



Last name

SSN

- 1 9 Enter tax (full-year resident, enter tax from line 17 - non or part-year resident, enter tax from line 18) 1 9
- 2 0 Nonrefundable credits from form TC-40S, Part 3 2 0
- 2 1 Subtract line 20 from line 19 (Note: if line 20 is greater than or equal to line 19, enter zero) 2 1
- 2 2 Contributions - add lines 22a through 22f and enter total contributions on line 22
 

<u>Code</u>	<u>Description</u>	<u>Code</u>	<u>Amount</u>	<u>Sch/Tech Code</u>
0 1	Utah Nongame Wildlife Fund	• 2 2 a		
0 2	Pamela Atkinson Homeless Trust Fund	• 2 2 b		
0 3	Kurt Oscarson Children's Organ Transplant Fund	• 2 2 c		
0 5	School District & Nonprofit School District Foundation	• 2 2 d		
0 6	Utah College of Applied Technology	• 2 2 e		
0 7	Uniform School Fund	• 2 2 f		2 2
0 8	Wolf Depredation Fund			
0 9	Cat & Dog Community spay and Neuter Program			
- 2 3 AMENDED RETURNS ONLY - previous refund • 2 3
- 2 4 Recapture of low-income housing credit • 2 4
- 2 5 Utah use tax • 2 5
- 2 6 Total tax, use tax and additions to tax** (add lines 21 through 25) **2 6**
- 2 7 UTAH TAX WITHHELD (must attach W-2s and/or 1099 forms) • 2 7
- 2 8 Credit for Utah income taxes prepaid • 2 8
- 2 9 AMENDED RETURNS ONLY - previous payments • 2 9
- 3 0 Refundable credits from form TC-40S, Part 4 3 0
- 3 1 Total withholding and credits** (add lines 27 through 30) **3 1**
- 3 2 Tax Due** - if line 26 is greater than line 31, subtract line 31 from line 26. **TAX DUE** • 3 2
- 3 3 Penalty and interest 3 3 a **Total Amount Due** (add penalty and interest to line 32) 3 3
- 3 4 Refund** - if line 31 is greater than line 26, subtract line 26 from line 31. **REFUND** • 3 4
- 3 5 Enter the amount of refund you want applied to your 2007 taxes. • 3 5
- 3 6 **DIRECT DEPOSIT YOUR REFUND.** Complete information below.
 

• Routing number	• Account number	Acct type	checking • savings •
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Under penalties of perjury, I declare to the best of my knowledge and belief, this return and accompanying schedules reflect my true tax status.

SIGN	Your signature	Date	Spouse's signature	Date
HERE				

Third Party Designee	Name of designee (if any) you authorize to discuss this return	Designee's telephone number	Designee PIN	•
Paid Preparer's Section	Preparer's signature	Preparer's telephone number	Preparer's SSN/PTIN	•
	Firm's name and address			•
			Preparer's EIN	•