



2019 IRS 1040 FORM SAMPLE

Highlighted fields represent items we are required to verify for you (and your spouse, if married) and/or parents (if you are a dependent student) if you are required to submit documents to the financial aid office.

1ST PAGE

Form **1040** Department of the Treasury—Internal Revenue Service (99) **2019** OMB No. 1545-0074 IRS Use Only—Do not write or staple in this space.

Filing Status Single Married filing jointly Married filing separately (MFS) Head of household (HOH) Qualifying widow(er) (QW)

Check only one box. If you checked the MFS box, enter the name of spouse. If you checked the HOH or QW box, enter the child's name if the qualifying person is a child but not your dependent.

Your first name and middle initial _____ Last name _____ Your social security number _____

If joint return, spouse's first name and middle initial _____ Last name _____ Spouse's social security number _____

Home address (number and street). If you have a P.O. box, see instructions. _____ Apt. no. _____

City, town or post office, state, and ZIP code. If you have a foreign address, also complete spaces below (see instructions). _____

Foreign country name _____ Foreign province/state/country _____ Foreign postal code _____

Standard Deduction **Someone can claim:** You as a dependent Your spouse as a dependent Spouse itemizes on a separate return or you were a dual-status alien

Age/Blindness You: Were born before January 2, 1955 Are blind Spouse: Was born before January 2, 1955 Is blind

Dependents (see instructions):

(1) First name	Last name	(2) Social security number	(3) Relationship to you	(4) <input type="checkbox"/> if qualifies for (see instructions): Child tax credit	Credit for other dependents
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

1 Wages, salaries, tips, etc. Attach Form(s) W-2	1 _____
2a Tax-exempt interest	2a _____
3a Qualified dividends	3a _____
4a IRA distributions	4a _____
c Pensions and annuities	4c _____
5a Social security benefits	5a _____
6 Capital gain or (loss). Attach Schedule D if required. If not required, check here <input type="checkbox"/>	6 _____
7a Other income from Schedule 1, line 9	7a _____
b Add lines 1, 2b, 3b, 4b, 4d, 5b, 6, and 7a. This is your total income	7b _____
8a Adjustments to income from Schedule 1, line 22	8a _____
b Subtract line 8a from line 7b. This is your adjusted gross income	8b _____
9 Standard deduction or itemized deductions (from Schedule A)	9 _____
10 Qualified business income deduction. Attach Form 8995 or Form 8995-A	10 _____
11a Add lines 9 and 10	11a _____
b Taxable income. Subtract line 11a from line 8b. If zero or less, enter -0-	11b _____

Standard Deduction for—
• Single or Married filing separately, \$12,200
• Married filing jointly or Qualifying widow(er), \$24,400
• Head of household, \$18,350
• If you checked any box under Standard Deduction, see instructions.

For Disclosure, Privacy Act, and Paperwork Reduction Act Notice, see separate instructions. Cat. No. 11320B Form **1040** (2019)

Filing Status

Wages

IRA Distribution

Pensions & Annuities

Adjusted Gross Income



2019 IRS 1040 FORM SAMPLE

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Form 1040 (2019) Page **2**

12a Tax (see inst.) Check if any from Form(s): <input type="checkbox"/> 8814 <input type="checkbox"/> 2 <input type="checkbox"/> 4972 <input type="checkbox"/> 3 <input type="checkbox"/>	12a	
b Add Schedule 2, line 3, and line 12a and enter the total	12b	
13a Child tax credit or credit for other dependents	13a	
b Add Schedule 3, line 7, and line 13a and enter the total	13b	
14 Subtract line 13b from line 12b. If zero or less, enter -0-	14	
15 Other taxes, including self-employment tax, from Schedule 2, line 10	15	
16 Add lines 14 and 15. This is your total tax	16	
17 Federal income tax withheld from Forms W-2 and 1099	17	
18 Other payments and refundable credits:		
a Earned income credit (EIC)	18a	
b Additional child tax credit. Attach Schedule 8812	18b	
c American opportunity credit from Form 8863, line 8	18c	
d Schedule 3, line 14	18d	
e Add lines 18a through 18d. These are your total other payments and refundable credits	18e	
19 Add lines 17 and 18e. These are your total payments	19	
20 If line 19 is more than line 16, subtract line 16 from line 19. This is the amount you overpaid	20	
21a Amount of line 20 you want refunded to you . If Form 8888 is attached, check here <input type="checkbox"/>	21a	
b Routing number	c Type: <input type="checkbox"/> Checking <input type="checkbox"/> Savings	
d Account number		
22 Amount of line 20 you want applied to your 2020 estimated tax	22	
23 Amount you owe . Subtract line 19 from line 16. For details on how to pay, see instructions	23	
24 Estimated tax penalty (see instructions)	24	

Refund

Direct deposit? See instructions.

Amount You Owe

23 Amount you owe. Subtract line 19 from line 16. For details on how to pay, see instructions

24 Estimated tax penalty (see instructions)

Third Party Designee

Do you want to allow another person (other than your paid preparer) to discuss this return with the IRS? See instructions. Yes. Complete below. No

Designee's name Phone no. Personal identification number (PIN)

Sign Here

Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Your signature Date Your occupation If the IRS sent you an Identity Protection PIN, enter it here (see inst.)

