Form **8879**

(Rev. January 2021)

Department of the Treasury Internal Revenue Service

IRS e-file Signature Authorization

▶ ERO must obtain and retain completed Form 8879.

▶ Go to www.irs.gov/Form8879 for the latest information.

OMB No. 1545-0074

	1				
Submi	ssion Identification Number (SID)				
Taxpaye	or's name	Social secur	ity numl	ber	
ABH	ISHEK ANNEY	402-87	-560	6	
Spouse'	s name	Spouse's so			
Part	Tax Return Information — Tax Year Ending December 31, 2023 (Enter	Vear Voll (ara au	thorizina	<u> </u>
	whole dollars only on lines 1 through 5.	year you a	ale au	illolizillg.)
	Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.				
1	Adjusted gross income		1	90	,630.
2	Total tax		2		,198.
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3		,250.
4	Amount you want refunded to you		4		,052.
5	Amount you owe		5		
Part		еер а сор	y of y	our retu	rn)
my know return (to send for any Agent t payment authorize payment business taxes t persona	penalties of perjury, I declare that I have examined a copy of the income tax return (original or amended) by	e are the ameter, or electrication of the second of the second of the second of the second of the authorizests must be processing cayment. I fur	ronic references and its of tax preparation. The electrical action and the electrical action	from the inc turn original ssion, (b) th designated paration sof to this acco To revoke (i ved no late lectronic pa cknowledge	come tax tor (ERO) he reason Financial tware for bunt. This cancel) a er than 2 hyment of that the
	nic Funds Withdrawal Consent. yer's PIN: check one box only				
Х		my DINI 7	5 (6 0 6	as my
	ERO firm name signature on the income tax return (original or amended) I am now authorizing.	ř Er		digits, but er all zeros	as my
	I will enter my PIN as my signature on the income tax return (original or amended) I am no if you are entering your own PIN and your return is filed using the Practitioner PIN metholelow.				
Your s	ignature ▶ Date ▶				
Snous	e's PIN: check one box only	_			
Орошо	I authorize to enter or generate	ny PIN			as my
_	ERO firm name	_	nter five	digits, but	asiny
	signature on the income tax return (original or amended) I am now authorizing.	do	n't ente	er all zeros	
	I will enter my PIN as my signature on the income tax return (original or amended) I am no if you are entering your own PIN and your return is filed using the Practitioner PIN method below.				
Spous	e's signature ▶ Date ▶				
	Practitioner PIN Method Returns Only—continue below				
Part	III Certification and Authentication — Practitioner PIN Method Only				
ERO's	EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN. 2 2	2 4 9 Don't en	6 0	8 2 7	1
		Don't en	.c. an Ze		
authoriz	that the above numeric entry is my PIN, which is my signature for the electronic individual income to take to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am subments of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS e-file Providers of Inc.	tting this ret	urn in a	accordance	
ERO's	signature ▶ Date ▶				
	ERO Must Retain This Form — See Instructions				
	Don't Submit This Form to the IRS Unless Requested To D	o So			

E1040 Department of the Treasury—Internal Revenue Service U.S. Individual Income Tax Return



