Tax Transcript Decoder®

COMPARISON OF 2021 TAX RETURN AND TAX TRANSCRIPT DATA 2023-24 Award Year

QUALIFIE DIVIDENDS:
REFUNDS OF STATE/LOCAL TAXES:
AL MONY RECEIVED:
JUSINESS INCOME OR LOSS: SCH & PER COMPUTER:
CAPITAL GAIN OR LOSS: (Schedule D):
CAPITAL GAINS OR LOSS: SCH D PER COMPUTER:
OTHER GAINS OR LOSSES (Form 4797):
TAXABLE IRA DISTRIBUTIONS:
TOTAL PENSIONS AND ANNUITIES:
TAXABLE PENSION/ANNUITY AMOUNT
A DITIONAL INCOME:
REFUNDABLE CREDITS PER CONTER:
REFUNDANT EDUCATION TR COMPUTER:
QUALIFIED BUSINESS INCOME TION:
chedule E):

© 2023 by National Association of Student Financial Aid Administrators (NASFAA). All rights reserved.

NASFAA has prepared this document for use only by personnel, licensees, and members. The information contained herein is protected by copyright. No part of this document may be reproduced, translated, or transmitted in any form or by any means, electronically or mechanically, without prior written permission from NASFAA.

NASFAA SHALL NOT BE LIABLE FOR TECHNICAL OR EDITORIAL ERRORS OR OMISSIONS CONTAINED HEREIN; NOR FOR INCIDENTAL OR CONSEQUENTIAL DAMAGES RESULTING FROM THE FURNISHING, PERFORMANCE, OR USE OF THIS MATERIAL.

This publication contains material related to the federal student aid programs under Title IV of the Higher Education Act and/or Title VII or Title VIII of the Public Health Service Act. While we believe that the information contained herein is accurate and factual, this publication has not been reviewed or approved by the U.S. Department of Education, the Department of Health and Human Services, or the Department of the Interior.

The Free Application for Federal Student Aid (FAFSA®) is a registered trademark of the U.S. Department of Education.

NASFAA reserves the right to revise this document and/or change product features or specifications without advance notice.

January 2023

Information in this publication is current as of January 4, 2023.

Tax Transcript Decoder®

Comparison of 2021 Tax Return and Tax Transcript Data

FAFSA instructions direct applicants to obtain information from certain lines on IRS income tax returns and schedules. For the most part, the instructions identify the relevant lines on the tax form by line number. These line item numbers do not appear on IRS tax transcripts. Instead, each item is identified by name. When verifying FAFSA data using tax transcripts, it is important to identify the correct answer.

The following pages contain a sample tax return and corresponding tax return transcript. Relevant line items have been highlighted as follows:

Red: information to help cross-reference tax return line items with corresponding data on the tax return transcript.

Yellow: tax return line items that are required verification data elements for the 2023-24 award year.

Blue: tax return line items listed in the FAFSA instructions, which should be reviewed for potential conflicting information.

2021 Tax Return Line Items for 2023-24 Verification

	1040 and Schedules	2023-24 FAFSA Question
AGI	1040 Line 11	33 (S) and 81 (P)
Income tax paid*	1040 Line 22 <i>minus</i> Schedule 2, Line 2	34 (S) and 82 (P)
Education credits	Schedule 3, Line 3	40a (S) and 88a (P)
IRA deductions and payments	Schedule 1, Line 16 + Line 20	41b (S) and 89b (P)
Tax-exempt interest income	1040 Line 2a	41d (S) and 89d (P)
Untaxed portions of IRA, pension, and annuity distributions (withdrawals)*	1040 Lines (4a <i>minus</i> 4b; if negative, use zero) + (5a <i>minus</i> 5b; if negative, use zero) (exclude rollovers)	41e (S) and 89e (P)

2021 Tax Return Transcript Line Items for 2023-24 Verification

	Tax Transcript	2023-24 FAFSA Question
AGI	"ADJUSTED GROSS INCOME PER COMPUTER"	33 (S) and 81 (P)
Income tax paid*	"INCOME TAX AFTER CREDITS PER COMPUTER" minus "EXCESS ADVANCE PREMIUM TAX CREDIT REPAYMENT AMOUNT"	34 (S) and 82 (P)
Education credits	"EDUCATION CREDIT PER COMPUTER"	40a (S) and 88a (P)
IRA deductions and payments	"KEOGH/SEP CONTRIBUTION DEDUCTION" plus "IRA DEDUCTION PER COMPUTER"	41b (S) and 89b (P)
Tax-exempt interest income	"TAX-EXEMPT INTEREST"	41d (S) and 89d (P)
Untaxed portions of IRA, pension, and annuity distributions (withdrawals)*	("TOTAL IRA DISTRIBUTIONS" minus "TAXABLE IRA DISTRIBUTIONS"; if negative, use zero) plus ("TOTAL PENSIONS AND ANNUITIES" minus "TAXABLE PENSION/ANNUITY AMOUNT"; if negative, use zero) (exclude rollovers)	41e (S) and 89e (P)

Sample IRS Form 1040, Page 1 – Kayce and Monica Dutton

<u>1040</u>	U.	artment of the Treasury—Internal Revenue Servi S. Individual Income Tax	x Ret		2	02)MB No. 15					
Filing Status Check only one box.	If yo	Single Married filing jointly uchecked the MFS box, enter the noing is a child but not your dependent		_		• •				` , _		, ,	ow(er) (QW) e qualifying
Your first name	and mi	ddle initial	Last na	me						Y	our soc	cial security	number
KAYCE L			DUT	TON							XXX	XX 12	34
If joint return, s	pouse's	first name and middle initial	Last na	me						S	Spouse's	s social secu	urity number
MONICA	K		DUT	TON							XXX	XX 56	78
		er and street). If you have a P.O. box, see	instruction	ons.									n Campaign
_4230 DAR												ere if you, c if filing jointl	,
•	ost offi	ce. If you have a foreign address, also co	mplete s	paces be	low.		State			code	•	this fund. C	•
CORONA							CA		9	2860 b	ox belo	w will not o	
Foreign country	name/		1	oreign p	rovino	e/state/c	ounty		Fo	reign postal code y	our tax	or refund.	
												You	Spouse
At any time du	ring 20	021, did you receive, sell, exchange	, or othe	rwise d	ispos	e of any	finan	cial interes	st in a	ny virtual currenc	y?	Yes	☐ No
Standard	Som	eone can claim:	pendent	t \Box	Your	rspouse	as a	depender	nt				
Deduction		Spouse itemizes on a separate retur	n or you	were a	dual-	-status a	ılien	·					
Age/Rlindness	You	Were born before January 2, 1	957	Are b	lind	Sno	use:	□ Was I	orn h	efore January 2,	1957	ls blir	nd
Dependents			301	Ī		•	use.			(4) ✓ if qua			
-		instructions). irst name Last name		(2)	ociai num	security ber		(3) Relation to you		Child tax cred			er dependents
If more than four	• •			V/V/	XX	9101		SON		✓	JIL .	orean for earl	
dependents,		<u>TE DUTTON</u> HN DUTTON		XXX		1121		SON					
see instructions	3	THI DOTTON			^^	1121		3011					
and check here ►													
	1	Wages, salaries, tips, etc. Attach I	Form(s) \	N-2 .		. , .				' .	1		202,095
Attach	2a	Tax-exempt interest	2a			ı	b Tax	able inter	est		2b		747
Sch. B if required.	3a	Qualified dividends	3a				b Ord	linary divi	dends		3b		
Tequired.	4a	IRA distributions	4a				b Tax	able amo	unt .		4b		
	5a	Pensions and annuities	5a				b Tax	able amo	unt .		5b		
Standard	6a	Social security benefits	6a				b Tax	able amo	unt .		6b		
Deduction for— Single or	7	Capital gain or (loss). Attach Sche	dule D if	require	d. If r	not requi	red, c	heck here		▶ 🗆	7		
Married filing	8	Other income from Schedule 1, lin	ne 10								8		
separately, \$12,550	9	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7,	and 8. T	his is yo	our to	tal inco	me				9		202,842
Married filing	10	Adjustments to income from Sche	dule 1, l	ine 26							10		
jointly or Qualifying	11	Subtract line 10 from line 9. This is		-	_			,	. ,		11		202,842
widow(er), \$25,100	12a	Standard deduction or itemized	deduct	ions (fro	om Sc	hedule .	A)	🗠	12a	34,88	5		
Head of	b	Charitable contributions if you take	the star	dard de	duction	on (see i	nstruc	tions)	12b				
household, \$18,800	С	Add lines 12a and 12b									12c	;	34,885
If you checked	13	Qualified business income deduct	ion from	Form 8	8995 c	or Form	8995-	Α			13		34,885
any box under Standard	14	Add lines 12c and 13									14		
Deduction, see instructions.	15	Taxable income. Subtract line 14	from lin	e 11. lf	zero d	or less, e	enter -	0			15		167,957
$\overline{}$													10.10
For Disclosure,	Privac	y Act, and Paperwork Reduction Act N	lotice, se	e separa	ate ins	struction	s.		Ca	at. No. 11320B		Form	1040 (2021)

^{*}Income earned from work: **IRS Form 1040 Line 1** + Schedule 1, Line 3 + Schedule 1, Line 6 + Schedule K-1 (IRS Form 1065)—Box 14 (Code A). If any individual earning item is negative, do not include that amount in your calculation.

