Internal Revenue Service

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

IRS e-file Signature Authorization

Submission Identification Number (SID)

Taxpay	er's name	Social security n	umber
MOH	AMED ASAD SHEIKH	059-06-63	362
Spouse	's name	Spouse's social s	ecurity number
Part	Tax Return Information – Tax Year Ending December 31, 2023 (Enter	year you are	authorizing.)
Enter	whole dollars only on lines 1 through 5.		
Note:	Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.		
1	Adjusted gross income		50,160.
2	Total tax		2 5,793.
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		9 ,125.
4	Amount you want refunded to you	4	4 3,332.
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 periury. 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

				EBO firm name	. .	Ēr
X	l authorize	GLOBAL	TAXES	LLC	to enter or generate my PIN	
						10

6	6	3	6	2	as my
Ent don	ao mj				

signature on the income tax return (original or amended) I am now authorizing.

I will enter my PIN as my signature on the income tax return (original or amended) I am now authorizing. Check this box only if you are entering your own PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Your signature

Date

Spouse's PIN: check one box only

I authorize

to enter or generate my PIN

		as my
er fiv n't er		

ERO firm name signature on the income tax return (original or amended) I am now authorizing.

I will enter my PIN as my signature on the income tax return (original or amended) I am now authorizing. Check this box only if you are entering your own PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Spouse's signature	Date					 			
Practitioner PIN Method Returns Only—continu	e bel	ow							
Part III Certification and Authentication – Practitioner PIN Method Only									
ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN.	2	2	2		6 nter a		2	7 1	

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.

RO's signature ► Date ►									
ERO Must Retain This Don't Submit This Form to th									
For Paperwork Reduction Act Notice, see your tax return instruction	IS. BAA	REV 02/23/24 PRO	Form 8879 (Rev. 01-2021)						

