

# **2018 IRS 1040 FORM SAMPLE**

#### **1ST PAGE**

Filing status:	Department of the Treasury—Internal Reve  U.S. Individual Income  Single Married filing jointly	Marri		separately	П	lead of household	0.10 001	fying widow		ite or staple in this space.		
Your first name an			ast name			ioda or riodocriola	- Cada	yang maor	-	cial security number		
Your standard ded	luction: Someone can claim y	ou as a de	pendent	You	were	born before January	2, 1954	☐ Yo	ou are blind			
If joint return, spouse's first name and initial				9		-			Spouse's	s social security numb		
Spouse standard de	=			_		ouse was born befor lien	e January	2, 1954		ear health care covera empt (see inst.)		
Home address (nu	mber and street). If you have a P.O. b	oox, see ins	structions	s.				Apt. no	President (see inst.)	Presidential Election Campaign (see inst.) You Spor		
City, town or post	office, state, and ZIP code. If you have	ve a foreigr	n address	s, attach Sc	hedul	e 6.				han four dependents, and ✓ here ►		
Dependents (se	e instructions):		(2) Soc	cial security nu	ımber	(3) Relationship t	you _		(4) ✓ if qualifies			
(1) First name	Last name							Child 1	tax credit	Credit for other depender		
oigii cor	der penalties of perjury, I declare that I haw rect, and complete. Declaration of prepare	e examined t r (other than	this return taxpayer)	and accompa is based on a	nying:	schedules and statemer nation of which prepare	ts, and to the has any ki	he best of m nowledge.	y knowledge and	belief, they are true,		
Here	Your signature	are form that aspery		Date		Your occupation			If the IRS ser PIN, enter it here (see inst	nt you an Identity Protec		
	Spouse's signature. If a joint return, both must sign.		Date		Spouse's occupation				nt you an Identity Protec			
See instructions. Keep a copy for	Spouse's signature. It a joint return									Check if:		
See instructions. Keep a copy for your records.	Spouse's signature. If a joint return Preparer's name	Prepare	r's signat	ture			PTIN		Firm's EIN	Check II:		
Joint return? See instructions. Keep a copy for your records.		Prepare	r's signat	ture			PTIN		Firm's EIN			
See instructions. Keep a copy for your records.		Prepare	r's signat	ture			PTIN Phone no	D.	HIM'S EIN	3rd Party Design		

Taxes need to be signed if "self prepared" or include EIN/PTIN / and full name of Tax Preparer / Accountant.

Note:

#### **2ND PAGE**

Form 1040 (2018)	_			Pag
	1	Wages, salaries, tips, etc. Attach Form(s) W-2	1	$\vdash$
Attach Form(s)	2a	Tax-exempt interest 2a b Taxable interest	2b	
W-2. Also attach	3a	Qualified dividends 3a b Ordinary dividends	3b	$\vdash$
Form(s) W-2G and 1099-R if tax was	4a	IRAs, pensions, and annuities . 4a b Taxable amount	4b	
withheld.	5a	Social security benefits 5a b Taxable amount	5b	
	6	Total income. Add lines 1 through 5. Add any amount from Schedule 1, line 22	6	L
	7	Adjusted gross income. If you have no adjustments to income, enter the amount from line 6; otherwise,	_	
Standard Deduction for—	_	subtract Schedule 1, line 36, from line 6	7	Н
Single or married	8	Standard deduction or itemized deductions (from Schedule A)	8	Н
filing separately, \$12,000	9	Qualified business income deduction (see instructions)	9	
<ul> <li>Married filing</li> </ul>	10	Taxable income. Subtract lines 8 and 9 from line 7. If zero or less, enter -0	10	
jointly or Qualifying widow(er).	11	a Tax (see inst.) (check if any from: 1 Form(s) 8814 _ 2 Form 4972 _ 3)		
\$24,000		b Add any amount from Schedule 2 and check here	11	
<ul> <li>Head of household.</li> </ul>	12	a Child tax credit/credit for other dependents b Add any amount from Schedule 3 and check here ▶	12	
\$18,000	13	Subtract line 12 from line 11. If zero or less, enter -0	13	L
If you checked	14	Other taxes. Attach Schedule 4	14	L
any box under Standard	15	Total tax. Add lines 13 and 14	15	
deduction, see instructions.	16	Federal income tax withheld from Forms W-2 and 1099	16	
500 1150 000015.	17	Refundable credits: a EIC (see inst.) b Sch. 8812 c Form 8863		Г
		Add any amount from Schedule 5	17	
	18	Add lines 16 and 17. These are your total payments	18	Г
Refund	19	If line 18 is more than line 15, subtract line 15 from line 18. This is the amount you overpaid	19	Г
neiuliu	20a	Amount of line 19 you want refunded to you. If Form 8888 is attached, check here	20a	Г
Direct deposit?	►b	Routing number		Г
See instructions.	►d	Account number		
	21	Amount of line 19 you want applied to your 2019 estimated tax ▶ 21		
Amount You Owe		Amount you owe. Subtract line 18 from line 15. For details on how to pay, see instructions	22	Г
	23	Estimated tax penalty (see instructions)		۰

