

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 NUTHAN MOSES	Social security number 687-44-1826
Spouse's name	Spouse's social security number

Part I Tax Return Information – Tax Year Ending December 31, 2021 (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 -178,515.
2 Total tax	2 0.
3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099	3 26,777.
4 Amount you want refunded to you	4 26,777.
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

4	1	8	2	6
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 as my signature on the income tax return (original or amended) I am now authorizing.
ERO firm name
Enter five digits, but don't enter all zeros
- 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.
ERO firm name
Enter five digits, but don't enter all zeros
- 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.

5	8	7	2	7	8	6	1	9	8	9
---	---	---	---	---	---	---	---	---	---	---

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

Filing Status [X] Single [] Married filing jointly [] Married filing separately (MFS) [] Head of household (HOH) [] Qualifying widow(er) (QW)
Check only one box. If you checked the MFS box, enter the name of your spouse. If you checked the HOH or QW box, enter the child's name if the qualifying person is a child but not your dependent

Your first name and middle initial: NUTHAN
Last name: MOSES
Your social security number: 687-44-1826
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.
5712 S FAIRWOOD DR
Apt. no.: 11
Presidential Election Campaign
Check here if you, or your spouse if filing jointly, want \$3 to go to this fund. Checking a box below will not change your tax or refund.
[] You [] Spouse

At any time during 2021, did you receive, sell, exchange, or otherwise dispose of any financial interest in any virtual currency? [] 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, 1957 [] Are blind Spouse: [] Was born before January 2, 1957 [] Is blind

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

Main tax calculation table with 15 rows. Includes sections for 'Attach Sch. B if required' and 'Standard Deduction for-' with various sub-rows (1-15) for income, deductions, and taxable income.

16	Tax (see instructions). Check if any from Form(s): 1 <input type="checkbox"/> 8814 2 <input type="checkbox"/> 4972 3 <input type="checkbox"/> _____	16	0.
17	Amount from Schedule 2, line 3	17	
18	Add lines 16 and 17	18	0.
19	Nonrefundable child tax credit or credit for other dependents from Schedule 8812	19	
20	Amount from Schedule 3, line 8	20	
21	Add lines 19 and 20	21	
22	Subtract line 21 from line 18. If zero or less, enter -0-	22	0.
23	Other taxes, including self-employment tax, from Schedule 2, line 21	23	0.
24	Add lines 22 and 23. This is your total tax	24	0.
25	Federal income tax withheld from:		
a	Form(s) W-2	25a	26,777.
b	Form(s) 1099	25b	0.
c	Other forms (see instructions)	25c	
d	Add lines 25a through 25c	25d	26,777.
26	2021 estimated tax payments and amount applied from 2020 return	26	
27a	Earned income credit (EIC) No Check here if you were born after January 1, 1998, and before January 2, 2004, and you satisfy all the other requirements for taxpayers who are at least age 18, to claim the EIC. See instructions <input type="checkbox"/>	27a	
b	Nontaxable combat pay election	27b	
c	Prior year (2019) earned income	27c	
28	Refundable child tax credit or additional child tax credit from Schedule 8812	28	
29	American opportunity credit from Form 8863, line 8	29	
30	Recovery rebate credit. See instructions	30	
31	Amount from Schedule 3, line 15	31	
32	Add lines 27a and 28 through 31. These are your total other payments and refundable credits	32	
33	Add lines 25d, 26, and 32. These are your total payments	33	26,777.
Refund	34 If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid	34	26,777.
	35a Amount of line 34 you want refunded to you . If Form 8888 is attached, check here <input type="checkbox"/>	35a	26,777.
Direct deposit? See instructions.	b Routing number 0 2 1 0 0 0 0 2 1 c Type: <input checked="" type="checkbox"/> Checking <input type="checkbox"/> Savings		
	d Account number 0 0 0 0 0 0 0 7 0 7 7 3 5 0 9 3		
	36 Amount of line 34 you want applied to your 2022 estimated tax	36	
Amount You Owe	37 Amount you owe . Subtract line 33 from line 24. For details on how to pay, see instructions	37	
	38 Estimated tax penalty (see instructions)	38	

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

Third Party Designee Do you want to allow another person to discuss this return with the IRS? See instructions **Yes**. Complete below. **No**

Designee's name _____ Phone no. _____ Personal identification number (PIN) _____

Sign Here Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Your signature	Date	Your occupation	If the IRS sent you an Identity Protection PIN, enter it here (see inst.)
Spouse's signature. If a joint return, both must sign.	Date	Spouse's occupation	If the IRS sent your spouse an Identity Protection PIN, enter it here (see inst.)

