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

2022

OMB No. 1545-007

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

Check only		Single Married filing jointly	_	ed filing separately (N		_				spou	fying su se (QSS	3)	
one box.	-	u checked the MFS box, enter the n on is a child but not your dependent	-	our spouse. If you cr	IECKE	ea trie non or	QSS DOX, el	iter	trie ci	iliu S	патте п	trie (qualifyirig
Your first name		<u> </u>	Last nar	me					Yo	ur soc	ial secu	ritv r	number
SIVA PRI				AREDDY						Your social security number 030-94-2180			
		s first name and middle initial	Last nar						+				ity number
Home address	(numbe	er and street). If you have a P.O. box, see	instructio	nns			Apt. no.		Dro	cidor	tial Floo		Campaign
	,		, 111311 40110	7113.			7,01.110.		- 1	Presidential Election Campa Check here if you, or your			
343 S 50		r サンショ ce. If you have a foreign address, also co	omplete si	naces helow	Stat	·e	ZIP code		spo	ouse i	f filing jo	intly	, want \$3
SALT LA		,	omplote of	54000 5010W.	UT		84102						ecking a
Foreign country		L I I	F	Foreign province/state/o			Foreign postal	cod	_		w will no or refun		arige
. orongin oodina	<i>y</i>			oronger provinces of actions		,	. o.o.g., poota	000			You	_	Spouse
Digital Assets		ny time during 2022, did you: (a) rec ange, gift, or otherwise dispose of a			-		-				Yes		⊠ No
Standard		eone can claim: You as a de					43301): (000	11101	idetio	113.)			
Deduction		Spouse itemizes on a separate retur		•		а аерепаеті							
Age/Blindness	s You:	Were born before January 2, 1	958	Are blind Spo	use:	☐ Was bor	n before Jan	uar	/ 2, 19	58	☐ Is	blinc	d
Dependent	s (see	instructions):		(2) Social security		(3) Relationsh	ip (4) Check	the	box if	qualifi	es for (se	e ins	structions):
If more	(1) F	(1) First name Last name		number		to you	Child	Child tax cr		(Credit for	other	dependents
than four													
dependents, see instruction	s —												
and check	. —												
here L													
Income	1a	Total amount from Form(s) W-2, b	ox 1 (see	e instructions)						1a		32	,891.
	b	Household employee wages not re	eported							1b			
Attach Form(s) W-2 here. Also	С	Tip income not reported on line 1a	•							1c			
attach Forms	d	Medicaid waiver payments not reported on Form(s) W-2 (see instructions)							1d				
W-2G and 1099-R if tax	е	Taxable dependent care benefits from Form 2441, line 26							1e				
was withheld.	f								1f				
If you did not	g	Wages from Form 8919, line 6 .								1g			
get a Form W-2, see	h	Other earned income (see instruct	ions) .			1	1			1h			0.
instructions.	i	Nontaxable combat pay election (see instr	uctions)		<u>1</u> i							
	Z			· · · · · · · · · · · · · · · · · · ·						1z		_32	, 891.
Attach Sch. B	2 a	' <u> </u>	2a			axable interest				2b			
if required.	3a	· · ·	3a			rdinary divide				3b			
	4a	<u> </u>	4a			axable amoun				4b			
Standard Deduction for —	5a	_	5a			axable amoun				5b			
Single or	6a	,	6a			axable amoun	t		·	6b			
Married filing separately,	С	If you elect to use the lump-sum e				,							
\$12,950	7	Capital gain or (loss). Attach Sche							Ш	7			
Married filing jointly or	8	Other income from Schedule 1, lin								8			
Qualifying surviving spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7								9		32	<u>,891.</u>
\$25,900 \$25,900	10	Adjustments to income from Sche								10			
Head of household,	11	Subtract line 10 from line 9. This is	-	-				٠		11			,891.
\$19,400	12	Standard deduction or itemized						٠		12		_12	, 950.
If you checked any box under	13	Qualified business income deduct						٠		13			
Standard Deduction,	14							٠		14			<u>,950.</u>
see instructions.	15	Subtract line 14 from line 11. If zer	ro or less	s, enter -U This is y	our t a	axable incom	e			15		19	<u>,941.</u>