£1040		artment of the Treasury—Internal Revenue Servi S. Individual Income Tax		urn	202	3	OMB No. 1545-	0074	IRS Use Only	—Do not v	write or staple in this space.
For the year Jar	n. 1–Dec	:. 31, 2023, or other tax year beginning			, 2023, end	ling _			, 20	See se	parate instructions.
Your first name	and mi	iddle initial	Last na	ame						Your so	ocial security number
ABHISHE	<		ANNI	ΞY						402	87 5606
		s first name and middle initial	Last n	ame							's social security numbe
Home address	(numbe	er and street). If you have a P.O. box, see	instruct	ions.				A	Apt. no.	Preside	ential Election Campaigr
5516 SOT	JTH I	RED CLIFF DR									here if you, or your
City, town, or p	ost offi	ce. If you have a foreign address, also co	mplete	spaces be	elow.	Sta	te	ZIP c	ode		if filing jointly, want \$3 this fund. Checking a
SALT LA	KE C	ITY				UI	Γ	841	23		low will not change
Foreign country	y name			Foreign p	rovince/state/o	count	ty	Foreig	n postal code		x or refund.
											You Spouse
Filing Status	; X	Single					☐ Head of ho	ouseh	old (HOH)		
Check only		Married filing jointly (even if only or	ne had	income)							
one box.		Married filing separately (MFS)					☐ Qualifying	surviv	ing spouse	(QSS)	
	If y	ou checked the MFS box, enter the	name	of your s	pouse. If you	ı che	ecked the HOH	or Q	SS box, ente	r the ch	ild's name if the
	qu	alifying person is a child but not you	ır depe	ndent:							
Digital	At ar	ny time during 2023, did you: (a) rec	eive (as	a rewar	d award or	navr	ment for proper	tv or	services): or	(h) sell	
Assets		lange, or otherwise dispose of a digi						-			☐ Yes 🗵 No
Standard	_	eone can claim: You as a de					a dependent	, (,	
Deduction	_	Spouse itemizes on a separate retur			•		•				
				_						1050	
	_	Were born before January 2, 1	959	Are b	iina Spa	ouse	: U was bor		ore January 2	•	☐ Is blind
Dependent				(2)	Social security number	'	(3) Relationshi	ip (4	Child tax c		ifies for (see instructions). Credit for other dependents
If more	(1) F	(1) First name Last name		nambor to you					Orealt for other dependents		
than four dependents,											
see instruction	s			-							
and check here	1 —										
	10	Total amount from Form(a) W 2 h	ov 1 (o	o inatru	otiona)					14	99,271.
Income	1a b	Total amount from Form(s) W-2, by Household employee wages not re								. 16 . 1k	
Attach Form(s)		Tip income not reported on line 1a								. 10	
W-2 here. Also attach Forms	c d	Medicaid waiver payments not rep	`		,					. 10	
W-2G and	e	Taxable dependent care benefits f								. 16	
1099-R if tax was withheld.	f	Employer-provided adoption bene								. 11	
If you did not		Wages from Form 8919, line 6.	1113 1101	ii i Oiiii c	0000, III le 20	•				. 10	
get a Form	g h	Other earned income (see instructi	ions)							· <u>'``</u> . 11	
W-2, see instructions.	i	Nontaxable combat pay election (s	,	ructions	· · · ·	•	1i	i.			
	Z	Add lines 1a through 1h								. 12	99,271.
Attach Sch. B	2a		2a			b T	axable interest			. 2k	
if required.	3a	· · · · · · · · · · · · · · · · · · ·	3a				ordinary divider			. 3k	
	4a		4a				axable amount			. 4k	
Standard	5a		5a				axable amount			. 5k	
• Single or	6a		6a			b T	axable amount	:		. 6k)
Married filing separately,	С	If you elect to use the lump-sum e	lection	method,	check here	(see	instructions)		[
\$13,850	7	Capital gain or (loss). Attach Sche							[_ 7	
 Married filing jointly or 	8	Additional income from Schedule		•	•		•			. 8	-8,641.
Qualifying surviving spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7,								. 9	
\$27,700	10	Adjustments to income from Sche								. 10)
 Head of household, 	11	Subtract line 10 from line 9. This is	your a	djusted	gross incon	ne				. 11	90,630.
\$20,800 • If you checked	12	Standard deduction or itemized	-							. 12	
any box under	13	Qualified business income deducti	ion fror	n Form 8	995 or Form	899	5-A			. 13	
Standard Deduction,	14	Add lines 12 and 13								. 14	13,850.
see instructions.	15	Subtract line 14 from line 11. If zer	o or les	ss, enter	-0 This is y	our I	taxable incom	e .		. 15	76,780.