Phone no. (929) 354-4916 Email address NUTHAN478@GMAIL.COM

Paid Preparer Use Only

Preparer's name	Preparer's signature	Date	PTIN	Check if: <input type="checkbox"/> Self-employed
SYAM PRIYA RAM SAGAR GUPTA TALLAM	SYAM PRIYA RAM SAGAR GUPTA TALLAM	03/05/2022	P02082703	
Firm's name	Firm's address		Phone no.	Firm's EIN
GLOBAL TAXES LLC	2530 Pebble Creek Ln Cumming GA 30041		(678) 965-9522	30-1017196

**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

2021
Attachment
Sequence No. **01**

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

Your social security number
687-44-1826

Part I Additional Income

1	Taxable refunds, credits, or offsets of state and local income taxes	1	0.
2a	Alimony received	2a	
b	Date of original divorce or separation agreement (see instructions) ▶ _____		
3	Business income or (loss). Attach Schedule C	3	-368,537.
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	(1,318.)
b	Gambling income	8b	
c	Cancellation of debt	8c	
d	Foreign earned income exclusion from Form 2555	8d	()
e	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	
l	Olympic and Paralympic medals and USOC prize money (see instructions)	8l	
m	Section 951(a) inclusion (see instructions)	8m	
n	Section 951A(a) inclusion (see instructions)	8n	
o	Section 461(l) excess business loss adjustment	8o	
p	Taxable distributions from an ABLE account (see instructions)	8p	
z	Other income. List type and amount ▶ _____		
	Nonemployee compensation from 1099-NEC 41,679.	8z	41,679.
9	Total other income. Add lines 8a through 8z	9	40,361.
10	Combine lines 1 through 7 and 9. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 8	10	-328,176.

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

Schedule 1 (Form 1040) 2021

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 8k 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 8l	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 or 1040-SR, line 10, or Form 1040-NR, line 10a		26	

**SCHEDULE C
(Form 1040)**

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

OMB No. 1545-0074

2021

Attachment
Sequence No. **09**

Department of the Treasury
Internal Revenue Service (99)

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

▶ Attach to Form 1040, 1040-SR, 1040-NR, or 1041; partnerships must generally file Form 1065.

Name of proprietor NUTHAN MOSES		Social security number (SSN) 687-44-1826
A Principal business or profession, including product or service (see instructions) INDIA FOODS AND SS LAND	B Enter code from instructions ▶ 7 2 2 3 0 0	
C Business name. If no separate business name, leave blank. NUTHAN P MOSES L.L.C	D Employer ID number (EIN) (see instr.) 8 5 1 4 1 4 9 7 8	
E Business address (including suite or room no.) ▶ 4852 S REDWOOD RD City, town or post office, state, and ZIP code SALT LAKE CITY, UT 84123		
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 2021? 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 2021, check here		<input type="checkbox"/>
I Did you make any payments in 2021 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	693,236.
2 Returns and allowances	2	
3 Subtract line 2 from line 1	3	693,236.
4 Cost of goods sold (from line 42)	4	
5 Gross profit. Subtract line 4 from line 3	5	693,236.
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	693,236.

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		19 Pension and profit-sharing plans	19	
10 Commissions and fees	10		20 Rent or lease (see instructions):		
11 Contract labor (see instructions)	11	3,000.	a Vehicles, machinery, and equipment	20a	2,000.
12 Depletion	12		b Other business property	20b	70,548.
13 Depreciation and section 179 expense deduction (not included in Part III) (see instructions)	13		21 Repairs and maintenance	21	
14 Employee benefit programs (other than on line 19)	14		22 Supplies (not included in Part III)	22	796,526.
15 Insurance (other than health)	15	1,500.	23 Taxes and licenses	23	38,916.
16 Interest (see instructions):			24 Travel and meals:		
a Mortgage (paid to banks, etc.)	16a		a Travel	24a	4,010.
b Other	16b		b Deductible meals (see instructions)	24b	
17 Legal and professional services	17		25 Utilities	25	
28 Total expenses before expenses for business use of home. Add lines 8 through 27a ▶	28		26 Wages (less employment credits)	26	15,000.
29 Tentative profit or (loss). Subtract line 28 from line 7	29		27a Other expenses (from line 48)	27a	49,304.
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		27b Reserved for future use	27b	
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				-287,568.
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 checked="" 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 <input type="checkbox"/> Cost b <input type="checkbox"/> Lower of cost or market c <input type="checkbox"/> Other (attach explanation)	
34	Was there any change in determining quantities, costs, or valuations between opening and closing inventory? If "Yes," attach explanation	<input type="checkbox"/> Yes <input type="checkbox"/> 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) ▶
44	Of the total number of miles you drove your vehicle during 2021, enter the number of miles you used your vehicle for:	
a	Business	
b	Commuting (see instructions)	
c	Other	
45	Was your vehicle available for personal use during off-duty hours?	<input type="checkbox"/> Yes <input type="checkbox"/> No
46	Do you (or your spouse) have another vehicle available for personal use?.	<input type="checkbox"/> Yes <input type="checkbox"/> No
47a	Do you have evidence to support your deduction?	<input type="checkbox"/> Yes <input type="checkbox"/> No
b	If "Yes," is the evidence written?	<input type="checkbox"/> Yes <input type="checkbox"/> No