Form 1040 (202	2)							Page 2
Tax and	16	Tax (see instructions). Check if any from Form	(s): 1 881	4 2 🗌 4972	3 🗌		16	2,186.
Credits	17	Amount from Schedule 2, line 3					17	
	18	Add lines 16 and 17					18	2,186.
	19	Child tax credit or credit for other dependent	ts from Schedi	ule 8812			19	
	20	Amount from Schedule 3, line 8					20	64.
	21	Add lines 19 and 20					21	64.
	22	Subtract line 21 from line 18. If zero or less,	enter -0				22	2,122.
	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	2,122.
Payments	25	Federal income tax withheld from:						
•	а	Form(s) W-2			25a	4,276	5.	
	b	Form(s) 1099			25b			
	С	Other forms (see instructions)			25c			
	d	Add lines 25a through 25c					25d	4,276.
f you have a	26	2022 estimated tax payments and amount a	pplied from 20	21 return			26	
qualifying child,	27	Earned income credit (EIC)			27			
attach Sch. EIC.	28	Additional child tax credit from Schedule 8812	2		28			
	29	American opportunity credit from Form 8863	3, line 8		29			
	30	Reserved for future use			30			
	31	Amount from Schedule 3, line 15			31			
	32	Add lines 27, 28, 29, and 31. These are your	total other pa	ayments and refu	ndable cre	dits	32	
	33	Add lines 25d, 26, and 32. These are your to	tal payments				33	4,276.
Refund	34	If line 33 is more than line 24, subtract line 2	4 from line 33.	This is the amoun	nt you over	oaid	34	2,154.
iloidila	35a	Amount of line 34 you want refunded to you	J. If Form 8888	is attached, chec	k here .	[35a	2,154.
Direct deposit?	b	Routing number 1 2 2 1 0 0 0		c Type:	Checking	Saving	s	
See instructions	d	Account number 7 9 2 3 9 7 0	5 8					
	36	Amount of line 34 you want applied to your	2023 estimate	ed tax	36			
Amount You Owe	37	Subtract line 33 from line 24. This is the amo For details on how to pay, go to <i>www.irs.go</i>	•				37	
	38	Estimated tax penalty (see instructions) .			38			
Third Party Designee		you want to allow another person to disc	cuss this retur			es. Complet	e below.	⊠ No
	De na	signee's ne	Phone no.			Personal ide number (PIN	ntification r	
Sign		der penalties of perjury, I declare that I have examine ief, they are true, correct, and complete. Declaration of						
Here	Yo	ur signature	Date	Your occupation		lf ·	the IRS sen	t you an Identity

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 an 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						
la la tauta ma 0	Siva Воттагедду		ANALYST	Protection PIN, enter it here (see inst.)						
loint return? See instructions.		02/21/2022		` ′						
Keep a copy for	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 he						
our records.				(see inst.)						
	Phone no. (510) 570-7265	Email address	SBOMMAR1@ASU.EDU							

Preparer's signature

SYAM PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA RAM SAGAR GUPTA TALLAM

Preparer GLOBAL TAXES LLC Firm's name **Use Only** 245 ROONEY CT E BRUNSWICK NJ 08816 Firm's address Go to www.irs.gov/Form1040 for instructions and the latest information.