Spouse's signature. If a joint return, **both** must sign. Date Spouse's occupation If the IRS sent your spouse an Identity Protection PIN, enter it here (see inst.)

Phone no. Email address

Paid Preparer Use Only

Preparer's name Preparer's signature Date PTIN Check if: 3rd Party Designee Self-employed

Firm's name Phone no.

Firm's address Firm's EIN

Go to www.irs.gov/Form1040 for instructions and the latest information. Form **1040** (2019)

Income Tax for 2019

Signatures

Taxes need to be signed if "self prepared" or include, name, address and EIN/PTIN if prepared by a firm or an accountant.

SCHEDULE 1

SCHEDULE 1
(Form 1040 or 1040-SR)

Department of the Treasury
Internal Revenue Service

Additional Income and Adjustments to Income

► Attach to Form 1040 or 1040-SR.
► Go to www.irs.gov/Form1040 for instructions and the latest information.

OMB No. 1545-0074
2019
Attachment Sequence No. **01**

Name(s) shown on Form 1040 or 1040-SR _____ Your social security number _____

At any time during 2019, did you receive, sell, send, exchange, or otherwise acquire any financial interest in any virtual currency? Yes No

Part 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. Attach Schedule E	5	
6	Farm income or (loss). Attach Schedule F	6	
7	Unemployment compensation	7	
8	Other income. List type and amount ► _____	8	
9	Combine lines 1 through 8. Enter here and on Form 1040 or 1040-SR, line 7a	9	

Part II Adjustments to Income

10	Educator expenses	10	
11	Certain business expenses of reservists, performing artists, and fee-basis government officials. Attach Form 2106	11	
12	Health savings account deduction. Attach Form 8889	12	
13	Moving expenses for members of the Armed Forces. Attach Form 3903	13	
14	Deductible part of self-employment tax. Attach Schedule SE	14	
15	Self-employed SEP, SIMPLE, and qualified plans	15	
16	Self-employed health insurance deduction	16	
17	Penalty on early withdrawal of savings	17	
18a	Alimony paid	18a	
b	Recipient's SSN _____		
c	Date of original divorce or separation agreement (see instructions) ► _____		
19	IRA deduction	19	
20	Student loan interest deduction	20	
21	Tuition and fees. Attach Form 8917	21	
22	Add lines 10 through 21. These are your adjustments to income . Enter here and on Form 1040 or 1040-SR, line 8a	22	

For Paperwork Reduction Act Notice, see your tax return instructions. Cat. No. 71479F Schedule 1 (Form 1040 or 1040-SR) 2019

Business Income or (loss)

Note: We must collect the Schedule C if business income (or loss) was reported on this line.

Farm Income or (loss)

Note: We must collect the Schedule F if farm income (or loss) was reported on this line.

IRS Deductions & Payments

SCHEDULE 2

SCHEDULE 2
(Form 1040 or 1040-SR)

Department of the Treasury
Internal Revenue Service

Additional Taxes

► Attach to Form 1040 or 1040-SR.
► Go to www.irs.gov/Form1040 for instructions and the latest information.

OMB No. 1545-0074
2019
Attachment Sequence No. **02**

Name(s) shown on Form 1040 or 1040-SR _____ Your social security number _____

Part I Tax

1	Alternative minimum tax. Attach Form 6251	1	
2	Excess advance premium tax credit repayment. Attach Form 8962	2	
3	Add lines 1 and 2. Enter here and include on Form 1040 or 1040-SR, line 12b	3	

Part II Other Taxes

4	Self-employment tax. Attach Schedule SE	4	
5	Unreported social security and Medicare tax from Form: a <input type="checkbox"/> 4137 b <input type="checkbox"/> 8919	5	
6	Additional tax on IRAs, other qualified retirement plans, and other tax-favored accounts. Attach Form 5329 if required	6	
7a	Household employment taxes. Attach Schedule H	7a	
b	Repayment of first-time homebuyer credit from Form 5405. Attach Form 5405 if required	7b	
8	Taxes from: a <input type="checkbox"/> Form 8959 b <input type="checkbox"/> Form 8960 c <input type="checkbox"/> Instructions; enter code(s) _____	8	
9	Section 965 net tax liability installment from Form 965-A	9	
10	Add lines 4 through 8. These are your total other taxes . Enter here and on Form 1040 or 1040-SR, line 15	10	

For Paperwork Reduction Act Notice, see your tax return instructions. Cat. No. 71478U Schedule 2 (Form 1040 or 1040-SR) 2019

Excess Advance Premium Tax

Note: we must collect schedule 2 if an amount was reported on this line.

SCHEDULE 3

SCHEDULE 3
(Form 1040 or 1040-SR)

Department of the Treasury
Internal Revenue Service

Additional Credits and Payments

▶ Attach to Form 1040 or 1040-SR.
▶ Go to www.irs.gov/Form1040 for instructions and the latest information.