Sample IRS Form 1040, Page 2 – Kayce and Monica Dutton

Form 1040 (2021)							Page 2
	16	Tax (see instructions). Check if any from For	m(s): 1 881	4 2 🗌 497	72 3 🗌		. 16	28,448
	17	Amount from Schedule 2, line 3					. 17	
	18	Add lines 16 and 17					. 18	28,448
	19	Nonrefundable child tax credit or credit for	other depende	nts from Sc			19	
	20	Amount from Schedule 3, line 8			Income T	ax Paid*	20	
	21	Add lines 19 and 20		🔳	1040 Li	ine 22	21	
	22	Subtract line 21 from line 18. If zero or less	s, enter -0		mir		22	28,448
	23	Other taxes, including self-employment tax	k, from Schedule	e 2, line 21	Schedule	2, Line 2	23	
	24	Add lines 22 and 23. This is your total tax					24	28,448
	25	Federal income tax withheld from:		_	f negative, e	nter zero		
	а	Form(s) W-2			. 25a	17,2	29	
	b	Form(s) 1099					_	
	С	Other forms (see instructions)					1	
	d	Add lines 25a through 25c					. 25d	17,730
If you have a	26	2021 estimated tax payments and amount			1 1		. 26	
qualifying child, attach Sch. EIC.	27a	Earned income credit (EIC)			. 27a		_	
		Check here if you were born after Jar January 2, 2004, and you satisfy all t taxpayers who are at least age 18, to claim	the other requi	irements for				
	b	Nontaxable combat pay election	+					
	С	Prior year (2019) earned income	. 27c					
	28	Refundable child tax credit or additional child				2,0	92	
	29	American opportunity credit from Form 886	63, line 8 . .				_	
	30	Recovery rebate credit. See instructions .						
	31	Amount from Schedule 3, line 15						
	32	Add lines 27a and 28 through 31. These ar						2,092
	33	Add lines 25d, 26, and 32. These are your	total payments				▶ 33	19,822
								==,===
Refund	34	If line 33 is more than line 24, subtract line			•	-		
	34 35a	Amount of line 34 you want refunded to you		3 is attached,	check here	▶ [35a	
Direct deposit?	34 35a ▶ b	Amount of line 34 you want refunded to you Routing number		3 is attached,	•	▶ [35a	
	34 35a ▶ b ▶ d	Amount of line 34 you want refunded to you Routing number Account number	ou. If Form 8888	is attached, ► c Type:	check here Checking	▶ [35a	
Direct deposit? See instructions.	34 35a ▶ b ▶ d 36	Amount of line 34 you want refunded to you Routing number Account number Amount of line 34 you want applied to you	ou. If Form 8888	B is attached, c ► c Type:	Check here Checking Marketing M	► [g	35a	
Direct deposit? See instructions.	34 35a ▶ b ▶ d 36	Amount of line 34 you want refunded to you Routing number Account number Amount of line 34 you want applied to you Amount you owe. Subtract line 33 from line	ou. If Form 8888 r 2022 estimate ne 24. For detail	B is attached, c Type: ed tax . s on how to possess.	check here Checking 36 ay, see instruc	► [g	35a	8,626
Direct deposit? See instructions. Amount You Owe	34 35a ▶ b ▶ d 36 37 38	Amount of line 34 you want refunded to you Routing number Account number Amount of line 34 you want applied to you Amount you owe. Subtract line 33 from line Estimated tax penalty (see instructions)	ou. If Form 8888 Ir 2022 estimate ne 24. For detail	B is attached, C Type: ed tax s on how to po	check here Checking Checking 36 ay, see instruct 38	► [g	35a	
Direct deposit? See instructions. Amount You Owe Third Party	34 35a ▶ b ▶ d 36 37 38	Amount of line 34 you want refunded to you Routing number Account number Amount of line 34 you want applied to you Amount you owe. Subtract line 33 from line Estimated tax penalty (see instructions) you want to allow another person to display the statement of the statement o	r 2022 estimate ne 24. For detail scuss this retu	B is attached, C Type: ed tax s on how to po rn with the If	check here Checking Checking 36 ay, see instruct 38 RS? See	g ☐ Saving	35a gs ▶ 37	8,626
Direct deposit? See instructions. Amount You Owe	34 35a ▶ b ▶ d 36 37 38	Amount of line 34 you want refunded to you Routing number Account number Amount of line 34 you want applied to you Amount you owe. Subtract line 33 from line Estimated tax penalty (see instructions) you want to allow another person to display the statement of the statement o	r 2022 estimate ne 24. For detail scuss this retu	B is attached, c Type: ed tax s on how to po rn with the If	check here Checking Checking 36 ay, see instruct 38 RS? See	► [g	35a 35a → 37 te below.	8,626
Direct deposit? See instructions. Amount You Owe Third Party	34 35a ▶ b ▶ d 36 37 38 Doo ins	Amount of line 34 you want refunded to you Routing number Account number Amount of line 34 you want applied to you Amount you owe. Subtract line 33 from line Estimated tax penalty (see instructions) you want to allow another person to ditructions	ou. If Form 8888 Ir 2022 estimate The 24. For detail Scuss this retu	B is attached, c Type: ed tax . s on how to po rn with the If	check here Checking Checking 36 ay, see instruct 38 RS? See	Saving □ Saving ctions . I	35a 35a 37 te below. entification	8,626
Direct deposit? See instructions. Amount You Owe Third Party Designee Sign	34 35a ▶ b ▶ d 36 37 38 Do ins Deanar	Amount of line 34 you want refunded to you Routing number Account number Amount of line 34 you want applied to you Amount you owe. Subtract line 33 from line Estimated tax penalty (see instructions) you want to allow another person to distructions you want to allow another person to distructions signee's the penalties of perjury, I declare that I have examined, they are true, correct, and complete. Declaration	r 2022 estimate ne 24. For detail	B is attached, c Type: ed tax . s on how to position in the lift in the lif	check here Checking Checking Salary, see instruct S	Saving Saving Stions Yes. Comple Personal id- number (PII statements, an	35a 35a 37 te below. entification b) d to the be hich prepar	8,626 No st of my knowledge and rer has any knowledge.
Direct deposit? See instructions. Amount You Owe Third Party Designee	34 35a ▶ b ▶ d 36 37 38 Do ins Deanar	Amount of line 34 you want refunded to you Routing number Account number Amount of line 34 you want applied to you Amount you owe. Subtract line 33 from line Estimated tax penalty (see instructions) you want to allow another person to distructions you want to allow another person to distructions signee's ne der penalties of perjury, I declare that I have examined to the second of the	r 2022 estimate ne 24. For detail scuss this retu Phone no. ▶	B is attached, c Type: ed tax s on how to po rn with the If	check here Checking Checking Salary, see instruct S	yes. Comple Personal id- number (PII statements, an- nformation of w	35a 35a te below. entification b to the behich prepar	8,626 No st of my knowledge and rer has any knowledge.
Direct deposit? See instructions. Amount You Owe Third Party Designee Sign Here	34 35a ▶ b ▶ d 36 37 38 Doins Deenar Unebel	Amount of line 34 you want refunded to you Routing number Account number Amount of line 34 you want applied to you Amount you owe. Subtract line 33 from line Estimated tax penalty (see instructions) you want to allow another person to distructions you want to allow another person to distructions signee's the penalties of perjury, I declare that I have examined, they are true, correct, and complete. Declaration	r 2022 estimate ne 24. For detail Scuss this retu Phone no. ned this return and n of preparer (othe	B is attached, c Type: ded tax s on how to pour the service of the service	check here Checking Checking Salary, see instruct S	yes. Comple Personal id- number (PII statements, an- nformation of w	35a 35a te below. entification b to the behich prepar	8,626 No st of my knowledge and rer has any knowledge. ent you an Identity PIN, enter it here
Direct deposit? See instructions. Amount You Owe Third Party Designee Sign Here Joint return? See instructions.	34 35a ▶ b ▶ d 36 37 38 Do ins De: nar Unibel You	Amount of line 34 you want refunded to you Routing number Account number Amount of line 34 you want applied to you Amount you owe. Subtract line 33 from line Estimated tax penalty (see instructions) you want to allow another person to distructions signee's ne der penalties of perjury, I declare that I have examilef, they are true, correct, and complete. Declarationar signature	r 2022 estimate ne 24. For detail	B is attached, c Type: ded tax s on how to pour the service of the service	check here Checking A 36 A 36 A 38	yes. Comple Personal id- number (PII statements, ann formation of w	35a 35a te below. entification bit to the behich prepare the IRS serrotection Free inst.)	8,626 No st of my knowledge and rer has any knowledge. ent you an Identity PIN, enter it here
Direct deposit? See instructions. Amount You Owe Third Party Designee Sign Here Joint return? See instructions. Keep a copy for	34 35a ▶ b ▶ d 36 37 38 Do ins De: nar Unibel You	Amount of line 34 you want refunded to you Routing number Account number Amount of line 34 you want applied to you Amount you owe. Subtract line 33 from line Estimated tax penalty (see instructions) you want to allow another person to distructions you want to allow another person to distructions signee's ne der penalties of perjury, I declare that I have examiled, they are true, correct, and complete. Declarationar signature ayce L Dutton	r 2022 estimate ne 24. For detail Scuss this retu Phone no. In the preparer (other Date 04/15/22 Date	B is attached, c Type: ded tax s on how to pour than taxpayer) Your occupation CATTLE CC Spouse's occur	check here Checking A 36 A 36 A 38	Yes. Comple Personal id- number (PII statements, an nformation of w	35a 35a te below. entification by d to the behich prepar the IRS secretation F see inst.) the IRS secretation F see inst.) the IRS secretation F	8,626 No st of my knowledge and rer has any knowledge. ent you an Identity PIN, enter it here ent your spouse an tection PIN, enter it here
Direct deposit? See instructions. Amount You Owe Third Party Designee Sign Here Joint return? See instructions.	34 35a b d 36 37 38 Do ins Dei nar Uni bel Yor	Amount of line 34 you want refunded to you Routing number Account number Amount of line 34 you want applied to you Amount you owe. Subtract line 33 from line Estimated tax penalty (see instructions) you want to allow another person to distructions you want to allow another person to distructions signee's ne der penalties of perjury, I declare that I have examiled, they are true, correct, and complete. Declarational are signature ayou L Dutton buse's signature. If a joint return, both must sign.	r 2022 estimate re 24. For detail Scuss this return and of preparer (other Date 04/15/22 Date 04/15/22	B is attached, c Type: ed tax . s on how to po rn with the If d accompanying r than taxpayer) Your occupati CATTLE CC	check here Checking A 36 A 36 A 38	Yes. Comple Personal id- number (PII statements, an nformation of w	35a 35a te below. entification by d to the behich prepar the IRS servection F see inst.) the IRS se	8,626 No st of my knowledge and rer has any knowledge. ent you an Identity PIN, enter it here ent your spouse an tection PIN, enter it here
Direct deposit? See instructions. Amount You Owe Third Party Designee Sign Here Joint return? See instructions. Keep a copy for	34 35a b d 36 37 38 Do ins Dei nar Uni bel Yor Phe	Amount of line 34 you want refunded to you Routing number Account number Amount of line 34 you want applied to you Amount you owe. Subtract line 33 from line Estimated tax penalty (see instructions) you want to allow another person to distructions you want to allow another person to distructions signee's ne der penalties of perjury, I declare that I have examined, they are true, correct, and complete. Declaration our signature Tayce L Datton one no.	r 2022 estimate re 24. For detail Scuss this return and of preparer (othe Date 04/15/22 Date 04/15/22 Email address	B is attached, c Type: ded tax s on how to pour than taxpayer) Your occupation CATTLE CC Spouse's occur	check here Checking Age and Checking Age	yes. Comple Personal id- number (PII statements, an- nformation of w	35a 35a te below. entification by d to the behich prepar the IRS secretation F see inst.) the IRS secretation F see inst.) the IRS secretation F	8,626 No st of my knowledge and rer has any knowledge. ent you an Identity PIN, enter it here ent your spouse an tection PIN, enter it here
Direct deposit? See instructions. Amount You Owe Third Party Designee Sign Here Joint return? See instructions. Keep a copy for	34 35a b d 36 37 38 Do ins Dei nar Uni bel Yor Phe	Amount of line 34 you want refunded to you Routing number Account number Amount of line 34 you want applied to you Amount you owe. Subtract line 33 from line Estimated tax penalty (see instructions) you want to allow another person to distructions you want to allow another person to distructions signee's ne der penalties of perjury, I declare that I have examiled, they are true, correct, and complete. Declarational are signature ayou L Dutton buse's signature. If a joint return, both must sign.	r 2022 estimate re 24. For detail Scuss this return and of preparer (othe Date 04/15/22 Date 04/15/22 Email address	B is attached, c Type: ded tax s on how to pour than taxpayer) Your occupation CATTLE CC Spouse's occur	check here Checking A 36 A 36 A 38	Yes. Comple Personal id- number (PII statements, an nformation of w	35a 35a te below. entification by d to the behich prepar the IRS secretation F see inst.) the IRS secretation F see inst.) the IRS secretation F	8,626 No st of my knowledge and rer has any knowledge. ent you an Identity PIN, enter it here ent your spouse an tection PIN, enter it here Check if:
Direct deposit? See instructions. Amount You Owe Third Party Designee Sign Here Joint return? See instructions. Keep a copy for your records.	34 35a b d 36 37 38 Doo ins Des nar Und bel You Spo	Amount of line 34 you want refunded to you Routing number Account number Amount of line 34 you want applied to you Amount you owe. Subtract line 33 from line Estimated tax penalty (see instructions). you want to allow another person to distructions. you want to allow another person to distructions. before penalties of perjury, I declare that I have examined, they are true, correct, and complete. Declarationar signature aux L Dutton Duse's signature. If a joint return, both must sign. Duse signature. Preparer's signature.	r 2022 estimate re 24. For detail Scuss this return and of preparer (othe Date 04/15/22 Date 04/15/22 Email address	B is attached, c Type: ded tax s on how to pour than taxpayer) Your occupation CATTLE CC Spouse's occur	check here Checking Age and Checking Age	Yes. Comple Personal id number (Pil statements, an nformation of w	as a	8,626 No st of my knowledge and rer has any knowledge. ent you an Identity PIN, enter it here ent your spouse an tection PIN, enter it here
Direct deposit? See instructions. Amount You Owe Third Party Designee Sign Here Joint return? See instructions. Keep a copy for your records.	34 35a b d 36 37 38 Doo ins Dee nar Under bel You Specific Fire	Amount of line 34 you want refunded to you Routing number Account number Account number Amount of line 34 you want applied to you Amount you owe. Subtract line 33 from line Estimated tax penalty (see instructions). you want to allow another person to distructions	r 2022 estimate re 24. For detail Scuss this return and of preparer (othe Date 04/15/22 Date 04/15/22 Email address	B is attached, c Type: ded tax s on how to pour than taxpayer) Your occupation CATTLE CC Spouse's occur	check here Checking Age and Checking Age	yes. Comple Personal id number (PII statements, an nformation of w If Ic (s) PTIN	35a 35a te below. entification y) d to the be hich prepar the IRS se rotection F see inst.) the IRS se dentity Prof see inst.) whone no.	8,626 No st of my knowledge and rer has any knowledge. ent you an Identity PIN, enter it here ent your spouse an dection PIN, enter it here Check if:
Direct deposit? See instructions. Amount You Owe Third Party Designee Sign Here Joint return? See instructions. Keep a copy for your records. Paid Preparer Use Only	34 35a b d 36 37 38 Doo ins Des nar Unibel Yor Spri Phe Firm Firm	Amount of line 34 you want refunded to you Routing number Account number Amount of line 34 you want applied to you Amount you owe. Subtract line 33 from line Estimated tax penalty (see instructions). you want to allow another person to distructions. you want to allow another person to distructions. before penalties of perjury, I declare that I have examined, they are true, correct, and complete. Declarationar signature aux L Dutton Duse's signature. If a joint return, both must sign. Duse signature. Preparer's signature.	r 2022 estimate re 24. For detail Scuss this return and of preparer (othe Date 04/15/22 Date 04/15/22 Email address	B is attached, c Type: ded tax s on how to pour than taxpayer) Your occupation CATTLE CC Spouse's occur	check here Checking Age and Checking Age	yes. Comple Personal id number (PII statements, an nformation of w If Ic (s) PTIN	as a	8,626 No st of my knowledge and rer has any knowledge. ent you an Identity PIN, enter it here ent your spouse an dection PIN, enter it here Check if:

Sample IRS Form Schedule 1, Page 1 – (not filed by Kayce and Monica)

SCHEDULE 1 (Form 1040)

Department of the Treasury Internal Revenue Service

Additional Income and Adjustments to Income

► Attach to Form 1040, 1040-SR, or 1040-NR. ▶ Go to www.irs.gov/Form1040 for instructions and the latest information. OMB No. 1545-0074

Sequence No. 01

Attachment

Name(s) shown on Form 1040, 1040-SR, or 1040-NR Your social security number Part I Additional Income Taxable refunds, credits, or offsets of state and local income taxes 1 2a **b** Date of original divorce or separation agreement (see instructions) ▶ 3 3 4 4 Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach 5 Farm income or (loss). Attach Schedule F 6 6 7 7 Other income: a Net operating loss 8a **b** Gambling income 8b **d** Foreign earned income exclusion from Form 2555 8d e Taxable Health Savings Account distribution 8e Alaska Permanent Fund dividends 8g 8h i Activity not engaged in for profit income 8i **k** Income from the rental of personal property if you engaged in the rental for profit but were not in the business of renting such 8k I Olympic and Paralympic medals and USOC prize money (see 81 m Section 951(a) inclusion (see instructions) 8m n Section 951A(a) inclusion (see instructions) 8n o Section 461(I) excess business loss adjustment 80 **p** Taxable distributions from an ABLE account (see instructions). g8 Z Other income. List type and amount ► Total other income. Add lines 8a through 8z 9 9 10 Combine lines 1 through 7 and 9. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 8 10

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

^{*}Income earned from work: IRS Form 1040 Line 1 **+ Schedule 1, Line 3 + Schedule 1, Line 6** + Schedule K-1 (IRS Form 1065)¬Box 14 (Code A). If any individual earning item is negative, do not include that amount in your calculation.

Sample IRS Form Schedule 1, Page 2 – (not filed by Kayce and Monica)

Schedule 1 (Form 1040) 2021 Page				
Par	t II Adjustments to Income			
11	Educator expenses		11	
12	Certain business expenses of reservists, performing artists, and fee officials. Attach Form 2106	12		
13	Health savings account deduction. Attach Form 8889		13	
14	Moving expenses for members of the Armed Forces. Attach Form	3903	14	
15	Deductible part of self-employment tax. Attach Schedule SE		15	
16	Self-employed SEP, SIMPLE, and qualified plans		16	
17	Self-employed health insurance deduction		17	
18	Penalty on early withdrawal of savings		18	
19a	Alimony paid		19a	
b	Recipient's SSN	•		
С	Date of original divorce or separation agreement (see instructions)	-		
20	IRA deduction		20	
21	Student loan interest deduction		21	
22	Reserved for future use		22	
23	Archer MSA deduction		23	
24	Other adjustments:			
а	Jury duty pay (see instructions)	24a		
b	Deductible expenses related to income reported on line 8k from the rental of personal property engaged in for profit	24b		
С	Nontaxable amount of the value of Olympic and Paralympic medals and USOC prize money reported on line 8l	24c		
d	Reforestation amortization and expenses	24d		
е	Repayment of supplemental unemployment benefits under the Trade Act of 1974	24e		
f	Contributions to section 501(c)(18)(D) pension plans	24f		
g	Contributions by certain chaplains to section 403(b) plans	24g		
h	Attorney fees and court costs for actions involving certain unlawful discrimination claims (see instructions)	24h		
i	Attorney fees and court costs you paid in connection with an award from the IRS for information you provided that helped the IRS detect tax law violations	24i		
j	Housing deduction from Form 2555	24j		
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form 1041)	24k		
Z	Other adjustments. List type and amount ▶	24z		
25	Total other adjustments. Add lines 24a through 24z		25	
26	Add lines 11 through 23 and 25. These are your adjustments			
	here and on Form 1040 or 1040-SR, line 10, or Form 1040-NR, lin		26	lo 1 (Form 1040) 2021
			ocneau	le 1 (Form 1040) 2021

Sample IRS Form Schedule 2, Page 1 – (not filed by Kayce and Monica)

		1			
	EDULE 2 n 1040)	Additional Taxes		_	OMB No. 1545-0074
Departn	Department of the Treasury Internal Revenue Service ► Attach to Form 1040, 1040-SR, or 1040-NR. ► Go to www.irs.gov/Form1040 for instructions and the latest information.				Attachment Sequence No. 02
Name	e(s) shown on Fo	orm 1040, 1040-SR, or 1040-NR		Your social	security number
Pa	rtl Tax				
1	Alternative	minimum tax. Attach Form 6251	Income Tax Pa	id* 1	
2	Excess adv	rance premium tax credit repayment. Attach Form	1040 Line 22 minus	2	
3		and 2. Enter here and on Form 1040, 1040-SR, c	61 11 21	2 3	
Par	t II Other		*If negative, enter zer	0	
4	Self-employ	yment tax. Attach Schedule SE		4	
5		urity and Medicare tax on unreported tip inco	ome.		
6	Uncollected Form 8919	d social security and Medicare tax on wages. At	tach 6		
7	Total addition	onal social security and Medicare tax. Add lines 5	and 6	7	
8	Additional t	ax on IRAs or other tax-favored accounts. Attach	Form 5329 if requ	uired 8	
9	Household	employment taxes. Attach Schedule H		9	
10	Repayment	of first-time homebuyer credit. Attach Form 5405	if required	10	
11	Additional N	Medicare Tax. Attach Form 8959		11	
12	Net investm	nent income tax. Attach Form 8960		12	!
13		d social security and Medicare or RRTA tax on rom Form W-2, box 12		l l	
14	Interest on and timesha	tax due on installment income from the sale of ares	certain residentia	al lots 14	
15		the deferred tax on gain from certain installment		price 15	
16	Recapture of	of low-income housing credit. Attach Form 8611 .		16	;
				(contii	nued on page 2)
For Pa	aperwork Reduct	tion Act Notice, see your tax return instructions.	Cat. No. 71478U	Sche	dule 2 (Form 1040) 2021