Preparer's name

Paid

BAA

REV 02/10/23 PRO

02/21/2023

PTIN

P02082703

Firm's EIN

Date

84-3171965 Form **1040** (2022)

Self-employed

Check if:

Phone no. (678) 965-9522

SCHEDULE 3 (Form 1040)

Department of the Treasury Internal Revenue Service

Additional Credits and Payments

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

2022

Attachment Sequence No. 03

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

Your social security number 030-94-2180

Par	t I Nonrefundable Credits			
1	Foreign tax credit. Attach Form 1116 if required		1	
2	Credit for child and dependent care expenses from Form 2441 Form 2441		2	
3	Education credits from Form 8863, line 19		3	
4	Retirement savings contributions credit. Attach Form 8880		4	64.
5	Residential energy credits. Attach Form 5695		5	
6	Other nonrefundable credits:			
а	General business credit. Attach Form 3800	6a		
b	Credit for prior year minimum tax. Attach Form 8801	6b		
С	Adoption credit. Attach Form 8839	6c		
d	Credit for the elderly or disabled. Attach Schedule R	6d		
е	Alternative motor vehicle credit. Attach Form 8910	6e		
f	Qualified plug-in motor vehicle credit. Attach Form 8936	6f		
g	Mortgage interest credit. Attach Form 8396	6g		
h	District of Columbia first-time homebuyer credit. Attach Form 8859	6h		
i	Qualified electric vehicle credit. Attach Form 8834	6i		
j	Alternative fuel vehicle refueling property credit. Attach Form 8911	6j		
k	Credit to holders of tax credit bonds. Attach Form 8912	6k		
1	Amount on Form 8978, line 14. See instructions	61		
Z	Other nonrefundable credits. List type and amount:			
		6z		
7	Total other nonrefundable credits. Add lines 6a through 6z		7	
8	Add lines 1 through 5 and 7. Enter here and on Form 1040, 1040-line 20	SR, or 1040-NR,	8	64.

REV 02/10/23 PRO

Schedule 3 (Form 1040) 2022 Page **2**

Par	Other Payments and Refundable Credits			
9	Net premium tax credit. Attach Form 8962		9	
10	Amount paid with request for extension to file (see instructions) .		10	
11	Excess social security and tier 1 RRTA tax withheld		11	
12	Credit for federal tax on fuels. Attach Form 4136		12	
13	Other payments or refundable credits:			
а	Form 2439	13a		
b	Credit for qualified sick and family leave wages paid in 2022 from Schedule(s) H for leave taken before April 1, 2021	13b		
С	Reserved for future use	13c		
d	Credit for repayment of amounts included in income from earlier years	13d		
е	Reserved for future use	13e		
f	Deferred amount of net 965 tax liability (see instructions)	13f		
g	Reserved for future use	13g		
h	from Schedule(s) H for leave taken after March 31, 2021, and	13h		
Z	Other payments or refundable credits. List type and amount:			
		13z		
14	Total other payments or refundable credits. Add lines 13a through	13z	14	
15	Add lines 9 through 12 and 14. Enter here and on Form 1040, 1040-line 31	,	15	

BAA

Form **8889**

Health Savings Accounts (HSAs)

Department of the Treasury Internal Revenue Service

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

Go to www.irs.gov/Form8889 for instructions and the latest information.

OMB No. 1545-0074

2022

Attachment
Sequence No. 52

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

SIVA PRIYADARSHINI BOMMAREDDY

Social security number of HSA beneficiary. If both spouses have HSAs, see instructions. $0\,3\,0-9\,4-2\,1\,8\,0$

