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.

Submission Identification Number (SID)

T.....

Тахрау	er's name	Social securi	ty numbe	er					
KIR	AN MAHATO	850-97	-2491						
Spouse	's name	Spouse's soo	ial secu	rity number					
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Par	Tax Return Information — Tax Year Ending December 31, 2023 (Ente	r year you a	ire auti	norizing.)					
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	35,463.					
2	Total tax		2	2,375.					
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3	3,809.					
4	Amount you want refunded to you		4	1,434.					
5	Amount you owe		5						
Part	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

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X	l authorize	GLOBAL	TAXES	T.T.C	to enter or generate my PIN	L

Ent	as my				
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	7 Ent	7 2 Enter fiv	7 2 4	7 2 4 9 Enter five digits,	7 2 4 9 1 Enter five digits, but don't enter all zeros

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 o	nly
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I authorize

to enter or generate my PIN

as mv Enter five digits, but don't enter all zeros

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 signation	ature Da Da	ate 🕨	•								
Practitioner PIN Method Returns Only—continue below											
Part III C	Certification and Authentication – Practitioner PIN Method Only										
ERO's EFIN/P	PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN.	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.

ERO's signature >	Date 🕨		
ERO Must Retain This F Don't Submit This Form to the I			
For Paperwork Reduction Act Notice, see your tax return instructions.	BAA	REV 03/07/24 PRO	Form 8879 (Rev. 01-2021)

Deduction for - Sa Definitions and annulates Sa Definitions and annulates Sa Sa Sa • Single or Married filing separately, \$13,850 6a 6a b Taxable amount 6b 6b • If you elect to use the lump-sum election method, check here (see instructions) • • • • • • • • • • • • • • • • • • •	1040		artment of the Treasury—Internal Revenue Servi S. Individual Income Tax		turn	202	3	OMB No. 1545	-0074	IRS Use (Only—[Do not wr	ite or sta	aple in t	his space.
KLT RAN MARATO 550 97 2491 If port functure, spouse's first name and middle initial Last name 500 7 2491 Home address (jumber and streed, if you have a broken subscience) Apt. no. Precidential Election Campaign 204 W 2100 S EXEY, 241 DIX A224 Check here if you or your Check here if you or your SATIT LARC CITY Pations and strength address, also complete spaces below. State 21P code bornes here' your your tax or refund. Filing Status Single Married filing jointly (even if only one had income) on box. If was one one code in the space of a glatal asset (refug surviving spouse (QSS) If you checked the MI'S box, entor the name of your spouse. If you checked the HO'I or QSS box, entor the child's name if the qualifying person as child but not your dependent Digital At any time during 2023, dd you: (a) reserve (as a reward, award, or payment for property or service); or (b) sell, eachange. or otherwise dispose of a digital asset (or a financial interest in a digital asset)? (See instructions.) Vers is bind Dependents Someone can challing. If a 35, 463. Asset If Pint name If a 35, 463. If non our displant abset form form(s) W-2. box 1 (see instructions) If a 35, 463. Dependents If in 100. If a 35, 463. <td>For the year Jar</td> <td>n. 1–Dec</td> <td>c. 31, 2023, or other tax year beginning</td> <td></td> <td></td> <td>, 2023, end</td> <td>ling</td> <td></td> <td></td> <td>, 20</td> <td></td> <td>See sep</td> <td>oarate</td> <td>instru</td> <td>ctions.</td>	For the year Jar	n. 1–Dec	c. 31, 2023, or other tax year beginning			, 2023, end	ling			, 20		See sep	oarate	instru	ctions.
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Married filing separately, \$13,850 c If you elect to use the lump-sum election method, check here (see instructions) .															
Subtractly, Standard Deduction, 7 Capital gain or (loss). Attach Schedule D if required. If not required, check here 7 Married filing jointy or Qualifying souse, \$27,700 8 Additional income from Schedule 1, line 10 8 10 Adjustments to income from Schedule 1, line 26 9 35,463. 11 Subtract line 10 from line 9. This is your adjusted gross income 10 12 Standard deduction or itemized deductions (from Schedule A) 12 13,850. 13 Qualified business income deduction from Form 8995 or Form 8995-A 13 14 13,850. 14 13,850.	Married filing				n method.	check here									
Married filing jointly or Qualifying surviving spouse, \$27,7008Additional income from Schedule 1, line 1089Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income935, 463.\$27,70010Adjustments to income from Schedule 1, line 2610Head of household, \$20,80011Subtract line 10 from line 9. This is your adjusted gross income111213, 463.\$20,80012Standard deduction or itemized deductions (from Schedule A)1213Qualified business income deduction from Form 8995 or Form 8995-A1314Add lines 12 and 131413, 850.	\$13,850		, ,				`	,			. 🗍	7			
Qualifying surving spouse, \$27,7009Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income935, 463.10Adjustments to income from Schedule 1, line 2610Head of household, \$20,80011Subtract line 10 from line 9. This is your adjusted gross income1135, 463.12Standard deduction or itemized deductions (from Schedule A)1213, 850.13Qualified business income deduction from Form 8995 or Form 8995-A1314Add lines 12 and 1314	 Married filing jointly or 														
10 Adjustments to income from Schedule 1, line 26 10 Head of household, \$20,800 Subtract line 10 from line 9. This is your adjusted gross income 11 35,463. 12 Standard deduction or itemized deductions (from Schedule A) 12 13,850. 13 Qualified business income deduction from Form 8995 or Form 8995-A 13 14 Add lines 12 and 13 14 13,850.	Qualifying											-		35	,463.
Index of head of household, household,11Subtract line 10 from line 9. This is your adjusted gross income1135, 463.\$20,80012Standard deduction or itemized deductions (from Schedule A)1213, 850.13Qualified business income deduction from Form 8995 or Form 8995-A1314Add lines 12 and 13131413, 850.	\$27,700	10			-							10			
\$20,80012Standard deduction or itemized deductions (from Schedule A)1213,850.If you checked any box under Standard Deduction,13Qualified business income deduction from Form 8995 or Form 8995-A1313If you checked any box under Deduction,1413.13.14		11				gross incor	ne					11		35	,463.
In you checked any box under Standard Deduction,13Qualified business income deduction from Form 8995 or Form 8995-A1314Add lines 12 and 131413,850.		12	Standard deduction or itemized	deduc	ctions (fro	om Schedule	A)					12			
Deduction, 14 Add lines 12 and 13 13,850.	any box under	13	Qualified business income deduct	ion fro	m Form 8	995 or Form	899	5-A				13			
see instructions. 15 Subtract line 14 from line 11. If zero or less, enter -0 This is your taxable income 15 21, 613.	Deduction,	14		• •								14			
	see instructions.	15	Subtract line 14 from line 11. If zer	o or le	ess, enter	-0 This is y	ourt	taxable incom	ie.			15		21	,613.