Sample IRS Form Schedule 2, Page 2 – (not filed by Kayce and Monica)

Schedul	e 2 (Form 1040) 2021					Page 2
Par	Other Taxes (continued)					
17	Other additional taxes:					
а	Recapture of other credits. List type, form number, and amount ▶	17a				
b	Recapture of federal mortgage subsidy. If you sold your home in 2021, see instructions	17b				
С	Additional tax on HSA distributions. Attach Form 8889	17c				
d	Additional tax on an HSA because you didn't remain an eligible individual. Attach Form 8889	17d				
е	Additional tax on Archer MSA distributions. Attach Form 8853.	17e				
f	Additional tax on Medicare Advantage MSA distributions. Attach Form 8853	17f				
g	Recapture of a charitable contribution deduction related to a fractional interest in tangible personal property	17g				
h	Income you received from a nonqualified deferred compensation plan that fails to meet the requirements of section 409A	17h				
i	Compensation you received from a nonqualified deferred compensation plan described in section 457A	17i				
j	Section 72(m)(5) excess benefits tax	17j				
k	Golden parachute payments	17k				
- 1	Tax on accumulation distribution of trusts	17 I				
m	Excise tax on insider stock compensation from an expatriated					
	corporation	17m		-		
	Look-back interest under section 167(g) or 460(b) from Form 8697 or 8866	17n				
	Tax on non-effectively connected income for any part of the year you were a nonresident alien from Form 1040-NR	17 o				
р	Any interest from Form 8621, line 16f, relating to distributions from, and dispositions of, stock of a section 1291 fund	17p				
q	Any interest from Form 8621, line 24	17q				
Z	Any other taxes. List type and amount ▶	17z				
18	Total additional taxes. Add lines 17a through 17z		 	18		
19	Additional tax from Schedule 8812		 	19		
20	Section 965 net tax liability installment from Form 965-A	20				
21	Add lines 4, 7 through 16, 18, and 19. These are your total other and on Form 1040 or 1040-SR, line 23, or Form 1040-NR, line 23b			21		
			1	Schedu	le 2 (Form 1	1040) 2021

Sample IRS Form Schedule 3, Page 1 – (not filed by Kayce and Monica)

SCHEDULE 3 (Form 1040)

Additional Credits and Payments

OMB No. 1545-0074

	artment of the Treasury nal Revenue Service ► Attach to Form 1040, 1040-SR, or 1040-NR. ► Go to www.irs.gov/Form1040 for instructions and the latest information.			Attachment Sequence No. 03		
		rm 1040, 1040-SR, or 1040-NR		Your so		security number
Part	Nonre	undable Credits		1		
1	Foreign tax	credit. Attach Form 1116 if required			1	
	Credit for o Form 2441	hild and dependent care expenses from Form 244			2	
3	Education c	redits 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 nonre	fundable credits:				
а	General bus	iness credit. Attach Form 3800	6a			
b (Credit for p	ior year minimum tax. Attach Form 8801	6b			
C	Adoption cr	edit. Attach Form 8839	6c			
d (Credit for th	e elderly or disabled. Attach Schedule R	6d			
e /	Alternative r	notor vehicle credit. Attach Form 8910	6e			
f (Qualified plu	ıg-in motor vehicle credit. Attach Form 8936	6f			
g l	Mortgage in	terest credit. Attach Form 8396	6g			
h l	District of Co	olumbia first-time homebuyer credit. Attach Form 8859	6h			
i (Qualified ele	ectric vehicle credit. Attach Form 8834	6i			
j	Alternative f	uel vehicle refueling property credit. Attach Form 8911	6 j			
k (Credit to ho	lders of tax credit bonds. Attach Form 8912	6k			
1 /	Amount on	Form 8978, line 14. See instructions	6 I			
z	Other nonref	undable credits. List type and amount ▶				
			6z			
		nonrefundable credits. Add lines 6a through 6z		T t	7	
		through 5 and 7. Enter here and on Form 1040, 1040	-SR, or	1040-NR,	8	
				(co		ued on page 2)
		on Act Notice, see your tax return instructions. Cat. No		1		7

Sample IRS Form Schedule 3, Page 2 – (not filed by Kayce and Monica)

Schedu	Schedule 3 (Form 1040) 2021 Page 2						
Par	t II Other Payments and Refundable Credits						
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	Other payments or refundable credits:						
а	Form 2439	13a					
b	Qualified sick and family leave credits from Schedule(s) H and Form(s) 7202 for leave taken before April 1, 2021	13b					
С	Health coverage tax credit from Form 8885	13c					
d	Credit for repayment of amounts included in income from earlier years	13d					
е	Reserved for future use	13e					
f	Deferred amount of net 965 tax liability (see instructions)	13f					
g	Credit for child and dependent care expenses from Form 2441, line 10. Attach Form 2441	13g					
h	Qualified sick and family leave credits from Schedule(s) H and Form(s) 7202 for leave taken after March 31, 2021	13h					
z	Other payments or refundable credits. List type and amount ▶	13z					
14	Total other payments or refundable credits. Add lines 13a through	13z	14				
15	Add lines 9 through 12 and 14. Enter here and on Form 1040, 1040 line 31		15				

Schedule 3 (Form 1040) 2021

SCHEDULE A (Form 1040)

Itemized Deductions

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

OMB No. 1545-0074

Department of the Treasury

Internal Revenue Ser	vice ((99) Caution: If you are claiming a net qualified disaster loss on Form 4684, see the	instructions for line 16		Sequence No. 07
Name(s) shown on	Form	1 1040 or 1040-SR		Your so	ocial security number
KAYCE L DUTT	ON	MONICA K DUTTON			XXX-XX-1234
Medical		Caution: Do not include expenses reimbursed or paid by others.			
and	1	Medical and dental expenses (see instructions)	1		
Dental	2	Enter amount from Form 1040 or 1040-SR, line 11 2 202,842			
Expenses		Multiply line 2 by 7.5% (0.075)	3 15,21	.3	
-		Subtract line 3 from line 1. If line 3 is more than line 1, enter -0		4	
Taxes You		State and local taxes.			
Paid	_	a State and local income taxes or general sales taxes. You may include either income taxes or general sales taxes on line 5a, but not both. If you elect to include general sales taxes instead of income taxes, check this box	5a 12,90	02	
	k	State and local real estate taxes (see instructions)	5b 15,12		
		State and local personal property taxes	5c		
		Add lines 5a through 5c	5d 28,02	4	
		Enter the smaller of line 5d or \$10,000 (\$5,000 if married filing	20,01		
		separately)	5e 10,00	00	
	U		6		
	7	Add lines 5e and 6		7	10.000
Interest					10,000
Interest You Paid Caution: Your mortgage interest deduction may be limited (see instructions).		Home mortgage interest and points. If you didn't use all of your home mortgage loan(s) to buy, build, or improve your home, see instructions and check this box	8a 24,33	70	
	ŀ	Home mortgage interest not reported to you on Form 1098. See instructions if limited. If paid to the person from whom you bought the home, see instructions and show that person's name, identifying no., and address	8b		
		Points not reported to you on Form 1098. See instructions for special			
		rules	8c		
		Mortgage insurance premiums (see instructions)	8d		
		Add lines 8a through 8d	8e 24,37	0	
		Investment interest. Attach Form 4952 if required. See instructions.	9	Ť	
		Add lines 8e and 9		10	24,370
Gifts to Charity	11	Gifts by cash or check. If you made any gift of \$250 or more, see instructions		.5	2.,5.0
Caution: If you made a gift and got a benefit for it,	12	Other than by cash or check. If you made any gift of \$250 or more, see instructions. You must attach Form 8283 if over \$500	40	00	
see instructions.	13	Carryover from prior year	13		
	14	Add lines 11 through 13		14	515
Casualty and Theft Losses	15	Casualty and theft loss(es) from a federally declared disaster (other disaster losses). Attach Form 4684 and enter the amount from line 1 instructions	r than net qualified 8 of that form. See		
Other	16				
Itemized					
D eductions				16	
Total Itemized	17	Add the amounts in the far right column for lines 4 through 16. Also, e Form 1040 or 1040-SR, line 12a		17	34,885
	18	If you elect to itemize deductions even though they are less than your check this box	standard deduction	,	, , , , ,
For Paperwork	Red			Schedu	ıle A (Form 1040) 2021

Note: Besides Schedules 1, 2, and 3, the school does not need to collect copies of IRS schedules or forms attached to the tax return, unless conflicting information in the student's file needs resolving.

SCHEDULE B OMB No. 1545-0074 Interest and Ordinary Dividends (Form 1040) ► Go to www.irs.gov/ScheduleB for instructions and the latest information. Department of the Treasury Internal Revenue Service (99) Attachment ► Attach to Form 1040 or 1040-SR. Sequence No. 08 Name(s) shown on return Your social security number **KAYCE L DUTTON** XXX-XX-1234 Amount Part I List name of payer. If any interest is from a seller-financed mortgage and the buyer used the property as a personal residence, see the instructions and list this Interest interest first. Also, show that buyer's social security number and address FIRST FINANCIAL FCU 318 (See instructions FIRST FINANCIAL FCU 429 and the Instructions for Form 1040, line 2b.) Note: If you 1 received a Form 1099-INT, Form 1099-OID, or substitute statement from a brokerage firm, list the firm's name as the payer and enter the total interest shown on that 2 747 3 Excludable interest on series EE and I U.S. savings bonds issued after 1989. 0 Subtract line 3 from line 2. Enter the result here and on Form 1040 or 1040-SR, 747 Note: If line 4 is over \$1,500, you must complete Part III. Amount Part II List name of payer ▶ Ordinary **Dividends** (See instructions and the Instructions for Form 1040, line 3b.) 5 Note: If you received a Form 1099-DIV or substitute statement from a brokerage firm, list the firm's name as the payer and enter the ordinary dividends shown Add the amounts on line 5. Enter the total here and on Form 1040 or 1040-SR, on that form. 0 Note: If line 6 is over \$1,500, you must complete Part III.

Foreign Accounts

Part III

and Trusts

Caution: If
required, failure
to file FinCEN
Form 114 may
result in
substantial

penalties. See

You must complete this part if you (a) had over \$1,500 of taxable interest or ordinary dividends; (b) had a foreign account; or (c) received a distribution from, or were a grantor of, or a transferor to, a foreign trust.

b If you are required to file FinCEN Form 114, enter the name of the foreign country where the financial account is located ▶
 During 2021, did you receive a distribution from, or were you the grantor of, or transferor to, a

Cat. No. 17146N Schedule B (Form 1040) 2021

Yes No

SCHEDULE 8812 (Form 1040)

Credits for Qualifying Children and Other Dependents

1040 1040-SR 1040-NR 8812

OMB No. 1545-0074

2021

Attachment Sequence No. 47

Department of the Treasury Internal Revenue Service (99) ► Attach to Form 1040, 1040-SR, or 1040-NR.

► Go to www.irs.gov/Schedule8812 for instructions and the latest information.

Name(s) shown on return Your social security number **KAYCE L DUTTON** XXX-XX-1234 **Child Tax Credit and Credit for Other Dependents** Part I-A Enter the amount from line 11 of your Form 1040, 1040-SR, or 1040-NR . . . 202,842 Enter income from Puerto Rico that you excluded Enter the amounts from lines 45 and 50 of your Form 2555 . . . 2b Enter the amount from line 15 of your Form 4563 d Add lines 2a through 2c 2d3 3 202,842 4a Number of qualifying children under age 18 with the required social security number 4aNumber of children included on line 4a who were under age 6 at the end of 2021 . . . 4b 2 c 5 If line 4a is more than zero, enter the amount from the Line 5 Worksheet; otherwise, enter -0-5 4,550 Number of other dependents, including any qualifying children who are not under age Caution: Do not include yourself, your spouse, or anyone who is not a U.S. citizen, U.S. national, or U.S. resident alien. Also, do not include anyone you included on line 4a. 8 8 4,550 Enter the amount shown below for your filing status. • Married filing jointly—\$400,000 All other filing statuses—\$200,000 9 400.000 10 Subtract line 9 from line 3. • If zero or less, enter -0-. • If more than zero and not a multiple of \$1,000, enter the next multiple of \$1,000. For example, if the result is \$425, enter \$1,000; if the result is \$1,025, enter \$2,000, etc. **10** 11 11 12 12 4,550 13 Check all the boxes that apply to you (or your spouse if married filing jointly). A Check here if you (or your spouse if married filing jointly) had a principal place of abode in the United States B Check here if you (or your spouse if married filing jointly) were a bona fide resident of Puerto Rico for 2021 Part I-B Filers Who Check a Box on Line 13 Caution: If you did not check a box on line 13, do not complete Part I-B; instead, skip to Part I-C. 14a 14b 4,550 If line 14a is zero, enter -0-; otherwise, enter the amount from the Credit Limit Worksheet A. 14c 14d 14e 4,550 Enter the aggregate amount of advance child tax credit payments you (and your spouse if filing jointly) received for 2021. See your Letter(s) 6419 for the amounts to include on this line. If you are missing Letter 6419, see the instructions before entering an amount on this line. If you didn't receive any advance child tax credit payments 14f 2.458 for 2021, enter -0-Caution: If the amount on this line doesn't match the aggregate amounts reported to you (and your spouse if filing jointly) on your Letter(s) 6419, the processing of your return will be delayed. g Subtract line 14f from line 14e. If zero or less, enter -0- on lines 14g through 14i and go to Part III 14g 2,092 Enter the smaller of line 14d or line 14g. This is your credit for other dependents. Enter this amount on line 14h Subtract line 14h from line 14g. This is your refundable child tax credit. Enter this amount on line 28 of your Form 1040, 1040-SR, or 1040-NR 2,092