# **SCHEDULE 1**

SCHEDULE 1		Additional Income and Adjustme	ents	to Income		OMB No. 1545-0074
(Form 1040)		► Attach to Form 1040.				2018
Department of the Tre Internal Revenue Serv		Attachment Sequence No. 01				
Name(s) shown on F	orm 104	10			Your	social security numbe
Additional	1-9b	Reserved	1-9b			
Income	10	Taxable refunds, credits, or offsets of state and local inco	me ta	xes	10	
IIICOIIIE	11	Alimony received			11	
	12	Business income or (loss). Attach Schedule C or C-EZ			12	
	13	Capital gain or (loss). Attach Schedule D if required. If not re	quire	d, check here 🕨 🗌	13	
	14	Other gains or (losses). Attach Form 4797			14	
	15a	Reserved			15b	
	16a	Reserved	16b			
	17	Rental real estate, royalties, partnerships, S corporations, trust	17			
	18	Farm income or (loss). Attach Schedule F	18			
	19	Unemployment compensation	19			
20a 21		Reserved	20b			
		Other income. List type and amount ▶	21			
	22	Combine the amounts in the far right column. If you don't	have	any adjustments to		
		income, enter here and include on Form 1040, line 6. Other	erwis	e, go to line 23	22	
Adjustments	23	Educator expenses	23			
to Income	24	Certain business expenses of reservists, performing artists, and fee-basis government officials. Attach Form 2106	24			
	25	Health savings account deduction. Attach Form 8889 .	25			
	26	Moving expenses for members of the Armed Forces.  Attach Form 3903	26			
	27	Deductible part of self-employment tax, Attach Schedule SE	27			
	28	Self-employed SEP, SIMPLE, and qualified plans	28			
	29	Self-employed health insurance deduction	29			
	30	Penalty on early withdrawal of savings	30			
	31a	Alimony paid b Recipient's SSN ▶	31a			
	32	IRA deduction	32			
	33	Student loan interest deduction	33			
	34	Reserved	34			
	35	Reserved	35			
	36	Add lines 23 through 35			36	

### **SCHEDULE 2**

SCHEDU (Form 1040 Department of Internal Rever	O) of the Treasury	Tax  MB No. 1545-0074  2018  Attach to Form 1040.  ► Go to www.irs.gov/Form1040 for instructions and the latest information.  Attach to Form 1040.			
Name(s) sho	wn on Form 10	40	Your	social security number	
Тах	38-44	Reserved	38-44		
	45	Alternative minimum tax. Attach Form 6251	45		
	46	Excess advance premium tax credit repayment. Attach Form 8962	46		
	47	Add the amounts in the far right column. Enter here and include on Form 1040, line 11	47		
	work Bodust	ion Act Notice, see your tax return instructions. Cat. No. 71478U		hedule 2 (Form 1040) 20	

