



Utah State Tax Commission
210 N 1950 W, Salt Lake City, Utah 84134
(801) 297-2200 or 1-800-662-4335

Utah Individual Income Tax Return
All State Income Tax Dollars Fund Education

2001
TC-40
Rev. 12/01

For calendar year January 1, 2001 through December 31, 2001 or other taxable periods beginning date _____, and ending date _____.

Please print legibly or use preprinted label.

AMENDED RETURN See page 4 for the "REASONS FOR AMENDING" and enter the number in this box

L A B E L H E R E	Your Social Security number - - - - - <input type="checkbox"/> if died in 2001 or 2002 (page 5)		Spouse's Social Security number - - - - - <input type="checkbox"/> if died in 2001 or 2002 (page 5)	
	Your full name (first, middle initial, last)		Spouse's name (first, middle initial, last)	
	Mailing address			
	City	State	ZIP code + 4	County
Foreign city	Foreign state & zip		Foreign country	Evening telephone number () ()

<p>1. Filing status (page 5) <i>If filing married joint or separate return, enter spouse's name and social security number in the address area above.</i></p> <p>a. <input type="checkbox"/> Single</p> <p>b. <input type="checkbox"/> Head of household</p> <p>c. <input type="checkbox"/> Married filing joint return</p> <p>d. <input type="checkbox"/> Married filing separate return</p> <p>e. <input type="checkbox"/> Qualifying widow(er)</p>	<p>2. Exemptions (enter the same number claimed on federal return) (page 5)</p> <p>a. <input type="checkbox"/> Yourself <i>If parents, or someone else, can claim you (or your spouse) as dependents, enter "0".</i></p> <p>b. <input type="checkbox"/> Spouse</p> <p>c. <input type="checkbox"/> Other dependents</p> <p>d. <input type="checkbox"/> Disabled (attach form TC-40D)</p> <p>e. <input type="checkbox"/> Total exemptions</p>	<p>3. Election campaign fund (page 5) (Checking a party does not increase your tax or reduce your refund.)</p> <table border="1"> <tr> <td></td> <td>Yourself</td> <td>Spouse</td> </tr> <tr> <td>Democrat</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td>Libertarian</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td>Natural Law</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td>Republican</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td>No Contribution</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> </table>		Yourself	Spouse	Democrat	<input type="checkbox"/>	<input type="checkbox"/>	Libertarian	<input type="checkbox"/>	<input type="checkbox"/>	Natural Law	<input type="checkbox"/>	<input type="checkbox"/>	Republican	<input type="checkbox"/>	<input type="checkbox"/>	No Contribution	<input type="checkbox"/>	<input type="checkbox"/>
	Yourself	Spouse																		
Democrat	<input type="checkbox"/>	<input type="checkbox"/>																		
Libertarian	<input type="checkbox"/>	<input type="checkbox"/>																		
Natural Law	<input type="checkbox"/>	<input type="checkbox"/>																		
Republican	<input type="checkbox"/>	<input type="checkbox"/>																		
No Contribution	<input type="checkbox"/>	<input type="checkbox"/>																		

4. Federal adjusted gross income from federal return (Telefile Record line I, 1040EZ line 4, 1040A line 19, or 1040 line 33)(page 6)	4	00
5. State income tax deducted as an itemized deduction on your 2001 federal form 1040, Schedule A, line 5 (page 6)	5	00
6. Enter entire amount of lump sum distribution reported on federal form 4972 (page 6)	6	00
7. State taxes allocated from an estate or trust (page 6)	7	00
8. Additions to income (page 6) <input type="checkbox"/> MSA \$ _____ <input type="checkbox"/> UESP \$ _____ <input type="checkbox"/> Reimbursed \$ _____ <input type="checkbox"/> Adoption expenses	8	00
9. Total adjusted income (add lines 4 through 8)	9	00

10. Standard or itemized deduction (page 6)	10	00	Round to nearest whole dollar.
11. Personal exemptions deduction. Multiply \$2,175 by line 2e. (High income see pages 6 & 7)	11	00	
12. One-half of the federal tax (page 7)	12	00	
13. State tax refund included on line 10 of federal form 1040 (page 7)	13	00	
14. Retirement exemption/deduction Check box if age 65 or older <input type="checkbox"/> Taxpayer is 65 or older <input type="checkbox"/> Spouse is 65 or older	14	00	
15. Interest from U. S. government obligations deduction (page 7 & 8)	15	00	
16. MSA and UESP deductions (page 8) <input type="checkbox"/> MSA \$ _____ <input type="checkbox"/> UESP \$ _____	16	00	
17. Health Care Insurance Premium deduction (page 8)	17	00	
18. Long-Term Care Insurance Premium deduction (pages 8 & 9)	18	00	
19. Other deductions (page 9) <input type="checkbox"/> Adoption exp. \$ _____ <input type="checkbox"/> R.R. Retire. \$ _____ <input type="checkbox"/> Native Amer. income \$ _____ <input type="checkbox"/> Other \$ _____	19	00	

20. Total deductions (add lines 10 through 19)	20	00
---	-----------	-----------

21. Utah 2001 taxable income (subtract line 20 from line 9) If less than zero, enter zero.	21	00
--	----	----

22. CALCULATE INCOME TAX (MUST READ INSTRUCTIONS on page 9) Worksheet on page 17. 22 00

23. FOR NON OR PART-YEAR RESIDENTS ONLY - Use form TC-40A, PART 3. Check "Nonresident" or "Part-year resident" below.

Nonresident. Home state abbreviation: _____ Part-year resident from ____/____/01 to ____/____/01