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

ELECTRICITY-ROCKY MOUNTAIN POWER CHARGES	4,500.
WIFI-COMCAST CHARGES	1,459.
GAS CHARGES	5,600.
Cell phone bill -Mint Mobile	300.
iPhone 13 pro max, AirPods Pro 3	1,500.
CASH AND CARRY CHARGES	5,521.
WATER BILL-TAYLORSVILLE-BENNION	671.
Credit card Merchant fees-MONIFY	9,600.
See Line 48 Other Expenses	20,153.
48 Total other expenses. Enter here and on line 27a	48 49,304.

**SCHEDULE C
(Form 1040)**

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

OMB No. 1545-0074

2021

Attachment
Sequence No. **09**

Department of the Treasury
Internal Revenue Service (99)

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

▶ Attach to Form 1040, 1040-SR, 1040-NR, or 1041; partnerships must generally file Form 1065.

Name of proprietor NUTHAN MOSES		Social security number (SSN) 687-44-1826
A Principal business or profession, including product or service (see instructions) AM 2 PM	B Enter code from instructions ▶ 7 2 2 3 0 0	
C Business name. If no separate business name, leave blank. URGG LLC	D Employer ID number (EIN) (see instr.) 8 7 2 1 9 6 0 4 7	
E Business address (including suite or room no.) ▶ 9447 S Union Square City, town or post office, state, and ZIP code SANDY, UT 84070		
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 2021? 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 2021, check here . . . <input type="checkbox"/>		
I Did you make any payments in 2021 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	12,902.
2 Returns and allowances	2	
3 Subtract line 2 from line 1	3	12,902.
4 Cost of goods sold (from line 42)	4	
5 Gross profit. Subtract line 4 from line 3	5	12,902.
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	12,902.

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		19	Pension and profit-sharing plans	19	
10 Commissions and fees	10		20	Rent or lease (see instructions):	20	
11 Contract labor (see instructions)	11		20a	a Vehicles, machinery, and equipment	20a	9,300.
12 Depletion	12		20b	b Other business property	20b	
13 Depreciation and section 179 expense deduction (not included in Part III) (see instructions)	13		21	21 Repairs and maintenance	21	
14 Employee benefit programs (other than on line 19)	14		22	22 Supplies (not included in Part III)	22	84,319.
15 Insurance (other than health)	15		23	23 Taxes and licenses	23	
16 Interest (see instructions):			24	24 Travel and meals:	24	
a Mortgage (paid to banks, etc.)	16a		24a	a Travel	24a	
b Other	16b		24b	b Deductible meals (see instructions)	24b	
17 Legal and professional services	17		25	25 Utilities	25	252.
18 Total expenses before expenses for business use of home. Add lines 8 through 27a ▶	18		26	26 Wages (less employment credits)	26	
19 Tentative profit or (loss). Subtract line 18 from line 7	19		27a	27a Other expenses (from line 48)	27a	
20 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	20		27b	27b Reserved for future use	27b	
21 Net profit or (loss). Subtract line 20 from line 19. • 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.	21		28	28 Total expenses before expenses for business use of home. Add lines 8 through 27a ▶	28	93,871.
22 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.	22		29	29 Tentative profit or (loss). Subtract line 28 from line 7	29	-80,969.
	23		30	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	
	24		31	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	-80,969.
	25		32a	32a <input checked="" type="checkbox"/> All investment is at risk.	32a	
	26		32b	32b <input type="checkbox"/> Some investment is not at risk.	32b	

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) ▶

44 Of the total number of miles you drove your vehicle during 2021, enter the number of miles you used your vehicle for:

a Business **b** Commuting (see instructions) **c** Other

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 or line 30.

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

Additional information from your 2021 Federal Tax Return

Schedule 1: Additional Income and Adjustments to Income

Line 8a

Explanation Statement

Net Operating Loss Carryforward
I NUTHAN MOSES WAS RUNNING FOOD BUSINESS AND INCLURRED HUGE LOSSES AND BORROWED MONEY FROM MY FRIENDS AND DETAILS WERE AS FOLLOWS SAI TEJA MERUGU -\$60000 SHYAM-\$10000 KARTHIK RANJARAJU-\$46500 AKHIL VANAMA-\$27950 PAVAN KOLANUPAKA-\$7000

Schedule C (INDIA FOODS AND SS LAND): Profit or Loss from Business

Ln 1a: Other receipts

Itemization Statement

Description	Amount
LYFT	611.74
INDIA FOODS	482,366.37
SS LAND	210,257.51
Total	693,236.