1040		artment of the Treasury–Internal Revenue Servi S. Individual Income Tax		turn	202	3	OMB No. 1545-	-0074	IRS Use	Only—I	Do not w	rite or stap	le in this space.
For the year Jar	n. 1–Dec	c. 31, 2023, or other tax year beginning			, 2023, end	ing			, 20		See sep	parate in	structions.
Your first name	and m	iddle initial	Last r	name						Y	our so	cial secu	rity number
MOHAMED	ASA	D	SHE	IKH							059	06	6362
		s first name and middle initial	Last r										ecurity number
Home address	(numbe	er and street). If you have a P.O. box, see	instruc	ctions.				A	pt. no.	F	Preside	ntial Elec	tion Campaig
4351 S S	SUNN	Y RIVER ROAD						0	322	0	Check h	ere if yo	u, or your
		ce. If you have a foreign address, also co	mplete	spaces be	low.	Sta	ite	ZIP co					bintly, want \$3
TAYLORS	/ILLI	Ε				UI	C I	841	23		•		d. Checking a ot change
Foreign country	y name			Foreign p	rovince/state/o	count	ty	Foreig	n postal co			or refun	
												🗌 You	I Spous
Filing Status	; 🛛	Single					Head of ho	ouseho	old (HOF	I)			
Check only] Married filing jointly (even if only or	ne hac	d income)									
one box.] Married filing separately (MFS)					Qualifying	surviv	ing spou	se (Q	SS)		
	-	ou checked the MFS box, enter the		-	pouse. If you	ı che	ecked the HOH	l or QS	SS box, e	enter 1	the chi	ld's nam	ne if the
	qu	alifying person is a child but not you	r depe	endent:									
Digital	Atar	ny time during 2023, did you: (a) rece	eive (a	s a reward	d award or	navr	ment for prope	tv or s	services)	· or (h) sell		
Assets		hange, or otherwise dispose of a digi						-					s 🛛 No
Standard		eone can claim: You as a de					a dependent						
Deduction		Spouse itemizes on a separate retur	n or yo				•						
Age/Blindnes	s You	: Were born before January 2, 1	959	Are b	lind Spo	ouse	: 🗌 Was bor	n befo	re Janua	rv 2.	1959	ls I	blind
Dependent	-			<u> </u>	Social security		(3) Relationshi	14					ee instructions
•		irst name Last name		(2)	number to you Child tax c			ax cred	dit	Credit for	other dependent		
lf more than four									Γ				\Box
dependents,													
see instruction and check	s —												
here]												
Income	1a	Total amount from Form(s) W-2, be	ox 1 (s	see instruc	ctions)						1a		41,098.
	b	Household employee wages not re	eporte	d on Form	n(s) W-2						1b		
Attach Form(s) W-2 here. Also	с	Tip income not reported on line 1a	(see i	nstructior	ns)						1c		
attach Forms	d	Medicaid waiver payments not rep	orted	on Form(s	s) W-2 (see ir	nstru	uctions)				1d		
W-2G and 1099-R if tax	е	Taxable dependent care benefits f	rom F	orm 2441	, line 26 .						1e		
was withheld.	f	Employer-provided adoption bene	fits fro	m Form 8	8839, line 29						1f		
If you did not	g	Wages from Form 8919, line 6 .									1g		
get a Form W-2, see	h	Other earned income (see instructi	ons)					· ·			1h		0.
instructions.	i	Nontaxable combat pay election (s	see ins	structions)			1 i						
	z	Add lines 1a through 1h	• ;								1z	_	41,098.
Attach Sch. B	2a	' –	2a				axable interest		• •		2b	-	
if required.	3a		3a				Ordinary divider				3b		
Standard	4a	-	4a				axable amount				4b		10 540
Deduction for –	5a		5a				axable amount				5b		16,540.
 Single or Married filing 	6a	, _	6a				axable amount	t	• •	· .	6b		
separately,	c	If you elect to use the lump-sum el						• •	• •	· 님	_		
\$13,850Married filing	7	Capital gain or (loss). Attach Sched		•	•		-	• •		. Ц	7		7 470
jointly or Qualifying	8	Additional income from Schedule						• •	• •		8		-7,478.
surviving spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7,		-				• •	• •		9		50,160.
\$27,700 • Head of	10	Adjustments to income from Sche						• •			10		F0 1 CC
household, \$20,800	11	Subtract line 10 from line 9. This is	-					• •	• •	• •	11		<u>50,160.</u>
 If you checked 	12	Standard deduction or itemized						• •	• •		12	-	13,850.
any box under Standard	13 14	Qualified business income deducti	on tro	m Form 8	ອອວ or ⊢orm	899	ъ-А	• •	• •		13		12 050
Deduction, see instructions.	14 15	Add lines 12 and 13 Subtract line 14 from line 11. If zer	 0.01/2	· · ·		 	 tavabla incom	· ·	• •		14		13,850. 36,310.
	10			55, enter	-o mis is y			σ.	• •	• •	15		30,310.

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

Form **1040** (2023)