OMB No. 1545-0074

2019

Attachment
Sequence No. **03**

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

Your social security number

Part I Nonrefundable Credits

1	Foreign tax credit. Attach Form 1116 if required	1	
2	Credit for child and dependent care expenses. Attach Form 2441	2	
3	Education credits from Form 8863, line 19	3	
4	Retirement savings contributions credit. Attach Form 8880	4	
5	Residential energy credits. Attach Form 5695	5	
6	Other credits from Form: a <input type="checkbox"/> 3800 b <input type="checkbox"/> 8801 c <input type="checkbox"/> _____	6	
7	Add lines 1 through 6. Enter here and include on Form 1040 or 1040-SR, line 13b	7	

Part II Other Payments and Refundable Credits

8	2019 estimated tax payments and amount applied from 2018 return	8	
9	Net premium tax credit. Attach Form 8962	9	
10	Amount paid with request for extension to file (see instructions)	10	
11	Excess social security and tier 1 RRTA tax withheld	11	
12	Credit for federal tax on fuels. Attach Form 4136	12	
13	Credits from Form: a <input type="checkbox"/> 2439 b <input checked="" type="checkbox"/> Reserved c <input type="checkbox"/> 8885 d <input type="checkbox"/> _____	13	
14	Add lines 8 through 13. Enter here and on Form 1040 or 1040-SR, line 18d	14	

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

Cat. No. 71480G

Schedule 3 (Form 1040 or 1040-SR) 2019

Education Credit

Note: we must collect schedule 3 if an amount was reported on this line.

SCHEDULE C

SCHEDULE C
Profit or Loss From Business
(Sole Proprietorship)

OMB No. 1545-0074
2019
Attachment
Sequence No. 09

Department of the Treasury
Internal Revenue Service (IRS) ▶ Go to www.irs.gov/ScheduleC for instructions and the latest information.
▶ Attach to Form 1040, 1040-SR, 1040-NR, or 1041; partnerships generally must file Form 1065.

Name of proprietor: _____ Social security number (SSN): _____

A Principal business or profession, including product or service (see instructions) _____

B Enter code from instructions _____

C Business name, if no separate business name, leave blank. _____

D Employer ID number (EIN) (see instr.) _____

E Business address (including suite or room no.) _____
City, town or post office, state, and ZIP code _____

F Accounting method: (1) Cash (2) Accrual (3) Other (specify) ▶ _____

G Did you "materially participate" in the operation of this business during 2019? If "No," see instructions for limit on losses. Yes No

H If you started or acquired this business during 2019, check here. Yes No

I Did you make any payments in 2019 that would require you to file Form(s) 1099? (see instructions) Yes No

If "Yes," did you or will you file required Forms 1099? Yes No

Note: We must collect the Schedule C if business income (or loss) was reported.

SCHEDULE E

SCHEDULE E
Supplemental Income and Loss
(From rental real estate, royalties, partnerships, S corporations, estates, trusts, REMICs, etc.)

OMB No. 1545-0074
2019
Attachment
Sequence No. 13

Department of the Treasury
Internal Revenue Service (IRS) ▶ Go to www.irs.gov/ScheduleE for instructions and the latest information.
Name(s) shown on return: _____ Your social security number: _____

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.

A Did you make any payments in 2019 that would require you to file Form(s) 1099? (see instructions) Yes No

B If "Yes," did you or will you file required Forms 1099? Yes No

Ia Physical address of each property (street, city, state, ZIP code) _____

Ib Type of Property (from list below) _____

2 For each rental real estate property listed above, report the number of fair rental and personal use days. Check the QJV box only if you meet the requirements to file as a qualified joint venture. See instructions.

Type of Property	Fair Rental Days	Personal Use Days	QJV
A	A	A	
B	B	B	
C	C	C	

Type of Property:
1 Single Family Residence 3 Vacation/Short-Term Rental 5 Land
2 Multi-Family Residence 4 Commercial 6 Royalties 7 Self-Rental 8 Other (describe) _____

Income:	Properties:	A	B	C
3 Rents received	3			
4 Royalties received	4			
Expenses:				
5 Advertising	5			
6 Auto and travel (see instructions)	6			
7 Cleaning and maintenance	7			
8 Commissions	8			
9 Insurance	9			
10 Legal and other professional fees	10			
11 Management fees	11			
12 Mortgage interest paid to banks, etc. (see instructions)	12			
13 Other interest	13			
14 Repairs	14			
15 Supplies	15			
16 Taxes	16			
17 Utilities	17			
18 Depreciation expense or depletion	18			
19 Other (list) ▶	19			
20 Total expenses. Add lines 5 through 19	20			
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			
22 Deductible rental real estate loss after limitation, if any, on Form 8562 (see instructions)	22			
23a Total of all amounts reported on line 3 for all rental properties	23a			
23b Total of all amounts reported on line 4 for all royalty properties	23b			
23c Total of all amounts reported on line 12 for all properties	23c			
23d Total of all amounts reported on line 18 for all properties	23d			
23e 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 positive amounts shown on line 21 and rental real estate losses from line 22. Enter total losses here	25			
26 Total rental real estate and royalty income or (loss). Combine lines 24 and 25. Enter the result here. If Parts I, III, IV, and line 40 on page 2 do not apply to you, also enter this amount on Schedule 1 (Form 1040 or 1040-SR), line 5, or Form 1040-NR, line 18. Otherwise, include this amount in the total on line 41 on page 2	26			

For Paperwork Reduction Act Notice, see the separate instructions. Cat. No. 11344L Schedule E (Form 1040 or 1040-SR) 2019

Note: We must collect the Schedule E if assets were reported.

SCHEDULE D

SCHEDULE D
Capital Gains and Losses

OMB No. 1545-0074
2019
Attachment
Sequence No. 12

Department of the Treasury
Internal Revenue Service (IRS) ▶ Go to www.irs.gov/ScheduleD for instructions and the latest information.
▶ Use Form 8949 to list your transactions for lines 1b, 2, 3, 6b, 9, and 10.

