug	h 31. These are	your total oth	er payments and	refundable cre	edits 🕨	32	1,400.		
	33	Add lines 25d, 26, and 32. The	33	9,947.							
Refund	34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid							5,649.		
Herana	35a								5,649.		
Direct deposit?	►b	Routing number 0 8 1 0 0 0 2 1 0									
See instructions.	►d	Account number 1 5 2 3 2 0 1 4 1 2 0 2									
	36	Amount of line 34 you want a	applied to your	2022 estimate	ed tax ►	36					
Amount	37	Amount you owe. Subtract	line 33 from line	24. For details	s on how to pay,	see instructions	. ▶	37			
You Owe	38	Estimated tax penalty (see in	structions) .		🕨	38					
Third Party Designee		you want to allow another tructions	•		n with the IRS?		Complete I	oelow.	X No		
	Des	signee's		Phone			sonal identi				
		ne ▶		no. ►			nber (PIN)				
Sign Here	bel	der penalties of perjury, I declare the lief, they are true, correct, and composition at the composition of the lief.		of preparer (othe	than taxpayer) is b		tion of whicl	n prepare	er has any knowledge.		
	YOU	ur signature		Date	Your occupation		I .		nt you an Identity IN, enter it here		
Joint return?					TECHNOLOG	Y ANALYST	I .	inst.) 🕨			
See instructions. Keep a copy for your records.	Spouse's signature. If a joint return, both must sign.			Date Spouse's occupation			Iden		nt your spouse an ection PIN, enter it here		
	Pho	one no. (410)512-2094	4	Email address	NEERUVIJU:	1@GMAIL.CO					
		parer's name	Preparer's signat			Date	PTIN		Check if:		
Paid	SYAM	PRIYA RAM SAGAR GUPTA TALLAM	SYAM PRIYA	RAM SAGAR	GUPTA TALLAM	03/23/2022	P0208	2703	Self-employed		
Preparer		m's name ► GLOBAL TAX							678)965-9522		
Use Only		n's address ▶ 2530 Pebbl		n Cummin	GA 30041			's EIN ▶	·		
Go to www.irs.go		n1040 for instructions and the lates			BAA	REV 03/12/22 PRO			Form 1040 (2021)		

SCHEDULE 1 (Form 1040)

Additional Income and Adjustments to Income

OMB No. 1545-0074 Attachment Sequence No. **01**

Department of the Treasury Internal Revenue Service

NEERAJA KARETI

► Attach to Form 1040, 1040-SR, or 1040-NR. ▶ Go to www.irs.gov/Form1040 for instructions and the latest information.

Name(s) shown on Form 1040, 1040-SR, or 1040-NR Your social security number 680-89-8992

Par	t I Additional Income			
1	Taxable refunds, credits, or offsets of state and local income taxes	3	1	
2 a	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, truschedule E	•	5	
6	Farm income or (loss). Attach Schedule F		6	
7	Unemployment compensation		7	
8	Other income:			
а	Net operating loss	8a (
b	Gambling income	8b		
С	Cancellation of debt	8c		
d	Foreign earned income exclusion from Form 2555	8d (
е	Taxable Health Savings Account distribution	8e		
f	Alaska Permanent Fund dividends	8f		
g	Jury duty pay	8g		
h	Prizes and awards	8h		
i	Activity not engaged in for profit income	8i		
j	Stock options	8j		
k	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	8k		
I	Olympic and Paralympic medals and USOC prize money (see		-	
	instructions)	81		
m	Section 951(a) inclusion (see instructions)	8m		
n	Section 951A(a) inclusion (see instructions)	8n		
0	Section 461(I) excess business loss adjustment	80		
р	Taxable distributions from an ABLE account (see instructions) .	8p		
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. Enter here and on Form 10			
	1040-NR, line 8		10	

Schedule 1 (Form 1040) 2021 Page **2**

Par	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	
4	Moving expenses for members of the Armed Forces. Attach Form 3903	14	
5	Deductible part of self-employment tax. Attach Schedule SE	15	
6	Self-employed SEP, SIMPLE, and qualified plans	16	
7	Self-employed health insurance deduction	17	
8	Penalty on early withdrawal of savings	18	
9a	Alimony paid	19a	
b	Recipient's SSN		
С	Date of original divorce or separation agreement (see instructions) ▶		
20	IRA deduction	20	
21	Student loan interest deduction	21	2,500.
22	Reserved for future use	22	
23	Archer MSA deduction	23	
24	Other adjustments:		
а	Jury duty pay (see instructions)		
b	Deductible expenses related to income reported on line 8k 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 8l 24c		
d	Reforestation amortization and expenses		
е	Repayment of supplemental unemployment benefits under the Trade Act of 1974		
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)		
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		
j	Housing deduction from Form 2555 24j		
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form 1041)		
Z	Other adjustments. List type and amount ▶		
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 or 1040-SR, line 10, or Form 1040-NR, line 10a	26	2 500

SCHEDULE D (Form 1040)

Capital Gains and Losses

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

OMB No. 1545-0074

Attachment

Department of the Treasury Internal Revenue Service (99) Name(s) shown on return

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

Sequence No. 12 ▶ Use Form 8949 to list your transactions for lines 1b, 2, 3, 8b, 9, and 10. Your social security number

680-89-8992 NEERAJA KARETI Did you dispose of any investment(s) in a qualified opportunity fund during the tax year?