Schedule C (INDIA FOODS AND SS LAND): Profit or Loss from Business

Line 11

Itemization Statement

Description	Amount
INTERIOR LABOUR WORK	3,000.
Total	3,000.

Schedule C (INDIA FOODS AND SS LAND): Profit or Loss from Business

Line 20b

Itemization Statement

Description	Amount
RENT-COALT INC JAN(01-03-2021)	3,239.
RENT-COALT INC FEB (02-04-2021)	3,239.
RENT-COALT INC MAR (03-05-2021)	3,239.
RENT-COALT INC APRIL (04-05-2021)	3,239.
RENT-COALT INC MAY (05-04-2021)	3,239.
RENT-COALT INC JUNE (06-03-2021)	3,239.
RENT-COALT INC JULY (07-04-2021)	3,239.
RENT-COALT INC AUG (08-02-2021)	6,387.

Schedule C (INDIA FOODS AND SS LAND): Profit or Loss from Business

Line 20b

Itemization Statement

Description	Amount
RENT-COALT INC SEP(09-04-2021)	3,512.
RENT-COALT INC OCT(10-03-2021)	3,512.
RENT-COALT INC NOV (11-04-2021)	3,512.
RENT-COALT INC DEC (12-05-2021)	3,512.
RENT ADVANCE FOR SS LAND	6,000.
RENT PAID SS LAND-INVOICE 2680	21,440.
Total	70,548.

Schedule C (INDIA FOODS AND SS LAND): Profit or Loss from Business

Line 22

Itemization Statement

Description	Amount
Nirav -Indian Groceries and Spices Inc INVOICE NO-21111360	4,531.55
Nirav -Indian Groceries and Spices Inc INVOICE NO-21113173	7,022.30
Nirav -Indian Groceries and Spices Inc INVOICE NO-21112163	5,365.30
Nirav -Indian Groceries and Spices Inc INVOICE NO-21111568	2,191.80
Himalayan Fresh Inc INVOICE-6219	655.
Himalayan Fresh Inc INVOICE-6320	821.
Himalayan Fresh Inc INVOICE-7163	1,035.
Himalayan Fresh Inc INVOICE-6959	1,325.50
Himalayan Fresh Inc INVOICE-6867	1,247.75
Himalayan Fresh Inc INVOICE-6675	1,332.50
Himalayan Fresh Inc INVOICE-6592	837.
Chetak SanFransisco LLC INVOICE-274102	11,203.93
Chetak SanFransisco LLC INVOICE-274230	239.04
Chetak SanFransisco LLC INVOICE-276188	6,567.33
Chetak SanFransisco LLC INVOICE-275359	5,199.91
Chetak SanFransisco LLC INVOICE-276188	5,285.84

Schedule C (INDIA FOODS AND SS LAND): Profit or Loss from Business

Line 22

Itemization Statement

Description	Amount
Chetak SanFransisco LLC INVOICE-277168	3,707.57
Chetak SanFransisco LLC INVOICE-277763	6,468.32
Chetak SanFransisco LLC INVOICE-277853	1,147.80
Chetak SanFransisco LLC INVOICE-278665	6,972.06
Chetak SanFransisco LLC INVOICE-279504	6,235.92
Chetak SanFransisco LLC INVOICE-279688	232.20
Chetak SanFransisco LLC INVOICE-280511	7,274.95
Chetak SanFransisco LLC INVOICE-280612	1,014.
Chetak SanFransisco LLC INVOICE-281406	8,508.97
Chetak SanFransisco LLC INVOICE-282319	8,325.39
Chetak SanFransisco LLC INVOICE-283235	5,523.46
Bharathi - Perryville Farms (\$800*12M)	9,600.
Wanship - Truck company (\$1000*12M)	12,000.
House of Spices (India) Inc. INVOICE-PSI166565	2,002.25
House of Spices (India) Inc. INVOICE-PSI178079	3,016.10
House of Spices (India) Inc. INVOICE-PSI182285	2,050.50
House of Spices (India) Inc. INVOICE-PSI184211	2,230.50
House of Spices (India) Inc. INVOICE-PSI188810	4,429.95
House of Spices (India) Inc. INVOICE-PSI189444	108.75
House of Spices (India) Inc. INVOICE-PSI193193	6,645.95
House of Spices (India) Inc. INVOICE-PSI198120	6,259.09
House of Spices (India) Inc. INVOICE-PSI208653	5,487.45
Rajshree International Inc. INVOICE-6601	4,965.04
Gas-Dominion Energy AC:9636862930	130.37
Gas-Dominion Energy AC:9636862931	175.67
Gas-Dominion Energy AC:9636862932	88.24