Form 1040 (2023	3)								Page 2
Tax and	16	Tax (see instructions). Check	if any from Form	(s): 1 🗌 881	4 2 4972	3 🗌		16	4,139.
Credits	17	Amount from Schedule 2, lin	e3					17	
	18	Add lines 16 and 17						18	4,139.
	19	Child tax credit or credit for	other dependent	ts from Sched	ule 8812			19	
	20	Amount from Schedule 3, lin	ie8					20	
	21	Add lines 19 and 20						21	
	22	Subtract line 21 from line 18	. If zero or less,	enter -0				22	4,139.
	23	Other taxes, including self-e	mployment tax,	from Schedule	e 2, line 21 .			23	1,654.
	24	Add lines 22 and 23. This is	your total tax					24	5,793.
Payments	25	Federal income tax withheld	from:						
	а	Form(s) W-2				25a 5	, 817.		
	b	Form(s) 1099				25b	3,308.		
	с	Other forms (see instructions	s)			25c			
	d	Add lines 25a through 25c						25d	9,125.
If you have a	26	2023 estimated tax payment	ts and amount a	pplied from 20)22 return			26	
qualifying child,	27	Earned income credit (EIC)			No	27			
attach Sch. EIC.	28	Additional child tax credit from	n Schedule 8812			28			
	29	American opportunity credit	from Form 8863	8, line 8		29			
	30	Reserved for future use .				30			
	31	Amount from Schedule 3, lin	ie 15			31			
	32	Add lines 27, 28, 29, and 31	. These are your	total other pa	ayments and ref	undable credits		32	
	33	Add lines 25d, 26, and 32. T	hese are your to	tal payments				33	9,125.
Refund	34	If line 33 is more than line 24	1, subtract line 24	4 from line 33.	This is the amou	nt you overpaid		34	3,332.
	35a	Amount of line 34 you want	refunded to you	I. If Form 8888	3 is attached, che	ck here		35a	3,332.
Direct deposit?	b	Routing number 3 2 4			c Type: 🛛 🗙	Checking	Savings		
See instructions.	d	Account number 3 4 3	8 4 7 0	5 0 0					
	36	Amount of line 34 you want a	applied to your :	2024 estimate	edtax	36			
Amount	37	Subtract line 33 from line 24	. This is the amo	ount you owe					
You Owe		For details on how to pay, g	o to <i>www.irs.gov</i>	//Payments or	see instructions			37	
	38	Estimated tax penalty (see in	nstructions) .			38			
Third Party	Do	you want to allow another	person to disc	cuss this retu	rn with the IRS?	See			_
Designee	ins	tructions				🗌 Yes. C	omplete b	elow.	× No
	De nai	signee's		Phone no.			onal identifi ber (PIN)	cation	
Ciarra		der penalties of perjury, I declare tl	nat I have examined		accompanying sche		. ,	e hest	of my knowledge and
Sign		ief, they are true, correct, and com							
Here	Yo	ur signature		Date	Your occupation		If the	IRS ser	nt you an Identity
							Prote	ction P	IN, enter it here
Joint return?					EMPLOYEE		(see ii	ıst.)	
See instructions. Keep a copy for	Sp	ouse's signature. If a joint return, I	ooth must sign.	Date	Spouse's occupat	ion			nt your spouse an
your records.							(see ii		ection PIN, enter it here
	Dh	20000 (001) 220 000	0	Email addross			,		
		one no. (801) 230-899 parer's name	9 Preparer's signat	Email address	ASADATTTT	DE@GMAIL.CO	PTIN		Check if:
Paid		PRIYA RAM SAGAR GUPTA TALLAM					P02082	507	Self-employed
Preparer				NAM SAGAK	GUFIA IALLAM	03/03/2024			
Use Only		m's name GLOBAL TAX	Y CT E BRU	NOMITOR N	J 08816				(678) 965-9522
Co to user in a				NOWICK N			Firm's		84-3171965 Form 1040 (2023)
GO LO WWW.Irs.go	JVIFOM	n1040 for instructions and the late	sumormation.		BAA	REV 02/23/24 PRO			Form 1040 (2023)

SCHEDULE	1
(Form 1040)	

Department of the Treasury

Additional Income and Adjustments to Income

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

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

OMB No. 1545-0074 2023

Attachment Sequence No. **01** Internal Revenue Service Name(s) shown on Form 1040, 1040-SR, or 1040-NR Your social security number MOHAMED ASAD SHEIKH 059-06-6362