If "Yes," attach Form 8949 and see its instructions for additional requirements for reporting your gain or loss. Short-Term Capital Gains and Losses - Generally Assets Held One Year or Less (see instructions) Part I See instructions for how to figure the amounts to enter on the (h) Gain or (loss) (g) Adjustments Subtract column (e) lines below. Proceeds Cost to gain or loss from from column (d) and This form may be easier to complete if you round off cents to Form(s) 8949, Part I, combine the result (sales price) (or other basis) whole dollars. with column (g) line 2. column (a) 1a Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b . **1b** Totals for all transactions reported on Form(s) 8949 with Box A checked 1,546. -148. 1,398. Totals for all transactions reported on Form(s) 8949 with Box B checked 3 Totals for all transactions reported on Form(s) 8949 with Box C checked Short-term gain from Form 6252 and short-term gain or (loss) from Forms 4684, 6781, and 8824 4 Net short-term gain or (loss) from partnerships, S corporations, estates, and trusts from 5 Short-term capital loss carryover. Enter the amount, if any, from line 8 of your Capital Loss Carryover 6 Net short-term capital gain or (loss). Combine lines 1a through 6 in column (h), If you have any longterm capital gains or losses, go to Part II below. Otherwise, go to Part III on the back 7 -148. Part II Long-Term Capital Gains and Losses—Generally Assets Held More Than One Year (see instructions) See instructions for how to figure the amounts to enter on the (h) Gain or (loss) (g) Adjustments Subtract column (e) (d) (e) lines below. Proceeds to gain or loss from from column (d) and Cost This form may be easier to complete if you round off cents to Form(s) 8949, Part II, (sales price) (or other basis) combine the result whole dollars. line 2. column (a) with column (a) 8a Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b . 8b Totals for all transactions reported on Form(s) 8949 with Totals for all transactions reported on Form(s) 8949 with Box E checked 10 Totals for all transactions reported on Form(s) 8949 with 11 Gain from Form 4797, Part I; long-term gain from Forms 2439 and 6252; and long-term gain or (loss) 11 12 Net long-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1 12 13 14 Long-term capital loss carryover. Enter the amount, if any, from line 13 of your Capital Loss Carryover 14

15 Net long-term capital gain or (loss). Combine lines 8a through 14 in column (h). Then, go to Part III

BAA

15

Schedule D (Form 1040) 2021 Page 2

Part III **Summary** 16 Combine lines 7 and 15 and enter the result 16 -148.• If line 16 is a gain, enter the amount from line 16 on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 17 below. • If line 16 is a loss, skip lines 17 through 20 below. Then, go to line 21. Also be sure to complete • If line 16 is zero, skip lines 17 through 21 below and enter -0- on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 22. Are lines 15 and 16 both gains? 17 ☐ **Yes.** Go to line 18. No. Skip lines 18 through 21, and go to line 22. 18 If you are required to complete the 28% Rate Gain Worksheet (see instructions), enter the amount, if any, from line 7 of that worksheet 18 19 If you are required to complete the Unrecaptured Section 1250 Gain Worksheet (see instructions), enter the amount, if any, from line 18 of that worksheet . 19 20 Are lines 18 and 19 both zero or blank and are you not filing Form 4952? ☐ Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Forms 1040 and 1040-SR, line 16. Don't complete lines 21 and 22 below. and 22 below. If line 16 is a loss, enter here and on Form 1040, 1040-SR, or 1040-NR, line 7, the smaller of: 21 • The loss on line 16; or 148.) 21 • (\$3,000), or if married filing separately, (\$1,500) Note: When figuring which amount is smaller, treat both amounts as positive numbers. Do you have gualified dividends on Form 1040, 1040-SR, or 1040-NR, line 3a? 22 ☐ Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Forms 1040 and 1040-SR, line 16. No. Complete the rest of Form 1040, 1040-SR, or 1040-NR.

Sales and Other Dispositions of Capital Assets

▶ Go to www.irs.gov/Form8949 for instructions and the latest information.

Attachment Sequence No. 12A

OMB No. 1545-0074

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

▶ File with your Schedule D to list your transactions for lines 1b, 2, 3, 8b, 9, and 10 of Schedule D.

Social security number or taxpayer identification number

680-89-8992 NEERAJA KARETI

instructions). For long-term transactions, see page 2.

Before you check Box A, B, or C below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your broker and may even tell you which box to check.

Short-Term. Transactions involving capital assets you held 1 year or less are generally short-term (see Part I

Note: You may aggregate all short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 1a; you aren't required to report these transactions on Form 8949 (see instructions).