Form 1040 (202)	3)								Page Z
Tax and	16	Tax (see instructions). Check if ar	ny from Form((s): 1 881	4 2 🗌 4972	з 🗌		16	12,198.
Credits	17	Amount from Schedule 2, line 3						17	
	18	Add lines 16 and 17						18	12,198.
	19	Child tax credit or credit for other	er dependent	s from Sched	ule 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 a	zero or less, e	enter -0				22	12,198.
	23	Other taxes, including self-empl	oyment tax, f	from Schedule	e 2, line 21			23	0.
	24	Add lines 22 and 23. This is you	r total tax					24	12,198.
Payments	25	Federal income tax withheld from	m:						
•	а	Form(s) W-2				25a 16	5,250.		
	b	Form(s) 1099				25b			
	С	Other forms (see instructions)				25c			
	d	Add lines 25a through 25c .						25d	16 , 250.
If you have a	26	2023 estimated tax payments ar	nd amount ap	oplied from 20	22 return			26	
qualifying child,	27	Earned income credit (EIC) .			No .	27			
attach Sch. EIC.	28	Additional child tax credit from So	chedule 8812			28			
	29	American opportunity credit from	m Form 8863	, line 8		29			
	30	Reserved for future use				30			
	31	Amount from Schedule 3, line 1	5			31			
	32	Add lines 27, 28, 29, and 31. Th	ese are your	total other pa	ayments and refu	ndable credits		32	
	33	Add lines 25d, 26, and 32. Thes	e are your to	tal payments				33	16,250.
Refund	34	If line 33 is more than line 24, su	ubtract line 24	4 from line 33.	This is the amour	nt you overpaid		34	4,052.
	35a	Amount of line 34 you want refu	ınded to you	ı. If Form 8888	is attached, chec	k here		35a	4,052.
Direct deposit?	b	Routing number 1 2 4 0			c Type:	Checking	Savings		
See instructions.	d	Account number 3 9 9 3	2 5 8	6 6					
	36	Amount of line 34 you want app	lied to your 2	2024 estimate	ed tax	36			
Amount You Owe	37	Subtract line 33 from line 24. Th For details on how to pay, go to						07	
rou Owe	20	· · ·	_	-		1 1		37	
	38	Estimated tax penalty (see instru				38			
Third Party Designee		you want to allow another pe				_	omnlete	helow	⊠ No
Designee		esignee's		Phone			onal ident		M NO
		me		no.			ber (PIN)		
Sign		der penalties of perjury, I declare that I lief, they are true, correct, and complete							
Here	Yo	ur signature		Date	Your occupation		l If th	e IRS se	nt you an Identity
		er eignater					Pro	tection P	IN, enter it here
Joint return?					INTELLIGEN	CE ENGINE	ER (see	e inst.)	
See instructions. Keep a copy for your records.		ouse's signature. If a joint return, both	ı must sign.	'			Idei	the IRS sent your spouse an entity Protection PIN, enter it he ee inst.)	
	Ph	one no. (801) 800-2758		Email address	ABHISHEK.AN	NEY@GMAIL.C	DM MC		
Daid	Pre		eparer's signati	ure		Date	PTIN		Check if:
Paid	SYAN	M PRIYA RAM SAGAR GUPTA TALLAM SY.	AM PRIYA	RAM SAGAR	GUPTA TALLAM	02/19/2024	P0208	32703	Self-employed
Preparer	Fir	m's name GLOBAL TAXES	S LLC						(678) 965-9522
Use Only	Fir	m's address 245 ROONEY (NSWICK N	J 08816			n's EIN	84-3171965
<u> </u>		4040 ()					'		- 1040

SCHEDULE 1 (Form 1040)

Additional Income and Adjustments to Income

OMB No. 1545-0074

2023

Attachment
Seguence No. 01

Department of the Treasury Internal Revenue Service

ABHISHEK ANNEY

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

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

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

	Sequence No. 01
Your soc	ial security number
402-87	-5606

Par	t I Additional Income			
1	Taxable refunds, credits, or offsets of state and local income taxes		1	
2a	Alimony received		2a	
b	Date of original divorce or separation agreement (see instructions):			
3	Business income or (loss). Attach Schedule C		3	
4	Other gains or (losses). Attach Form 4797		4	
5	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Atta	ach Schedule E .	5	-8,641.
6	Farm income or (loss). Attach Schedule F		6	
7	Unemployment compensation		7	
8	Other income:			
а	Net operating loss	8a ()	
b	Gambling	8b		
С	Cancellation of debt	8c		
d	Foreign earned income exclusion from Form 2555	8d ()	
е	Income from Form 8853	8e		
f	Income from Form 8889	8f		
g	Alaska Permanent Fund dividends	8g		
h	Jury duty pay	8h		
i	Prizes and awards	8i		
j	Activity not engaged in for profit income	8j		
k	Stock options	8k		
ı	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)	8m		
n	Section 951(a) inclusion (see instructions)	8n		
0	Section 951A(a) inclusion (see instructions)	80		
р	Section 461(I) excess business loss adjustment	8p		
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	8s ()	
t	Pension or annuity from a nonqualifed deferred compensation plan or			
	a nongovernmental section 457 plan	8t		
u	Wages earned while incarcerated	8u		
Z	Other income. List type and amount:			
_		8z		
9	Total other income. Add lines 8a through 8z		9	
10	Combine lines 1 through 7 and 9. This is your additional income . Enter	r here and on Form		
	1040, 1040-SR, or 1040-NR, line 8		10	-8,641.