Name(s) shown on return: _____ Your social security number: _____

Did you dispose of any investment(s) in a qualified opportunity fund during the tax year? Yes No

If "Yes," attach Form 8949 and see its instructions for additional requirements for reporting your gain or loss.

Part I Short-Term Capital Gains and Losses—Generally Assets Held One Year or Less (see instructions)

See instructions for how to figure the amounts to enter on the lines below.
This form may be easier to complete if you round off cents to whole dollars.

	(d) Proceeds (sales price)	(e) Cost (or other basis)	(f) Adjustments to gain or loss from Form(s) 8949, Part I, line 2, column (f)	(g) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (f)
1a Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b				
1b Totals for all transactions reported on Form(s) 8949 with Box A checked				
2 Totals for all transactions reported on Form(s) 8949 with Box B checked				
3 Totals for all transactions reported on Form(s) 8949 with Box C checked				
4 Short-term gain from Form 6252 and short-term gain or (loss) from Forms 4684, 6781, and 8824				4
5 Net short-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1				5
6 Short-term capital loss carryover. Enter the amount, if any, from line 8 of your Capital Loss Carryover Worksheet in the instructions				6
7 Net short-term capital gain or (loss). Combine lines 1a through 6 in column (g). If you have any long-term capital gains or losses, go to Part II below. Otherwise, go to Part III on the back				7

Part II Long-Term Capital Gains and Losses—Generally Assets Held More Than One Year (see instructions)

See instructions for how to figure the amounts to enter on the lines below.
This form may be easier to complete if you round off cents to whole dollars.

	(d) Proceeds (sales price)	(e) Cost (or other basis)	(f) Adjustments to gain or loss from Form(s) 8949, Part I, line 2, column (f)	(g) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (f)
8a Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b				
8b Totals for all transactions reported on Form(s) 8949 with Box D checked				
9 Totals for all transactions reported on Form(s) 8949 with Box E checked				
10 Totals for all transactions reported on Form(s) 8949 with Box F checked				
11 Gain from Form 4797, Part I; long-term gain from Forms 2439 and 6252; and long-term gain or (loss) from Forms 4684, 6781, and 8824				11
12 Net long-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1				12
13 Capital gain distributions. See the instructions				13
14 Long-term capital loss carryover. Enter the amount, if any, from line 13 of your Capital Loss Carryover Worksheet in the instructions				14
15 Net long-term capital gain or (loss). Combine lines 8a through 14 in column (g). Then go to Part III on the back				15

For Paperwork Reduction Act Notice, see your tax return instructions. Cat. No. 11339H Schedule D (Form 1040 or 1040-SR) 2019

Note: We must collect the Schedule D if capital gains and losses were reported.



2019 IRS TAX RETURN TRANSCRIPT SAMPLE

Sample Tax Return Transcript: Marcos and Carolina Tamez

Internal Revenue Service
 United States Department of the Treasury

This Product Contains Sensitive Taxpayer Data

Request Date: 08-30-2020
 Response Date: 08-30-2020
 Tracking Number: XXXXXXXXXXXXX

Tax Return Transcript
 SSN Provided: XXX-XX-4672
 Tax Period Ending: Dec. 31, 2019

Tax Year

The following items reflect the amount as shown on the return (PR), and the amount as adjusted (PC), if applicable. They do not show subsequent activity on the account.

NAME(S) SHOWN ON RETURN: CARO MARCO TAMEZ
 ADDRESS: 8741 W

SSN: XXX-XX-4672
 SPOUSE SSN: XXX-XX-2280

Filing Status & Form Filed

1040: p.1 FILING STATUS: Married Filing Joint
 FORM NUMBER: 1040
 CYCLE POSTED: 20201602
 RECEIVED DATE: Apr. 18, 2020
 REMITTANCE: \$0.00
 EXEMPTION NUMBER: 04
 OTHER DEPENDENT CREDIT TOTAL ELIGIBLE PER COMPUTER: 00
 OTHER DEPENDENT CREDIT TOTAL ELIGIBLE VERIFIED: 00
 EXEMPTION NUMBER: 4
 1040: p.1 DEPENDENT 1 NAME CTRL: TAMEZ
 DEPENDENT 1 SSN: XXX-XX-6772
 DEPENDENT 2 NAME CTRL: TAMEZ
 DEPENDENT 2 SSN: XXX-XX-8834
 DEPENDENT 3 NAME CTRL:
 DEPENDENT 3 SSN:
 DEPENDENT 4 NAME CTRL:
 DEPENDENT 4 SSN:
 PTIN:
 PREPARER EIN:

Wages, Business and Farm Income

Income

1040: 1 WAGES, SALARIES, TIIPS, ETC: \$131,638.00
 TAXABLE INTEREST INCOME: SCH B: \$1,890.00
 1040: 2a TAX-EXEMPT INTEREST: \$0.00
 ORDINARY DIVIDEND INCOME: SCH B: \$0.00
 QUALIFIED DIVIDENDS: \$0.00
 REFUNDS OF STATE/LOCAL TAXES: \$0.00
 ALIMONY RECEIVED: \$0.00
 BUSINESS INCOME OR LOSS (Schedule C): \$0.00
 Sch 1: 3 BUSINESS INCOME OR LOSS: SCH C PER COMPUTER: \$0.00
 CAPITAL GAIN OR LOSS: (Schedule D): \$0.00
 CAPITAL GAINS OR LOSS: SCH D PER COMPUTER: \$0.00
 OTHER GAINS OR LOSSES (Form 4797): \$0.00
 1040: 4a TOTAL IRA DISTRIBUTIONS: \$0.00
 1040: 4b TAXABLE IRA DISTRIBUTIONS: \$0.00
 1040: 4c TOTAL PENSIONS AND ANNUITIES: \$0.00
 1040: 4d TAXABLE PENSION/ANNUITY AMOUNT: \$0.00
 ADDITIONAL INCOME: \$8,124.00
 ADDITIONAL INCOME PER COMPUTER: \$8,124.00
 REFUNDABLE CREDITS PER COMPUTER: \$0.00
 REFUNDABLE EDUCATION CREDIT PER COMPUTER: \$0.00

Untaxed Portion of IRS, Pension and Annuities

IRA Deductions and Payments
 KEOGH/SEP Contribution Deductions
 Plus
 IRS Deduction Per Computer

Adjusted Gross Income (AGI)

QUALIFIED BUSINESS INCOME DEDUCTION: \$0.00
 RENT/ROYALTY/PARTNERSHIP/ESTATE (Schedule E): \$0.00
 RENT/ROYALTY/PARTNERSHIP/ESTATE (Schedule E) PER COMPUTER: \$0.00
 RENT/ROYALTY INCOME/LOSS PER COMPUTER: \$0.00
 ESTATE/TRUST INCOME/LOSS PER COMPUTER: \$0.00
 PARTNERSHIP/S-CORP INCOME/LOSS PER COMPUTER: \$0.00
 FARM INCOME OR LOSS (Schedule F) PER COMPUTER: \$0.00
 UNEMPLOYMENT COMPENSATION: \$0.00
 TOTAL SOCIAL SECURITY BENEFITS: \$0.00
 TAXABLE SOCIAL SECURITY BENEFITS: \$0.00
 TAXABLE SOCIAL SECURITY BENEFITS PER COMPUTER: \$0.00
 OTHER INCOME: \$8,124.00
 SCHEDULE EIC SE INCOME PER COMPUTER: \$0.00
 SCHEDULE EIC EARNED INCOME PER COMPUTER: \$0.00
 SCH EIC DISQUALIFIED INC COMPUTER: \$0.00
 QUALIFIED BUSINESS INCOME DEDUCTION: \$0.00
 F9996 QUALIFIED BUSINESS INCOME DEDUCTION COMPUTER: \$0.00
 F9996 NET CAPITAL GAINS COMPUTER: \$0.00
 TOTAL INCOME: \$141,352.00
 TOTAL INCOME PER COMPUTER: \$141,352.00

Adjustments to Income

EDUCATOR EXPENSES: \$0.00
 EDUCATOR EXPENSES PER COMPUTER: \$0.00
 RESERVIST AND OTHER BUSINESS EXPENSE: \$0.00
 HEALTH SAVINGS ACCT DEDUCTION: \$0.00
 Sch 1: 12 SELF-EMP HEALTH INS DEDUCTION PER COMPT: \$0.00
 MOVING EXPENSES: F9903: \$0.00
 SELF EMPLOYMENT TAX DEDUCTION: \$0.00
 SELF EMPLOYMENT TAX DEDUCTION PER COMPUTER: \$0.00
 SELF EMPLOYMENT TAX DEDUCTION VERIFIED: \$0.00
 Sch 1: 15 KEOGH/SEP CONTRIBUTION DEDUCTION: \$0.00
 EARLY WITHDRAWAL OF SAVINGS PENALTY: \$0.00
 ALIMONY PAID SSN: \$0.00
 ALIMONY PAID: \$0.00
 IRA DEDUCTION: \$0.00
 Sch 1: 16 IRA DEDUCTION PER COMPUTER: \$0.00
 STUDENT LOAN INTEREST DEDUCTION: \$0.00
 STUDENT LOAN INTEREST DEDUCTION PER COMPUTER: \$0.00
 STUDENT LOAN INTEREST DEDUCTION VERIFIED: \$0.00
 TUITION AND FEES DEDUCTION: \$0.00
 TUITION AND FEES DEDUCTION PER COMPUTER: \$0.00
 DOMESTIC PRODUCTION ACTIVITIES DEDUCTION: \$0.00
 DOMESTIC PRODUCTION ACTIVITIES DEDUCTION PER COMPUTER: \$0.00
 OTHER ADJUSTMENTS: \$0.00
 ARCHER MSA DEDUCTION: \$0.00
 ARCHER MSA DEDUCTION PER COMPUTER: \$0.00
 TOTAL ADJUSTMENTS: \$0.00
 TOTAL ADJUSTMENTS PER COMPUTER: \$0.00
 1040: 8b ADJUSTED GROSS INCOME: \$141,352.00
 ADJUSTED GROSS INCOME PER COMPUTER: \$141,352.00