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	2,375.
Credits	17	Amount from Schedule 2, lin	e3					17	
	18	Add lines 16 and 17					[18	2,375.
	19	Child tax credit or credit for	other dependen	ts from Sched	ule 8812			19	
	20	Amount from Schedule 3, lin	e8					20	
	21	Add lines 19 and 20						21	
	22	Subtract line 21 from line 18	. If zero or less,	enter -0				22	2,375.
	23	Other taxes, including self-e	mployment tax,	from Schedule	e 2, line 21 .			23	0.
	24	Add lines 22 and 23. This is	your total tax					24	2,375.
Payments	25	Federal income tax withheld							
	а	Form(s) W-2				25a 3	,809.		
	b	Form(s) 1099				25b			
	с	Other forms (see instructions	s)			25c			
	d	Add lines 25a through 25c						25d	3,809.
If you have a	26	2023 estimated tax payment	s 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 fror	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	e15			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	3,809.
Refund	34	If line 33 is more than line 24	l, subtract line 2	4 from line 33.	This is the amou	nt you overpaid		34	1,434.
	35a	Amount of line 34 you want			is attached, che	ck here	. 🗆	35a	1,434.
Direct deposit?	b	Routing number 1 2 4	0 0 1 5	4 5	c Type: 🛛 🗙	Checking	Savings		
See instructions.	d	Account number 5 1 9	6 8 5 3	0 2					
	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, ge	o to <i>www.irs.go</i> v	//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	structions				🗌 Yes. C	omplete be	elow.	× No
	De nai	signee's		Phone no.			onal identific oer (PIN)	cation	
Ciarra		der penalties of perjury, I declare th	nat I have examined		accompanying sch		. ,	e hest	of my knowledge and
Sign		ief, they are true, correct, and com							
Here	Yo	ur signature		Date	Your occupation		If the I	IRS se	nt you an Identity
		0							IN, enter it here
Joint return?					SOFTWARE I		(see ir	,	
See instructions. Keep a copy for	Sp	ouse's signature. If a joint return, k	ooth must sign.	Date	Spouse's occupat	ion			nt your spouse an ection PIN, enter it here
your records.							(see in	,	section Fina, enter it here
	Ph	one no. (801) 608-942	6	Email address	ΚΤΡΔΝΜΔΗΔΠ	090GMAIL.CO)M		
		eparer's name	Preparer's signat			Date	PTIN	,	Check if:
Paid		M PRIYA RAM SAGAR GUPTA			GIIPTA	04/07/2024	P02082	703	Self-employed
Preparer	-	m's name GLOBAL TAX		A TATA DAG	JUIN OULIA	01/0//2024			(678) 965-9522
Use Only			Y CT E BRU	NSWICK N	J 08816		Firm's		84-3171965
Go to www.irs.cr		1040 for instructions and the late		TADAATOIN IN			111118		Form 1040 (2023)
		in the for instructions and the late	scinornation.		BAA	REV 03/07/24 PRO			1 0mm 1 0 TO (2023)