Schedule 1 (Form 1040) 2023 Page **2**

Par	t II Adjustments to Income			
11	Educator expenses		11	
12	Certain business expenses of reservists, performing artists, and fee-basis g			
	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			
С	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:			
а	Jury duty pay (see instructions)			
b	Deductible expenses related to income reported on line 8l from the			
	rental of personal property engaged in for profit			
С	Nontaxable amount of the value of Olympic and Paralympic medals			
	and USOC prize money reported on line 8m			
d	Reforestation amortization and expenses			
е	Repayment of supplemental unemployment benefits under the Trade			
	Act of 1974			
f	Contributions to section 501(c)(18)(D) pension plans			
g	Contributions by certain chaplains to section 403(b) plans 24g			
h	Attorney fees and court costs for actions involving certain unlawful			
	discrimination claims (see instructions)			
i	Attorney fees and court costs you paid in connection with an award			
	from the IRS for information you provided that helped the IRS detect			
	tax law violations			
J	Housing deduction from Form 2555			
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form			
	1041)			
Z	Other adjustments. List type and amount:			
0E	Total other adjustments. Add lines 24s through 24z		OF	
25 26	Total other adjustments. Add lines 24a through 24z		25	
26	Add lines 11 through 23 and 25. These are your adjustments to income . Enter he Form 1040, 1040-SR, or 1040-NR, line 10	iere and on	26	
	1 01111 1040, 1040-011, 01 1040-1111, 1111 0 10		20	

SCHEDULE E (Form 1040)

Supplemental Income and Loss

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

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

Attachment

Department of the Treasury Internal Revenue Service

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

Sequence No. 13

OMB No. 1545-0074

Name(s) shown on return Your social security number ABHISHEK ANNEY 402-87-5606 Part I **Income or Loss From Rental Real Estate and Royalties** Note: If you are in the business of renting personal property, use Schedule C. See instructions. If you are an individual, report farm rental income or loss from Form 4835 on page 2, line 40. Did you make any payments in 2023 that would require you to file Form(s) 1099? See instructions . If "Yes." did you or will you file required Form(s) 1099? Physical address of each property (street, city, state, ZIP code) 1a 16-1-7,7/1 & 7/2, F/No: 11 Santosh Nagar, Saidabad, Hyderabad Telangana IN 500059 Α В C 1b Type of Property For each rental real estate property listed **Fair Rental Personal Use** QJV (from list below) above, report the number of fair rental and **Davs Davs** personal use days. Check the QJV box only Α Α 325 0 if you meet the requirements to file as a В В qualified joint venture. See instructions. С C Type of Property: 3 Vacation/Short-Term Rental 1 Single Family Residence 5 Land 7 Self-Rental 8 Other (describe) 2 Multi-Family Residence 4 Commercial 6 Royalties **Properties:** Α В C Income: 745. 3 Rents received . 3 4 4 Royalties received . **Expenses:** 5 5 Advertising 6 Auto and travel (see instructions) 6 7 Cleaning and maintenance . . . 7 845. 8 Commissions 8 9 9 Insurance . . . 10 Legal and other professional fees 10 11 Management fees 11 1,475. 12 Mortgage interest paid to banks, etc. (see instructions) 12 13 13 14 3,145. 14 Repairs 2,247. 15 Supplies 15 16 16 Taxes 17 Utilities 17 1,674. 18 18 Depreciation expense or depletion Other (list) 19 19 20 20 Total expenses. Add lines 5 through 19 9,386. 21 Subtract line 20 from line 3 (rents) and/or 4 (royalties). If result is a (loss), see instructions to find out if you must file Form 6198 21 -8,641. 22 Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions) 8,641.) 745. 23a Total of all amounts reported on line 3 for all rental properties 23a Total of all amounts reported on line 4 for all royalty properties 23b Total of all amounts reported on line 12 for all properties 23c 23d Total of all amounts reported on line 18 for all properties 9,386. Total of all amounts reported on line 20 for all properties 23e 24 Income. Add positive amounts shown on line 21. Do not include any losses 24 25 Losses. Add royalty losses from line 21 and rental real estate losses from line 22. Enter total losses here 25 8,641. Total rental real estate and royalty income or (loss). Combine lines 24 and 25. Enter the result 26 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 .