You must check Box A. B. or C below. Check only one box. If more than one box applies for your short-term transactions. complete a separate Form 8949, page 1, for each applicable box. If you have more short-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

X (A) Short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see Note above)

(B) Short-term transactions reported on Form(s) 1099-B showing basis wasn't reported to the IRS

(C) Short-term transactions	not reported	I to you on F	orm 1099-B	·			
1 (a) Description of property	(b) Date acquired	(c) Date sold or	(d) Proceeds	(e) Cost or other basis. See the Note below	If you enter an enter a co	any, to gain or loss. amount in column (g), ode in column (f). arate instructions.	(h) Gain or (loss). Subtract column (e)
(Example: 100 sh. XYZ Co.)	(Mo., day, yr.)	disposed of (Mo., day, yr.)	(sales price) (see instructions)	and see Column (e) in the separate instructions	(f) Code(s) from instructions	(g) Amount of adjustment	from column (d) and combine the result with column (g)
ROBINHOOD SECURITIES LLC	01/01/21	12/01/21	1,398.	1,546.			-148.
2 Totals. Add the amounts in columns negative amounts). Enter each total Schedule D, line 1b (if Box A above above is checked), or line 3 (if Box 6).	al here and inc is checked), lir	lude on your ne 2 (if Box B	1.398.	1.546.			-148.

Note: If you checked Box A above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See Column (g) in the separate instructions for how to figure the amount of the adjustment.

Utah State Tax Commission Utah Individual Income Tax Return

All State Income Tax Dollars Fund Education

2021 TC-40

INTUIT

Full-yr Resident?

• Amended Return - enter code:

(see instructions)

Your Social Security No. 680898992 Spouse's Soc. Sec. No. Your first name

NEERAJA

Spouse's first name

Your last name
KARETI
Spouse's last name

Y/N N

Address

If deceased, complete page 3, Part 1

701 N LEORA IN, APT 523

 $\begin{array}{cccc} \text{City} & \text{State} & \text{ZIP+4} \\ \text{THE COLONY} & \text{TX} & 75056 \\ \end{array}$

Telephone number 410-512-2094 Foreign country (if not U.S.)

	• 2 Qualifying Dependents		3 Election Cam	-	
1 = Single	a Dependents age 16 and	under		-	r tax or reduce your refund.
• 1 2 = Married filing jointly	b Other dependents		Enter the code for		Yourself Spouse
3 = Married filing separately	c 0 Total (add lines a and b)		party of your choice		•
4 = Head of household	Dan and automorphic alaims at fau th	برجة إدائط	See instructions		
5 = Qualifying widow(er)	Dependents must be claimed for the				ncometax.utah.gov/elect.
If using code 2 or 3, enter spouse's name and SSN above	credit on your federal return. See in	istructions.	If no contribution,	enter	N.
4 Federal adjusted gross income from federal	al return			• 4	50339
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	50339
7 State tax refund included on federal form 1	040, Schedule 1, line 1 (if any)			• 7	
8 Subtractions from income from TC-40A, Pa	art 2 (attach TC-40A, page 1)			• 8	
9 Utah taxable income (loss) - subtract the	sum of lines 7 and 8 from line 6			• 9	50339
10 Utah tax - multiply line 9 by 4.95% (.0495)	(not less than zero)			• 10	2492
11 Utah personal exemption (multiply line 2c by	y \$1,750)	• 11	0	Г	
12 Federal standard or itemized deductions		• 12	12550		Electronic filing is quick, easy and
13 Add line 11 and line 12		13	12550		free, and will speed up your refund.
14 State income tax included in federal itemize	ed deductions	• 14		t	To learn more,
15 Subtract line 14 from line 13		15	12550		go to tap.utah.gov
16 Initial credit before phase-out - multiply line	15 by 6% (.06)	• 16	753	L	
17 Enter: \$15,095 (if single or married filing se	• • • •	• 17	15095		
18 Income subject to phase-out - subtract line		18	35244		
19 Phase-out amount - multiply line 18 by 1.3	% (.013)	• 19	458		
20 Taxpayer tax credit - subtract line 19 from l	ine 16 (not less than zero)			• 20	295
21 If you are a qualified exempt taxpayer, enter	er "X" (complete worksheet in instr.)	• 21			
22 Utah income tax - subtract line 20 from lin	e 10 (not less than zero)			• 22	2197