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

Cat. No. 59761M

Schedule 8812 (Form 1040) 2021

Schedul	e 8812 (Form 1040) 2021	Page 2
Part	I-C Filers Who Do Not Check a Box on Line 13	
Cautio	n: If you checked a box on line 13, do not complete Part I-C.	
15a	Enter the amount from the Credit Limit Worksheet A	15a
b	Enter the smaller of line 12 or line 15a	15b
	Additional child tax credit. Complete Parts II-A through II-C if you meet each of the following items.	
	1. You are not filing Form 2555.	
	2. Line 4a is more than zero.	
	3. Line 12 is more than line 15a.	
c	If you completed Parts II-A through II-C, enter the amount from line 27; otherwise, enter -0	15c
d	Add lines 15b and 15c	15d
e	Enter the aggregate amount of advance child tax credit payments you (and your spouse if filing jointly) received	
	for 2021. See your Letter(s) 6419 for the amounts to include on this line. If you are missing Letter 6419, see the	
	instructions before entering an amount on this line. If you didn't receive any advance child tax credit payments for 2021, enter -0-	15e
	Caution: If the amount on this line doesn't match the aggregate amounts reported to you (and your spouse if	150
	filing jointly) on your Letter(s) 6419, the processing of your return will be delayed.	
f	Subtract line 15e from line 15d. If zero or less, enter -0- on lines 15f through 15h and go to Part III	15f
g	Enter the smaller of line 15b or line 15f. This is your nonrefundable child tax credit and credit for other	
5	dependents. Enter this amount on line 19 of your Form 1040, 1040-SR, or 1040-NR	15g
h	Subtract line 15g from line 15f. This is your additional child tax credit. Enter this amount on line 28 of your	- 0
	Form 1040, 1040-SR, or 1040-NR	15h
Part		
Cautio	n: If you file Form 2555, do not complete Parts II-A through II-C; you cannot claim the additional child tax credit.	
Cautio	n: If you checked a box on line 13, do not complete Parts II-A through II-C; you cannot claim the additional child ta	ax credit.
16a	Subtract line 15b from line 12. If zero, skip Parts II-A and II-B and enter -0- on line 27	16a
b	Number of qualifying children under 18 with the required social security number: x \$1,400.	
	Enter the result. If zero, skip Parts II-A and II-B and enter -0- on line 27	16b
	TIP: The number of children you use for this line is the same as the number of children you used for line 4a.	
17	Enter the smaller of line 16a or line 16b	17
18a	Earned income (see instructions)	
b	Nontaxable combat pay (see instructions)	
19	Is the amount on line 18a more than \$2,500?	
	No. Leave line 19 blank and enter -0- on line 20.	
	Yes. Subtract \$2,500 from the amount on line 18a. Enter the result 19	
20	Multiply the amount on line 19 by 15% (0.15) and enter the result $\dots \dots \dots \dots \dots \dots \dots$	20
	Next. On line 16b, is the amount \$4,200 or more?	
	No. If line 20 is zero, enter -0- on line 15c. Otherwise, skip Part II-B and enter the smaller of line 17 or line 20 on line 27.	
	Yes. If line 20 is equal to or more than line 17, skip Part II-B and enter the amount from line 17 on line 27.	
	Otherwise, go to line 21.	
Part	I-B Certain Filers Who Have Three or More Qualifying Children	
21	Withheld social security, Medicare, and Additional Medicare taxes from Form(s) W-2,	
	boxes 4 and 6. If married filing jointly, include your spouse's amounts with yours. If	
	your employer withheld or you paid Additional Medicare Tax or tier 1 RRTA taxes, see instructions	
22		-
22	Enter the total of the amounts from Schedule 1 (Form 1040), line 15; Schedule 2 (Form 1040), line 5; Schedule 2 (Form 1040), line 6; and Schedule 2 (Form 1040), line 13 . 22	
23	Add lines 21 and 22	-
24	1040 and	-
24	1040-SR filers: Enter the total of the amounts from Form 1040 or 1040-SR, line 27a,	
	and Schedule 3 (Form 1040), line 11.	
	1040-NR filers: Enter the amount from Schedule 3 (Form 1040), line 11.	
25	Subtract line 24 from line 23. If zero or less, enter -0	25
26	Enter the larger of line 20 or line 25	26
	Next, enter the smaller of line 17 or line 26 on line 27.	
Part		
27	Enter this amount on line 15c	27
		nedule 8812 (Form 1040) 2021

Schedu	le 8812 (Form 1040) 2021		Page 3
Part	Additional Tax (use only if line 14g or line 15f, whichever applies, is zero)		
28a	Enter the amount from line 14f or line 15e, whichever applies	28a	
b	Enter the amount from line 14e or line 15d, whichever applies	28b	
29	Excess advance child tax credit payments. Subtract line 28b from line 28a. If zero, stop; you do not owe the additional tax	29	
30	Enter the number of qualifying children taken into account in determining the annual advance amount you received for 2021. See your Letter 6419 for this number. If you are missing your Letter 6419, you are filing a joint return, or you received more than one Letter 6419, see the instructions before entering a number on this line	30	
	Caution: If the amount on this line doesn't match the number of qualifying children reported to you (and your spouse if filing jointly) on your Letter(s) 6419, the processing of your return will be delayed.		
31	Enter the smaller of line 4a or line 30	31	
32	Subtract line 31 from line 30. If zero, skip to line 40 and enter the amount from line 29; otherwise, continue to line 33	32	
33	• Married filing jointly or Qualifying widow(er)—\$60,000 • Head of household—\$50,000		
	• All other filing statuses—\$40,000	33	
34	Subtract line 33 from line 3. If zero or less, enter -0	34	
35	Enter the amount from line 33	35	
36	Divide line 34 by line 35. Enter the result as a decimal (rounded to at least three places). If the result is 1.000 or	26	
27	more, enter 1.000	36	
37	Multiply line 32 by \$2,000		
38	Multiply line 37 by line 36	38	
39	Subtract line 38 from line 37	39	
40	Subtract line 39 from line 29. If zero or less, enter -0 This is your additional tax. If more than zero, enter this amount on Schedule 2 (Form 1040), line 19	40	
	Sah	odulo 9912 (E	orm 1040\ 2021

-orm **8959**

Department of the Treasury Internal Revenue Service

Additional Medicare Tax

▶ If any line does not apply to you, leave it blank. See separate instructions.

► Attach to Form 1040, 1040-SR, 1040-NR, 1040-PR, or 1040-SS.

► Go to www.irs.gov/Form8959 for instructions and the latest information.

OMB No. 1545-0074

2021 Attachment Sequence No. 71

Name(s) shown on return Your social security number **KAYCE L DUTTON** XXX-XX-1234 Additional Medicare Tax on Medicare Wages Part I Medicare wages and tips from Form W-2, box 5. If you have more than one Form W-2, enter the total of the amounts from box 5 216,995 2 2 3 3 4 Add lines 1 through 3 216,995 5 Enter the following amount for your filing status: Single, Head of household, or Qualifying widow(er) \$200,000 5 Additional Medicare Tax on Medicare wages. Multiply line 6 by 0.9% (0.009). Enter here and go to 7 7 Part II Additional Medicare Tax on Self-Employment Income Self-employment income from Schedule SE (Form 1040), Part I, line 6. If you had a loss, enter -0- (Form 1040-PR or 1040-SS filers, see instructions.) . . . Enter the following amount for your filing status: Single, Head of household, or Qualifying widow(er) \$200,000 250,000 10 10 216,995 11 11 33,005 12 Subtract line 11 from line 8. If zero or less, enter -0- 12 13 Additional Medicare Tax on self-employment income. Multiply line 12 by 0.9% (0.009). Enter here and 13 Part III Additional Medicare Tax on Railroad Retirement Tax Act (RRTA) Compensation 14 Railroad retirement (RRTA) compensation and tips from Form(s) W-2, box 14 14 15 Enter the following amount for your filing status: 15 Single, Head of household, or Qualifying widow(er) \$200,000 16 16 17 Additional Medicare Tax on railroad retirement (RRTA) compensation. Multiply line 16 by 0.9% (0.009). Part IV Total Additional Medicare Tax Add lines 7, 13, and 17. Also include this amount on Schedule 2 (Form 1040), line 11 (Form 1040-PR Part V Withholding Reconciliation Medicare tax withheld from Form W-2, box 6. If you have more than one Form W-2, enter the total of the amounts from box 6 19 3,147 20 216,995 21 Multiply line 20 by 1.45% (0.0145). This is your regular Medicare tax 22 Subtract line 21 from line 19. If zero or less, enter -0-. This is your Additional Medicare Tax 1 23 Additional Medicare Tax withholding on railroad retirement (RRTA) compensation from Form W-2, box 24 Total Additional Medicare Tax withholding. Add lines 22 and 23. Also include this amount with federal income tax withholding on Form 1040, 1040-SR, or 1040-NR, line 25c (Form 1040-PR or 1040-SS filers, see instructions) 1

Cat. No. 59475X

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

Schedul	e 8812 (Form 1040) 2021	Page 2
Part	I-C Filers Who Do Not Check a Box on Line 13	
Cautio	n: If you checked a box on line 13, do not complete Part I-C.	
15a	Enter the amount from the Credit Limit Worksheet A	15a
b	Enter the smaller of line 12 or line 15a	15b
	Additional child tax credit. Complete Parts II-A through II-C if you meet each of the following items.	
	1. You are not filing Form 2555.	
	2. Line 4a is more than zero.	
	3. Line 12 is more than line 15a.	
c	If you completed Parts II-A through II-C, enter the amount from line 27; otherwise, enter -0	15c
d	Add lines 15b and 15c	15d
e	Enter the aggregate amount of advance child tax credit payments you (and your spouse if filing jointly) received	
	for 2021. See your Letter(s) 6419 for the amounts to include on this line. If you are missing Letter 6419, see the	
	instructions before entering an amount on this line. If you didn't receive any advance child tax credit payments for 2021, enter -0-	15e
	Caution: If the amount on this line doesn't match the aggregate amounts reported to you (and your spouse if	150
	filing jointly) on your Letter(s) 6419, the processing of your return will be delayed.	
f	Subtract line 15e from line 15d. If zero or less, enter -0- on lines 15f through 15h and go to Part III	15f
g	Enter the smaller of line 15b or line 15f. This is your nonrefundable child tax credit and credit for other	
5	dependents. Enter this amount on line 19 of your Form 1040, 1040-SR, or 1040-NR	15g
h	Subtract line 15g from line 15f. This is your additional child tax credit. Enter this amount on line 28 of your	- 0
	Form 1040, 1040-SR, or 1040-NR	15h
Part		
Cautio	n: If you file Form 2555, do not complete Parts II-A through II-C; you cannot claim the additional child tax credit.	
Cautio	n: If you checked a box on line 13, do not complete Parts II-A through II-C; you cannot claim the additional child ta	ax credit.
16a	Subtract line 15b from line 12. If zero, skip Parts II-A and II-B and enter -0- on line 27	16a
b	Number of qualifying children under 18 with the required social security number: x \$1,400.	
	Enter the result. If zero, skip Parts II-A and II-B and enter -0- on line 27	16b
	TIP: The number of children you use for this line is the same as the number of children you used for line 4a.	
17	Enter the smaller of line 16a or line 16b	17
18a	Earned income (see instructions)	
b	Nontaxable combat pay (see instructions)	
19	Is the amount on line 18a more than \$2,500?	
	No. Leave line 19 blank and enter -0- on line 20.	
	Yes. Subtract \$2,500 from the amount on line 18a. Enter the result 19	
20	Multiply the amount on line 19 by 15% (0.15) and enter the result $\dots \dots \dots \dots \dots \dots \dots$	20
	Next. On line 16b, is the amount \$4,200 or more?	
	No. If line 20 is zero, enter -0- on line 15c. Otherwise, skip Part II-B and enter the smaller of line 17 or line 20 on line 27.	
	Yes. If line 20 is equal to or more than line 17, skip Part II-B and enter the amount from line 17 on line 27.	
	Otherwise, go to line 21.	
Part	I-B Certain Filers Who Have Three or More Qualifying Children	
21	Withheld social security, Medicare, and Additional Medicare taxes from Form(s) W-2,	
	boxes 4 and 6. If married filing jointly, include your spouse's amounts with yours. If	
	your employer withheld or you paid Additional Medicare Tax or tier 1 RRTA taxes, see instructions	
22		-
22	Enter the total of the amounts from Schedule 1 (Form 1040), line 15; Schedule 2 (Form 1040), line 5; Schedule 2 (Form 1040), line 6; and Schedule 2 (Form 1040), line 13 . 22	
23	Add lines 21 and 22	-
24	1040 and	-
24	1040-SR filers: Enter the total of the amounts from Form 1040 or 1040-SR, line 27a,	
	and Schedule 3 (Form 1040), line 11.	
	1040-NR filers: Enter the amount from Schedule 3 (Form 1040), line 11.	
25	Subtract line 24 from line 23. If zero or less, enter -0	25
26	Enter the larger of line 20 or line 25	26
	Next, enter the smaller of line 17 or line 26 on line 27.	
Part		
27	Enter this amount on line 15c	27
		nedule 8812 (Form 1040) 2021

Sample Tax Return Transcript – Kayce and Monica Dutton



Internal Revenue Service

United States Department of the Treasury

This Product Contains Sensitive Taxpayer Data

Request Date: 08-30-2022 Response Date: 08-30-2022 Tracking Number: XXXXXXXXXXX

Tax Return Transcript

SSN Provided: XXX-XX-1234
Tax Period Ending: Dec. 31, 2021

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.

SSN: XXX-XX-1234 SPOUSE SSN: XXX-XX-5678

XXX-XX-1121

1040: P1 NAME(S) SHOWN ON RETURN: KAYC L & MONI K DUTTON

ADDRESS: 4230 D

1040: P1	FILING STATUS:	Married Filed Joint
	FORM NUMBER:	1040
	CYCLE POSTED:	20221405
	RECEIVED DATE:	Apr.15, 2022
	REMITTANCE:	\$0.00
	EXEMPTION NUMBER:	04
1040: P1	DEPENDENT 1 NAME CTRL:	DUTT
	DEPENDENT 1 SSN:	XXX-XX-9101
	DEPENDENT 2 NAME CTRL:	DUTT

DEPENDENT 2 NAME CTRL:
DEPENDENT 2 SSN:
DEPENDENT 3 NAME CTRL:
DEPENDENT 3 SSN:
DEPENDENT 4 NAME CTRL:
DEPENDENT 4 SSN:
PTIN:

Income

PREPARER EIN:

1040:1 *	WAGES, SALARIES, TIPS, ETC:\$202,095.00
	TAXABLE INTEREST INCOME: SCH B:
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: 5a	TOTAL PENSIONS AND ANNUITIES: \$0.00
1040: 5b	TAXABLE PENSION/ANNUITY AMOUNT: \$0.00
	ADDITIONAL INCOME:\$0.00
	ADDITIONAL INCOME PER COMPUTER:\$0.00
	REFUNDABLE CREDITS PER COMPUTER: \$2,092.00
	REFUNDABLE EDUCATION CREDIT PER COMPUTER:\$0.00
	QUALIFIED BUSINESS INCOME DEDUCTION:\$0.00
	RENT/ROYALTY/PARTNERSHIP/ESTATE (Schedule E):
	RENT/ROYALTY/PARTNERSHIP/ESTATE (Schedule E) PER COMPUTER:\$0.00

^{*}Income earned from work: IRS Form 1040 Line 1 + Schedule 1, Line 3 + Schedule 1, Line 6 + Schedule K-1 (IRS Form 1065)—Box 14 (Code A). If any individual earning item is negative, do not include that amount in your calculation.