-8,641.

403011555

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)

INTUIT

2023

TC-40

Your Social Security No. 402875606 Spouse's Soc. Sec. No.

Your first name

ABHISHEK

Spouse's first name

Your last name
ANNEY
Spouse's last name

Full-yr Resident?
Y/N
Y

If deceased, complete page 3, Part 1

Address
5516 SOUTH RED CLIFF DR, APT C
City State ZIP4

Telephone number 801-800-2758 Foreign country (if not U.S.)

• 22

4214

	SALT LAKE	CITY UT	84123	}		
1	Filing Status - enter code	• 2 Qualifying Dependents		3 Election Camp	aign Fund	
	1 = Single	a Dependents age 16 and	d under		_	reduce your refund.
	1 2 = Married filing jointly	b Other dependents		Enter the code for t	•	ourself Spouse
	3 = Married filing separately	c Dependents born in 202	23	party of your choice	e. •	•
	4 = Head of household	d () Total (add lines a, b and		See instructions f		
	5 = Qualifying surviving spouse		,			etax.utah.gov/elect
lf u	using code 2 or 3, enter spouse's name and SSN above	See instructions.		If no contribution, e		9
4	Federal adjusted gross income from federal Additions to income from TC-40A, Part 1 (a				• 4 • 5	90630
Ū	, tautilione to meetine incin 10 10, 1, 1 and 1 (c	maen i o ion, page in				
6	Total income - add line 4 and line 5				6	90630
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	sum of lines 7 and 8 from line 6			• 9	90630
10	Utah tax - multiply line 9 by 4.65% (.0465)	(not less than zero)			• 10	4214
11	Utah personal exemption (multiply line 2d b	y \$1,941)	• 11	0		
12	2 Federal standard or itemized deductions		• 12	13850	is q	ectronic filing uick, easy and ree, and will
13	3 Add line 11 and line 12		13	13850	- 1	d up your refund.
14	4 State income tax included in federal itemize	ed deductions	• 14		То	learn more,
15	5 Subtract line 14 from line 13		15	13850	t	ap.utah.gov
16	6 Initial credit before phase-out - multiply line	9 15 by 6% (.06)	• 16	831		
17	7 Enter: \$16,742 (single or married filing sep household); or \$33,484 (married filing)	• • • • • • • • • • • • • • • • • • • •	• 17 use)	16742		•
18	Income subject to phase-out - subtract line	0, , , , , , , , , , , , , , , , , , ,	18	73888		
19	9 Phase-out amount - multiply line 18 by 1.3	% (.013)	• 19	961		
20	Taxpayer tax credit - subtract line 19 from I	line 16 (not less than zero)			• 20	0

