

2018 Utah state tax benefits information and year-end deadlines

Utah taxpayers can save on Utah state income taxes while saving for education. Contributions to a my529 account qualify for a Utah state income tax credit or deduction, up to the amounts in the table below.

2018 Utah State Income Tax Benefits			
Tax Filer	my529 Account Type	2018 Maximum Allowable Contribution for a Utah State Income Tax Benefit	2018 Maximum Utah State Income Tax Credit per Beneficiary (5%)
Single	Individual	\$1,960	\$98
Joint	Individual	\$3,920	\$196
Trusts	Institutional	\$1,960	\$98
Grantor Trust, Married Filing Jointly	Institutional	\$3,920	\$196
Flow Through Entity	Institutional	\$1,960	\$98
Corporation	Institutional	\$1,960	\$1,960*

*deduction

Calculate your my529 income tax credit:

1. Multiply contribution amounts by 5 percent for each qualified beneficiary.
2. Add totals from each beneficiary.

A corporation may deduct up to \$1,960 per beneficiary from its income.

You qualify for the tax benefits even if you contribute more or less than the maximum amounts. If someone else contributes to your my529 account, you will receive the tax credit as the account owner.

Meet year-end deadlines to claim tax benefits for 2018 contributions to your my529 account.

2018 Year-End Deadlines		
Transaction	Online Process Deadline	Manual Process Deadline ¹
Contributions	Monday, December 31, 2018	Monday, December 31, 2018
New Accounts	Monday, December 31, 2018	Monday, December 31, 2018
Withdrawals	Monday, December 31, 2018	Monday, December 31, 2018
Investment Option Change	Monday, December 31, 2018	Monday, December 31, 2018
Incoming Rollovers (money received)	N/A	Monday, December 31, 2018
Transfers (between accounts with the same account owner)	Monday, December 31, 2018	Monday, December 31, 2018
Transfers (between accounts with different account owners)	N/A	Monday, December 31, 2018
Outgoing Rollovers	N/A	Friday, December 14, 2018
Please Note the Times	Must be received by my529 before 11:59 p.m., MT.	Mailed or hand-delivered documents must be received by my529 before 5 p.m. MT. Faxes must be received before 6 p.m. MT.

¹ A mailed contribution postmarked on or before the December 31, 2018, deadline but received in 2019 will be recorded as a 2019 tax-year contribution. All documents must be in good order—accurate, proper, legible, and complete.

[See the Program Description for more information.](#)

my529 ID No. _____

Date Received by my529 _____

User Initials _____

Form 110

Account Owner/Agent Signature Card

ABOUT THIS FORM

- This form is used to secure the signature of an account owner who opens an account online.
- Please complete this form in its entirety. The information and signature you provide below will be used to validate current and future account transactions such as withdrawals, internal transfers, and account information changes.
- Only one Account Owner/Agent Signature Card per account owner is required to be submitted to my529.
- Failure to complete and submit this document may delay future account transactions.

SUBMITTING THIS FORM

- Please print clearly—preferably in capital letters, using black or blue ink.
- To ask questions about completing this form, contact my529 toll-free at 800.418.2551 on business days from 7 a.m. to 6 p.m. MT.
- Return this form to: my529, PO Box 145100, Salt Lake City, UT 84114-5100. For delivery by overnight carrier, send to: my529, Board of Regents Building, Gateway 2, 60 South 400 West, Salt Lake City, UT 84101-1284. You may also fax this form to 800.214.2956.

1 Account Owner/Agent Information

Account Owner/Agent's U.S. Social Security Number (Required)	OR	Taxpayer Identification Number (Required)
Account Owner/Agent's Last Name	First Name	Middle Name

2 my529 Account Information

my529 Account Number	Beneficiary's Last Name	First Name
my529 Account Number	Beneficiary's Last Name	First Name
my529 Account Number	Beneficiary's Last Name	First Name
my529 Account Number	Beneficiary's Last Name	First Name

If the number of beneficiaries exceeds the space available, attach a separate page showing the information requested in this section for the additional beneficiaries.

3 Signature Authorization

By signing below,

- I certify that I have received, read, understand, and agree to all the terms and conditions in the Program Description and Account Agreement as presented when I opened my account online.
- I understand the my529 requires my name, U.S. Social Security or Taxpayer Identification Number, and signature in order to verify my identity.
- I certify that the information provided on this form is true and accurate.



Account Owner/Agent Signature

Date (mm/dd/yyyy)

Account Owner/Agent Name (please print)

Title (if signed on behalf of a trust, corporation, or other institution)