	RENT/ROYALTY INCOME/LOSS PER COMPUTER:\$0.00
	ESTATE/TRUST INCOME/LOSS PER COMPUTER:\$0.00
	PARTNERSHIP/S-CORP INCOME/LOSS PER COMPUTER:
	FARM INCOME OR LOSS (Schedule F):
Sch 1: 6*	FARM INCOME OR LOSS (Schedule F) PER COMPUTER:\$0.00
001111.0	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:\$0.00
	SCHEDULE EIC SE INCOME PER COMPUTER: \$0.00
	SCHEDULE EIC SE INCOME PER COMPUTER:
	l
	SCH EIC DISQUALIFIED INC COMPUTER:\$0.00
	EXCESS ADV CHILD TAX CREDIT PER COMPUTER:
	PRIMARY ECONOMIC PAYMENT 2:\$0.00
	SECONDARY ECONOMIC PAYMENT 2:\$0.00
	PRIMARY ADVANCED CTC PAYMENTS:\$819.50
	SECONDARY ADVANCED CTC PAYMENTS:\$1,638.50
	ADDITIONAL CTC EARNED INCOME:\$0.00
	EIC PRIOR YEAR EARNED INCOME:\$0.00
	CTC PRIOR YEAR EARNED INCOME:\$0.00
	QUALIFIED BUSINESS INCOME DEDUCTION:\$0.00
	F8995 QUALIFIED BUSINESS INCOME DEDUCTION COMPUTER:\$0.00
	PRIMARY ECONOMIC IMPACT PAYMENT:\$2,800.00
	SECONDARY ECONOMIC IMPACT PAYMENT:\$2,800.00
	SCHOLARSHIP FELLOWSHIP GRANT:\$0.00
	TOTAL INCOME:\$202,842.00
	TOTAL INCOME PER COMPUTER: \$202,842.00
	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
SCH1: 13	HEALTH SAVINGS ACCT DEDUCTION PER COMPTR:\$0.00
SCH1: 13	MOVING EXPENSES: F3903:\$0.00
Scn 1: 13	MOVING EXPENSES: F3903: \$0.00 SELF EMPLOYMENT TAX DEDUCTION: \$0.00
Scn 1: 13	MOVING EXPENSES: F3903:
	MOVING EXPENSES: F3903: \$0.00 SELF EMPLOYMENT TAX DEDUCTION: \$0.00 SELF EMPLOYMENT TAX DEDUCTION PER COMPUTER: \$0.00 SELF EMPLOYMENT TAX DEDUCTION VERIFIED: \$0.00 KEOGH/SEP CONTRIBUTION DEDUCTION: \$0.00 SELF-EMP HEALTH INS DEDUCTION: \$0.00 EARLY WITHDRAWAL OF SAVINGS PENALTY: \$0.00
	MOVING EXPENSES: F3903: \$0.00 SELF EMPLOYMENT TAX DEDUCTION: \$0.00 SELF EMPLOYMENT TAX DEDUCTION PER COMPUTER: \$0.00 SELF EMPLOYMENT TAX DEDUCTION VERIFIED: \$0.00 KEOGH/SEP CONTRIBUTION DEDUCTION: \$0.00 SELF-EMP HEALTH INS DEDUCTION: \$0.00 EARLY WITHDRAWAL OF SAVINGS PENALTY: \$0.00 ALIMONY PAID SSN:
	MOVING EXPENSES: F3903: \$0.00 SELF EMPLOYMENT TAX DEDUCTION: \$0.00 SELF EMPLOYMENT TAX DEDUCTION PER COMPUTER: \$0.00 SELF EMPLOYMENT TAX DEDUCTION VERIFIED: \$0.00 KEOGH/SEP CONTRIBUTION DEDUCTION: \$0.00 SELF-EMP HEALTH INS DEDUCTION: \$0.00 EARLY WITHDRAWAL OF SAVINGS PENALTY: \$0.00 ALIMONY PAID SSN: ALIMONY PAID: \$0.00
	MOVING EXPENSES: F3903: \$0.00 SELF EMPLOYMENT TAX DEDUCTION: \$0.00 SELF EMPLOYMENT TAX DEDUCTION PER COMPUTER: \$0.00 SELF EMPLOYMENT TAX DEDUCTION VERIFIED: \$0.00 KEOGH/SEP CONTRIBUTION DEDUCTION: \$0.00 SELF-EMP HEALTH INS DEDUCTION: \$0.00 EARLY WITHDRAWAL OF SAVINGS PENALTY: \$0.00 ALIMONY PAID SSN: \$0.00 SCHOLARSHIP FELLOWSHIP EXCLUDED: \$0.00
Sch1:16	MOVING EXPENSES: F3903: \$0.00 SELF EMPLOYMENT TAX DEDUCTION: \$0.00 SELF EMPLOYMENT TAX DEDUCTION PER COMPUTER: \$0.00 SELF EMPLOYMENT TAX DEDUCTION VERIFIED: \$0.00 KEOGH/SEP CONTRIBUTION DEDUCTION: \$0.00 SELF-EMP HEALTH INS DEDUCTION: \$0.00 EARLY WITHDRAWAL OF SAVINGS PENALTY: \$0.00 ALIMONY PAID SSN: ALIMONY PAID: \$0.00 SCHOLARSHIP FELLOWSHIP EXCLUDED: \$0.00 IRA DEDUCTION: \$0.00
Sch1:16	MOVING EXPENSES: F3903: \$0.00 SELF EMPLOYMENT TAX DEDUCTION: \$0.00 SELF EMPLOYMENT TAX DEDUCTION PER COMPUTER: \$0.00 SELF EMPLOYMENT TAX DEDUCTION VERIFIED: \$0.00 KEOGH/SEP CONTRIBUTION DEDUCTION: \$0.00 SELF-EMP HEALTH INS DEDUCTION: \$0.00 EARLY WITHDRAWAL OF SAVINGS PENALTY: \$0.00 ALIMONY PAID SSN: ALIMONY PAID: \$0.00 SCHOLARSHIP FELLOWSHIP EXCLUDED: \$0.00 IRA DEDUCTION: \$0.00 IRA DEDUCTION PER COMPUTER: \$0.00
Sch1:16	MOVING EXPENSES: F3903: \$0.00 SELF EMPLOYMENT TAX DEDUCTION: \$0.00 SELF EMPLOYMENT TAX DEDUCTION PER COMPUTER: \$0.00 SELF EMPLOYMENT TAX DEDUCTION VERIFIED: \$0.00 KEOGH/SEP CONTRIBUTION DEDUCTION: \$0.00 SELF-EMP HEALTH INS DEDUCTION: \$0.00 EARLY WITHDRAWAL OF SAVINGS PENALTY: \$0.00 ALIMONY PAID SSN: ALIMONY PAID: \$0.00 SCHOLARSHIP FELLOWSHIP EXCLUDED: \$0.00 IRA DEDUCTION: \$0.00 IRA DEDUCTION PER COMPUTER: \$0.00 STUDENT LOAN INTEREST DEDUCTION: \$0.00
Sch1:16	MOVING EXPENSES: F3903:
Sch1:16	MOVING EXPENSES: F3903: \$0.00 SELF EMPLOYMENT TAX DEDUCTION: \$0.00 SELF EMPLOYMENT TAX DEDUCTION PER COMPUTER: \$0.00 SELF EMPLOYMENT TAX DEDUCTION VERIFIED: \$0.00 KEOGH/SEP CONTRIBUTION DEDUCTION: \$0.00 SELF-EMP HEALTH INS DEDUCTION: \$0.00 EARLY WITHDRAWAL OF SAVINGS PENALTY: \$0.00 ALIMONY PAID SSN: \$0.00 ALIMONY PAID: \$0.00 SCHOLARSHIP FELLOWSHIP EXCLUDED: \$0.00 IRA DEDUCTION: \$0.00 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
Sch1:16	MOVING EXPENSES: F3903: \$0.00 SELF EMPLOYMENT TAX DEDUCTION: \$0.00 SELF EMPLOYMENT TAX DEDUCTION PER COMPUTER: \$0.00 SELF EMPLOYMENT TAX DEDUCTION VERIFIED: \$0.00 KEOGH/SEP CONTRIBUTION DEDUCTION: \$0.00 SELF-EMP HEALTH INS DEDUCTION: \$0.00 EARLY WITHDRAWAL OF SAVINGS PENALTY: \$0.00 ALIMONY PAID SSN: \$0.00 SCHOLARSHIP FELLOWSHIP EXCLUDED: \$0.00 SIRA DEDUCTION: \$0.00 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
Sch1:16	MOVING EXPENSES: F3903: \$0.00 SELF EMPLOYMENT TAX DEDUCTION: \$0.00 SELF EMPLOYMENT TAX DEDUCTION PER COMPUTER: \$0.00 SELF EMPLOYMENT TAX DEDUCTION VERIFIED: \$0.00 KEOGH/SEP CONTRIBUTION DEDUCTION: \$0.00 SELF-EMP HEALTH INS DEDUCTION: \$0.00 SEARLY WITHDRAWAL OF SAVINGS PENALTY: \$0.00 ALIMONY PAID SSN: \$0.00 ALIMONY PAID: \$0.00 SCHOLARSHIP FELLOWSHIP EXCLUDED: \$0.00 IRA DEDUCTION: \$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
Sch1:16	MOVING EXPENSES: F3903: \$0.00 SELF EMPLOYMENT TAX DEDUCTION: \$0.00 SELF EMPLOYMENT TAX DEDUCTION PER COMPUTER: \$0.00 SELF EMPLOYMENT TAX DEDUCTION VERIFIED: \$0.00 KEOGH/SEP CONTRIBUTION DEDUCTION: \$0.00 SELF-EMP HEALTH INS DEDUCTION: \$0.00 SEARLY WITHDRAWAL OF SAVINGS PENALTY: \$0.00 ALIMONY PAID SSN: ALIMONY PAID: \$0.00 SCHOLARSHIP FELLOWSHIP EXCLUDED: \$0.00 IRA DEDUCTION: \$0.00 IRA DEDUCTION PER COMPUTER: \$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: \$0.00 TUITION AND FEES DEDUCTION PER COMPUTER: \$0.00 OTHER ADJUSTMENTS: \$0.00
Sch1:16	MOVING EXPENSES: F3903: \$0.00 SELF EMPLOYMENT TAX DEDUCTION: \$0.00 SELF EMPLOYMENT TAX DEDUCTION PER COMPUTER: \$0.00 SELF EMPLOYMENT TAX DEDUCTION VERIFIED: \$0.00 KEOGH/SEP CONTRIBUTION DEDUCTION: \$0.00 SELF-EMP HEALTH INS DEDUCTION: \$0.00 SEARLY WITHDRAWAL OF SAVINGS PENALTY: \$0.00 ALIMONY PAID SSN: \$0.00 ALIMONY PAID: \$0.00 SCHOLARSHIP FELLOWSHIP EXCLUDED: \$0.00 IRA DEDUCTION: \$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
Sch1:16	MOVING EXPENSES: F3903: \$0.00 SELF EMPLOYMENT TAX DEDUCTION: \$0.00 SELF EMPLOYMENT TAX DEDUCTION PER COMPUTER: \$0.00 SELF EMPLOYMENT TAX DEDUCTION VERIFIED: \$0.00 KEOGH/SEP CONTRIBUTION DEDUCTION: \$0.00 SELF-EMP HEALTH INS DEDUCTION: \$0.00 SEARLY WITHDRAWAL OF SAVINGS PENALTY: \$0.00 ALIMONY PAID SSN: ALIMONY PAID: \$0.00 SCHOLARSHIP FELLOWSHIP EXCLUDED: \$0.00 IRA DEDUCTION: \$0.00 IRA DEDUCTION PER COMPUTER: \$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: \$0.00 TUITION AND FEES DEDUCTION PER COMPUTER: \$0.00 OTHER ADJUSTMENTS: \$0.00
Sch1:16	MOVING EXPENSES: F3903: \$0.00 SELF EMPLOYMENT TAX DEDUCTION: \$0.00 SELF EMPLOYMENT TAX DEDUCTION PER COMPUTER: \$0.00 SELF EMPLOYMENT TAX DEDUCTION VERIFIED: \$0.00 KEOGH/SEP CONTRIBUTION DEDUCTION: \$0.00 SELF-EMP HEALTH INS DEDUCTION: \$0.00 EARLY WITHDRAWAL OF SAVINGS PENALTY: \$0.00 ALIMONY PAID SSN: ALIMONY PAID: \$0.00 SCHOLARSHIP FELLOWSHIP EXCLUDED: \$0.00 IRA DEDUCTION: \$0.00 IRA DEDUCTION PER COMPUTER: \$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 OTHER ADJUSTMENTS: \$0.00 ARCHER MSA DEDUCTION: \$0.00
Sch1:16	MOVING EXPENSES: F3903: \$0.00 SELF EMPLOYMENT TAX DEDUCTION: \$0.00 SELF EMPLOYMENT TAX DEDUCTION PER COMPUTER: \$0.00 SELF EMPLOYMENT TAX DEDUCTION VERIFIED: \$0.00 KEOGH/SEP CONTRIBUTION DEDUCTION: \$0.00 SELF-EMP HEALTH INS DEDUCTION: \$0.00 EARLY WITHDRAWAL OF SAVINGS PENALTY: \$0.00 ALIMONY PAID SSN: \$0.00 ALIMONY PAID: \$0.00 SCHOLARSHIP FELLOWSHIP EXCLUDED: \$0.00 IRA DEDUCTION: \$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 TUITION AND FEES DEDUCTION PER COMPUTER: \$0.00 OTHER ADJUSTMENTS: \$0.00 ARCHER MSA DEDUCTION PER COMPUTER: \$0.00 TOTAL ADJUSTMENTS: \$0.00 TOTAL ADJUSTMENTS PER COMPUTER: \$0.00
Sch1: 16 Sch1: 20	MOVING EXPENSES: F3903: \$0.00 SELF EMPLOYMENT TAX DEDUCTION: \$0.00 SELF EMPLOYMENT TAX DEDUCTION PER COMPUTER: \$0.00 SELF EMPLOYMENT TAX DEDUCTION VERIFIED: \$0.00 KEOGH/SEP CONTRIBUTION DEDUCTION: \$0.00 SELF-EMP HEALTH INS DEDUCTION: \$0.00 EARLY WITHDRAWAL OF SAVINGS PENALTY: \$0.00 ALIMONY PAID SSN: \$0.00 ALIMONY PAID: \$0.00 SCHOLARSHIP FELLOWSHIP EXCLUDED: \$0.00 IRA DEDUCTION: \$0.00 STUDENT LOAN INTEREST DEDUCTION: \$0.00 STUDENT LOAN INTEREST DEDUCTION PER COMPUTER: \$0.00 STUDENT LOAN INTEREST DEDUCTION PER COMPUTER: \$0.00 TUITION AND FEES DEDUCTION: \$0.00 TUITION AND FEES DEDUCTION PER COMPUTER: \$0.00 TUITION AND FEES DEDUCTION PER COMPUTER: \$0.00 ARCHER MSA DEDUCTION: \$0.00 ARCHER MSA DEDUCTION PER COMPUTER: \$0.00 TOTAL ADJUSTMENTS: \$0.00 TOTAL ADJUSTMENTS: \$0.00 TOTAL ADJUSTMENTS: \$0.00 ADJUSTED GROSS INCOME: \$202,842.00
Sch1: 16 Sch1: 20	MOVING EXPENSES: F3903: \$0.00 SELF EMPLOYMENT TAX DEDUCTION: \$0.00 SELF EMPLOYMENT TAX DEDUCTION PER COMPUTER: \$0.00 SELF EMPLOYMENT TAX DEDUCTION VERIFIED: \$0.00 KEOGH/SEP CONTRIBUTION DEDUCTION: \$0.00 SELF-EMP HEALTH INS DEDUCTION: \$0.00 EARLY WITHDRAWAL OF SAVINGS PENALTY: \$0.00 ALIMONY PAID SSN: \$0.00 ALIMONY PAID: \$0.00 SCHOLARSHIP FELLOWSHIP EXCLUDED: \$0.00 IRA DEDUCTION: \$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 TUITION AND FEES DEDUCTION PER COMPUTER: \$0.00 OTHER ADJUSTMENTS: \$0.00 ARCHER MSA DEDUCTION PER COMPUTER: \$0.00 TOTAL ADJUSTMENTS: \$0.00 TOTAL ADJUSTMENTS PER COMPUTER: \$0.00
Sch1: 16 Sch1: 20	MOVING EXPENSES: F3903: \$0.00 SELF EMPLOYMENT TAX DEDUCTION: \$0.00 SELF EMPLOYMENT TAX DEDUCTION PER COMPUTER: \$0.00 SELF EMPLOYMENT TAX DEDUCTION VERIFIED: \$0.00 KEOGH/SEP CONTRIBUTION DEDUCTION: \$0.00 SELF-EMP HEALTH INS DEDUCTION: \$0.00 CARLY WITHDRAWAL OF SAVINGS PENALTY: \$0.00 ALIMONY PAID SSN: ALIMONY PAID SSN: \$0.00 SCHOLARSHIP FELLOWSHIP EXCLUDED: \$0.00 IRA DEDUCTION \$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: \$0.00 OTHER ADJUSTMENTS: \$0.00 ARCHER MSA DEDUCTION: \$0.00 ARCHER MSA DEDUCTION: \$0.00 TOTAL ADJUSTMENTS: \$0.00 TOTAL ADJUSTMENTS: \$0.00 ADJUSTED GROSS INCOME: \$202,842.00 ADJUSTED GROSS INCOME PER COMPUTER: \$202,842.00
Sch1: 16 Sch1: 20	MOVING EXPENSES: F3903: \$0.00 SELF EMPLOYMENT TAX DEDUCTION: \$0.00 SELF EMPLOYMENT TAX DEDUCTION PER COMPUTER: \$0.00 SELF EMPLOYMENT TAX DEDUCTION VERIFIED: \$0.00 KEOGH/SEP CONTRIBUTION DEDUCTION: \$0.00 SELF-EMP HEALTH INS DEDUCTION: \$0.00 EARLY WITHDRAWAL OF SAVINGS PENALTY: \$0.00 ALIMONY PAID SSN: \$0.00 ALIMONY PAID: \$0.00 SCHOLARSHIP FELLOWSHIP EXCLUDED: \$0.00 IRA DEDUCTION: \$0.00 STUDENT LOAN INTEREST DEDUCTION: \$0.00 STUDENT LOAN INTEREST DEDUCTION PER COMPUTER: \$0.00 STUDENT LOAN INTEREST DEDUCTION PER COMPUTER: \$0.00 TUITION AND FEES DEDUCTION: \$0.00 TUITION AND FEES DEDUCTION PER COMPUTER: \$0.00 TUITION AND FEES DEDUCTION PER COMPUTER: \$0.00 ARCHER MSA DEDUCTION: \$0.00 ARCHER MSA DEDUCTION PER COMPUTER: \$0.00 TOTAL ADJUSTMENTS: \$0.00 TOTAL ADJUSTMENTS: \$0.00 TOTAL ADJUSTMENTS: \$0.00 ADJUSTED GROSS INCOME: \$202,842.00
Sch1: 16 Sch1: 20	MOVING EXPENSES: F3903: \$0.00 SELF EMPLOYMENT TAX DEDUCTION: \$0.00 SELF EMPLOYMENT TAX DEDUCTION PER COMPUTER: \$0.00 SELF EMPLOYMENT TAX DEDUCTION VERIFIED: \$0.00 KEOCH/SEP CONTRIBUTION DEDUCTION: \$0.00 SELF-EMP HEALTH INS DEDUCTION: \$0.00 SERIF-EMP HEALTH INS DEDUCTION: \$0.00 ALIMONY PAID SSN: ALIMONY PAID SSN: \$0.00 ALIMONY PAID: \$0.00 SCHOLARSHIP FELLOWSHIP EXCLUDED: \$0.00 IRA DEDUCTION: \$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 TOTHER ADJUSTMENTS: \$0.00 ARCHER MSA DEDUCTION: \$0.00 TOTAL ADJUSTMENTS: \$0.00 TOTAL ADJUSTMENTS PER COMPUTER: \$0.00 TOTAL ADJUSTMENTS PER COMPUTER: \$0.00 TOTAL ADJUSTMENTS PER COMPUTER: \$0.00 ADJUSTED GROSS INCOME: \$202,842.00 <t< th=""></t<>
Sch1: 16 Sch1: 20	MOVING EXPENSES: F3903: \$0.00 SELF EMPLOYMENT TAX DEDUCTION: \$0.00 SELF EMPLOYMENT TAX DEDUCTION PER COMPUTER: \$0.00 SELF EMPLOYMENT TAX DEDUCTION VERIFIED: \$0.00 KEOCH/SEP CONTRIBUTION DEDUCTION: \$0.00 ECHCH/SEP CONTRIBUTION DEDUCTION: \$0.00 EARLY WITHDRAWAL OF SAVINGS PENALTY: \$0.00 ALIMONY PAID SSN: ALIMONY PAID: \$0.00 SCHOLARSHIP FELLOWSHIP EXCLUDED: \$0.00 ITAD DEDUCTION: \$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 PER COMPUTER: \$0.00 TUITION AND FEES DEDUCTION PER COMPUTER: \$0.00 OTHER ADJUSTMENTS: \$0.00 ARCHER MSA DEDUCTION PER COMPUTER: \$0.00 TOTAL ADJUSTMENTS: \$0.00 TOTAL ADJUSTMENTS: \$0.00 ADJUSTED GROSS INCOME: \$202,842.00 ADJUSTED GROSS INCOME: \$202,842.00 ADJUSTED GROSS INCOME PER COMPUTER: \$202,842.00 Tax and Credits .
Sch1: 16 Sch1: 20	MOVING EXPENSES: F3903: \$0.00 SELF EMPLOYMENT TAX DEDUCTION: \$0.00 SELF EMPLOYMENT TAX DEDUCTION PER COMPUTER: \$0.00 SELF EMPLOYMENT TAX DEDUCTION VERIFIED: \$0.00 KEOGH/SEP CONTRIBUTION DEDUCTION: \$0.00 EARLY WITHDRAWAL OF SAVINGS PENALTY: \$0.00 ALIMONY PAID SSN: \$0.00 ALIMONY PAID SSN: \$0.00 SCHOLARSHIP FELLOWSHIP EXCLUDED: \$0.00 ITA DEDUCTION: \$0.00 ITA DEDUCTION PER COMPUTER: \$0.00 STUDENT LOAN INTEREST DEDUCTION COMPUTER: \$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 TUITION AND FEES DEDUCTION PER COMPUTER: \$0.00 ARCHER MSA DEDUCTION: \$0.00 ARCHER MSA DEDUCTION PER COMPUTER: \$0.00 TOTAL ADJUSTMENTS: \$0.00 ACHER MSA DEDUCTION PER COMPUTER: \$0.00 ADJUSTED GROSS INCOME: \$0.00 ADJUSTED GROSS INCOME: \$0.00 ADJUSTED GROSS INCOME PER COMPUTE
Sch1: 16 Sch1: 20	MOVING EXPENSES: F3903: \$0.00 SELF EMPLOYMENT TAX DEDUCTION: \$0.00 SELF EMPLOYMENT TAX DEDUCTION PER COMPUTER: \$0.00 SELF EMPLOYMENT TAX DEDUCTION VERIFIED: \$0.00 KEOGH/SEP CONTRIBUTION DEDUCTION: \$0.00 ESCHF-EMP HEALTH INS DEDUCTION: \$0.00 EARLY WITHDRAWAL OF SAVINGS PENALTY: \$0.00 ALIMONY PAID SSN: \$0.00 ALIMONY PAID: \$0.00 SCHOLARSHIP FELLOWSHIP EXCLUDED: \$0.00 IRA DEDUCTION: \$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: \$0.00 TUITION AND FEES DEDUCTION VERIFIED: \$0.00 TOTHAR ADJUSTMENTS: \$0.00 ARCHER MSA DEDUCTION PER COMPUTER: \$0.00 ARCHER MSA DEDUCTION PER COMPUTER: \$0.00 TOTAL ADJUSTMENTS: \$0.00 ADJUSTED GROSS INCOME: \$0.00 ADJUSTED GROSS INCOME PER COMPUTER: \$0.00 Tax and Credits \$0.00
Sch1: 16 Sch1: 20	MOVING EXPENSES: F3903: \$0.00 SELF EMPLOYMENT TAX DEDUCTION: \$0.00 SELF EMPLOYMENT TAX DEDUCTION PER COMPUTER: \$0.00 SELF EMPLOYMENT TAX DEDUCTION VERIFIED: \$0.00 SEOGH/SEP CONTRIBUTION DEDUCTION: \$0.00 SELF-EMP HEALTH INS DEDUCTION: \$0.00 SELF-EMP HEALTH INS DEDUCTION: \$0.00 ALIMONY PAID \$0.00 ACHMONY PAID \$0.00 SCHOLARSHIP FELLOWSHIP EXCLUDED: \$0.00 IRA DEDUCTION: \$0.00 IRA DEDUCTION: \$0.00 STUDENT LOAN INTEREST DEDUCTION \$0.00 STUDENT LOAN INTEREST DEDUCTION PER COMPUTER: \$0.00 STUDENT LOAN INTEREST DEDUCTION PER COMPUTER: \$0.00 STUDENT LOAN INTEREST DEDUCTION VERIFIED: \$0.00 TUITION AND FEES DEDUCTION PER COMPUTER: \$0.00 TUITION AND FEES DEDUCTION PER COMPUTER: \$0.00 OTHER ADJUSTMENTS: \$0.00 ARCHER MSA DEDUCTION PER COMPUTER: \$0.00 ARCHER MSA DEDUCTION PER COMPUTER: \$0.00 ARCHER MSA DEDUCTION PER COMPUTER: \$0.00 ADJUSTED GROSS INCOME: \$0.00 ADJUSTED GROSS INCOME PER COMPU
Sch 1: 16 Sch 1: 20	MOVING EXPENSES: F3903: \$0.00 SELF EMPLOYMENT TAX DEDUCTION: \$0.00 SELF EMPLOYMENT TAX DEDUCTION PER COMPUTER: \$0.00 SELF EMPLOYMENT TAX DEDUCTION VERIFIED: \$0.00 KEOGH/SEP CONTRIBUTION DEDUCTION: \$0.00 KEOGH/SEP CONTRIBUTION DEDUCTION: \$0.00 SELF-EMP HEALTH INS DEDUCTION: \$0.00 ALIMONY PAID SSN: \$0.00 ALIMONY PAID: \$0.00 SCHOLARSHIP FELLOWSHIP EXCLUDED: \$0.00 SCHOLARSHIP FELLOWSHIP EXCLUDED: \$0.00 IRA DEDUCTION: \$0.00 STUDENT LOAN INTEREST DEDUCTION: \$0.00 STUDENT LOAN INTEREST DEDUCTION PER COMPUTER: \$0.00 STUDENT LOAN INTEREST DEDUCTION VERTFIED: \$0.00 TUTITION AND FEES DEDUCTION: \$0.00 TUTITION AND FEES 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 ADJUSTED GROSS INCOME: \$0.00 ADJUSTED GROSS INCOME: \$0.00 ADJUSTED GROSS INCOME: \$0.00 <tr< th=""></tr<>
Sch 1: 16 Sch 1: 20	MOVING EXPENSES: F3903: \$0.00 SELF EMPLOYMENT TAX DEDUCTION: \$0.00 SELF EMPLOYMENT TAX DEDUCTION PER COMPUTER: \$0.00 SELF EMPLOYMENT TAX DEDUCTION VERIFIED: \$0.00 SEOGH/SEP CONTRIBUTION DEDUCTION: \$0.00 SELF-EMP HEALTH INS DEDUCTION: \$0.00 SELF-EMP HEALTH INS DEDUCTION: \$0.00 ALIMONY PAID \$0.00 ACHMONY PAID \$0.00 SCHOLARSHIP FELLOWSHIP EXCLUDED: \$0.00 IRA DEDUCTION: \$0.00 IRA DEDUCTION: \$0.00 STUDENT LOAN INTEREST DEDUCTION \$0.00 STUDENT LOAN INTEREST DEDUCTION PER COMPUTER: \$0.00 STUDENT LOAN INTEREST DEDUCTION PER COMPUTER: \$0.00 STUDENT LOAN INTEREST DEDUCTION VERIFIED: \$0.00 TUITION AND FEES DEDUCTION PER COMPUTER: \$0.00 TUITION AND FEES DEDUCTION PER COMPUTER: \$0.00 OTHER ADJUSTMENTS: \$0.00 ARCHER MSA DEDUCTION PER COMPUTER: \$0.00 ARCHER MSA DEDUCTION PER COMPUTER: \$0.00 ARCHER MSA DEDUCTION PER COMPUTER: \$0.00 ADJUSTED GROSS INCOME: \$0.00 ADJUSTED GROSS INCOME PER COMPU