4010		al Income Tax Return ((continued) ame KARETI	INTUIT	TC-40 2021	Pg. 2
23 E	Enter tax from TC-40, page 1	, line 22			23	2197
24 A	Apportionable nonrefundable	credits from TC-40A, Part 3 (att	tach TC-40A, page 1)		• 24	
N	Non or Part-year resident, co	ne 24 from line 23 (not less than implete and enter the UTAH TAX	from TC-40B, line 41		• 25	2197
		able credits from TC-40A, Part 4	(allach TC-40A, pag	e 1)	• 26	
	Subtract line 26 from line 25 (27	2197
28 V	Voluntary contributions from ⁻	TC-40, page 3, Part 4 (attach TC	C-40, page 3)		• 28	
29 A	AMENDED RETURN ONLY -	- previous refund			• 29	
30 F	Recapture of low-income hou	using credit			• 30	
31 L	Utah use tax				• 31	
32 T	Total tax, use tax and addit	ions to tax (add lines 27 throug	h 31)		32	2197
33 L	Utah income tax withheld sho	own on TC-40W, Part 1 (attach T	「C-40W, page 1)		• 33	2622
34 C	Credit for Utah income taxes	prepaid from TC-546 and 2020	refund applied to 202	1	• 34	
35 F	Pass-through entity withholdi	ng tax shown on TC-40W, Part 3	3 (attach TC-40W, pa	ge 2)	• 35	
36 N	Mineral production withholdin	ng tax shown on TC-40W, Part 2	(attach TC-40W, pag	e 2)	• 36	
37 A	AMENDED RETURN ONLY -	- previous payments			• 37	
38 F	Refundable credits from TC-4	40A, Part 5 (attach TC-40A, pag	e 2)		• 38	
39 T	Total withholding and refunda	able credits - add lines 33 throug	jh 38		39	2622
		rom line 32 (not less than zero)			• 40	
	Penalty and interest (see inst TOTAL DUE - PAY THIS AM	tructions) OUNT - add line 40 and line 41		41	• 42	
43 F	REFUND - subtract line 32 fro	om line 39 (not less than zero)			• 43	425
	Voluntary subtractions from re Enter the total from page 3, F	efund (not greater than line 43)			• 44	
45 C	DIRECT DEPOSIT YOUR RE	EMAINING REFUND - provide a 000210 • Account nur	•		counts) c	hecking savings
	Your signature	the best of my knowledge and belief Date	1	anying schedules are true, correct signature (if filing jointly)	t and complete.	Date
Third I	, ,	y) you authorize to discuss this retur	'n	Designee's telephone number	Designee PIN	
	Preparer's signature	Date		Preparer's telephone number	Preparer's PTIN	
Paid Prepa	DIZET LICITZ	<u>A RAM SAGAR G </u>	3/23/22	6789659522	• Preparer's EIN	P02082703
Section	ion and address 2	2530 PEBBLE CREE CUMMING	K LN	GA 30041	•	301017196

Non and Part-year Resident Schedule

Residency Status: • X Nonresident: Home state abbreviation: NC

40106 SSN 680-89-8992

Last name KARETI

TC-40B 2021

to

INTUIT

Part-vear resident from:

mm/dd/yy mm/dd/yy Col. A - UTAH Col. B - TOTAL Income Wages, salaries, tips, etc. (1040 line 1) 52987 1 52987 2 Taxable interest income (1040 line 2b) 3 Ordinary dividends (1040 line 3b) 4 IRAs, pensions and annuities - taxable amount (1040 lines 4b and 5b) 5 Social Security benefits - taxable amount (1040 line 6b) 6 Taxable refunds/credits/offsets of state/local income taxes (1040, Schedule 1, line 1) 7 Alimony received (1040, Schedule 1, line 2a) 8 Business income or (loss) (1040, Schedule 1, line 3) 9 Capital gain or (loss) (1040, line 7) 0 -14810 Other gains or (losses) (1040, Schedule 1, line 4) 11 Rental real estate, royalties, partnerships, S corps, trusts, etc. (1040, Schd 1, line 5) 12 Farm income or (loss) (1040, Schedule 1, line 6) 13 Unemployment compensation (1040, Schedule 1, line 7) 14 Other income (1040, Schedule 1, line 9) 15 Additions to income from TC-40A, Part 1 (Utah portion only in Utah column) 16 Reserved 17 Reserved Total income (loss) - add lines 1 through 17 for both columns A and B 52987 52839 18 Col. B - TOTAL **Adjustments** Col. A - UTAH Educator expenses (1040, Schedule 1, line 11) 19 20 Certain bus. expenses of reservists, performing artists, etc. (1040, Schd 1, line 12) Health savings account deduction (1040, Schedule 1, line 13) 21 22 Moving expenses (1040, Schedule 1, line 14) - col. A only expenses moving into Utah 23 Deductible part of self-employment tax (1040, Schedule 1, line 15) 24 Self-employed SEP, SIMPLE and qualified plans (1040, Schedule 1, line 16) 25 Self-employed health insurance deduction (1040, Schedule 1, line 17) 26 Penalty on early withdrawal of savings (1040, Schedule 1, line 18) 27 Alimony paid (1040, Schedule 1, line 19a) 28 IRA deduction (1040, Schedule 1, line 20) 29 Student loan interest deduction (1040, Schedule 1, line 21) 0 2500 30 Reserved 31 Reserved 32 Taxable refunds/credits/offsets of state and local income taxes (1040, Schd 1, line 1) 33 Subtractions from income from TC-40A, Part 2 (Utah portion only in Utah column) 34 Reserved 35 Reserved 36 (see instructions): 37 Total adjustments - add lines 19 through 36 for both columns A and B 0 2500 38 Subtract line 37 from line 18 for both columns A and B 52987 50339 Line 38, column B must equal TC-40, line 9 Non or Part-year Resident Utah Tax Divide line 38 column A by line 38 column B (to 4 decimal places, not more than 1.0000 or less than 0.0000) 39 1.0000 Subtract TC-40, line 24 from TC-40, line 23 and enter the result (not less than zero) here 40 40 2197 UTAH TAX - Multiply line 40 by the decimal on line 39. Enter on TC-40, page 2, line 25 41 • 41 2197

Submit this page ONLY if data entered.