Before you begin: Complete Form 8853, Archer MSAs and Long-Term Care Insurance Contracts, if required. HSA Contributions and Deduction. See the instructions before completing this part. If you are filing jointly and both you and your spouse each have separate HSAs, complete a separate Part I for each spouse. Check the box to indicate your coverage under a high-deductible health plan (HDHP) during 2022. ■ Self-only
 □ Family HSA contributions you made for 2022 (or those made on your behalf), including those made by the unextended due date of your tax return that were for 2022. Do not include employer contributions, 2 0. If you were under age 55 at the end of 2022 and, on the first day of every month during 2022, you 3 were, or were considered, an eligible individual with the same coverage, enter \$3,650 (\$7,300 for 3 3,650. Enter the amount you and your employer contributed to your Archer MSAs for 2022 from Form 8853, lines 1 and 2. If you or your spouse had family coverage under an HDHP at any time during 2022, also 4 5 5 3,650. 6 Enter the amount from line 5. But if you and your spouse each have separate HSAs and had family coverage under an HDHP at any time during 2022, see the instructions for the amount to enter . . . 3,650. 6 If you were age 55 or older at the end of 2022, married, and you or your spouse had family coverage 7 under an HDHP at any time during 2022, enter your additional contribution amount. See instructions. 7 8 3,650. 9 Employer contributions made to your HSAs for 2022 10 11 11 500. 3,150. 12 12 13 HSA deduction. Enter the smaller of line 2 or line 12 here and on Schedule 1 (Form 1040), Part II, line 13 **Caution:** If line 2 is more than line 13, you may have to pay an additional tax. See instructions. HSA Distributions. If you are filing jointly and both you and your spouse each have separate HSAs, complete Part II a separate Part II for each spouse. Total distributions you received in 2022 from all HSAs (see instructions) Distributions included on line 14a that you rolled over to another HSA. Also include any excess contributions (and the earnings on those excess contributions) included on line 14a that were 14b 14c 15 15 Taxable HSA distributions. Subtract line 15 from line 14c. If zero or less, enter -0-. Also, include this 16 16 17a If any of the distributions included on line 16 meet any of the Exceptions to the Additional 20% b Additional 20% tax (see instructions). Enter 20% (0.20) of the distributions included on line 16 that are subject to the additional 20% tax. Also, include this amount in the total on Schedule 2 (Form 1040). Part II. line 17c Part III Income and Additional Tax for Failure To Maintain HDHP Coverage. See the instructions before completing this part. If you are filing jointly and both you and your spouse each have separate HSAs, complete a separate Part III for each spouse. 18 18 19 19 20 Total income. Add lines 18 and 19. Include this amount on Schedule 1 (Form 1040), Part I, line 8f 20 21 Additional tax. Multiply line 20 by 10% (0.10). Include this amount in the total on Schedule 2 (Form 21

Form **8880**

Credit for Qualified Retirement Savings Contributions

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

Go to www.irs.gov/Form8880 for the latest information.

OMB No. 1545-0074

2022

Attachment
Sequence No. 54

(h) Vour spouse

Name(s) shown on return

Your social security number

(a) Vou

030-94-2180

SIVA PRIYADARSHINI BOMMAREDDY

You cannot take this credit i

You cannot take this credit if either of the following applies.

- The amount on Form 1040, 1040-SR, or 1040-NR, line 11, is more than \$34,000 (\$51,000 if head of household; \$68,000 if married filing jointly).
- The person(s) who made the qualified contribution or elective deferral (a) was born after January 1, 2005; (b) is claimed as a dependent on someone else's 2022 tax return; or (c) was a **student** (see instructions).

						(a) Yo	u	(b) Your	spouse
		ontributions, and AB		•					
designated beneficiary for 2022. Do not include rollover contributions									
	Elective deferrals to a 401(k) or other qualified employer plan, voluntary employee contributions, and 501(c)(18)(D) plan contributions for 2022 (see instructions) 2								
					2		635.		
					3		635.		
		ed after 2019 and		,					
,	•	return (see instruction	,	•					
•		oth columns. See inst	•		4				
		zero or less, enter -0-			5		635.		
		naller of line 5 or \$2,0			6		635.		
		f zero, stop ; you can't		1			7		635
		1040, 1040-SR, or 10		8		32,891.			
Enter the appl	icable decimal	amount from the table	e below.						
If line 8 is— And your filing status is—									
	But not	Married	Head of	Single, Marr	ied filin	g			
Over—	over—	filing jointly	household	separate					
		Enter on		Qualifying survi		ouse			
	\$20,500	0.5	0.5	0.5					
\$20,500	\$22,000	0.5	0.5	0.2					
\$22,000	\$30,750	0.5	0.5	0.1			9	Х	.1
\$30,750	\$33,000	0.5	0.2	0.1					
\$33,000	\$34,000	0.5	0.1	0.1					
\$34,000	\$41,000	0.5	0.1	0.0					
\$41,000	\$44,000	0.2	0.1	0.0					
\$44,000	\$51,000	0.1	0.1	0.0					
\$51,000	\$68,000	0.1	0.0	0.0					
\$68,000		0.0	0.0	0.0					
	Note:	f line 9 is zero, stop ; y	ou can't take this cre	edit.					
Multiply line 7							10		64
. ,	,	ity. Enter the amount			he inst	tructions	11		2,186
Credit for qu								_	,