Tax and Credits

65-OR-OVER: \$0.00
 BLIND: \$0.00
 SPOUSE 65-OR-OVER: \$0.00
 SPOUSE BLIND: \$0.00
 STANDARD DEDUCTION PER COMPUTER: \$0.00
 ADDITIONAL STANDARD DEDUCTION PER COMPUTER: \$0.00
 TAX TABLE INCOME PER COMPUTER: \$107,638.00
 EXEMPTION AMOUNT PER COMPUTER: \$0.00
 TAXABLE INCOME: \$107,638.00
 TAXABLE INCOME PER COMPUTER: \$107,638.00
 TOTAL POSITIVE INCOME PER COMPUTER: \$141,352.00
 TENTATIVE TAX: \$15,397.00
 TENTATIVE TAX PER COMPUTER: \$15,397.00

FORM 8814 ADDITIONAL TAX AMOUNT	\$0.00
TAX ON INCOME LESS SOC SEC INCOME PER COMPUTER	\$0.00
FORM 6251 ALTERNATIVE MINIMUM TAX	\$0.00
FORM 6251 ALTERNATIVE MINIMUM TAX PER COMPUTER	\$0.00
FOREIGN TAX CREDIT	\$0.00
FOREIGN TAX CREDIT PER COMPUTER	\$0.00
FOREIGN INCOME EXCLUSION PER COMPUTER	\$0.00
FOREIGN INCOME EXCLUSION TAX PER COMPUTER	\$0.00
Sch 2: 2** EXCESS ADVANCE PREMIUM TAX CREDIT REPAYMENT AMOUNT	-\$0.00
EXCESS ADVANCE PREMIUM TAX CREDIT REPAYMENT VERIFIED AMOUNT	\$0.00
CHILD & DEPENDENT CARE CREDIT	\$58.80
CHILD & DEPENDENT CARE CREDIT PER COMPUTER	\$58.80
CREDIT FOR ELDERLY AND DISABLED	\$0.00
CREDIT FOR ELDERLY AND DISABLED PER COMPUTER	\$0.00
EDUCATION CREDIT	\$0.00
Sch 3: 3 EDUCATION CREDIT PER COMPUTER	-\$0.00
GROSS EDUCATION CREDIT PER COMPUTER	\$0.00
RETIREMENT SAVINGS CONTRB CREDIT	\$0.00
RETIREMENT SAVINGS CONTRB CREDIT PER COMPUTER	\$0.00
PATH RET SAV CONTRB: F8880 LNSA:	\$0.00
SEC RET SAV CONTRB: F8880 LNSB:	\$0.00
TOTAL RETIREMENT SAVINGS CONTRIBUTION: F8880 CMPTR:	\$0.00
RESIDENTIAL ENERGY CREDIT	\$0.00
RESIDENTIAL ENERGY CREDIT PER COMPUTER	\$0.00
CHILD AND OTHER DEPENDENT CREDIT	\$4,000.00
CHILD AND OTHER DEPENDENT CREDIT PER COMPUTER	\$4,000.00
ADOPTION CREDIT: F8839:	\$0.00
ADOPTION CREDIT PER COMPUTER	\$0.00
FORM 8896 MORTGAGE CERTIFICATE CREDIT	\$0.00
FORM 8896 MORTGAGE CERTIFICATE CREDIT PER COMPUTER	\$0.00
F8800, F8801 AND OTHER CREDIT AMOUNT	\$0.00
FORM 3800 GENERAL BUSINESS CREDITS	\$0.00
FORM 3800 GENERAL BUSINESS CREDITS PER COMPUTER	\$0.00
PRIOR YR MIN TAX CREDIT: F8801:	\$0.00
PRIOR YR MIN TAX CREDIT: F8801 PER COMPUTER	\$0.00
F8936 ELECTRIC MOTOR VEHICLE CREDIT AMOUNT	\$0.00
F8936 ELECTRIC MOTOR VEHICLE CREDIT PER COMPUTER	\$0.00
F8910 ALTERNATIVE MOTOR VEHICLE CREDIT AMOUNT	\$0.00
F8910 ALTERNATIVE MOTOR VEHICLE CREDIT PER COMPUTER	\$0.00
OTHER CREDITS	\$0.00
TOTAL CREDITS	\$4,059.00
TOTAL CREDITS PER COMPUTER	\$4,059.00
*** INCOME TAX AFTER CREDITS PER COMPUTER	-\$11,338.00
1040: 14 ****Income Tax After Credits Per Computer	-\$11,338.00
Sch 2: 2 - **Excess Advance Premium Tax Credit Repayment Amount	-\$0.00
**** Income Tax Paid	=\$11,338.00
Other Taxes	
SE TAX	\$0.00
SE TAX PER COMPUTER	\$0.00
SOCIAL SECURITY AND MEDICARE TAX ON UNREPORTED TIPS	\$0.00
SOCIAL SECURITY AND MEDICARE TAX ON UNREPORTED TIPS PER COMPUTER	\$0.00
TAX ON QUALIFIED PLANS F8328 (SP)	\$0.00
TAX ON QUALIFIED PLANS F8328 PER COMPUTER	\$0.00
IRAF TAX PER COMPUTER	\$0.00
TP TAX FIGURES (REDUCED BY IRAF) PER COMPUTER	\$11,338.00
THE TOTAL TAX (REDUCED BY IRAF) PER COMPUTER	\$11,338.00
TOTAL OTHER TAXES PER COMPUTER	\$0.00
UNPAID FICA ON REPORTED TIPS	\$0.00
F8959-8960 OTHER TAXES	\$0.00
TOTAL OTHER TAXES	\$0.00
RECAPTURE TAX: F8611	\$0.00
HOUSEHOLD EMPLOYMENT TAXES	\$0.00
HOUSEHOLD EMPLOYMENT TAXES PER COMPUTER	\$0.00
HEALTH CARE RESPONSIBILITY PENALTY	\$0.00
HEALTH CARE RESPONSIBILITY PENALTY VERIFIED	\$0.00
HEALTH COVERAGE RECAPTURE: F8885	\$0.00
RECAPTURE TAXES	\$0.00
TOTAL ASSESSMENT PER COMPUTER	\$11,338.00
****If Income Tax Paid is negative, enter zero.	