Information in the boxes below is from state form TC-40A, Part 3. (see page 9)

Box a. From Column A, line h	÷	Box b. From Column B, line h	=	Box c. Utah income tax ratio	23	00
------------------------------	---	------------------------------	---	------------------------------	----	----

24. Utah use tax (see pages 9 & 10) 24 00

25. Subtotal - Utah income tax and use tax (see page 10) UTAH RESIDENTS: Add lines 22 and 24. NON OR PART-YEAR RESIDENTS: Add lines 23 and 24.	25	00
---	-----------	-----------

Attach W-2 and other withholding forms here

CONTINUE ON LINE 26

26. Enter amount from line 25 (Subtotal - Utah income tax and use tax).....		26	00
CONTRIBUTIONS	27. Contributions (page 10)		
	27a. Homeless trust fund.....	<input type="radio"/> 27a	00
	27b. Kurt Oscarson Children' s organ transplant fund.....	<input type="radio"/> 27b	00
	27c. Utah nongame wildlife fund.....	<input type="radio"/> 27c	00
	27d. State colleges and universities..... College code <input type="radio"/> <input type="text"/>	<input type="radio"/> 27d	00
	27e. Nonprofit school district foundation..... School district code <input type="radio"/> <input type="text"/>	<input type="radio"/> 27e	00
Total contributions (add lines 27a through 27e).....		27	00
28. AMENDED RETURNS ONLY - previous refunds (page 11).....		28	00
29. Total tax and contributions (add lines 26, 27, and 28).....		29	00
30. UTAH TAX WITHHELD (must attach Utah W-2 and/or 1099 forms) (page 11).....		* 30	00
31. Credit for income tax paid to another state (page 11). Complete state form TC-40A, PART 1. Nonresidents do not qualify for this credit.....		• 31	00
32. Credit for Utah income taxes prepaid (page 11).....		• 32	00
33. AMENDED RETURNS ONLY - previous payments (page 11).....		• 33	00
WITHHOLDING AND CREDITS	34. Nonrefundable credits (pages 11 through 14)		
	34a. Credit.....	<input type="radio"/> <input type="text"/>	• 34a
	34b. Credit.....	<input type="radio"/> <input type="text"/>	• 34b
	34c. Credit.....	<input type="radio"/> <input type="text"/>	• 34c
	34d. Credit.....	<input type="radio"/> <input type="text"/>	• 34d
	34e. Credit.....	<input type="radio"/> <input type="text"/>	• 34e
Total nonrefundable credits (add lines lines 34a through 34e).....		34	00
<p style="color: red;">UTAH RESIDENT: The total nonrefundable credits on line 34 cannot exceed the amount on line 22 less line 31.</p> <p style="color: red;">NON or PART-YEAR RESIDENT: The total nonrefundable credits on line 34 cannot exceed the amount on line 23 less line 31.</p>			
35. Refundable credits (page 14)			
35a. Mineral production withholding tax credit (attach TC-675R and/or K-1).....	<input type="radio"/> 35a	00	<p style="color: red;">Attach copy of federal form 1040 Schedule F or K-1 for credit on line 35b.</p>
35b. Agricultural off-highway gas/undyed diesel tax credit. Gallons _____ X .245.....	<input type="radio"/> 35b	00	
35c. NON or PART-YEAR RESIDENTS ONLY Nonresident shareholder' s withholding tax credit Federal ID number <input type="text"/> - <input type="text"/>	<input type="radio"/> 35c	00	
35d. Special needs adoption tax credit.....	<input type="radio"/> 35d	00	
Total other credits (add lines 35a through 35d).....		35	00
36. Total withholding and credits (add lines 30, 31, 32, 33, 34, and 35).....		36	00
TAX DUE	37. Tax due - If line 29 is larger than line 36, subtract line 36 from line 29. This is the amount you owe. The taxpayer will be billed for any penalty and interest owed. See page 15 about payment and payment agreements. Mail payment to the Utah State Tax Commission, 210 N 1950 W, SLC, UT 84134-0200		TAX DUE ☹️ 37
	38. Refund - If line 36 is larger than line 29, subtract line 29 from line 36. This is your refund. (page 15)		REFUND 😊 38
REFUND	39. Enter the amount of refund you want applied to your 2002 taxes. Your refund will be reduced by this amount. (page 15)		
	If this is an AMENDED return, you cannot apply your refund to next year's tax liability.		• 39 00
<p>40. Do you want your REFUND DEPOSITED DIRECTLY into your account? If you choose to DIRECT DEPOSIT, provide the routing and account information below. You will not receive a check in the mail. (See page 15)</p> <p>Routing number <input type="text"/> Account number <input type="text"/> What type of account is it? <input type="radio"/> Checking account <input type="radio"/> Savings account</p>			

Under penalties of perjury, I declare that to the best of my knowledge and belief, this return and accompanying schedules reflect my true tax status.

Your signature	Date signed	Occupation		
Spouse' s signature (if filing jointly, both MUST sign even if only one had income)	Date signed	Occupation		
Paid Preparer' s Section	Paid preparer' s signature	Date signed	Check if self-employed <input type="checkbox"/>	Preparer' s Social Security no. or PTIN
	Firm' s name (or yours if self-employed)		Telephone number	E.I. number
	Paid preparer' s complete address		City	State ZIP code