# **SCHEDULE 3**

SCHEDULE 3 (Form 1040)		Nonrefundable Credits	- F	OMB No. 1545-007		
Department of the Treasury Internal Revenue Service		► Attach to Form 1040.  ► Go to www.irs.gov/Form1040 for instructions and the latest information.		2018 Attachment Sequence No. 03		
Name(s) shown on Fo	rm 10	40	Your soc	ial security numb		
Nonrefundable	48	Foreign tax credit. Attach Form 1116 if required	. 48			
Credits	49	Credit for child and dependent care expenses. Attach Form 2441	. 49			
Orcuito	50	Education credits from Form 8863, line 19	. 50			
	51	Retirement savings contributions credit. Attach Form 8880	. 51			
	52	Reserved	. 52			
	53	Residential energy credit. Attach Form 5695	. 53			
	54	Other credits from Form a 3800 b 8801 c	54			
	55	Add the amounts in the far right column. Enter here and include on Form 1040, line 1	2 <b>55</b>			
For Paperwork Re	duct	ion Act Notice, see your tax return instructions. Cat. No. 71480G	Sched	lule 3 (Form 1040)		

# **SCHEDULE C**

(For	EDULE C m 1040)		Loss From Business (Sole Proprietorship) (uleC for instructions and the latest information		2018 Attachment
Internal			or 1041; partnerships generally must file Form		Sequence No. 09
Name	of proprietor			Social sec	curity number (SSN)
A	Principal business or profess	ion, including product or ser	vice (see instructions)		ode from instructions
С	Business name. If no separa	te business name, leave blan	k.		er ID number (EIN) (see instr.)
E	Business address (including	suite or morn no.) >			
_	City, town or post office, sta				
F	Accounting method: (1)		al (3) ☐ Other (specify) ▶		
G	Did you "materially participa	te" in the operation of this bu	usiness during 2018? If "No," see instructions for li	mit on loss	ses . Yes No
н	If you started or acquired thi	s business during 2018, chec	ok here	1000	. • 🗆
1	Did you make any payments	in 2018 that would require y	ou to file Form(s) 1099? (see instructions)		Yes No
J	If "Yes," did you or will you f	ile required Forms 1099? .			Yes N
Par	Income			70	
1	Gross receipts or sales. See	instructions for line 1 and ch	neck the box if this income was reported to you or		
			n was checked		
2	Returns and allowances .			2	
3	Subtract line 2 from line 1			3	
4	Cost of goods sold (from line			4	
5				5	
6			I tax credit or refund (see instructions)	6	
7	Gross income. Add lines 5			7	
Par			of your home only on line 30.		
8	Advertising	8	18 Office expense (see instructions)	18	
9	Car and truck expenses (see		19 Pension and profit-sharing plans	19	
	instructions)	9	20 Rent or lease (see instructions):	10	
10	Commissions and fees .	10	a Vehicles, machinery, and equipment	20a	
11	Contract labor (see instructions)		b Other business property	200	
12	Depletion	12	21 Repairs and maintenance		
13	Depreciation and section 179		22 Supplies (not included in Part III)		
-	expense deduction (not		23 Taxes and licenses		
	included in Part III) (see	13	24 Travel and meals:	23	
	instructions)			24a	
14	Employee benefit programs	14		248	
40	(other than on line 19).	16	b Deductible meals (see	24	
15	Insurance (other than health)	15	instructions)		
16	Interest (see instructions):	40-		25	
a	Mortgage (paid to banks, etc.)	16a	26 Wages (less employment credits).		
ь	Other	16b	27a Other expenses (from line 48)		
17	Legal and professional services	17	b Reserved for future use	27ь	
28			me. Add lines 8 through 27a		
29				29	
30			rt these expenses elsewhere. Attach Form 8829	ч 1	
	unless using the simplified m Simplified method filers on		to so of fel years become	1 1	
			The state of the s		
	and (b) the part of your home		. Use the Simplified	1	
			nt to enter on line 30	30	
31	Net profit or (loss). Subtract			1	
			Form 1040NR, line 13) and on Schedule SE,		
			tes and trusts, enter on Form 1041, line 3.	31	
	<ul> <li>If a loss, you must go to l</li> </ul>		,		
32	If you have a loss, check the	box that describes your inve	estment in this activity (see instructions).		
			1 (Form 1040), line 12 (or Form 1040NR,		
			box on line 1, see the line 31 instructions).		All investment is at risk
	Estates and trusts, enter on			32b	Some investment is no at risk.
	<ul> <li>If you checked 32b, you m</li> </ul>	oust attach Form 6198. Your	loss may be limited.		en rich.