^{*} See Pub. 590-A for the amount to enter if you claim any exclusion or deduction for foreign earned income, foreign housing, or income from Puerto Rico or for bona fide residents of American Samoa.

64.

and on Schedule 3 (Form 1040), line 4

40201 1555

Utah State Tax Commission

Utah Individual Income Tax Return

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

· Amended Return - enter code:

(see instructions)

2022 TC-40

INTUIT

Your Social Security No. 030942180 Spouse's Soc. Sec. No.

Your first name

SIVA PRIYADARSHIN Spouse's first name

Your last name BOMMAREDDY Spouse's last name

Full-yr Resident? Y/N Υ

If deceased, complete page 3, Part 1

Address 343 S 500 E, #539

SALT LAKE CITY

b

С

State ZIP+4 84102 UT

Telephone number 510-570-7265 Foreign country (if not U.S.)

1	Filina	Status	- enter	code

- 1 = Single
- 2 = Married filing jointly
 - 3 = Married filing separately
 - 4 = Head of household
 - E = Ouglifying widow(or)

Qualifying Dependents • 2

- Dependents age 16 and under а
 - Other dependents
 - O Total (add lines a and b)

3 Election Campaign Fund

Does not increase your tax or reduce your refund.

Enter the code for the party of your choice.

Yourself

See instructions for

anda lattara ar an ta incometav utah anvioleet

5 = Qualifying widow(er) Dependents must be claimed for the			code letters or go	to inco	metax.utah.gov/elect
If using code 2 or 3, enter spouse's name and SSN above	credit on your federal return. See in	nstructions.	If no contribution, e	enter N.	
4 Federal adjusted gross income from federal	al return			• 4	32891
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	32891
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 s	um of lines 7 and 8 from line 6			• 9	32891
10 Utah tax - multiply line 9 by 4.85% (.0485)	(not less than zero)			• 10	1595
11 Utah personal exemption (multiply line 2c b	y \$1,802)	• 11	0		
12 Federal standard or itemized deductions		• 12	12950		Electronic filing squick, easy and
13 Add line 11 and line 12		13	12950	spe	free, and will eed up your refund.
14 State income tax included in federal itemiz	ed deductions	• 14			To learn more,
15 Subtract line 14 from line 13		15	12950		tap.utah.gov
16 Initial credit before phase-out - multiply line	e 15 by 6% (.06)	• 16	777		
17 Enter: \$15,548 (if single or married filing s of household); or \$31,096 (if marrie		• 17	15548		•
18 Income subject to phase-out - subtract line		18	17343		

• 19

21 If you are a qualified exempt taxpayer, enter "X" (complete worksheet in instr.) 22 Utah income tax - subtract line 20 from line 10 (not less than zero)