Attach completed schedule to your Utah Income Tax Return.

SSN 680-89-8992

Last name KARETI

Line Explanations	IMPORTANT				
 Employer/payer ID number from W-2 box "b" or 1099 Utah withholding ID number from W-2 box "15" or 1099 (14 characters, ending in WTH, no hyphens) Employer/payer name and address from W-2 box "c" or 1099 Enter "X" if reporting Utah withholding from form 1099 Employee's Social Security number from W-2 box "a" or 1099 Utah wages or income from W-2 box "16" or 1099 Utah withholding tax from W-2 box "17" or 1099 	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. Use additional forms TC-40W if you have more than four W-2s and/or 1099s with Utah withholding tax. 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 581760235	1				
2 12490481003WTH (14 characters, no hyphens)	2 (14 characters, no hyphens)				
3 INFOSYS LIMITED 2400 N GLENNVILLE DR C150	3				
RICHARDSON TX75082					
4	4				
5 680898992	5				
⁶ 52987.	6				
⁷ 2622.	7				
Third W-2 or 1099	Fourth W-2 or 1099				
1	1				
2 (14 characters, no hyphens)	2 (14 characters, no hyphens)				
3	3				
4	4				
5	5				
6	6				
7	7				
	·				

Enter total Utah withholding tax from all lines 7 here and on TC-40, page 2, line 33: 2622.

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.

D-40 < Stape	le All	Pages	of Yo	our	021			<u>l</u> ina D	ncome Department			DOR Use Only			
		nd W-2 or vear 2		e or fiscal year	heainnina	n			ended Return and ending			Are you a ve	otoran?	Yes D N	No X
NEER			1021,0	KARE		1		<u> </u>	and ending				ise a veteran'		10 D
		EORA TX 7						523	Your SS Spouse's SS	SN: 6808	98992	, ,		matic extension to eturn, e.g., Form 1	,
Filing			1. Sing			2. Marri	ed Filing	Jointly		ed Filing Se	parately	2021 lederal	Yes	No X	040 !
More	VOLL 2	rosidon		d of Househol			ying Wid		ППБ	eturn for d	occased t	Year spou	ise died: Date of d	looth:	
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1					-				ucation Endow NC-EDU and y		-	ng a contribu 0		ignating some or ate your overpay	
to the	Fund	, enter	he am	ount of your	designati	on on Pa	age 2, L	ine 31.	. (See instruct	ions for in	formation	about the F	und.)		
		-							of the country of or Court-Appoi				izen or resid	dent.	
FS :	1	PP	Y		DT	N	OC	N	TPRES	Y	SPRES	N	VT I	N SVT	N
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												TX	75050	6	
701	N L	EOR	A IN	1					523	THE	COLO	NY			
06			503	339		16			2078		26C		(0	= 7
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11			107	750		21C			0		31		(0	
13			000	000		21D			0		32		(0	
14			395	89		26A			0		34		(0	
15			20	78		26B			0						
TN	4	1051	1220	94		PN	6	789	659522		PP	P02	08270	3	
		urn B		mined this return f, they are true, o	fund D		edules ar			ment Du		uthorize the N	O North Carolin	a Department of Re	evenue
the best o	f my kn	owledge a	and belie	f, they are true, o	orrect, and	complete.								e paid preparer bel	
Your Sign	ature					Date	Spor	use's Sigr	nature (If filing joint	return, both i	must sign.)	Date		122094 Phone No. (Include are	ea code)
PAID PRE	PARE	R USE ON	ILY If	prepared by a pe	erson other t	han taxpay	er, this cei	rtification	is based on all info	rmation of wh	ich the prepa	rer has any kno	wledge.		
SYAM	PR.	<u>IYA</u> R	AM S	SAGAR GU	<u>PT</u> 0	3 23	<u>2</u> 67	89659	9522				P020	82703	
Paid Prep						Date	<u> </u>		ntact Phone Numbe				· · ·	's FEIN, SSN, or PTIN	
	If y	ou ARE	NOT di		-				F REVENUE, P.O OV to: N.C. DEF					NC 27640-0640	