### **SCHEDULE D**

(Form 1040)		Capital G		sses		-	OMB No. 1545-0074	
Department of the Treasury Internal Revenue Service (99)			rm 1040 or Form 10 for instructions an	MONR. d the latest informa	110.	2018 Attachment Sequence No. 12		
Name(s) shown on return					Your	social s	ecurity number	
Part I Short-1	Ferm Capital G	ains and Losses—Ge	enerally Assets	Held One Year	or Less (	see ins	structions)	
lines below.	-	amounts to enter on the	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustm to gain or lo Form(s) 894 line 2, colo	ss from D. Part I.	(h) Cain or (loss) Subtract column (e) from column (d) and combine the result with column (g)	
1099-B for which you ha However, if you	ch basis was repo ve no adjustme i choose to repor	tions reported on Form orted to the IRS and for ints (see instructions). It all these transactions ink and go to line 1b.						
	nsactions reporte	ed on Form(s) 8949 with						
2 Totals for all tra Box B checked	nsactions reporte	ed on Form(s) 8949 with						
3 Totals for all tra Box C checked		ed on Form(s) 8949 with				_		
	n gain or (loss	and short-term gain or (	S corporations,	estates, and t	rusts from	5		
Schedule(s) K- 6 Short-term cap	ital loss carryover	r. Enter the amount, if ar					k )	
Schedule(s) K- 6 Short-term cap Worksheet in t 7 Net short-term	ital loss carryover he instructions a capital gain or		a through 6 in colu	ımn (h). If you hav		6	( )	
Schedule(s) K- 6 Short-term cap Worksheet in to 7 Net short-term term capital gain	ital loss carryover he instructions a capital gain or ns or losses, go t	r. Enter the amount, if a (loss). Combine lines 1:	a through 6 in colu ie, go to Part III on	umn (h). If you have the back	e any long	7	( ) e instructions)	
Schedule(s) K- 6 Short-term cap Worksheet in t 7 Net short-term term capital gai Part II Long-T See instructions for h lines below.	ital loss carryover he instructions a capital gain or ns or losses, go to erm Capital Ga now to figure the a	r. Enter the amount, if an (loss). Combine lines 1: to Part II below. Otherwis	a through 6 in colu ie, go to Part III on	umn (h). If you have the back	e any long	7 (See	(instructions) (h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)	
Schedule(s) K- 6 Short-term cap Worksheet in t 7 Net short-term term capital gai PORTIL Long-T See instructions for h lines below. This form may be ea whole dollars.  8a Totals for all le 1099-B for whis which you ha Howover, if you	ital loss carryover he instructions capital gain or ns or losses, go t ferm Capital Gai sow to figure the a sier to complete it rig-term transact th basis was represent on adjustme choose to report	r. Enter the amount, if ar (loss). Combine lines 1: o Part II below. Otherwis ains and Losses—Ge amounts to enter on the	a through 6 in coluie, go to Part III on nerally Assets I	umn (h). If you have the back  Held More Than  (e) Cont	One Yea	7 (See	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result	
Schedule(s) K- 6 Short-term cape Worksheet in it 7 Net short-term term capital gai PORTI Long-T See instructions for hines below. His form may be ear whole dollars. 8a Totals for all le 1099-B for whi which you ha However, if you no form 8494, 8b Totals for all le	ital loss carryover he instructions capital gain or ns or losses, go t erm Capital Gai low to figure the : sier to complete it org-term transact ch basis was rep we no adjustme e i choose to repon eave this line blai me blai italiana.	r. Enter the amount, if as 1 (loss). Combine lines 1 or Part II below. Otherwise inns and Losses—Ge amounts to enter on the f you round off cents to sions reported on Form orted to the IRS and for ents (see instructions). If all these transactions nk and go to line 8th you found the result of th	a through 6 in coluie, go to Part III on nerally Assets I	umn (h). If you have the back  Held More Than  (e) Cont	One Yea	7 (See	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result	
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### **SCHEDULE E**