1 Taxable refunds, credits, or offsets of state and local income taxes 1 2a Alimony received 2a b Date of original divorce or separation agreement (see instructions): 2a 3 Business income or (loss). Attach Schedule C 3 4 Other gains or (losses). Attach Form 4797 4 5 Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E 5	0.
 b Date of original divorce or separation agreement (see instructions): 3 Business income or (loss). Attach Schedule C	178.
3 Business income or (loss). Attach Schedule C 3 4 Other gains or (losses). Attach Form 4797 4	178.
3 Business income or (loss). Attach Schedule C 3 4 Other gains or (losses). Attach Form 4797 4	178.
4 Other gains or (losses). Attach Form 4797	178.
5 Bental real estate royalties partnerships S corporations trusts etc. Attach Schedule F 5 -7.	178.
6 Farm income or (loss). Attach Schedule F.	
7 Unemployment compensation	
8 Other income:	
a Net operating loss	
b Gambling	
c Cancellation of debt	
d Foreign earned income exclusion from Form 2555 8d ()	
e Income from Form 8853	
f Income from Form 8889	
g Alaska Permanent Fund dividends	
h Jury duty pay	
i Prizes and awards	
j Activity not engaged in for profit income	
k Stock options	
I Income from the rental of personal property if you engaged in the rental	
for profit but were not in the business of renting such property 81	
m Olympic and Paralympic medals and USOC prize money (see	
instructions)	
n Section 951(a) inclusion (see instructions)	
o Section 951A(a) inclusion (see instructions)	
p Section 461(I) excess business loss adjustment	
q Taxable distributions from an ABLE account (see instructions) 8q	
r Scholarship and fellowship grants not reported on Form W-2 8r	
s Nontaxable amount of Medicaid waiver payments included on Form	
1040, line 1a or 1d	
t Pension or annuity from a nonqualifed deferred compensation plan or	
a nongovernmental section 457 plan	
u Wages earned while incarcerated	
z Other income. List type and amount:	
2 Tatal athening and a defined to the work to	
9 Total other income. Add lines 8a through 8z	
10Combine lines 1 through 7 and 9. This is your additional income. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 810-7,	178.
1040, 1040-SR, or 1040-NR, line 8 10 -7, For Paperwork Reduction Act Notice, see your tax return instructions. Schedule 1 (Form 10	

1	Educator expenses					11	
2	Certain business expenses of reservists, performing artists, and fee				+		
2	officials. Attach Form 2106	-Dasis	s go	vennn	ent	12	
3	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						19a	
b	Recipient's SSN						
C	Date of original divorce or separation agreement (see instructions):						
20						20	
21	Student loan interest deduction					21	
22	Reserved for future use					22	
23	Archer MSA deduction	• •	• •	• •	·	23	
24	Other adjustments:						
а		24a					
b	Deductible expenses related to income reported on line 8I from the						
		24b					
С	Nontaxable amount of the value of Olympic and Paralympic medals						
		24c					
d	Reforestation amortization and expenses	24d					
е	Repayment of supplemental unemployment benefits under the Trade						
	Act of 1974	24e					
f	Contributions to section 501(c)(18)(D) pension plans	24f					
g		24g					
ĥ	Attorney fees and court costs for actions involving certain unlawful						
		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					
i	Housing deduction from Form 2555	24i					
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form	,					
		24k					
z	Other adjustments. List type and amount:						
~		24z					
25	Total other adjustments. Add lines 24a through 24z					25	
25 26	Add lines 11 through 23 and 25. These are your adjustments to income					23	
.0	Form 1040, 1040-SR, or 1040-NR, line 10					26	
		• •	• •	• •	•	-	1 (Form 10

SCHEDULE 2 (Form 1040)

Additional Taxes

OMB No. 1545-0074

(Forr	n 1040)	Additional Taxos		$ \mathcal{O} \cap \mathcal{O} \mathcal{O} $
	ment of the Treasury Revenue Service	Attach to Form 1040, 1040-SR, or 1040-NR. Go to <i>www.irs.gov/Form1040</i> for instructions and the latest information.		Attachment Sequence No. 02
	()			al security number
	_	SHEIKH	059-06	-6362
Pa	rt Tax			
1	Alternative r	ninimum tax. Attach Form 6251		1
2	Excess adv	ance premium tax credit repayment. Attach Form 8962		2
3	Add lines 1	and 2. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 17		3
Par	t I Other	Taxes		
4	Self-employ	ment tax. Attach Schedule SE		4
5	Social secu Attach Form	rity and Medicare tax on unreported tip income.		
6	Uncollected Form 8919	social security and Medicare tax on wages. Attach		
7	Total addition	onal social security and Medicare tax. Add lines 5 and 6		7
8	Additional ta	ax on IRAs or other tax-favored accounts. Attach Form 5329 if requi	ired.	
	If not require	ed, check here	×	8 1,654.
9	Household	employment taxes. Attach Schedule H		9
10	Repayment	of first-time homebuyer credit. Attach Form 5405 if required	1	0
11	Additional N	Nedicare Tax. Attach Form 8959	1	1
12	Net investm	ent income tax. Attach Form 8960	1	2
13		l social security and Medicare or RRTA tax on tips or group-tern om Form W-2, box 12..................		3
14		tax due on installment income from the sale of certain residential ares		4
15		he deferred tax on gain from certain installment sales with a sales p		5
16	Recapture of	of low-income housing credit. Attach Form 8611	1	6