Last Name (First 10 Characters) KARETI 680898992 Your Social Security Number **D-400 Line-by-Line Information** Federal Adjusted Gross Income 6. 50339 6. 7. 7. Additions to Federal Adjusted Gross Income 0 8. Add Lines 6 and 7 8. 50339 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. 10750 11. 12. a. Add Lines 9, 10b, and 11 12a. 10750 b. Subtract amount on Line 12a from Line 8 12b. 39589 Part-year Residents and Nonresidents Taxable Percentage 13. 13. 0.0000 14. N.C. Taxable Income 14. 39589 15. N.C. Income Tax 15. 2078 16. Tax Credits 2078 16. Subtract Line 16 from Line 15 17. 17. 0 18. Consumer Use Tax 18. 0 You certify that no Consumer Use Tax is due Υ 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. 2021 estimated tax 21a. 0 Paid with extension 0 21b. 21b. 0 21c. Partnership 21c. 21d. S Corporation 21d. 0 22. Amended Returns Only - Previous payments 22. 0 23. **Total Payments** 23. 24. Amended Returns Only - Previous refunds 0 24. 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 0 28. Overpayment 28. Amount of Refund to Apply to: 29. Amount of Line 28 to be applied to 2022 Estimated Income Tax 29. 0 30. N.C. Nongame and Endangered Wildlife Fund 30. 0 31. 31. N.C. Education Endowment Fund 0 0 32. N.C. Breast and Cervical Cancer Control Program 32. 33. 0 33. Add Lines 29 through 32 34. 0 34. Amount to be Refunded

D-400TC (50)

2021 Individual Income Tax Credits

DOR Use Only

12-1-21

3.
 4.

North Carolina Department of Revenue

If you claim a tax credit on Form D-400, Line 16, you must attach this form to the return. Otherwise, the tax credit may be disallowed.

Important: Refer to the instructions before completing this form.

Last Name	(First 10 Characters)	KARETI		Your So	ocial Security Number	680898992	
01	52839	07в	1	10A	0	13	0
02	52987	A80	0	10B	0	14	0
04	2078	08B	0	11A	0	15	0
06	2197	09A	0	11B	0	19	0
07A	2084	09B	0	12	0		

Part 1. Credit for Income Tax Paid to Another State or Country - N.C. Residents Only

If you claim a tax credit for taxes paid to more than one state or country, do not complete Lines 1-6. Instead, complete the "Out-of-State Tax Credit Worksheet" in the instructions to determine the amount to enter on Line 7a.

 Total income from all sources while a resident of N.C. modified by N.C. adjustments to federal gross income

federal gross income	1.	52839
Portion of Line 1 that was taxed by another state or country	2.	52987
Divide Line 2 by Line 1	3.	1.0028
Total North Carolina income tax (From Form D-400, Line 15)	4.	2078

- Multiply Line 4 by Line 3
 Amount of net tax paid to the other state or country on the income shown on Line 2
 6.
- 7a. Credit for Income Tax Paid to Another State or Country
 7a. 2084
 7b. Number of states or countries for which a credit is claimed
 7b. 1

Part 2. Credits for Rehabilitating Historic Structures

On Lines 8a, 9a, 10a, and 11a, enter the amount of expenditures or expenses only if tax year 2021 is the first year the credit is taken. **Note:** For Lines 8a and 9a, the expenditures and expenses must have been incurred prior to January 1, 2015.

On Lines 8b, 9b, 10b, 11b, 12, and 13, enter the amount of the tax credit taken.

8a.	An income-producing historic structure (Article 3D)	8a.	0
8b.	Enter installment amount of credit	8b.	0
9a.	A nonincome-producing historic structure (Article 3D)	9a.	0
9b.	Enter installment amount of credit	9b.	0
10a.	An income-producing historic mill facility (Article 3H)	10a.	0
10b.	Enter amount of credit	10b.	0
11a.	A nonincome-producing historic mill facility (Article 3H)	11a.	0
11b.	Enter installment amount of credit	11b.	0
12.	An income-producing historic structure (Article 3L)	12.	0
13.	A nonincome-producing historic structure (Article 3L)	13.	0
	(If you take a credit on Lines 12 or 13, attach Form NC-Rehab to the front of Form D-400.)		



2084

2197

14.	Tax credits carried over from previous year	14.	0
15.	Reserved for Future Use	15.	0
16.	Add Lines 7a, 8b, 9b, 10b, 11b, 12, 13, 14, and 15	16.	2084
17.	North Carolina income tax (From Form D-400, Line 15)	17.	2078
18.	Enter the lesser of Line 16 or Line 17	18.	2078
19.	Business incentive and energy tax credits	19.	0
	(Attach Form NC-478 and any required supporting schedules to the front of Form D-400.)		
20.	Total Tax Credits to be Taken for Tax Year 2021	20.	2078

Utah State Tax Commission Utah Individual Income Tax Return

All State Income Tax Dollars Fund Education

2021 TC-40

INTUIT

Full-yr Resident?

• Amended Return - enter code:

(see instructions)

Your Social Security No. 680898992 Spouse's Soc. Sec. No. Your first name

NEERAJA

Spouse's first name

Your last name
KARETI
Spouse's last name

Y/N N

Address

If deceased, complete page 3, Part 1

701 N LEORA IN, APT 523

 $\begin{array}{cccc} \text{City} & \text{State} & \text{ZIP+4} \\ \text{THE COLONY} & \text{TX} & 75056 \\ \end{array}$

Telephone number 410-512-2094 Foreign country (if not U.S.)