orn	EDULE E n 1040) ent of the Treasury	(From re	ental real estate, roy	ipplementa alties, partnersi tach to Form 10	hips, S	corpo	rations	, estate	s, trust	s, REMI	Os, etc.)	2	No. 1545-0	
partin email	ent of the Treasury Revenue Service (99)		► Go to www.irs.g						st infor	mation.		Attact Segu	hment ence No. 1	3
me(s	shown on return										Your soc		ty number	
_														
art			From Rental Real											
Di			Z (see instructions). If ts in 2018 that woul											
			is in 2018 that would file required Form		) IIIe r					ons) .			res □	
1a			ach property (street		o code							. Ц	05	HO
A	i ilyaida dadi		and property (ourco)	, only, orano, Em	004	<i>.,</i>								
В														
С														
1b	Type of Pro (from list be		2 For each rental above, report to personal use donly if you mee a qualified joint	real estate pro ne number of fa	perty l	isted al and		Fa	ir Ren Days	tal I	Persona Day:		ση.	,
Α			only if you mee	t the requireme	nts to	file as	Α							
В			a qualified joint	venture. See in	struct	tions.	В							_
С							С							
	of Property:													
	gle Family Resid		3 Vacation/Shor	t-Term Rental					If-Rent					
COR	ti-Family Reside	ence	4 Commercial	Properties:	6 R	yalties		8 Ot	her (de	scribe)		_	С	_
3	Rents received			Properues:	3	_	Α	_	+	В	_	_	C	_
4	Royalties received				4			+	+		-	_		⊢
	noyalties recei	iveu			٠,			_	+		_			۰
5					5									
6	Auto and trave				6			+	+		-			۰
7	Cleaning and r				7			+	+		-			۰
8					8			$\top$	+		-			۲
9	Insurance				9			$\neg$						T
0			sional fees		10			$\neg$	$\top$					т
1	Management f	fees			11									Г
2			to banks, etc. (see	instructions)	12									
3					13			$\perp$						L
4	Repairs				14			$\perp$						L
5	Supplies				15	_		+	+		$\rightarrow$			┡
6					16	-		+	+		-	_		₽
7 8			or depletion		17	-		+	+		-	_		⊢
9	Other (list) ►				19			+	+		-	_		⊢
0	Total expense	s. Add lin	nes 5 through 19 .		20			+	+		-			╁
1			ne 3 (rents) and/or		-									t
	result is a (loss	s), see in	structions to find o	ut if you must	21									
2	Deductible ren	ntal real e	estate loss after lim tructions)	itation, if any,	22	(			)(			(		
3a			ported on line 3 for					23	а					ì
b			ported on line 4 for					23						
C	Total of all am	ounts rep	ported on line 12 fo	r all properties				23						
d			ported on line 18 fo					23						
0			ported on line 20 fo					23	0					
4			amounts shown on								. 24			1
5		, ,	ses from line 21 and									(		-
6	here. If Parts	II, III, IV	te and royalty inco /, and line 40 on p 0), line 17, or Form	age 2 do not	apply	to yo	u, also	enter	this a	mount o	n			
			02				,				. 26			