Schedule C (INDIA FOODS AND SS LAND): Profit or Loss from Business

Line 22

Itemization Statement

Description	Amount
Gas-Dominion Energy AC:9636862933	35.20
Gas-Dominion Energy AC:9636862934	11.70
Gas-Dominion Energy AC:9636862935	11.71
Gas-Dominion Energy AC:9636862936	11.71
Gas-Dominion Energy AC:9636862937	11.95
Gas-Dominion Energy AC:9636862938	51.73
Gas-Dominion Energy AC:9636862939	85.23
Gas-Dominion Energy AC:9636862940	194.61
Electricity- Rocky Mountain Power (01-14-21)	609.10
Electricity- Rocky Mountain Power (02-12-21)	557.75
Electricity- Rocky Mountain Power (03-16-21)	594.29
Electricity- Rocky Mountain Power (04-14-21)	544.34
Electricity- Rocky Mountain Power (05-12-21)	508.83
Electricity- Rocky Mountain Power (06-11-21)	648.48
Electricity- Rocky Mountain Power (07-14-21)	1,073.06
Electricity- Rocky Mountain Power (08-12-21)	930.06
Electricity- Rocky Mountain Power (10-12-21)	16.62
Electricity- Rocky Mountain Power (11-10-21)	717.15
Electricity- Rocky Mountain Power (12-16-21)	647.87
HATHI BRAND FOODS INC INVOICE 0034512-IN	6,644.33
HATHI BRAND FOODS INC INVOICE 0036459-IN	4,239.42
HATHI BRAND FOODS INC INVOICE 0037512-IN	2,987.33
HATHI BRAND FOODS INC INVOICE 0038912-IN	4,484.60
HATHI BRAND FOODS INC INVOICE 0040684-IN	6,229.44

Schedule C (INDIA FOODS AND SS LAND): Profit or Loss from Business

Line 22

Itemization Statement

Description	Amount
HATHI BRAND FOODS INC INVOICE 0041320-IN	4,451.17
Divine supplies INVOICE 55587	621.40
Divine supplies INVOICE 56301	320.
Divine supplies INVOICE 8891	403.55
Divine supplies INVOICE 55587	640.
Divine supplies INVOICE 8144	910.10
Divine supplies INVOICE 59007	716.
Divine supplies INVOICE 59525	1,741.
Divine supplies INVOICE 60453	930.
Chris-Veggies shipping JAN-DEC	10,005.45
Shrinath Trading INVOICE-39153	1,713.15
Shrinath Trading INVOICE-38779	3,486.10
Shrinath Trading INVOICE-42325	6,784.50
Shrinath Trading INVOICE-38344	2,160.59
Xpressions-Haldirams INVOICE-6142	5,293.80
Xpressions-Haldirams INVOICE-8966	8,517.65
Xpressions-Haldirams INVOICE-8037	6,288.20
RAJBHOG FOODS (METRO) INC. INVOICE-271816	5,152.95
RAJBHOG FOODS (METRO) INC. INVOICE-273423	1,122.
RAJBHOG FOODS (METRO) INC. INVOICE-268231	1,666.68
Raja Foods INVOICE-236406	1,700.50
Raja Foods INVOICE-0236889-IN	3,458.50
BONDSFOREVER,INC. INVOICE-121610	1,061.70
Roti machine -JKS ENGINEERING WORKS (06-05-2021)	5,000.

Schedule C (INDIA FOODS AND SS LAND): Profit or Loss from Business**Line 22****Itemization Statement**

Description	Amount
Dhanraj Inc INVOICE-69899	2,853.65
Dhanraj Inc INVOICE-70504	2,984.40
Dhanraj Inc INVOICE-71245	3,610.75
Dhanraj Inc INVOICE-71478	1,972.75
Dhanraj Inc INVOICE-71612	4,438.
Walton Meat (\$1200*12M)	14,400.
Bombay Foods Inc INVOICE-1123	619.
Bombay Foods Inc INVOICE-1197	397.
Bombay Foods Inc INVOICE-1003	1,929.85
Bombay Foods Inc INVOICE-1079	368.
Desi Taste - NANAK INVOICE-80837	3,428.
Desi Taste - NANAK INVOICE-21-0463	2,371.
Desi Taste - NANAK INVOICE-20-3924	3,404.
VADILAL INDUSTRIES (USA) Inc. INVOICE-95093306	7,409.88
VADILAL INDUSTRIES (USA) Inc. INVOICE-95090943	3,433.04
Grain Market LLC INVOICE-19755	14,994.77
Grain Market LLC INVOICE-0031472-IN	7,367.50
CV Foods Inc INVOICE-24767	3,198.
CV Foods Inc INVOICE-23954	4,454.95
Gourmet wala INVOICE-80837	3,903.
HEMANI INVOICE-714	3,168.25
Samra Produce (\$4000*12)	48,000.
Desi Foods INVOICE-21108	825.
Desi Foods INVOICE-210920	558.