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

19 Phase-out amount - multiply line 18 by 1.3% (.013)

• 22

• 20

225

1043

552

402	Utah Individual Income Tax Return (continued) 0202 SSN 030942180 Last name BOMMARED	інтиіт DY	TC-40 2022	Pg. 2
23	23 Enter tax from TC-40, page 1, line 22		23	1043
24	24 Apportionable nonrefundable credits from TC-40A, Part 3 (attach TC-40A, page 1)		• 24	
	 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	1043
	Nonapportionable nonrefundable credits from TC-40A, Part 4 (attach TC-40A, page	: 1)	• 26	
27	27 Subtract line 26 from line 25 (not less than zero)		27	1043
28	Voluntary contributions from TC-40, page 3, Part 4 (attach TC-40, page 3)		• 28	
29	29 AMENDED RETURN ONLY - previous refund		• 29	
30	Recapture of low-income housing credit		• 30	
31	31 Utah use tax		• 31	
32	Total tax, use tax and additions to tax (add lines 27 through 31)		32	1043
33	Utah income tax withheld shown on TC-40W, Part 1 (attach TC-40W, page 1)		• 33	1628
34	34 Credit for Utah income taxes prepaid from TC-546 and 2021 refund applied to 2022		• 34	
35	Pass-through entity withholding tax shown on TC-40W, Part 3 (attach TC-40W, pag	e 2)	• 35	
36	Mineral production withholding tax shown on TC-40W, Part 2 (attach TC-40W, page	2)	• 36	
37	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	1628
	TAX DUE - subtract line 39 from line 32 (not less than zero)		• 40	
		41	• 42	
43	43 REFUND - subtract line 32 from line 39 (not less than zero)		• 43	585
44	14 Voluntary subtractions from refund (not greater than line 43)		• 44	
	Enter the total from page 3, Part 5			
	 DIRECT DEPOSIT YOUR REMAINING REFUND - provide account information (se Routing number 122100024 • Account number 7923970 	=	counts) c	hecking savings X
Unde	Inder penalties of perjury, I declare to the best of my knowledge and belief, this return and accompa	nying schedules are true, correc	ct and complete.	
	SIGN Your signature Date Spouse's s	ignature (if filing jointly)		Date
	Third Party Name of designee (if any) you authorize to discuss this return	Designee's telephone number	Designee PIN	
Des	Designee			
1	Preparer's signature Date	Preparer's telephone number	Preparer's PTIN	D00000000000
	Paid SYAM PRIYA RAM SAGAR G 02/21/23 Preparer's Firm's name CIORAL TAYES LLC	6789659522	Preparer's EINI	P02082703
	Preparer's Firm's name GLOBAL TAXES LLC Section and address 245 ROONEY CT		Preparer's EIN	843171965
		J 08816		

40209 SSN 030-94-2180

6

7

Last name BOMMAREDDY

Line Explanations **IMPORTANT** 1 Employer/payer ID number from W-2 box "b" or 1099 Do not send your W-2s or 1099s with your return. Instead enter 2 Utah withholding ID number from W-2 box "15" or 1099 W-2 or 1099 information below, but only if there is Utah withholding (14 characters, ending in WTH, no hyphens) on the form. 3 Employer/payer name and address from W-2 box "c" or 1099 4 Enter "X" if reporting Utah withholding from form 1099 Use additional forms TC-40W if you have more than four W-2s and/or Employee's Social Security number from W-2 box "a" or 1099 1099s with Utah withholding tax. Utah wages or income from W-2 box "16" or 1099 7 Utah withholding tax from W-2 box "17" or 1099 Enter mineral production withholding from TC-675R in Part 2 of TC-40W; enter pass-through entity withholding in Part 3 of TC-40W. First W-2 or 1099 Second W-2 or 1099 1 135108880 12249890004WTH (14 characters, no hyphens) 2 (14 characters, no hyphens) 3 GOLDMAN SACHS & CO LLC 30 HUDSON STREET 4TH FLOOR JERSEY CITY NJ07302 4 4 5 030942180 6 32891. 7 1628. 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

Enter total Utah withholding tax from all lines 7 here and on TC-40, page 2, line 33: 1628.

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.

6

7