# **2018 IRS TAX RETURN TRANSCRIPT SAMPLE**

#### Sample Tax Transcript 1040: Lucy and John Matterocci

	Internal Revenue Service United States Department of the Treasury
	This Product Contains Sensitive Taxpayer Data
	Request Date: 08-30-2019 Response Date: 08-30-2019 Tracking Number: 120000000000000
	Tax Return Transcript
	SSN Provided: XXX-XX-1614 Tax Period Ending: Dec. 91, 2018
	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.
	85N: XXXX-XXX-1614 8F0USE 85N: XXXX-XXX-7148
	NAME (8) SHOWN ON RETURN: LUCY JOHN MATT
1040: p.1	FILING STATUS: Married Filed Joint
	FORM VINUEER:
1040: p.1	DEFENDENT 1 NAME CTAL:  DELV DEFENDENT 1 NAME CTAL:  DEFENDENT 1 NAME CTAL:  DEFENDENT 2 NAME CTAL:  DEFENDENT 2 SNAME CTAL:  DEFENDENT 3 NAME CTAL:  DEFENDENT 3 NAME CTAL:  DEFENDENT 4 NAME CTAL:
	Indome
1040: 1	TAXABLE INTEREST INCOME: SCH B:
1040: 2a	TAX-EXEMPT INTEREST: \$0.00 ORDINARY DIVIDEND INCOME: SCH B: \$0.00
Sch 1: 12	QUALIFEED DIVIDENDS:
1040: 4a 1040: 4b	TANABLE IRA DISTRIBUTIONS: \$0.00 ERAS, EMBISORS AND ANNUTIES: \$0.00 ETANABLE IRAs, PENSIONS AND ANNUTIES: \$0.00 SCHEDULE 2 INDICATOR: 0.00 SCHEDULE 2 INDICATOR: 0.0
	*Income earned from work: IRS Form 1040-Line 1 , Schedule 1-Lines 12 and 18 , Schedule K-1 (IRS Form 1083)—Bax 14 (Cade A). If any individual earning item is negative, do not include that item in your coulutation.
	**Volve of 0' denotes schedule was not filed. 9 © 2019 NASFAA. All rights reserved.