Schedule C (INDIA FOODS AND SS LAND): Profit or Loss from Business

Line 22

Itemization Statement

Description	Amount
PARI Foods Inc INVOICE-2209	1,820.
Karoun Dairies LLC INVOICE-703777	608.
Karoun Dairies LLC INVOICE-708630	554.70
Karoun Dairies LLC INVOICE-714234	1,033.47
Karoun Dairies LLC INVOICE-719584	1,158.65
Amazon lights -SS LAND	2,000.
LOWES-SS LAND	1,500.
Advance display -BI WEEKLY SS LAND	20,000.
Costco -SS LAND	25,000.
Sign Board -SS LAND	8,000.
FLEX AND DESIGN-SS LAND	1,500.
Wave rax kratom -SS LAND	6,000.
kratom jane -SS LAND	10,000.
PAINT AND INTERIOR-SS LAND	2,000.
Kanger wholesale-SS LAND	35,000.
AFG DISTRIBUTOR-SS LAND	30,000.
stallion -SS LAND	40,000.
party nuts -SS LAND	25,000.
CA WHOLESALE -SS LAND	20,000.
phresh pick -SS LAND	6,000.
Everest DISTRIBUTION-SS LAND	20,000.
Alibaba DISTRIBUTION-SS LAND	50,000.
ADT ALARMS-SS LAND	500.
GOOD TIMES ENTERPRISES-SS LAND	3,000.
philips and king -SS LAND	1,500.
AW Marshall -SS LAND	1,500.
TOYS TY- SS LAND	500.
Clover- SS LAND	500.
Pipe zone vegas -SS LAND	12,000.

Schedule C (INDIA FOODS AND SS LAND): Profit or Loss from Business

Line 22

Itemization Statement

Description	Amount
Sincity vegas -SS LAND	12,000.
US CHEF store -INDIA FOODS	4,210.51
R&F-INDIA FOODS	6,210.11
Clover POS - 50 a month -INDIA FOODS	600.
COOLER	1,000.
home depo - SS LAND	2,000.
Expired stuff total value	10,000.
OTHER SUPPLIES	18,289.
Total	796,526.

Schedule C (INDIA FOODS AND SS LAND): Profit or Loss from Business

Line 23

Itemization Statement

Description	Amount
SALES TAXES INDIA FOOD INVOICE-AC: 15083131-002-STC (JAN TO DEC)	17,616.02
LICENSE FEE -SS LAND	1,300.
SALES TAX SS LAND	20,000.
Total	38,916.

Schedule C (INDIA FOODS AND SS LAND): Profit or Loss from Business

Line 24a

Itemization Statement

Description	Amount
India Imports and Exports Inc INVOICE-0075655(4-29-2021)	4,010.
Total	4,010.

Schedule C (INDIA FOODS AND SS LAND): Profit or Loss from Business

Line 15

Itemization Statement

Description	Amount
INSURANCE FOR SS LAND	1,500.
Total	1,500.

Schedule C (INDIA FOODS AND SS LAND): Profit or Loss from Business

Line 48 Other Expenses

Continuation Statement

Description	Amount
Lyft platform fees	78.
Service fees	72.
Third-party fees	3.
MISCELENIIOUS EXPENSES	20,000.

Schedule C (INDIA FOODS AND SS LAND): Profit or Loss from Business

Line 48 Other Expenses

Continuation Statement

Description	Amount
Total	20,153.

Schedule C (INDIA FOODS AND SS LAND): Profit or Loss from Business

Line 48 Other Expenses (1)

Line 48 Amount

Itemization Statement

Description	Amount
SS LAND(\$350*8)	4,500.
Total	4,500.

Schedule C (INDIA FOODS AND SS LAND): Profit or Loss from Business

Line 48 Other Expenses (2)

Line 48 Amount

Itemization Statement

Description	Amount
INDIA FOODS	659.
SS-LAND	800.
Total	1,459.

Schedule C (INDIA FOODS AND SS LAND): Profit or Loss from Business

Line 48 Other Expenses (3)

Line 48 Amount

Itemization Statement

Description	Amount
INDIA FOODS GAS-(\$50*12M)	600.
SS LAND	5,000.
Total	5,600.

Schedule C (AM 2 PM): Profit or Loss from Business

Ln 1a: Other receipts

Itemization Statement

Description	Amount
AM 2 PM SALES	12,901.51
Total	12,902.