88 Form Department of the Treasury Internal Revenue Service

Health Savings Accounts (HSAs)

OMB No. 1545-0074

3

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

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

Attachment Sequence No. 52
ber of HSA beneficiary. e HSAs, see instructions
 o . o .

2

				·
Name(s		Social security num		
KIR	AN MAHATO	f both spouses hav 850-97-		
Befo	re you begin: Complete Form 8853, Archer MSAs and Long-Term Care Insurance	Contracts, if re	equir	ed.
Part	HSA Contributions and Deduction. See the instructions before completing and both you and your spouse each have separate HSAs, complete a separa			
1	Check the box to indicate your coverage under a high-deductible health plan (HDHP) d See instructions	-	Self	-only 🗌 Family
2	HSA contributions you made for 2023 (or those made on your behalf), including those munextended due date of your tax return that were for 2023. Do not include employer contributions through a cafeteria plan, or rollovers. See instructions	ade by the ntributions,	2	0.
3	If you were under age 55 at the end of 2023 and, on the first day of every month during were, or were considered, an eligible individual with the same coverage, enter \$3,850 family coverage). All others , see the instructions for the amount to enter	(\$7,750 for	3	3,850.
4	Enter the amount you and your employer contributed to your Archer MSAs for 2023 from lines 1 and 2. If you or your spouse had family coverage under an HDHP at any time during include any amount contributed to your spouse's Archer MSAs	2023, also	4	0.
5	Subtract line 4 from line 3. If zero or less, enter -0	[5	3,850.
6	Enter the amount from line 5. But if you and your spouse each have separate HSAs and coverage under an HDHP at any time during 2023, see the instructions for the amount to en		6	3,850.
7	If you were age 55 or older at the end of 2023, married, and you or your spouse had fami under an HDHP at any time during 2023, enter your additional contribution amount. See ins		7	0.
8	Add lines 6 and 7		8	3,850.
9	Employer contributions made to your HSAs for 2023	2,000.		
10	Qualified HSA funding distributions			
11	Add lines 9 and 10		11	2,000.
12	Subtract line 11 from line 8. If zero or less, enter -0		12	1,850.
13	HSA deduction. Enter the smaller of line 2 or line 12 here and on Schedule 1 (Form 1040), Pa Caution: If line 2 is more than line 13, you may have to pay an additional tax. See instruction		13	0.
Part			ate H	SAs, complete
14a	Total distributions you received in 2023 from all HSAs (see instructions)	1	4a	110.
b	Distributions included on line 14a that you rolled over to another HSA. Also include a contributions (and the earnings on those excess contributions) included on line 14a withdrawn by the due date of your return. See instructions	any excess that were	4b	
с	Subtract line 14b from line 14a		4c	110.
15	Qualified medical expenses paid using HSA distributions (see instructions)		15	110.
16	Taxable HSA distributions. Subtract line 15 from line 14c. If zero or less, enter -0 Also, amount in the total on Schedule 1 (Form 1040), Part I, line 8f	nclude this	16	0.
17a	If any of the distributions included on line 16 meet any of the Exceptions to the Addition Tax (see instructions), check here	al 20%		
b	Additional 20% tax (see instructions). Enter 20% (0.20) of the distributions included on are subject to the additional 20% tax. Also, include this amount in the total on Schedu 1040), Part II, line 17c .	ine 16 that Ile 2 (Form	7b	
Part	III Income and Additional Tax for Failure To Maintain HDHP Coverage. See completing this part. If you are filing jointly and both you and your spouse eac complete a separate Part III for each spouse.	the instructior ch have separ		
18	Last-month rule		18	
19	Qualified HSA funding distribution		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 Sched	•		
	1040), Part II, line 17d		21	