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

(continued on page 2)

Schedule 2 (Form 1040) 2023

Par	t II Other Taxes (continued)			
17	Other additional taxes:			
а	Recapture of other credits. List type, form number, and amount:			
		17a		
b	Recapture of federal mortgage subsidy, if you sold your home			
		17b	-	
	Additional tax on HSA distributions. Attach Form 8889	17c	-	
d	Additional tax on an HSA because you didn't remain an eligible individual. Attach Form 8889	17d		
е	Additional tax on Archer MSA distributions. Attach Form 8853 .	17e		
f	Additional tax on Medicare Advantage MSA distributions. Attach Form 8853	17f		
g	Recapture of a charitable contribution deduction related to a fractional interest in tangible personal property	17g		
h	Income you received from a nonqualified deferred compensation plan that fails to meet the requirements of section 409A	17h		
i	Compensation you received from a nonqualified deferred compensation plan described in section 457A	17i		
j	Section 72(m)(5) excess benefits tax	17j		
k	Golden parachute payments	17k		
I	Tax on accumulation distribution of trusts	171		
m	Excise tax on insider stock compensation from an expatriated corporation	17m		
n	Look-back interest under section 167(g) or 460(b) from Form 8697 or 8866	17n		
0	Tax on non-effectively connected income for any part of the year you were a nonresident alien from Form 1040-NR	170		
р	Any interest from Form 8621, line 16f, relating to distributions from, and dispositions of, stock of a section 1291 fund	17p		
q	Any interest from Form 8621, line 24	17q		
z	Any other taxes. List type and amount:			
		17z		
18	Total additional taxes. Add lines 17a through 17z		18	
19	Reserved for future use		19	
20	Section 965 net tax liability installment from Form 965-A	20		
21	Add lines 4, 7 through 16, and 18. These are your total other tax on Form 1040 or 1040-SR, line 23, or Form 1040-NR, line 23b.		21	1,654.
	BAA			ule 2 (Form 1040) 2023

SCHEDULE	Ε
(Form 1040)	

Supplemental Income and Loss

OMB No. 1545-0074

(From rental real estate, royalties, partnerships, S corporations, estates, trusts, REMICs, etc.)

Department of the Treasury

Attach to Form 1040, 1040-SR, 1040-NR, or 1041.