^{*}Income earned from work: IRS Form 1040 Line 1 + Schedule 1, Line 3 + Schedule 1, Line 6 + Schedule K-1 (IRS Form 1065)—Box 14 (Code A). If any individual earning item is negative, do not include that amount in your calculation.

	EXEMPTION AMOUNT PER COMPUTER:	\$0.00
	TAXABLE INCOME:	\$167,957.00
	TAXABLE INCOME PER COMPUTER:	\$167,957.00
	TOTAL POSITIVE INCOME PER COMPUTER:	
	TENTATIVE TAX:	
	TENTATIVE TAX PER COMPUTER:	· · · · · · · · · · · · · · · · · · ·
	FORM 8814 ADDITIONAL TAX AMOUNT:	· I
	TAX ON INCOME LESS SOC SEC INCOME PER COMPUTER:	
	FORM 6251 ALTERNATIVE MINIMUM TAX:	· I
	FORM 6251 ALTERNATIVE MINIMUM TAX PER COMPUTER:	· I
	FOREIGN TAX CREDIT:	
	FOREIGN TAX CREDIT PER COMPUTER:	
	FOREIGN INCOME EXCLUSION PER COMPUTER:	
Sch 2: 2**	EXCESS ADVANCE PREMIUM TAX CREDIT REPAYMENT AMOUNT:	
JC112. 2	EXCESS ADVANCE PREMIUM TAX CREDIT REPAIMENT AMOUNT	•
	CHILD & DEPENDENT CARE CREDIT:	· I
	CHILD & DEPENDENT CARE CREDIT PER COMPUTER:	· I
	CREDIT FOR ELDERLY AND DISABLED:	
	CREDIT FOR ELDERLY AND DISABLED PER COMPUTER:	
	EDUCATION CREDIT:	\$0.00
Sch 3: 3	EDUCATION CREDIT PER COMPUTER:	\$0.00
	GROSS EDUCATION CREDIT PER COMPUTER:	\$0.00
	RETIREMENT SAVINGS CNTRB CREDIT:	
	RETIREMENT SAVINGS CNTRB CREDIT PER COMPUTER:	
	PRIM RET SAV CNTRB: F8880 LN6A:	· I
	SEC RET SAV CNTRB: F8880 LN6B:	· I
	RESIDENTIAL ENERGY CREDIT:	
	RESIDENTIAL ENERGY CREDIT PER COMPUTER:	· I
	CHILD AND OTHER DEPENDENT CREDIT:	
	CHILD AND OTHER DEPENDENT CREDIT PER COMPUTER:	
	ADOPTION CREDIT: F8839:	\$0.00
	ADOPTION CREDIT PER COMPUTER:	
	FORM 8396 MORTGAGE CERTIFICATE CREDIT:	•
	FORM 8396 MORTGAGE CERTIFICATE CREDIT PER COMPUTER:	· I
	TOTAL OTHER NON REFUNDABLE CREDIT:	· I
	FORM 3800 GENERAL BUSINESS CREDITS:	
	PRIOR YR MIN TAX CREDIT: F8801:	
	PRIOR YR MIN TAX CREDIT: F8801 PER COMPUTER:	· I
	F8936 ELECTRIC MOTOR VEHICLE CREDIT AMOUNT:	
	F8936 ELECTRIC MOTOR VEHICLE CREDIT PER COMPUTER:	
	F8910 ALTERNATIVE MOTOR VEHICLE CREDIT AMOUNT:	\$0.00
	F8910 ALTERNATIVE MOTOR VEHICLE CREDIT PER COMPUTER:	\$0.00
	SICK FAMILY LEAVE CREDIT:	·
	NON ITEMIZED CHARITABLE CONTRIBUTION DEDUCTION:	•
	NON ITEMIZED CHARITABLE CONTRIBUTION PER COMPUTER:	· I
	REFUNDABLE CHILD CARE CREDIT:	· I
	SICK FAMILY LEAVE CREDIT AFTER 3-31-21:	
	RECOVERY REBATE CREDIT:	· I
	RECOVERY REBATE CREDIT PER COMPUTER:	
	RECOVERY REBATE CREDIT VERIFIED:	
	OTHER CREDITS:	· I
	TOTAL CREDITS:	\$0.00
	TOTAL CREDITS PER COMPUTER:	
***	INCOME TAX AFTER CREDITS PER COMPUTER:	\$28,448.00
1040: 22	"Income Tax After Credits Per Computer"	\$28,448.00 ***
Sch 2: 2		\$0.00 **
	= Income Tax Paid	= \$28,448.00 ****
	Other Taxes	
	SE TAX:	\$0.00
	SE TAX PER COMPUTER:	
	LOCATAL GEORGE AND MEDICADE MAN ON MURRISONERS MADO	\$0.00
	SOCIAL SECURITY AND MEDICARE TAX ON UNREPORTED TIPS:	
	SOCIAL SECURITY AND MEDICARE TAX ON UNREPORTED TIPS PER	COMPUTER:\$0.00
		COMPUTER:

^{****} If Income Tax Paid is negative, enter zero.