Schedule C (AM 2 PM): Profit or Loss from Business

Line 22

Itemization Statement

Description	Amount
Home Depot INVOICE-4.4091E+14	75.04
Advance Displays INVOICE-208877	991.65
Advance Displays INVOICE-209043	118.50
Advance Displays INVOICE-209045	114.25

Schedule C (AM 2 PM): Profit or Loss from Business

Line 22

Itemization Statement

Description	Amount
Advance Displays INVOICE-209039	845.
Advance Displays INVOICE-209021	458.04
Lightinghouse printing INVOICE-17108	95.26
Costco INVOICE-1136210453	1,021.45
Costco INVOICE-113914237	73.03
Costco INVOICE-76420431	322.34
Lowe's INVOICE-2248388	10.57
Lowe's INVOICE-2241542	41.76
Lowe's INVOICE-14973	21.51
Advance Displays INVOICE-209202	280.01
Advance Displays INVOICE-209203	1,155.98
Lightinghouse printing INVOICE-17128	49.87
Maya Graphics -1547	3,116.05
7Global Distribution.inc -INVOICE-127411	3,716.65
PipeZone Distribution INVOICE-70247	6,674.65
Sincity wholesale.opt INVOICE-148	2,069.78
Sincity wholesale.opt INVOICE-11458	4,815.57
Maya Graphics INVOICE-4977	250.
Advance Displays INVOICE-206316	4,396.78
Costco INVOICE-20021	152.38
Dollar Tree INVOICE-21514616	206.61
Stallion Marketing INVOICE-40717	5,600.65
Uno wireless INVOICE-2846	468.
Everest Distribution INVOICE-SO010090	7,648.80
Stallion Marketing INVOICE-40717	1,495.

Schedule C (AM 2 PM): Profit or Loss from Business

Line 22

Itemization Statement

Description	Amount
Advance Displays INVOICE-209639	15.
Vype Vapor INVOICE-1589	1,020.
Everest Distribution -SO010138	805.
ADT	238.17
Lightinghouse printing	105.11
restaurant equipment.inc INVOICE-154762	1,547.67
General distribution.inc INVOICE-125478	2,654.89
JB distribution INVOICE-56984	789.67
SS Land INVOICE-12546	1,783.66
Garyed Company LTD INVOICE-9334608835	477.70
Lightinghouse printing INVOICE-17212	105.11
Vype Vapor INVOICE-1655	1,406.
smart gifts co.ltd INVOICE-5.30482E+11	172.
Costco INVOICE-113627337	4,086.42
Dollar Tree	40.
Costco INVOICE-113632437	650.
Comcast	166.35
miller group INVOICE-21750	1,524.09
Maya Graphics	171.92
Guangzhou Icon Trading Co,Ltd.	235.32
PuffX	190.
Kratora	359.96
Everest Distribution INVOICE-SO010307	970.25
ca distribution INVOICE-1713	50.
Office Deport INVOICE-210322600-001	441.67
ss disctribution. inc	1,781.26
Everest Distribution INVOICE-SO010379	358.75
Alpina Distribution	515.

Schedule C (AM 2 PM): Profit or Loss from Business

Line 22

Itemization Statement

Description	Amount
CA distribution INVOICE-1836	147.
Everest Distribution INVOICE-SO010459	498.45
Alpina Distribution INVOICE-OS-478	1,210.
Party Nuts INVOICE-WH-1165345	300.
Dollar Tree INVOICE-27087424	42.90
Costco INVOICE-113626653	555.19
Everest Distribution INVOICE-SO010525	1,596.80
Party Nuts INVOICE-WH-1165941	901.
Vape vapour INVOICE-1699	381.85
Nootropics	139.32
Uno wireless	184.
Comcast INVOICE-125476588	116.40
ADT INVOICE-882790067	238.17
ADT INVOICE-884445504	244.16
ADT INVOICE-883652207	244.16
Vape vapour INVOICE-2039	132.
Stallion Marketing INVOICE-40717	555.50
Party Nuts INVOICE-WH-1165345	300.
Costco	570.23
Alpina Distribution INVOICE-os-579	210.50
Maya Graphics INVOICE-5045	1,616.05
Uno wireless INVOICE-3047	250.
Comcast INVOICE-116400	116.40
CA distribution INVOICE-2084	86.
Party Nuts INVOICE-1Z91VW880391826910	901.
Everest Distribution INVOICE-SO010794	1,356.45

Schedule C (AM 2 PM): Profit or Loss from Business

Line 22

Itemization Statement

Description	Amount
Hookak wholesale INVOICE-10236290	170.47
Rojas Company LLC INVOICE-25068	91.56
Coke INVOICE-13306223536	747.12
Party Nuts -WH-1167945	400.
Uno wireless INVOICE-3087	300.
SS Land INVOICE-2146	401.25
comcast INVOICE-12547895	166.55
Walmart INVOICE-65653Z	202.36
Total	84,319.

Schedule C (AM 2 PM): Profit or Loss from Business

Line 25

Itemization Statement

Description	Amount
GAS INVOICE-SO12547	252.
Total	252.

40101

1555

Utah State Tax Commission
Utah Individual Income Tax Return
 All State Income Tax Dollars Fund Education

2021
TC-40
 INTUIT

• Amended Return - enter code: (see instructions)

Full-yr Resident?