	ADDITIONAL INCOME: \$8,110.00
	ADDITIONAL INCOME PER COMPUTER:
	REFUNDABLE CREDITS PER COMPUTER:
	REFUNDABLE EDUCATION CREDIT PER COMPUTER: \$0.00 QUALIFIED BUSINESS INCOME DEDUCTION: \$0.00
	QUALITIES DISTRESS INCOME DESCRIPTION:
	RENT/ROYALTY/FARTNERSHIP/ESTATE (Schedule E): \$0.00 RENT/ROYALTY/FARTNERSHIP/ESTATE (Schedule E) FER COMPUTER: \$0.00
	RENT/ROYALTY INCOME/LOSS PER COMPUTER: \$0.00
	ESTATE/TRUST INCOME/LOSS PER COMPUTER:
	PARTNERSHIP/S-CORP INCOME/LOSS PER COMPUTER PER COMPUTER:
	FARM INCOME OR LOSS (Schedule F):
Sch 1: 18 *	FARM INCOME OR LOSS (Schedule F) PER COMPUTER: \$0.00
	UNEMPLOYMENT COMPENSATION: \$7,296.00 TOTAL SOCIAL SECURITY BENEFITS: \$0.00
	TAXABLE SOCIAL SECURITY BENEFITS: \$0.00
	TAXABLE SOCIAL SECURITY BENEFITS PER COMPUTER: 90.00
	OTHER INCOME:
	SCHEDULE EIC SE INCOME PER COMPUTER: \$0.00
	SCHEDULE EIC EARNED INCOME PER COMPUTER:
	SCH EIC DISQUALIFIED INC COMPUTER:
	TOTAL INCOME:
	TOTAL INCOME PER COMPUTER:\$132,497.00
	Adjustments to Income
	· ·
	EDUCATOR EXPENSES: \$0.00 EDUCATOR EXPENSES PER COMPUTER: \$0.00
	RESERVIST AND OTHER BUSINESS EXPENSE: \$0.00
	HEALTH SAVINGS ACCT DEDUCTION: 50.00
Sch 1: 25	HEALTH SAVINGS ACCT DEDUCTION PER COMPTR: 50.00
	MOVING EXPENSES: F3903:
	SELF EMPLOYMENT TAX DEDUCTION: \$0.00
	SELF EMPLOYMENT TAX DEDUCTION PER COMPUTER:
Sch 1: 28	SELF EMPLOYMENT TAX DEDUCTION VERIFIED: \$0.00 KEOGH/SEP CONTRIBUTION DEDUCTION: \$0.00
5ch 1: 28	SELF-EMP HEALTH INS DEDUCTION: \$0.00
	EARLY WITHDRAWAL OF SAVINGS PENALTY: 50.00
	ALIMONY PAID SSN:
	ALIMONY PAID:
	IRA DEDUCTION:
Sch 1: 32	STUDENT LOAN INTEREST DEDUCTION:
	STUDENT LOAN INTEREST DEDUCTION PER COMPUTER: \$0.00
	STUDENT LOAN INTEREST DEDUCTION VERIFIED: 50.00
	TUITION AND FEES DEDUCTION:
	TUITION AND FEES DEDUCTION FER 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: SO.00
	TOTAL ADJUSTMENTS PER COMPUTER:
1040-7	ADJUSTED GROSS INCOME: \$132,497.00 ADJUSTED GROSS INCOME PER COMPUTER: \$132,497.00
1040: 7	ADDUSTED GROSS INCOME FER COMPOTER:
	Tax and Credits
	65-OR-OVER: NO
	GS-UK-UVLS: NO BLIND: NO
	SPOUSE 65-OR-OVER: NO
	SPOUSE BLIND: NO
	STANDARD DEDUCTION PER COMPUTER: \$24,000.00
	ADDITIONAL STANDARD DEDUCTION FER COMPUTER:
	TAX TABLE INCOME PER COMPUTER: \$108,497.00 EXEMPTION AMOUNT PER COMPUTER: \$0.00
	EXEMPTION AMOUNT PER COMPUTER: \$0.00 TAXABLE INCOME: \$108,497.00
	TAXABLE INCOME PER COMPUTER: \$108,497.00
	*Income corned from work: IRS Form 1040-Line 1, Schedule 1-Lines 12 and 18, Schedule K-1 (IRS Form 1055)-Box 14 (Code A). If any individual corning
	"Income earned from work: IRS Form 1040-Line 1, Schedule 1-Lines 12 and 18, Schedule K-1 (IRS Form 1065)-Box 14 (Code A). If any individual earning item is nearlive, do not include that item in your calculation.
	* -
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	TOTAL POSITIVE INCOME PER COMPUTER:
	TENTATIVE TAX:\$15,748.00
	TENTATIVE TAX PER COMPUTER: \$15.748.00 FORM 8814 ADDITIONAL TAX AMOUNT: \$0.00
	TAX ON INCOME LESS SOC SEC INCOME PER COMPUTER: \$0.00
	FORM 6251 ALTERNATIVE MINIMUM TAX:
	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 FER COMPUTER: \$0.00
Sch 2: 46 *	EXCESS ADVANCE PREMIUM TAX CREDIT REPAYMENT AMOUNT: \$0.00
	EXCESS ADVANCE PREMIUM TAX CREDIT REPAYMENT VERIFIED AMOUNT: \$0.00
	CHILD & DEPENDENT CARE CREDIT:
	CHILD & DEPENDENT CARE CREDIT PER COMPUTER: \$0.00 CREDIT FOR ELDERLY AND DISABLED: \$0.00