IRAF TAX PER COMPUTER: \$0.00
TRAF TAX FER COMPUTER:
TP TAX FIGURES (REDUCED BY IRAF) PER COMPUTER:\$28,448.00
IMF TOTAL TAX (REDUCED BY IRAF) PER COMPUTER:\$28,448.00
TOTAL OTHER TAXES PER COMPUTER:\$0.00
UNPAID FICA ON REPORTED TIPS:
INTEREST ON DEFERRED TAX: \$0.00
TOTAL OTHER TAXES:\$0.00
RECAPTURE TAX: F8611:\$0.00
HOUSEHOLD EMPLOYMENT TAXES: \$0.00
HOUSEHOLD EMPLOYMENT TAXES PER COMPUTER:
INTEREST DUE ON INSTALLMENT: \$0.00
SCH 8812 ADDITIONAL TAX COMPUTER: \$0.00
REFUNDABLE CHILD CARE COMPUTER:\$0.00
HEALTH COVERAGE RECAPTURE: F8885:\$0.00
DEFERRED TAX SCH H SE: \$0.00
MAX DEFERRED TAX PER COMPUTER:
TOTAL ADDITIONAL TAXES:
TOTAL ASSESSMENT PER COMPUTER:\$28,448.00
TOTAL TAX LIABILITY TP FIGURES:\$28,448.00
TOTAL TAX LIABILITY TP FIGURES PER COMPUTER:\$28,448.00
I and the second
Payments
<u>4</u>
FEDERAL INCOME TAX WITHHELD: \$17,730.00
SCH 8812 ADDITIONAL TAX:\$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:\$2,092.00
EARNED INCOME CREDIT: \$0.00
EARNED INCOME CREDIT PER COMPUTER:
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:\$2,092.00
SCHEDULE 8812 ADDITIONAL CHILD TAX CREDIT PER COMPUTER:
SCHEDULE 8812 ADDITIONAL CHILD TAX CREDIT VERIFIED:
1 SUBBIDDIE 0017 ADDITIONAL CBIDDIAX URBDIT VERTETEDI
AMOUNT PAID WITH FORM 4868:\$0.00
AMOUNT PAID WITH FORM 4868: \$0.00 FORM 2439 REGULATED INVESTMENT COMPANY CREDIT: \$0.00
AMOUNT PAID WITH FORM 4868: \$0.00 FORM 2439 REGULATED INVESTMENT COMPANY CREDIT: \$0.00 FORM 4136 CREDIT FOR FEDERAL TAX ON FUELS: \$0.00
AMOUNT PAID WITH FORM 4868: \$0.00 FORM 2439 REGULATED INVESTMENT COMPANY CREDIT: \$0.00 FORM 4136 CREDIT FOR FEDERAL TAX ON FUELS: \$0.00
AMOUNT PAID WITH FORM 4868:
AMOUNT PAID WITH FORM 4868: \$0.00 FORM 2439 REGULATED 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
AMOUNT PAID WITH FORM 4868: \$0.00 FORM 2439 REGULATED 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
AMOUNT PAID WITH FORM 4868:
AMOUNT PAID WITH FORM 4868: \$0.00 FORM 2439 REGULATED 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
AMOUNT PAID WITH FORM 4868: \$0.00 FORM 2439 REGULATED 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
AMOUNT PAID WITH FORM 4868: \$0.00 FORM 2439 REGULATED 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
AMOUNT PAID WITH FORM 4868: \$0.00 FORM 2439 REGULATED 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
AMOUNT PAID WITH FORM 4868: \$0.00 FORM 2439 REGULATED 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
AMOUNT PAID WITH FORM 4868: \$0.00 FORM 2439 REGULATED 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
AMOUNT PAID WITH FORM 4868: \$0.00 FORM 2439 REGULATED 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 HOMEBUYERS CREDIT REPAYMENT PER COMPUTER: \$0.00
AMOUNT PAID WITH FORM 4868: \$0.00 FORM 2439 REGULATED 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 SMALL EMPLOYER HEALTH INSURANCE PER COMPUTER: \$0.00
AMOUNT PAID WITH FORM 4868: \$0.00 FORM 2439 REGULATED 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 FIRST TIME HOMEBUYER CREDIT REPAYMENT AMOUNT: \$0.00 FORM 5405 TOTAL HOMEBUYERS CREDIT REPAYMENT PER COMPUTER: \$0.00 SMALL EMPLOYER HEALTH INSURANCE PER COMPUTER (2): \$0.00
AMOUNT PAID WITH FORM 4868: \$0.00 FORM 2439 REGULATED 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 FIRST TIME HOMEBUYER CREDIT REPAYMENT AMOUNT: \$0.00 SMALL EMPLOYER HEALTH INSURANCE PER COMPUTER: \$0.00 SMALL EMPLOYER HEALTH INSURANCE PER COMPUTER: \$0.00 TOTAL OTHER PAYMENTS REFUNDABLE: \$0.00
AMOUNT PAID WITH FORM 4868: \$0.00 FORM 2439 REGULATED 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 FIRST TIME HOMEBUYER CREDIT REPAYMENT AMOUNT: \$0.00 SMALL EMPLOYER HEALTH INSURANCE PER COMPUTER: \$0.00 SMALL EMPLOYER HEALTH INSURANCE PER COMPUTER: \$0.00 TOTAL OTHER PAYMENTS REFUNDABLE: \$0.00
AMOUNT PAID WITH FORM 4868: \$0.00 FORM 2439 REGULATED 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 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 CREDIT REPAYMENT PER COMPUTER: \$0.00 SMALL EMPLOYER HEALTH INSURANCE PER COMPUTER: \$0.00 TOTAL OTHER PAYMENTS REFUNDABLE: \$0.00 TOTAL PAYMENTS: \$19,822.00
AMOUNT PAID WITH FORM 4868: \$0.00 FORM 2439 REGULATED 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 FIRST TIME HOMEBUYER CREDIT REPAYMENT AMOUNT: \$0.00 SMALL EMPLOYER HEALTH INSURANCE PER COMPUTER: \$0.00 SMALL EMPLOYER HEALTH INSURANCE PER COMPUTER: \$0.00 TOTAL OTHER PAYMENTS REFUNDABLE: \$0.00
AMOUNT PAID WITH FORM 4868: \$0.00 FORM 2439 REGULATED 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 PREMIUM TAX CREDIT VERIFIED AMOUNT: \$0.00 PRIMARY NAP FIRST TIME HOME BUYER INSTALLMENT AMT: \$0.00 FIRST TIME HOMEBUYER CREDIT REPAYMENT AMOUNT: \$0.00 FORM 5405 TOTAL HOMEBUYERS CREDIT REPAYMENT PER COMPUTER: \$0.00 SMALL EMPLOYER HEALTH INSURANCE PER COMPUTER: \$0.00 SMALL EMPLOYER HEALTH INSURANCE PER COMPUTER (2): \$0.00 TOTAL OTHER PAYMENTS REFUNDABLE: \$0.00 TOTAL PAYMENTS: \$19,822.00 TOTAL PAYMENTS PER COMPUTER: \$19,822.00
AMOUNT PAID WITH FORM 4868: \$0.00 FORM 2439 REGULATED 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 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 CREDIT REPAYMENT PER COMPUTER: \$0.00 SMALL EMPLOYER HEALTH INSURANCE PER COMPUTER: \$0.00 TOTAL OTHER PAYMENTS REFUNDABLE: \$0.00 TOTAL PAYMENTS: \$19,822.00
AMOUNT PAID WITH FORM 4868: \$0.00 FORM 2439 REGULATED 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 FORM 4136 CREDIT FOR FEDERAL TAX ON FUELS PER COMPUTER: \$0.00 SEC 965 TAX INSTALLMENT: \$0.00 SEC 965 TAX INSTALLMENT: \$0.00 PREMIUM TAX CREDIT AMOUNT: \$0.00 PREMIUM TAX CREDIT AMOUNT: \$0.00 PREMIUM TAX CREDIT VERIFIED AMOUNT: \$0.00 SECONDARY NAP FIRST TIME HOME BUYER INSTALLMENT AMT: \$0.00 FIRST TIME HOMEBUYER CREDIT REPAYMENT AMOUNT: \$0.00 FORM 5405 TOTAL HOMEBUYERS CREDIT REPAYMENT PER COMPUTER: \$0.00 SMALL EMPLOYER HEALTH INSURANCE PER COMPUTER: \$0.00 SMALL EMPLOYER HEALTH INSURANCE PER COMPUTER: \$0.00 TOTAL OTHER PAYMENTS REFUNDABLE: \$0.00 TOTAL OTHER PAYMENTS REFUNDABLE: \$0.00 TOTAL PAYMENTS PER COMPUTER: \$19,822.00 Refund or Amount Owed
AMOUNT PAID WITH FORM 4868:
AMOUNT PAID WITH FORM 4868: \$0.00 FORM 2439 REGULATED 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 FORM 4136 CREDIT FOR FEDERAL TAX ON FUELS PER COMPUTER: \$0.00 SEC 965 TAX INSTALLMENT: \$0.00 SEC 965 TAX INSTALLMENT: \$0.00 PREMIUM TAX CREDIT AMOUNT: \$0.00 PREMIUM TAX CREDIT AMOUNT: \$0.00 PREMIUM TAX CREDIT VERIFIED AMOUNT: \$0.00 SECONDARY 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 CREDIT REPAYMENT PER COMPUTER: \$0.00 SMALL EMPLOYER HEALTH INSURANCE PER COMPUTER: \$0.00 SMALL EMPLOYER HEALTH INSURANCE PER COMPUTER (2): \$0.00 TOTAL OTHER PAYMENTS REFUNDABLE: \$0.00 TOTAL OTHER PAYMENTS REFUNDABLE: \$0.00 TOTAL PAYMENTS: \$19,822.00 TOTAL PAYMENTS PER COMPUTER: \$19,822.00 Refund or Amount Owed
AMOUNT PAID WITH FORM 4868:
AMOUNT PAID WITH FORM 4868:
AMOUNT PAID WITH FORM 4868: \$0.00 FORM 2439 REGULATED 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 WERIFIED 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 HOMEBUYERS CREDIT REPAYMENT PER COMPUTER: \$0.00 SMALL EMPLOYER HEALTH INSURANCE PER COMPUTER: \$0.00 SMALL EMPLOYER HEALTH INSURANCE PER COMPUTER: \$0.00 TOTAL OTHER PAYMENTS REFUNDABLE: \$0.00 TOTAL OTHER PAYMENTS REFUNDABLE: \$19,822.00 Refund or Amount Owed AMOUNT YOU OWE: \$8,626.00 APPLIED TO NEXT YEAR'S ESTIMATED TAX: \$0.00 ESTIMATED TAX PENALTY: \$0.00 ESTIMATED TAX PENALTY: \$0.00 TAX ON INCOME LESS STATE REFUND PER COMPUTER: \$0.00 TAX ON INCOME LESS STATE REFUND PER COMPUTER: \$0.00
AMOUNT PAID WITH FORM 4868: \$0.00 FORM 2439 REGULATED 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 INSTALLMENT: \$0.00 PREMIUM TAX CREDIT AMOUNT: \$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 FIRST TIME HOMEBUYER CREDIT REPAYMENT AMOUNT: \$0.00 FIRST TIME HOMEBUYER CREDIT REPAYMENT AMOUNT: \$0.00 SECONDARY NAP FIRST TIME HOME BUYER INSTALLMENT AMT: \$0.00 FORM \$405 TOTAL HOMEBUYERS CREDIT REPAYMENT PER COMPUTER: \$0.00 SMALL EMPLOYER HEALTH INSURANCE PER COMPUTER: \$0.00 SMALL EMPLOYER HEALTH INSURANCE PER COMPUTER: \$0.00 TOTAL OTHER PAYMENTS REFUNDABLE: \$0.00 TOTAL PAYMENTS: \$19,822.00 TOTAL PAYMENTS PER COMPUTER: \$19,822.00 REFUND OF AMOUNT YOU OWE: \$8,626.00 APPLIED TO NEXT YEAR'S ESTIMATED TAX: \$0.00 ESTIMATED TAX PENALTY: \$0.00 TAX ON INCOME LESS STATE REFUND PER COMPUTER: \$0.00 TAX ON INCOME LESS STATE REFUND PER COMPUTER: \$0.00 BAL DUE/OVER PYMT USING TP FIG PER COMPUTER: \$0.00 BAL DUE/OVER PYMT USING TP FIG PER COMPUTER: \$0.00 BAL DUE/OVER PYMT USING TP FIG PER COMPUTER: \$0.000
AMOUNT PAID WITH FORM 4868: \$0.00 FORM 2439 REGULATED 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 FORM 4136 CREDIT FOR FEDERAL TAX ON FUELS PER COMPUTER: \$0.00 BEALTH 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 PREMIUM TAX CREDIT THE HOME BUYER INSTALLMENT AMT: \$0.00 SECONDARY 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 SMALL EMPLOYER HEALTH INSURANCE PER COMPUTER: \$0.00 SMALL EMPLOYER HEALTH INSURANCE PER COMPUTER: \$0.00 TOTAL OTHER PAYMENTS REFUNDABLE: \$0.00 TOTAL PAYMENTS: \$19,822.00 TOTAL PAYMENTS PER COMPUTER: \$19,822.00 REFUNDA AMOUNT YOU OWE: \$19,822.00 REFUNDA ON INCOME LESS STATE REFUND PER COMPUTER: \$0.00 ESTIMATED TAX PENALTY: \$0.00 TAX ON INCOME LESS STATE REFUND PER COMPUTER: \$0.00 DAAL DUE/OVER PYMT USING TP FIG PER COMPUTER: \$8,626.00 BAL DUE/OVER PYMT USING COMPUTER FIGURES: \$8,626.00 BAL DUE/OVER PYMT USING COMPUTER FIGURES: \$8,626.00
AMOUNT PAID WITH FORM 4868: \$0.00 FORM 2439 REGULATED 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 INSTALLMENT: \$0.00 PREMIUM TAX CREDIT AMOUNT: \$0.00 PREMIUM TAX CREDIT AMOUNT: \$0.00 PREMIUM TAX CREDIT VERIFIED AMOUNT: \$0.00 PRIMIUM TAY CREDIT VERIFIED AMOUNT: \$0.00 FIRST TIME HOME BUYER INSTALLMENT AMT: \$0.00 FIRST TIME HOMEBUYER CREDIT REPAYMENT AMOUNT: \$0.00 FIRST TIME HOMEBUYER CREDIT REPAYMENT AMOUNT: \$0.00 SECONDARY NAP FIRST TIME HOME BUYER INSTALLMENT AMT: \$0.00 FORM 5405 TOTAL HOMEBUYERS CREDIT REPAYMENT PER COMPUTER: \$0.00 SMALL EMPLOYER HEALTH INSURANCE PER COMPUTER: \$0.00 SMALL EMPLOYER HEALTH INSURANCE PER COMPUTER: \$0.00 TOTAL OTHER PAYMENTS REFUNDABLE: \$0.00 TOTAL PAYMENTS: \$19,822.00 TOTAL PAYMENTS PER COMPUTER: \$19,822.00 REFUND OF AMOUNT YOU OWE: \$8,626.00 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: \$0.00 BAL DUE/OVER PYMT USING TP FIG PER COMPUTER: \$0.000 BAL DUE/OVER PYMT USING TP FIG PER COMPUTER: \$0.000
AMOUNT PAID WITH FORM 4868: \$0.00 FORM 2439 REGULATED 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 FORM 4136 CREDIT FOR FEDERAL TAX ON FUELS PER COMPUTER: \$0.00 BEALTH 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 PREMIUM TAX CREDIT THE HOME BUYER INSTALLMENT AMT: \$0.00 SECONDARY NAP FIRST TIME HOME BUYER INSTALLMENT AMT: \$0.00 FIRST TIME HOMEBUYER CREDIT REPAYMENT AMOUNT: \$0.00 FIRST TIME HOMEBUYER CREDIT REPAYMENT AMOUNT: \$0.00 SMALL EMPLOYER HEALTH INSURANCE PER COMPUTER: \$0.00 SMALL EMPLOYER HEALTH INSURANCE PER COMPUTER: \$0.00 TOTAL OTHER PAYMENTS: \$19,822.00 TOTAL PAYMENTS: \$19,822.00 TOTAL PAYMENTS PER COMPUTER: \$19,822.00 Refund or Amount Owed AMOUNT YOU OWE: \$19,822.00 Refund or Amount Owed AMOUNT YOU OKE: \$9.000 ESTIMATED TAX PENALTY: \$0.00 TAX ON INCOME LESS STATE REFUND PER COMPUTER: \$0.00 ESTIMATED TAX PENALTY: \$0.