2023
Attachment Sequence No. 13

Internal	Revenue Service		Go to www.irs.gov/ScheduleE fo	or instr	uctions a	nd the la	test inf	ormation.		Sec	quence	No. 1	3
Name(s) shown on return								Your soci	al secu	irity nu	mber	
MOHA	MED ASAD	H						059-0	6-63	62			
Part	Income	or Los	s From Rental Real Estate a	nd Ro	valties								
	Note: If y	ou are in [.]	the business of renting personal prope	erty, use	Schedu	le C. See	instruc	tions. If you	are an indi [,]	vidual,	repor	t farm	ו
			ss from Form 4835 on page 2, line 40								1		
			ents in 2023 that would require you										
B	f "Yes," did you	u or will y	ou file required Form(s) 1099?							. 🗆	Yes		No
1a	Physical add	ress of e	each property (street, city, state, Z	IP cod	e)								
Α	PATEL TOWER 1	8TH FLOOP	r 180 3d-wing (next to samudra ca	FE NAG	PADA JUNC	TTON) MU	MBAT CI	ENTRAL NAGP	ADA MAHARS	STRA M	UMBAT	TN 4	00008
B		0111 12001				1101() 110							00000
C													
1b	Type of Prope	ortu 0	For each rental real estate pres	orth (lio	tod		Fai	r Rental	Dereer				
1D	(from list belo		For each rental real estate prop above, report the number of fair				-	Days	Personal Use Days			QJ	JV
•	`	(**)	personal use days. Check the G					-		-	\rightarrow		
<u>A</u>	3		if you meet the requirements to			A		365		0			
<u>B</u>			qualified joint venture. See instr			B					\rightarrow		
С						С							
	of Property:												
	Single Family F			ntal	5 Lan			Self-Rental					
2	Multi-Family Re	esidence	4 Commercial		6 Roy	alties	8 (Other (desc	ribe)				
								Propert					
Incom	יפי					Α		B			C		
3		Ч		3			80.					-	
4				4			00.						
		iveu .											
Exper				-									
5				5						<u> </u>			
6			structions)	6						<u> </u>			
7			ance	7		6	20.			L			
8	Commissions			8									
9	Insurance .			9									
10	Legal and oth	er profes	ssional fees	10									
11	Management	fees .		11		1,0	59.						
12	Mortgage inte	rest paid	to banks, etc. (see instructions)	12									
13	Other interest			13									
14				14		2,1	50.						
15				15		3,1	00.						
16	T			16		,							
17				17		1,0	29.						
18			or depletion	18		-/ 0							
19	Other (list)			19						<u> </u>			
20			nes 5 through 19	20		7,9	58			<u> </u>			
	•		•	-		· , 9							
21			ine 3 (rents) and/or 4 (royalties). If nstructions to find out if you must										
	· ·					-7,4	78						
00				21		· / / 4	,			<u> </u>			
22			estate loss after limitation, if any,		((
		-	structions)	22	(/,4'/	8.)()	()
23a			ported on line 3 for all rental prop			• •	23a		480.				
b			ported on line 4 for all royalty pro	•		• •	23b						
С			ported on line 12 for all properties				23c						
d			ported on line 18 for all properties				23d						
е			ported on line 20 for all properties				23e		7 , 958.				
24			amounts shown on line 21. Do no						. 24				
25	Losses. Add re	oyalty los	ses from line 21 and rental real esta	te loss	es from li	ne 22. Er	nter tot	al losses he	re 25	(7,47	/8.)
00	Total wants!		• • • • • • • • • • • • • • • • • • •	Comela		01		مطلح برميل					

Total rental real estate and royalty income or (loss). Combine lines 24 and 25. Enter the result here. If Parts II, III, and IV, and line 40 on page 2 do not apply to you, also enter this amount on Schedule 1 (Form 1040), line 5. Otherwise, include this amount in the total on line 41 on page 2.
 For Paperwork Reduction Act Notice, see the separate instructions. NPA -7, 478.

Use of Payment Coupon

If you have a tax due balance on your Utah individual income tax return and you have previously filed your return (either electronically or by paper) without a payment, include the payment coupon below with your check or money order to insure proper credit to your account. Do not mail another copy of your income tax return with this payment. Sending a duplicate of your return may delay posting of the payment.

If you are sending a payment with your paper Utah individual income tax return, include the payment coupon below with your check or money order, to insure proper credit to your account.

Do not use this return payment coupon to prepay future individual income taxes. Use form TC-546.

Electronic Payment

You may pay your tax online at tap.utah.gov.

How to Prepare the Payment

Make your check or money order payable to the Utah State Tax Commission. Do not send cash. The Tax Commission does not assume liability for loss of cash placed in the mail.

Print your name and address, daytime telephone number and the year the payment is for on your check or money order.

Sending Payment Coupon

If sending this payment coupon separate from your individual income tax return, do NOT mail another copy of your return with this payment.

Complete and detach the payment coupon below.

Do not attach (staple, paper clip, etc.) the check or money order to the payment coupon.