→ Educational Credit

→ Taxes Paid

TOTAL TAX LIABILITY TP FIGURES	\$11,338.00
TOTAL TAX LIABILITY TP FIGURES PER COMPUTER	\$11,338.00
Payments	
FEDERAL INCOME TAX WITHHELD	\$11,291.00
HEALTH CARE: INDIVIDUAL RESPONSIBILITY	\$0.00
HEALTH CARE FULL-YEAR COVERAGE INDICATOR	\$0.00
ESTIMATED TAX PAYMENTS	\$0.00
OTHER PAYMENT CREDIT	\$0.00
REFUNDABLE EDUCATION CREDIT	\$0.00
REFUNDABLE EDUCATION CREDIT PER COMPUTER	\$0.00
REFUNDABLE EDUCATION CREDIT VERIFIED	\$0.00
REFUNDABLE CREDITS	\$0.00
EARNED INCOME CREDIT	\$0.00
EARNED INCOME CREDIT PER COMPUTER	\$0.00
EARNED INCOME CREDIT NONTAXABLE COMBAT PAY	\$0.00
SCHEDULE 8812 NONTAXABLE COMBAT PAY	\$0.00
EXCESS SOCIAL SECURITY & RRTA TAX WITHHELD	\$0.00
SCHEDULE 8812 TOT SS/MEDICARE WITHHELD	\$0.00
SCHEDULE 8812 ADDITIONAL CHILD TAX CREDIT	\$0.00
SCHEDULE 8812 ADDITIONAL CHILD TAX CREDIT PER COMPUTER	\$0.00
SCHEDULE 8812 ADDITIONAL CHILD TAX CREDIT VERIFIED	\$0.00
AMOUNT PAID WITH FORM 4868	\$0.00
FORM 2439 RECALLED INVESTMENT COMPANY CREDIT	\$0.00
FORM 4136 CREDIT FOR FEDERAL TAX ON FUELS	\$0.00
FORM 4136 CREDIT FOR FEDERAL TAX ON FUELS PER COMPUTER	\$0.00
HEALTH COVERAGE TX CR: F8885	\$0.00
SEC 965 TAX INSTALLMENT	\$0.00
SEC 965 TAX LIABILITY	\$0.00
PREMIUM TAX CREDIT AMOUNT	\$0.00
PREMIUM TAX CREDIT VERIFIED AMOUNT	\$0.00
PRIMARY NAP FIRST TIME HOME BUYER INSTALLMENT AMT	\$0.00
SECONDARY NAP FIRST TIME HOME BUYER INSTALLMENT AMT	\$0.00
FIRST TIME HOMEBUYER CREDIT REPAYMENT AMOUNT	\$0.00
FORM 5405 TOTAL HOMEBUYER'S CREDIT REPAYMENT PER COMPUTER	\$0.00
SMALL EMPLOYER HEALTH INSURANCE PER COMPUTER	\$0.00
SMALL EMPLOYER HEALTH INSURANCE PER COMPUTER (2)	\$0.00
FORM 2439 AND OTHER CREDITS	\$0.00
TOTAL PAYMENTS	\$11,291.00
TOTAL PAYMENTS PER COMPUTER	\$11,291.00
Refund or Amount Owed	
AMOUNT YOU OWE	\$47.00
APPLIED TO NEXT YEAR'S ESTIMATED TAX	\$0.00
ESTIMATED TAX PENALTY	\$0.00
TAX ON INCOME LESS STATE REFUND PER COMPUTER	\$0.00
BAL DUE/OVER PYMT USING TP FIG PER COMPUTER	\$47.00
BAL DUE/OVER PYMT USING COMPUTER FIGURES	\$47.00
FORM 8888 TOTAL REFUND PER COMPUTER	\$0.00
Third Party Designee	
THIRD PARTY DESIGNEE ID NUMBER	
AUTHORIZATION INDICATOR	0
THIRD PARTY DESIGNEE NAME	
Schedule A--Itemized Deductions	
MEDICAL/DENTAL	
MEDICAL AND DENTAL EXPENSES	\$0.00
ADJUSTED GROSS INCOME PERCENTAGE	\$10,601.00
ADJUSTED GROSS INCOME PERCENTAGE PER COMPUTER 10 PERCENT	\$0.00
ADJUSTED GROSS INCOME PERCENTAGE PER COMPUTER 7.5 PERCENT	\$10,601.00
NET MEDICAL DEDUCTION	\$0.00
NET MEDICAL DEDUCTION PER COMPUTER	\$0.00