•	• 2 Qualifying Dependents		3 Election Cam			
1 = Single	a Dependents age 16 and	under		-	r tax or reduce your refund.	
• 1 2 = Married filing jointly	b Other dependents		Enter the code for		Yourself Spouse	
3 = Married filing separately	c 0 Total (add lines a and b)		party of your choice		•	
4 = Head of household	Dan and danta marret has also made from the		See instructions			
5 = Qualifying widow(er)	Dependents must be claimed for the				ncometax.utah.gov/elect.	
If using code 2 or 3, enter spouse's name and SSN above	credit on your federal return. See in	istructions.	If no contribution,	enter	N.	
4 Federal adjusted gross income from federal	al return			• 4	50339	
5 Additions to income from TC-40A, Part 1 (a	attach TC-40A, page 1)			• 5	i	
6 Total income - add line 4 and line 5				6	50339	
7 State tax refund included on federal form 1	040, Schedule 1, line 1 (if any)			• 7		
8 Subtractions from income from TC-40A, Pa	art 2 (attach TC-40A, page 1)			• 8	3	
9 Utah taxable income (loss) - subtract the	sum of lines 7 and 8 from line 6			• 9	50339	
10 Utah tax - multiply line 9 by 4.95% (.0495)	(not less than zero)			• 10	2492	
11 Utah personal exemption (multiply line 2c by	y \$1,750)	• 11	0	_		
12 Federal standard or itemized deductions		• 12	12550		Electronic filing is quick, easy and free, and will speed up your refund.	
13 Add line 11 and line 12		13	12550			
14 State income tax included in federal itemize	ed deductions	• 14			To learn more,	
15 Subtract line 14 from line 13		15	12550		go to tap.utah.gov	
16 Initial credit before phase-out - multiply line	e 15 by 6% (.06)	• 16	753	L		
17 Enter: \$15,095 (if single or married filing se of household); or \$30,190 (if married	• • • •	• 17	15095			
18 Income subject to phase-out - subtract line		18	35244			
19 Phase-out amount - multiply line 18 by 1.3	% (.013)	• 19	458			
20 Taxpayer tax credit - subtract line 19 from I	ine 16 (not less than zero)			• 20	295	
21 If you are a qualified exempt taxpayer, enter	er "X" (complete worksheet in instr.)	• 21				
22 Utah income tax - subtract line 20 from lin	e 10 (not less than zero)			• 22	2197	

401	L02	Utah Indiv		Tax Return (continu	•	INTUIT	TC-40 2021	Pg. 2
23	Enter ta	ax from TC-40, p	page 1, line 22				23	2197
24	Apporti	onable nonrefur	ndable credits from TC	C-40A, Part 3 (attach TC-40	OA, page 1)		• 24	
	Non or	Part-year reside	ent, complete and ente	23 (not less than zero) er the UTAH TAX from TC-	•	4)	• 25	2197
				n TC-40A, Part 4 (attach T	C-40A, page	• 1)	• 26	
			ne 25 (not less than z				27	2197
28	Volunta	ry contributions	from TC-40, page 3,	Part 4 (attach TC-40, page	3)		• 28	
29	AMEND	DED RETURN (ONLY - previous refun	d			• 29	
30	Recapt	ure of low-incon	ne housing credit				• 30	
31	Utah us	se tax					• 31	
32	Total ta	ax, use tax and	additions to tax (add	d lines 27 through 31)			32	2197
33	Utah in	come tax withhe	eld shown on TC-40W	/, Part 1 (attach TC-40W, pa	age 1)		• 33	2622
34	Credit f	or Utah income	taxes prepaid from To	C-546 and 2020 refund app	olied to 2021		• 34	
35	Pass-th	rough entity wit	hholding tax shown o	n TC-40W, Part 3 (attach T	C-40W, pag	e 2)	• 35	
36	Mineral	production with	nholding tax shown on	TC-40W, Part 2 (attach TC	C-40W, page	2)	• 36	
37	AMEND	DED RETURN (ONLY - previous paym	nents			• 37	
38	Refund	able credits fror	n TC-40A, Part 5 (atta	ach TC-40A, page 2)			• 38	
39	Total wi	ithholding and re	efundable credits - ad	d lines 33 through 38			39	2622
			e 39 from line 32 (not	less than zero)			• 40	
	•	and interest (se	ee instructions) I S AMOUNT - add line	e 40 and line 41		41	• 42	
43	REFUN	ID - subtract line	e 32 from line 39 (not	less than zero)			• 43	425
		ry subtractions ne total from pag	from refund (not great	ter than line 43)			• 44	
45	DIREC.	T DEPOSIT YO		·	ormation (se	e instructions for foreign ac 41202	counts) •	checking savings
	N Yours		clare to the best of my kno	owledge and belief, this return Date	1	nying schedules are true, corre ignature (if filing jointly)	ct and complete.	Date
	d Party signee	Name of designe	e (if any) you authorize t	o discuss this return	1	Designee's telephone number	Designee PIN	
		Preparer's signa		Date		Preparer's telephone number	Preparer's PTIN	
	aid parer's	SYAM PE Firm's name	<u>RIYA RAM SA</u> GLOBAL T		22	6789659522	• Preparer's EIN	P02082703
-	etion	and address		BLE CREEK LN	G	A 30041	•	301017196