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

40301			Utah Indiv All state ind children	2023 TC-40			
			• Ame	ended Return - e	enter code: (see instructi	ons)
Your Social Security No. 850972491 Spouse's Soc. Sec. No.	Your first name KIRAN Spouse's first name		Your last name MAHATO Spouse's last name	e			Full-yr Resident? Y/N Y
If deceased, complete page 3, Part 1	Address 204 W 210 City SALT LAKE	O S EXPY, CITY	21 LU, Al State UT	PT A224 ^{ZIP+4} 84115		number 508–94 untry (if not l	
1 Filing Status - enter	code	• 2 Qualifying D	ependents		3 Election Can	npaign Fui	nd
 1 = Single 2 = Married filir 3 = Married filir 4 = Head of ho 5 = Qualifying s If using code 2 or 3, enter spouse 	ng separately usehold surviving spouse	b Other d c Depend	dents age 16 and lependents dents born in 2023 dd lines a, b and	3	Enter the code for party of your cho See instruction	or the ice. • s for go to inco i	or reduce your refund. Yourself Spouse • metax.utah.gov/elect.
4 Federal adjusted gro	ss income from feder	al return				• 4	35463
5 Additions to income	from TC-40A, Part 1 (attach TC-40A, page	e 1)			• 5	
6 Total income - add lir	ne 4 and line 5					6	35463
7 State tax refund inclu	ided on federal form	1040, Schedule 1, li	ine 1 (if any)			• 7	
8 Subtractions from inc	come from TC-40A, P	art 2 (attach TC-40A	, page 1)			• 8	
9 Utah taxable incom	e/loss - subtract the	sum of lines 7 and 8	from line 6			• 9	35463
10 Utah tax - multiply li	ne 9 by 4.65% (.0465) (not less than zero)			• 10	1649
11 Utah personal exemp	otion (multiply line 2d l	oy \$1,941)		• 11	0		
12 Federal standard or i	temized deductions			• 12	13850		Electronic filing quick, easy and
13 Add line 11 and line	12			13	13850	spe	free, and will ed up your refund.
14 State income tax incl	uded in federal itemiz	zed deductions		• 14			To learn more,
15 Subtract line 14 from	line 13			15	13850		go to tap.utah.gov
16 Initial credit before pl	hase-out - multiply lin	e 15 by 6% (.06)		• 16	831	L	
17 Enter: \$16,742 (sing	-			• 17	16742		· ·
nousenoid); o 18 Income subject to ph	r \$33,484 (married fil ase-out - subtract line			se) 18	18721		
19 Phase-out amount -	multiply line 18 by 1.3	9% (.013)		• 19	243		
20 Taxpayer tax credit -	subtract line 19 from	line 16 (not less tha	n zero)			• 20	588
21 If you are a qualified	exempt taxpayer, en	er "X" (complete wo	rksheet in instr.)	• 21			
22 Utah income tax - s REV 11/30/23 PRO	ubtract line 20 from li	ne 10 (not less than	zero)		•	• 22	1061