TAXES PAID	
STATE AND LOCAL INCOME OR SALES TAXES.....	\$6,206.00
STATE INCOME OR SALES TAX.....	\$0.00
REAL ESTATE TAXES.....	\$14,796.00
PERSONAL PROPERTY TAXES.....	\$784.00
OTHER TAXES AMOUNT.....	\$0.00
SCH A TAX DEDUCTIONS.....	\$10,000.00
SCH A TAX PER COMPUTER.....	\$10,000.00
INTEREST PAID	
MORTGAGE INTEREST (FINANCIAL).....	\$23,169.00
MORTGAGE INTEREST (INDIVIDUAL).....	\$0.00
DEDUCTIBLE POINTS.....	\$0.00
QUALIFIED MORTGAGE INSURANCE PREMIUMS.....	\$0.00
DEDUCTIBLE INVESTMENT INTEREST.....	\$0.00
TOTAL INTEREST DEDUCTION.....	\$23,169.00
TOTAL INTEREST DEDUCTION PER COMPUTER.....	\$23,169.00
CHARITABLE CONTRIBUTIONS	
CASH CONTRIBUTIONS.....	\$230.00
OTHER THAN CASH: Form 8283.....	\$315.00
CARRYOVER FROM PRIOR YEAR.....	\$0.00
SCH A TOTAL CONTRIBUTIONS.....	\$545.00
SCH A TOTAL CONTRIBUTIONS PER COMPUTER.....	\$545.00
CASUALTY AND THEFT LOSS	
CASUALTY OR THEFT LOSS.....	\$0.00
JOBS AND MISCELLANEOUS	
UNREIMBURSED EMPLOYEE EXPENSE AMOUNT.....	\$0.00
TOTAL LIMITED MISC EXPENSES.....	\$0.00
NET LIMITED MISC DEDUCTION.....	\$0.00
NET LIMITED MISC DEDUCTION PER COMPUTER.....	\$0.00
OTHER MISCELLANEOUS	
OTHER THAN GAMBLING AMOUNT.....	\$0.00
OTHER MISC DEDUCTIONS.....	\$0.00
TOTAL ITEMIZED DEDUCTIONS	
TOTAL ITEMIZED DEDUCTIONS.....	\$33,714.00
TOTAL ITEMIZED DEDUCTIONS PER COMPUTER.....	\$33,714.00
RECOMPUTED TOTAL ITEMIZED DEDUCTIONS PER COMPUTER.....	\$0.00
ELECT ITEMIZED DEDUCTION INDICATOR.....	
SCH A ITEMIZED PERCENTAGE PER COMPUTER.....	\$0.00
Interest and Dividends	
GROSS SCHEDULE B INTEREST.....	\$1,590.00
TAXABLE INTEREST INCOME.....	\$1,590.00
EXCLUDABLE SAVINGS FROM BOND INT.....	\$0.00
GROSS SCHEDULE B DIVIDENDS.....	\$0.00
DIVIDEND INCOME.....	\$0.00
FOREIGN ACCOUNTS IND.....	None
REQUIRED TO FILE FINCEN FORM 114.....	None

Form 2441--Child and Dependent Care Expenses

PROV NAME CNTRL..... CHIL
 CARE PROV SSN..... XX-XX-2619
 DEPENDENT CARE EMPLOYER BENEFITS AMT..... \$0.00
 QUALIFIED EXPENSES EMPLOYER INCURRED AMT..... \$294.00
 DEPENDENT CARE EXCLUSION AMOUNT..... \$0.00

PART II CREDIT FOR CHILD AND DEPENDENT CARE EXPENSES

NUMBER OF QUALIFYING PERSONS..... 2
 SEVS NOT RECD IND..... 0
 CHILD 1 NAME CONTROL..... TIME
 CHILD 1 SSN..... XX-XX-6772
 CHILD 1 QUALIFIED EXPENSE..... \$294.00
 CHILD 2 NAME CONTROL..... TIME
 CHILD 2 SSN..... XX-XX-8594
 CHILD 2 QUALIFIED EXPENSE..... \$0.00
 AMOUNT OF QUALIFIED EXPENSES..... \$294.00
 EARNED INCOME-PRIMARY..... \$53,698.00
 EARNED INCOME-SECONDARY..... \$77,950.00
 PRIOR YEAR CHILD CARE EXPENSES..... \$0.00
 PRIOR YEAR CHILD CARE EXPENSES PER COMPUTER..... \$0.00
 CHILD AND DEPENDENT CARE BASE AMOUNT PER COMPUTER..... \$294.00

PART III DEPENDENT CARE BENEFITS

DEPENDENT CARE EMPLOYER BENEFITS..... \$0.00
 QUALIFIED EXPENSES EMPLOYER INCURRED..... \$294.00
 DEPENDENT CARE EXCLUDED BENEFITS..... \$0.00
 GROSS CHILD CARE CREDIT PER COMPUTER..... \$58.80
 TOTAL QUALIFYING EXPENSES PER COMPUTER..... \$294.00

Form 8863 - Education Credits (Hope and Lifetime Learning Credits)

PART III - ALLOWABLE EDUCATION CREDITS

GROSS EDUCATION CR PER COMPUTER..... \$0.00
 TOTAL EDUCATION CREDIT AMOUNT..... \$0.00
 TOTAL EDUCATION CREDIT AMOUNT PER COMPUTER..... \$0.00

This Product Contains Sensitive Taxpayer Data