Non and Part-year Resident Schedule

Residency Status: • X Nonresident: Home state abbreviation: NC

40106 SSN 680-89-8992

Last name KARETI

TC-40B 2021

to

INTUIT

Part-vear resident from:

mm/dd/yy mm/dd/yy Col. A - UTAH Col. B - TOTAL Income Wages, salaries, tips, etc. (1040 line 1) 52987 1 52987 2 Taxable interest income (1040 line 2b) 3 Ordinary dividends (1040 line 3b) 4 IRAs, pensions and annuities - taxable amount (1040 lines 4b and 5b) 5 Social Security benefits - taxable amount (1040 line 6b) 6 Taxable refunds/credits/offsets of state/local income taxes (1040, Schedule 1, line 1) 7 Alimony received (1040, Schedule 1, line 2a) 8 Business income or (loss) (1040, Schedule 1, line 3) 9 Capital gain or (loss) (1040, line 7) 0 -14810 Other gains or (losses) (1040, Schedule 1, line 4) 11 Rental real estate, royalties, partnerships, S corps, trusts, etc. (1040, Schd 1, line 5) 12 Farm income or (loss) (1040, Schedule 1, line 6) 13 Unemployment compensation (1040, Schedule 1, line 7) 14 Other income (1040, Schedule 1, line 9) 15 Additions to income from TC-40A, Part 1 (Utah portion only in Utah column) 16 Reserved 17 Reserved Total income (loss) - add lines 1 through 17 for both columns A and B 52987 52839 18 Col. B - TOTAL **Adjustments** Col. A - UTAH Educator expenses (1040, Schedule 1, line 11) 19 20 Certain bus. expenses of reservists, performing artists, etc. (1040, Schd 1, line 12) Health savings account deduction (1040, Schedule 1, line 13) 21 22 Moving expenses (1040, Schedule 1, line 14) - col. A only expenses moving into Utah 23 Deductible part of self-employment tax (1040, Schedule 1, line 15) 24 Self-employed SEP, SIMPLE and qualified plans (1040, Schedule 1, line 16) 25 Self-employed health insurance deduction (1040, Schedule 1, line 17) 26 Penalty on early withdrawal of savings (1040, Schedule 1, line 18) 27 Alimony paid (1040, Schedule 1, line 19a) 28 IRA deduction (1040, Schedule 1, line 20) 29 Student loan interest deduction (1040, Schedule 1, line 21) 0 2500 30 Reserved 31 Reserved 32 Taxable refunds/credits/offsets of state and local income taxes (1040, Schd 1, line 1) 33 Subtractions from income from TC-40A, Part 2 (Utah portion only in Utah column) 34 Reserved 35 Reserved 36 (see instructions): 37 Total adjustments - add lines 19 through 36 for both columns A and B 0 2500 38 Subtract line 37 from line 18 for both columns A and B 52987 50339 Line 38, column B must equal TC-40, line 9 Non or Part-year Resident Utah Tax Divide line 38 column A by line 38 column B (to 4 decimal places, not more than 1.0000 or less than 0.0000) 39 1.0000 Subtract TC-40, line 24 from TC-40, line 23 and enter the result (not less than zero) here 40 40 2197 UTAH TAX - Multiply line 40 by the decimal on line 39. Enter on TC-40, page 2, line 25 41 • 41 2197

Submit this page ONLY if data entered.

Attach completed schedule to your Utah Income Tax Return.

40109 SSN 680-89-8992

Last name KARETI

Do not send your W-2s or 1099s with your return. Instead enter Utah withholding ID number from W-2 box "15" or 1099 (14 characters, ending in WTH, no hyphens) Employer/payer name and address from W-2 box "c" or 1099 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.
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 Enter mineral production withholding from TC-675R in Part 2 of TC-40 enter pass-through entity withholding in Part 3 of TC-40W.
First W-2 or 1099 Second W-2 or 1099
1 581760235
2 12490481003WTH (14 characters, no hyphens) 2 (14 characters, no hyphens)
3 INFOSYS LIMITED 3 2400 N GLENNVILLE DR C150
RICHARDSON TX75082
4
5 680898992 5
6 52987.
7 2622.
Third W-2 or 1099 Fourth W-2 or 1099
1
2 (14 characters, no hyphens) 2 (14 characters, no hyphens
3
4
5
6
7

Enter total Utah withholding tax from all lines 7 here and on TC-40, page 2, line 33: $\,2622$.

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.