Send the payment coupon and payment to:

Utah State Tax Commission 210 N 1950 W Salt Lake City, UT 84134-0266

dividual Income Tax	Mail to: Utah State Tax Commission, 210 N 1950 W, SLC U	г 84134-0	266 Rev. 12/1
eturn Payment Coupon	Primary taxpayer name MOHAMED ASAD SHEIKH		ecurity no.
Tax year ending		_	
2023	Secondary taxpayer name	Social Se	ecurity no.
USTC Use Only			
	Address 4351 S SUNNY RIVER ROAD , APT 0322		
	City TAYLORSVILLE	State UT	ZIP code 84123
	Payment amount enclosed	\$	24 00

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Make check or money order payable to the Utah State Tax Commission. Do not send cash. Do not staple check to coupon. Detach check stub.

40301 1555		Utah Indiv All state ind children	come tax doll and individu	come Tax R ars support educa als with disabilitie	tion, s.	2023 TC-40
USTC ORIGINAL FORM		• Ame	ended Return - e	enter code: (see instructions)	Full-yr Resident?
Your Social Security No. 059066362 Spouse's Soc. Sec. No.	Your first name MOHAMED ASAD Spouse's first name	Your last name SHEIKH Spouse's last nam	e			Y/N Y
If deceased, complete page 3, Part 1	Address 4351 S SUNNY City TAYLORSVILLE	RIVER ROAD , A State UT	PT 0322 _{ZIP+4} 84123		number 230 – 89999 untry (if not U.S.)	
 Filing Status - enter of 1 = Single 1 2 = Married filing 3 = Married filing 4 = Head of hou 5 = Qualifying sulfusing code 2 or 3, enter spouse 	g jointly b g separately c usehold d urviving spouse	ualifying Dependents Dependents age 16 and Other dependents Dependents born in 202 () Total (add lines a, b and nstructions.	3	Enter the code fo party of your choi See instruction	ase your tax or red r the Yours ice. • s for go to incometa	
1 Endered adjusted area	a income from federal rature				• 4	F0160
4 Federal adjusted gros	s income from federal return				• 4	50160
5 Additions to income fr	rom TC-40A, Part 1 (attach T	C-40A, page 1)			• 5	
6 Total income - add line	e 4 and line 5				6	50160
7 State tax refund inclu	ded on federal form 1040, So	chedule 1, line 1 (if any)			• 7	0
8 Subtractions from inco	ome from TC-40A, Part 2 (at	tach TC-40A, page 1)			• 8	
9 Utah taxable income	e/loss - subtract the sum of li	ines 7 and 8 from line 6			• 9	50160
10 Utah tax - multiply lin	e 9 by 4.65% (.0465) (not les	ss than zero)			• 10	2332
11 Utah personal exempt	ion (multiply line 2d by \$1,94	1)	• 11	0		
12 Federal standard or it	emized deductions		• 12	13850	is qui	ronic filing ck, easy and
13 Add line 11 and line 1	2		13	13850		e, and will p your refund.
14 State income tax inclu	uded in federal itemized dedu	uctions	• 14			arn more,
15 Subtract line 14 from	line 13		15	13850	tap	go to .utah.gov
16 Initial credit before ph	ase-out - multiply line 15 by	6% (.06)	• 16	831		I
	e or married filing separately		• 17	16742		•
	\$33,484 (married filing jointly ase-out - subtract line 17 from	y or qualifying surviving spou n line 9 (not less than zero)	se) 18	33418		
19 Phase-out amount - n	nultiply line 18 by 1.3% (.013)	• 19	434		
20 Taxpayer tax credit - s	subtract line 19 from line 16 ((not less than zero)			• 20	397
21 If you are a qualified e	exempt taxpayer, enter "X" (c	complete worksheet in instr.)	• 21	-		
22 Utah income tax - su REV 11/30/23 PRO	ıbtract line 20 from line 10 (n	ot less than zero)		•	• 22	1935