21 If you are a qualified exempt taxpayer, enter "X" (complete worksheet in instr.) • 21

22 Utah income tax - subtract line 20 from line 10 (not less than zero)

Enter tax from TC-40, page 1, line 22 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 26 Nonapportionable nonrefundable credits from TC-40A, Part 4 (attach TC-40A, page 1) 27 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 33 Total withholding - If you have mineral production withholding or pass-through entity withholding, complete page 3, Part 5. If not, enter on line 33 the total of TC-40W, Part 1.	4214 4214 4214
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 Nonapportionable nonrefundable credits from TC-40A, Part 4 (attach TC-40A, page 1) Subtract line 26 from line 25 (not less than zero) Voluntary contributions from TC-40, page 3, Part 4 (attach TC-40, page 3) AMENDED RETURN ONLY - previous refund Recapture of low-income housing credit Utah use tax 10 Total tax, use tax and additions to tax (add lines 27 through 31) Total withholding - If you have mineral production withholding or pass-through entity withholding, 33	
Non or Part-year resident, complete and enter the UTAH TAX from TC-40B, line 41 26 Nonapportionable nonrefundable credits from TC-40A, Part 4 (attach TC-40A, page 1) 27 28 Voluntary contributions from TC-40, page 3, Part 4 (attach TC-40, page 3) 29 AMENDED RETURN ONLY - previous refund 29 30 Recapture of low-income housing credit 31 Utah use tax 31 32 Total tax, use tax and additions to tax (add lines 27 through 31) 33 Total withholding - If you have mineral production withholding or pass-through entity withholding, 33	
26 Nonapportionable nonrefundable credits from TC-40A, Part 4 (attach TC-40A, page 1) 27 Subtract line 26 from line 25 (not less than zero) 28 Voluntary contributions from TC-40, page 3, Part 4 (attach TC-40, page 3) 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) 33 Total withholding - If you have mineral production withholding or pass-through entity withholding, 33	4214
28 Voluntary contributions from TC-40, page 3, Part 4 (attach TC-40, page 3) 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 33 Total withholding - If you have mineral production withholding or pass-through entity withholding, 30 31 32	4214
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 31 Utah use tax 31 32 Total tax, use tax and additions to tax (add lines 27 through 31) 32 33 Total withholding - If you have mineral production withholding or pass-through entity withholding, 33 	
32 Total tax, use tax and additions to tax (add lines 27 through 31) 32 33 Total withholding - If you have mineral production withholding or pass-through entity withholding, • 33	
33 Total withholding - If you have mineral production withholding or pass-through entity withholding,33	
	4214
complete page 3, Part 5. If not, enter on line 33 the total of TC-40W, Part 1.	4914
34 Credit for Utah income taxes prepaid from TC-546 and 2022 refund applied to 2023 • 34	
35 AMENDED RETURN ONLY - previous payments • 35	
36 Nonapportionable refundable credits from TC-40A, Part 5 (attach TC-40A, page 2) • 36	
37 Apportionable refundable credits from TC-40A, Part 6, line c (attach TC-40A, page 2) • 37	
38 Total withholding and refundable credits - add lines 33 through 37 38	4914
39 TAX DUE - subtract line 38 from line 32 (not less than zero) • 39	
40 Penalty and interest (see instructions) 40	
41 TOTAL DUE - PAY THIS AMOUNT - add line 39 and line 40 • 41	
42 REFUND - subtract line 32 from line 38 (not less than zero) • 42	700
43 Voluntary subtractions from refund (not greater than line 42) • 43	
Enter the total from page 3, Part 6 44 REMAINING REFUND DIRECT DEPOSIT - your account information (see instructions for foreign accounts) checking savings • Routing number 124001545 • Account number 399325866 Type: • X	foreign
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) HERE	
Third Party Designee Name of designee (if any) you authorize to discuss this return Designee's telephone number • Designee PIN)ate
Preparer's signature Date Preparer's telephone number Preparer's PTIN	ate
	ate
Preparer's Firm's name GLOBAL TAXES LLC Preparer's EIN	82703
E BRUNSWICK NJ 08816	

Pg. 1

40309

SSN 402-87-5606

Last name ANNEY

IMPORTANT

Line Explanations 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 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. Employer/payer name and address from W-2 box "c" or 1099 Enter "X" if reporting Utah withholding from form 1099 Use additional forms TC-40W if you have more than four W-2s and/or 5 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 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 2 (14 characters, no hyphens) 12249890004WTH (14 characters, no hyphens) 3 GOLDMAN SACHS & CO LLC 30 HUDSON STREET 4TH FLOOR JERSEY CITY NJ07302 4 4 5 402875606 6 6 99271 7 7 4914 Third W-2 or 1099 Fourth W-2 or 1099 1 1 2 (14 characters, no hyphens) 2 (14 characters, no hyphens) 3 3 4 4 5 5 6 6 7 7

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.

4914