403	302	Utal SSN	Individual Income Tax Return (continued)850972491Last nameMAHATO	INTUIT	TC-40 2023	Pg. 2
23	Enter ta	ax from	TC-40, page 1, line 22		23	1061
24	Apporti	onable	nonrefundable credits from TC-40A, Part 3 (attach TC-40A, page 1)		• 24	
25	-		lent, subtract line 24 from line 23 (not less than zero) ear resident, complete and enter the UTAH TAX from TC-40B, line 41		• 25	1061
26			able nonrefundable credits from TC-40A, Part 4 (attach TC-40A, page 1)		• 26	
27	Subtrac	ct line 2	26 from line 25 (not less than zero)		27	1061
28	Volunta	ary cont	tributions from TC-40, page 3, Part 4 (attach TC-40, page 3)		• 28	
29	AMEN	DED RI	ETURN ONLY - previous refund		• 29	
30	Recapt	ure of I	ow-income housing credit		• 30	
31	Utah us	se tax			• 31	
32	Total ta	ax, use	tax and additions to tax (add lines 27 through 31)		32	1061
33			ing - If you have mineral production withholding or pass-through entity withholding, e 3, Part 5. If not, enter on line 33 the total of TC-40W, Part 1.		• 33	1636
34			n income taxes prepaid from TC-546 and 2022 refund applied to 2023		• 34	
35	AMEN	DED RI	ETURN ONLY - previous payments		• 35	
36	Nonapp	oortiona	able refundable credits from TC-40A, Part 5 (attach TC-40A, page 2)		• 36	
37	Apporti	onable	refundable credits from TC-40A, Part 6, line c (attach TC-40A, page 2)		• 37	
38	Total wi	ithholdi	ing and refundable credits - add lines 33 through 37		38	1636
39	TAX DI	UE - su	btract line 38 from line 32 (not less than zero)		• 39	
40	Penalty	/ and ir	terest (see instructions)		40	
41	TOTAL	DUE -	PAY THIS AMOUNT - add line 39 and line 40		• 41	
42	REFUN	ID - su	btract line 32 from line 38 (not less than zero)		• 42	575
43			tractions from refund (not greater than line 42) from page 3, Part 6		• 43	
44		NING	REFUND DIRECT DEPOSIT - your account information (see instructions for foreign a	ccounts) Type	checking savings	foreign •

Under penalti	ies of perjury, I decla	are to the best of my knowledge and	belief, this return a	nd accompa	anying schedules are true, correc	t and complete.	
SIGN Your signature			Date	Spouse's	signature (if filing jointly)		Date
HERE							
Third Party	Third Party Name of designee (if any) you authorize to discuss this return				Designee's telephone number	Designee PIN	
Designee						•	
	Preparer's signatu	Ire	Date		Preparer's telephone number	Preparer's PTIN	1
Paid	SYAM PR	IYA RAM SAGAR G	04/07/2	4	6789659522	•	P02082703
Preparer's	Firm's name	GLOBAL TAXES 1	LLC			Preparer's EIN	
Section	and address	245 ROONEY CT				•	843171965
		E BRUNSWICK		1	NJ 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

INTUIT

2023

Line Explanations	IMPORTANT			
 Employer/payer ID number from W-2 box "b" or 1099 Utah withholding ID number from W-2 box "15" or 1099 (14 characters, ending in WTH, no hyphens) Employer/payer name and address from W-2 box "c" or 1099 Enter "X" if reporting Utah withholding from form 1099 Employee's Social Security number from W-2 box "a" or 1099 Utah wages or income from W-2 box "16" or 1099 Utah withholding tax from W-2 box "17" or 1099 	 Do not send your W-2s or 1099s with your return. Instead enter W-2 or 1099 information below, but only if there is Utah withholding on the form. Use additional forms TC-40W if you have more than four W-2s and/or 1099s with Utah withholding tax. Enter mineral production withholding from TC-675R in Part 2 of TC-40W; enter pass-through entity withholding in Part 3 of TC-40W. 			
First W-2 or 1099	Second W-2 or 1099			
1 581760235	1			
2 12490481003WTH (14 characters, no hyphens)	2 (14 characters, no hyphens)			
³ INFOSYS LIMITED 2400 N GLENVILLE DR C150	3			
RICHARDSON TX75082				
4	4			
5 850972491	5			
6 35463	6			
7 1636	7			
Third W-2 or 1099	Fourth W-2 or 1099			
1	1			
2 (14 characters, no hyphens)	2 (14 characters, no hyphens)			
3	3			
4	4			
5	5			
6	6			
7	7			

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.

1636

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.