403	302	Utal SSN	n Individual Income Ta 059066362	AX Return (continued) Last name SHEIKH	INTUIT	TC-4 2023	D Pg. 2	2
23	Enter ta	ax from	TC-40, page 1, line 22	•		23	1935)
24	Apportio	onable	nonrefundable credits from TC-	40A, Part 3 (attach TC-40A, page 1)		• 24		
25	-		ent, subtract line 24 from line 23	3 (not less than zero) r the UTAH TAX from TC-40B, line 41		• 25	1935)
26			•	TC-40A, Part 4 (attach TC-40A, page 1)		• 26		
27	Subtrac	t line 2	6 from line 25 (not less than ze	ro)		27	1935	1
28	Volunta	ry con	ributions from TC-40, page 3, P	Part 4 (attach TC-40, page 3)		• 28		
29	AMEND	DED RI	ETURN ONLY - previous refund			• 29		
30	Recapti	ure of I	ow-income housing credit			• 30		
31	Utah us	e tax				• 31		
32	Total ta	ix, use	tax and additions to tax (add	lines 27 through 31)		32	1935	I
33			ng - If you have mineral produc e 3, Part 5. If not, enter on line 3	tion withholding or pass-through entity withholding, 33 the total of TC-40W, Part 1.		• 33	1911	
34	Credit fo	or Utał	n income taxes prepaid from TC	-546 and 2022 refund applied to 2023		• 34		
35	AMEND	DED RI	ETURN ONLY - previous payme	ents		• 35		
36	Nonapp	ortiona	able refundable credits from TC-	-40A, Part 5 (attach TC-40A, page 2)		• 36		
37	Apportio	onable	refundable credits from TC-40A	A, Part 6, line c (attach TC-40A, page 2)		• 37		
38	Total wi	thholdi	ng and refundable credits - add	lines 33 through 37		38	1911	
39	TAX DU	JE - su	btract line 38 from line 32 (not le	ess than zero)		• 39	24	:
40	Penalty	and in	terest (see instructions)			40		
41	TOTAL	DUE -	PAY THIS AMOUNT - add line	39 and line 40		• 41	24	:
42	REFUN	D - su	otract line 32 from line 38 (not le	ess than zero)		• 42		
43		•	ractions from refund (not greate from page 3, Part 6	er than line 42)		• 43		
44	• Routi			our account information (see instructions for foreign a Account number	accounts) Type	checking	savings foreigr	n

Under penalti	es of perjury, I decla	re to the best of my knowledge and	belief, this return a	nd accompa	inying schedules are true, correc	t and complete.	
SIGN Your signature Date Spous				Spouse's signature (if filing jointly)			Date
HERE							
Third Party	Name of designee	(if any) you authorize to discuss this	s return		Designee's telephone number	Designee PIN	
Designee						•	
	Preparer's signatu	re	Date		Preparer's telephone number	Preparer's PTIN	
Paid	SYAM PR	IYA RAM SAGAR G	03/05/2	4	6789659522	•	P02082703
Preparer's	Firm's name	GLOBAL TAXES I	LC			Preparer's EIN	
Section	and address	245 ROONEY CT				•	843171965
		E BRUNSWICK		Ν	J 08816		

Attach page 3 if you: are filing for a deceased taxpayer, are filing a fiscal year return, filed IRS form 8886, are making contributions, want to deposit into a my529 account, want to apply all/part of your refund to next year's taxes, have mineral production or pass-through entity withholding, or no longer qualify for a homeowner's exemption. REV 11/30/23 PRO

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1911

Pg. 1

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 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
 462283648 13856858003WTH (14 characters, no hyphens) 	2 (14 characters, no hyphens)
 ³ JUSTWORKS EMPLOYMENT GROUP LLC PO BOX 7119 CHURCH STREET STATION 	3
NEW YORK NY10008	
4	4
5 059066362	5
6 41098	6
7 1911	7
Third W-2 or 1099 1	Fourth W-2 or 1099 1
2 (14 characters, no hyphens)	2 (14 characters, no hyphens)
3	3
4	4
5	5
6	6
7	7

Total Utah withholding tax from all lines 7:

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

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.

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