Your Social Security No.	Your first name	Your last name	Y/N
687441826	NUTHAN	MOSES	Y
Spouse's Soc. Sec. No.	Spouse's first name	Spouse's last name	

If deceased, complete page 3, Part 1

Address	Telephone number
5712 S FAIRWOOD DR, APT 11	929-354-4916
City State ZIP+4	Foreign country (if not U.S.)
SALT LAKE CITY UT 84129	

<p>1 Filing Status - enter code</p> <p>1 = Single</p> <p>• <u>1</u> 2 = Married filing jointly</p> <p>3 = Married filing separately</p> <p>4 = Head of household</p> <p>5 = Qualifying widow(er)</p> <p><small>If using code 2 or 3, enter spouse's name and SSN above</small></p>	<p>2 Qualifying Dependents</p> <p>a Dependents age 16 and under</p> <p>b Other dependents</p> <p>c 0 Total (add lines a and b)</p> <p><small>Dependents must be claimed for the child tax credit on your federal return. See instructions.</small></p>	<p>3 Election Campaign Fund</p> <p><small>Does not increase your tax or reduce your refund.</small></p> <p>Enter the code for the party of your choice.</p> <table border="0" style="width: 100%;"> <tr> <td style="width: 33%;"></td> <td style="width: 33%; text-align: center;">Yourself</td> <td style="width: 33%; text-align: center;">Spouse</td> </tr> <tr> <td></td> <td style="text-align: center;">•</td> <td style="text-align: center;">•</td> </tr> </table> <p><small>See instructions for code letters or go to incometax.utah.gov/elect.</small></p> <p><small>If no contribution, enter N.</small></p>		Yourself	Spouse		•	•
	Yourself	Spouse						
	•	•						

4 Federal adjusted gross income from federal return	• 4	-178515
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	-178515
7 State tax refund included on federal form 1040, Schedule 1, line 1 (if any)	• 7	0
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	-178515
10 Utah tax - multiply line 9 by 4.95% (.0495) (not less than zero)	• 10	0
11 Utah personal exemption (multiply line 2c by \$1,750)	• 11	0
12 Federal standard or itemized deductions	• 12	12550
13 Add line 11 and line 12	13	12550
14 State income tax included in federal itemized deductions	• 14	
15 Subtract line 14 from line 13	15	12550
16 Initial credit before phase-out - multiply line 15 by 6% (.06)	• 16	753
17 Enter: \$15,095 (if single or married filing separately); \$22,643 (if head of household); or \$30,190 (if married filing jointly or qualifying widow)	• 17	15095
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	753
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
2021**

Pg. 2

40102 SSN 687441826

Last name MOSES

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	Utah income tax withheld shown on TC-40W, Part 1 (attach TC-40W, page 1)	• 33	7402
34	Credit for Utah income taxes prepaid from TC-546 and 2020 refund applied to 2021	• 34	
35	Pass-through entity withholding tax shown on TC-40W, Part 3 (attach TC-40W, page 2)	• 35	
36	Mineral production withholding tax shown on TC-40W, Part 2 (attach TC-40W, page 2)	• 36	
37	AMENDED RETURN ONLY - previous payments	• 37	
38	Refundable credits from TC-40A, Part 5 (attach TC-40A, page 2)	• 38	
39	Total withholding and refundable credits - add lines 33 through 38	39	7402
40	TAX DUE - subtract line 39 from line 32 (not less than zero)	• 40	
41	Penalty and interest (see instructions)	41	
42	TOTAL DUE - PAY THIS AMOUNT - add line 40 and line 41	• 42	
43	REFUND - subtract line 32 from line 39 (not less than zero)	• 43	7402
44	Voluntary subtractions from refund (not greater than line 43) Enter the total from page 3, Part 5	• 44	
45	DIRECT DEPOSIT YOUR REMAINING REFUND - provide account information (see instructions for foreign accounts)	checking	savings
	• Routing number 021000021 • Account number 000000707735093	Account type: • <input checked="" 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	Date 03/05/22	Preparer's PTIN P02082703
	Firm's name and address GLOBAL TAXES LLC 2530 PEBBLE CREEK LN CUMMING GA 30041	Preparer's telephone number 6789659522	Preparer's EIN 301017196

Attach TC-40 page 3 if you: are filing for a deceased taxpayer, are filing a fiscal year return, filed IRS form 8886, are making voluntary contributions, want to deposit into a my529 account, want to apply all/part of your refund to next year's taxes, want to direct deposit to a foreign account, or no longer qualify for a homeowner's exemption.

Part 1 - Utah Withholding Tax Schedule

INTUIT

**TC-40W
2021**

Pg. 1

40109 SSN 687-44-1826

Last name MOSES

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 223604017 2 14183042003WTH (14 characters, no hyphens) 3 BIRLASOFT SOLUTIONS INC 399 THORNALL ST 8TH FL EDISON NJ08837 4 5 687441826 6 149661. 7 7402.	<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

Enter total Utah withholding tax from all lines 7 here and on TC-40, page 2, line 33: 7402.

**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.**