	CREDIT FOR ELDERLY AND DISABLED: \$0.00 CREDIT FOR ELDERLY AND DISABLED PER COMPUTER: \$0.00
	EDUCATION CREDIT: \$0.00
Sch 3: 50	EDUCATION CREDIT PER COMPUTER: \$0.00
	GROSS EDUCATION CREDIT PER COMPUTER:
	RETIREMENT SAVINGS CNTRB CREDIT:
	RETIREMENT SAVINGS CNTRB CREDIT FER COMPUTER: \$0.00 PRIM RET SAV CNTRB: F8880 LN6A: \$0.00
	SEC RET SAV CHTRE- FARSO INSE-
	TOTAL RETIREMENT SAVINGS CONTRIBUTION: F8880 CMPTR: \$0.00
	RESIDENTIAL ENERGY CREDIT:
	RESIDENTIAL ENERGY CREDIT PER COMPUTER:
	CHILD AND OTHER DEPENDENT CREDIT:
	ADOPTION CREDIT: F8839:
	ADOPTION CREDIT PER COMPUTER: \$0.00
	FORM 8396 MORTGAGE CERTIFICATE CREDIT: \$0.00
	FORM 8396 MORTGAGE CERTIFICATE CREDIT PER COMPUTER:
	F3800, F8801 AND OTHER CREDIT AMOUNT: \$0.00 FORM 3800 GENERAL BUSINESS CREDITS: \$0.00
	FORM 3800 GENERAL BUSINESS CREDITS PER COMPUTER: \$0.00
	FRIOR VR MIN TAX CREDIT: F8801: \$0.00
	PRIOR YR MIN TAX CREDIT: F8801 PER COMPUTER:
	F8936 ELECTRIC MOTOR VEHICLE CREDIT AMOUNT:
	F8936 ELECTRIC MOTOR VEHICLE CREDIT PER COMPUTER:
	F8910 ALTERNATIVE MOTOR VEHICLE CREDIT AMOUNT:
	OTHER CREDITS: \$0.00
	TOTAL CREDITS:\$4,500.00
	TOTAL CREDITS PER COMPUTER: \$4,500.00 INCOME TAX AFTER CREDITS PER COMPUTER: \$11,248.00
1040: 13	"" "Income Tax After Credits Per Computer" \$11,248.00 - ""Excess Advance Premimum Tax Credit Repayment Amount" \$0.00
Sch 2: 46	= **** Income Tax Paid = \$11,248.00
	- 1100110 1201110
	Other Taxes
	SE TAX:
	SE TAX PER COMPUTER:
	SOCIAL SECURITY AND MEDICARE TAX ON UNREPORTED TIPS:
	TAX ON QUALIFIED PLANS F5229 (FR):
	TAX ON QUALIFIED PLANS F5929 PER COMPUTER:
	IRAF TAX FER COMPUTER:
	TP TAX FIGURES (REDUCED BY IRAF) PER COMPUTER: \$11,248.00 IMF TOTAL TAX (REDUCED BY IRAF) PER COMPUTER: \$11,248.00
	TOTAL OTHER TAKES PER COMPUTER: \$0.00
	UNPAID FICA ON REPORTED TIPS: \$0.00
	F8959-8960 OTHER TAXES:\$0.00
- 1	
	***If Income Tax Paid is negative, use zero.
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RECAPTURE TAX: F8611: HOUSEHOLD EMPLOYMENT TAX HOUSEHOLD EMPLOYMENT TAX HEALTH CARE RESPONSIBIL: HEALTH CARE RESPONSIBIL: HEALTH COVERAGE RECAPTUR RECAPTURE TAXES: TOTAL ASSESSMENT PER COL TOTAL TAX LIABLITY TP;	50.   XES:   50.   XES:   50.   XES PER COMPUTER:   50.   IT! PENALTY URIFIED:   50.   RE F8685:   50.   MPUTER:   51.248.   FOURES:   51.248.   FOURES:   51.248.   FOURES:   51.248.
Payments	
HEALTH CARE: INDIVIDUAL HEALTH CARE: INDIVIDUAL HEALTH CARE FILL—TEAR FULL—TEAR FULL—T	MELD: \$11,272  RESPONSISILIT: \$0.  VURRAGE INDICATOR: \$0.  DUTRAGE INDICATOR: \$0.  R COMPUTER: \$0.  R EATH TAN NITHELLD: \$0.  R EATH TAN NITHELLD: \$0.  R EATH TAN OF TUELS: \$0.  R EATH TAN OF TUELS: \$0.  R EATH TAN OF TUELS PER COMPUTER: \$0.  R EATH TAN TUEL
	UTER:
Refund or Amount Owed	
APPLIED TO NEXT YEAR'S ! ESTIMATED TAX PENALTY:. TAX ON INCOME LESS STAT! BAL DUE/OVER PYMT USING BAL DUE/OVER PYMT USING	5-24
Third Party Designee	
AUTHORIZATION INDICATOR	NUMBER:

```
| Interest and Dividends
| GROSS SCHEDULE B INTEREST: $2,208.00 |
| TAXABLE INTEREST INCOME: $2,208.00 |
| TAXABLE INTEREST INCOME: $2,008.00 |
| EXCLUDABLE SAVINGS FROM BOND INT: $0.00 |
| GROSS SCHEDULE B DIVIDENDS: $0.00 |
| DIVIDEND INCOME: $0.00 |
| FOREIGN ACCOUNTS IND: $0.00 |
| FOREIGN ACCOUNTS ACCOU
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Please Note: This is a sample and depending on what schedules were filed it may include additional pages, please upload every page front and back.