Third Party Designee
THIRD PARTY DESIGNEE ID NUMBER: AUTHORIZATION INDICATOR: THIRD PARTY DESIGNEE NAME:
Schedule AItemized Deductions
MEDICAL/DENTAL
MEDICAL AND DENTAL EXPENSES: ADJUSTED GROSS INCOME PERCENTAGE: ADJUSTED GROSS INCOME PERCENTAGE PER COMPUTER 10 PERCENT: ADJUSTED GROSS INCOME PERCENTAGE PER COMPUTER 7.5 PERCENT: NET MEDICAL DEDUCTION: NET MEDICAL DEDUCTION PER COMPUTER: \$0.00
TAXES PAID
STATE AND LOCAL INCOME OR SALES TAXES: REAL ESTATE TAXES: PERSONAL PROPERTY TAXES: OTHER TAXES AMOUNT: SCH A TAX DEDUCTIONS: SCH A TAX PER COMPUTER: \$12,902.00 \$15,122.00 \$0.00 \$10,000.00
INTEREST PAID
MORTGAGE INTEREST (FINANCIAL): \$24,370.00 MORTGAGE INTEREST (INDIVIDUAL): \$0.00 DEDUCTIBLE POINTS: \$0.00 QUALIFIED MORTGAGE INSURANCE PREMIUMS: \$0.00 DEDUCTIBLE INVESTMENT INTEREST: \$0.00 TOTAL INTEREST DEDUCTION: \$24,370.00 TOTAL INTEREST DEDUCTION PER COMPUTER: \$24,370.00
CHARITABLE CONTRIBUTIONS
CASH CONTRIBUTIONS: \$215.00 OTHER THAN CASH: Form 8283: \$300.00 CARRYOVER FROM PRIOR YEAR: \$0.00 SCH A TOTAL CONTRIBUTIONS: \$515.00 SCH A TOTAL CONTRIBUTIONS PER COMPUTER: \$515.00
CASUALTY AND THEFT LOSS
CASUALTY OR THEFT LOSS:
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:
TOTAL ITEMIZED DEDUCTIONS
TOTAL ITEMIZED DEDUCTIONS:

Interest and Dividends	
GROSS SCHEDULE B INTEREST: TAXABLE INTEREST INCOME: EXCLUDABLE SAVINGS FROM BOND INT: GROSS SCHEDULE B DIVIDENDS: DIVIDEND INCOME: FOREIGN ACCOUNTS IND: REQUIRED TO FILE FINCEN FORM 114:	\$747.00 \$0.00 \$0.00 \$0.00
Form 8863 - Education Credits (Hope and Lifetime Learning Credits)	
PART III - ALLOWABLE EDUCATION CREDITS	
GROSS EDUCATION CR PER COMPUTER:	\$0.00
Form 8959 Additional Medicare Tax	
MEDICAL WAGES:	\$216,995.00
UNREPORTED TIPS:	
WAGES FROM FORM 8919:	\$0.00
ADDITIONAL MEDICARE TAX ON MEDICARE WAGES:	\$0.00
ADDITIONAL MEDICARE TAX ON MEDICARE WAGES PER COMPUTER:	\$0.00
SELF EMPLOYMENT INCOME:	\$0.00
ADDITIONAL MEDICARE TAX ON SELF-EMPLOYMENT INCOME:	\$0.00
ADDITIONAL MEDICARE TAX ON SELF-EMPLOYMENT INCOME PER COMPUTER:	\$0.00
RAILROAD RETIREMENT COMPENSATION:	
TIER I EMPLOYEE ADDITIONAL MEDICARE TAX ON RAILROAD COMPENSATION:	
TIER I EMPLOYEE ADDITIONAL MEDICARE TAX ON RAILROAD COMPENSATION PER COMPUTER:	
MEDICARE TAX WITHHELD W-2 BOX 6:	
ADDITIONAL MEDICARE TAX WITHHELD W-2 BOX 14:	\$0.00
TOTAL ADDITIONAL MEDICARE TAX:	
TOTAL ADDITIONAL MEDICARE TAX WITHHOLDING:	
TOTAL ADDITIONAL MEDICARE TAX WITHHOLDING VERIFIED:	
TOTAL ADDITIONAL MEDICARE TAX WITHHOLDING PER COMPUTER:	\$1.00
This Product Contains Sensitive Taxpayer Data	

Appendices

Appendix A

Sample 2021 W-2 Form, Reference Guide for Box 12 Codes, and Sample Wage and Income Statement

Appendix B

Sample 2021 K-1 (Form 1065) – Box 14, Self-Employment Earnings

Appendix C

Criteria for 2023-24 Simplified Needs Formulas and Automatic Zero EFC Calculation

Appendix D

2021 IRS Form 1040 Schedules Required for Federal Verification

Appendix E

Current Year Transcript Availability

Appendix F

References, Resources and Websites – Tax Returns and Transcripts

Appendix A

Sample 2021 W-2 Form

In addition to wages earned, the W-2 form may reveal sources of untaxed income, such as payments to tax-deferred pension and savings plan amounts reported in boxes 12a through 12d, code D, E, F, G, H and S.

Schools are not required to review income listed in box 14, however if you are aware that a box 14 item should be reported (i.e. clergy parsonage allowances) then you would count that amount as untaxed income.

55555	a Employee	e's social security number	OMB No. 154	5-0008					
b Employer identification number (EIN)	1 Waq	ges, tips, other compensation 71,281.42	2 Federal income tax withheld 6,975.02					
c Employer's name, address, and		cial security wages 79,431.34	4 Social security tax withheld 4,924.76						
					dicare wages and tips 79,431.34	6 Medicare tax withheld 1,151.77			
				7 Social security tips 8 Allocated tips					
d Control number				9 10 Dependent care benefits					
e Employee's first name and initial Last name Suff.					nqualified plans	12a E 3,491.28			
					utory Retirement Third-party loyee plan sick pay	12b DD 12,582.60			
				14 Oth	er	12c			
						12d C d e			
f Employee's address and ZIP cod									
15 State Employer's state ID numb			l .	ne tax 70.41	18 Local wages, tips, etc.	19 Local income	tax 2	O Locality name	
Form W-2 Wage and	d Tax Sta	atement	202	21	Department o	of the Treasury—In	ternal Rev	venue Service	

Form W-2 Reference Guide for Box 12 Codes

Α	Uncollected social security or RRTA tax on tips	K	20% excise tax on excess golden parachute payments	٧	Income from exercise of nonstatutory stock option(s)
В	Uncollected Medicare tax on tips	L	Substantiated employee business expense reimbursements	W	Employer contributions (including employee contributions through a cafeteria plan) to an employee's health savings account (HSA)
С	Taxable cost of group-term life insurance over \$50,000	М	Uncollected social security or RRTA tax on taxable cost of group-term life insurance over \$50,000 (former employees only)	Υ	Deferrals under a section 409A nonqualified deferred compensation plan
D	Elective deferrals to a section 401(k) cash or deferred arrangement (including deferrals under a SIMPLE 401(k) arrangement)	N	Uncollected Medicare tax on taxable cost of group-term life insurance over \$50,000 (former employees only)	Z	Income under a nonqualified deferred compensation plan that fails to satisfy section 409A
E	Elective deferrals under a section 403(b) salary reduction agreement	Р	Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces	АА	Designated Roth contributions under a section 401(k) plan
F	Elective deferrals under a section 408(k)(6) salary reduction SEP	Q	Nontaxable combat pay	ВВ	Designated Roth contributions under a section 403(b) plan
G	Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan	R	Employer contributions to an Archer MSA	DD	Cost of employer-sponsored health coverage
н	Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan	S	Employee salary reduction contributions under a section 408(p) SIMPLE plan	EE	Designated Roth contributions under a governmental section 457(b) plan
J	Nontaxable sick pay	Т	Adoption benefits	FF	Permitted benefits under a qualified small employer health reimbursement arrangement

(For additional codes and complete descriptions, visit https://www.irs.gov/pub/irs-prior/iw2w3--2021.pdf)



Employer:

Internal Revenue Service

United States Department of the Treasury

This Product Contains Sensitive Taxpayer Data

Request Date: 09-08-2022 *
Response Date: 09-08-2022
Tracking Number: XXXXXXXXXXX

Wage and Income Transcript

SSN Provided: XXX-XX-1234
Tax Period Ending: December 2021

Form W-2 Wage and Tax Statement

```
Employer Identification Number (EIN):
Employee's Social Security Number: XXX-XX-1234
KAYC JOHN DUTT
Submission Type:.....Original document
Federal Income Tax Withheld: .....$6,975.00 - → Box 2
Social Security Tax Withheld: ......$4,924.00 - -▶ Box 4
Medicare Wages and Tips:......$79.431.00 - - - - - ■ Box 5
Medicare Tax Withheld:.....$1,151.00 - -▶ Box 6
Social Security Tips:......$0.00 - - - - - ▶ Box 7
Allocated Tips:.....$0.00 - -▶ Box 8
Dependent Care Benefits:.....$0.00 - - - - - Box 10
Code "Q" Nontaxable Combat Pay:.....$0.00
Code "W" Employer Contributions to a Health Savings Account:.....$0.00
Code "Y" Deferrals under a section 409A nonqualified Deferred Compensation
plan:.....$0.00
Code "Z" Income under section 409A on a nonqualified Deferred Compensation
plan:.....$0.00
Code "R" Employer's Contribution to MSA:.....$0.00
Code "S" Employer's Contribution to Simple Account:......$0.00 - - - - - Box 12a-d (S)
Code "T" Expenses Incurred for Qualified Adoptions:................$0.00
Code "V" Income from exercise of non-statutory stock options:...........$0.00
Code "AA" Designated Roth Contributions under a Section 401(k) Plan:.....$0.00
Code "BB" Designated Roth Contributions under a Section 403(b) Plan:.....$0.00
Code "DD" Cost of Employer-Sponsored Health Coverage:......$12,582.00
Code "EE" Designated ROTH Contributions Under a Governmental Section 457(b)
Code "FF" Permitted benefits under a qualified small employer health
reimbursement arrangement:.....$0.00
```

Note: Payments to tax-deferred pension and retirement savings plans under "Deferred Compensation" and "Code 'S' Employer's Contribution to Simple Account" are not required to be verified unless there is conflicting information. "Deferred Compensation" is assumed to include W-2 Box 12a to 12d, Codes D, E, F, G, and H. If the total for this line plus the line for Code 'S' do not match the amount reported on the FAFSA, the school will need to collect additional documentation from the student or parent, as applicable. Schools may obtain a signed statement indicating the correct amounts or some other documentation the school deems appropriate to resolve the conflict.

^{*}Current tax year information may not be available until July.

Appendix B

Sample 2021 K-1 (Form 1065) – Box 14, Self-Employment Earnings

			Final K-1 Amended	1 K-1	OMB No. 1545-0123
Sch	edule K-1 20 21	Pa	art III Partner's Share o	f Cur	rent Year Income,
(Fo	rm 1065)		Deductions, Cred	its, a	nd Other Items
	rtment of the Treasury	1	Ordinary business income (loss)	14	Self-employment earnings (loss)
Interr	al Revenue Service For calendar year 2021, or tax year				
	beginning / / 2021 ending / /	2	Net rental real estate income (loss)		
Pai	tner's Share of Income, Deductions,			<u> </u>	
	edits, etc. See back of form and separate instructions.	3	Other net rental income (loss)	15	Credits
	•				
	art I Information About the Partnership	4a	Guaranteed payments for services		
Α	Partnership's employer identification number				
		4b	Guaranteed payments for capital	16	Schedule K-3 is attached if checked
В	Partnership's name, address, city, state, and ZIP code	4.	Total avanatased necessaria	47	
		4c	Total guaranteed payments	17	Alternative minimum tax (AMT) items
		_	I.A	-	
		5	Interest income		
С	IRS center where partnership filed return ▶	6a	Ordinary dividends		
D	Check if this is a publicly traded partnership (PTP)		0 10 1 1 1 1	100	
	art II Information About the Partner	6b	Qualified dividends	18	Tax-exempt income and nondeductible expenses
E	Partner's SSN or TIN (Do not use TIN of a disregarded entity. See instructions.)			_	
		6c	Dividend equivalents		
F	Name, address, city, state, and ZIP code for partner entered in E. See instructions.			-	
		7	Royalties		
				-	
		8	Net short-term capital gain (loss)		
			No.	19	Distributions
G	General partner or LLC Limited partner or other LLC member-manager member	9a	Net long-term capital gain (loss)		
				-	
H1	☐ Domestic partner ☐ Foreign partner	9b	Collectibles (28%) gain (loss)		
H2	If the partner is a disregarded entity (DE), enter the partner's:			20	Other information
	TIN Name	9c	Unrecaptured section 1250 gain		
l1	What type of entity is this partner?		N		
12	If this partner is a retirement plan (IRA/SEP/Keogh/etc.), check here ▶ ☐	10	Net section 1231 gain (loss)		
J	Partner's share of profit, loss, and capital (see instructions):	L		-	
	Beginning Ending	11	Other income (loss)		
	Profit % %				
	<u>Loss</u>				
	Capital % %	40	On aking 470 day dayating	04	Familia taura asidan samud
	Check if decrease is due to sale or exchange of partnership interest . ▶ □	12	Section 179 deduction	21	Foreign taxes paid or accrued
K	Partner's share of liabilities: Beginning Ending	12	Other deductions		
		13	Other deductions		
	Nonrecourse \$				
	Qualified nonrecourse				
	financing \$ \$				
	Recourse \$ \$				
<u> </u>	Check this box if Item K includes liability amounts from lower tier partnerships ▶	-	Mana shan ana assirita dan at via	le mi uma e	
	Partner's Capital Account Analysis	22	More than one activity for at-ris		
	Beginning capital account \$	23	More than one activity for passi		
	Capital contributed during the year \$	"S	ee attached statement for ad	uition	ai ii ii ormation.
	Current year net income (loss) \$				
	Other increase (decrease) (attach explanation) \$	>			
	Withdrawals and distributions \$ ()	Only	an		
	Endina expitations	-			

^{*}Income earned from work: IRS Form 1040 Line 1 + Schedule 1, Line 3 + Schedule 1, Line 6 + **Schedule K-1 (IRS Form 1065)**-**Box 14 (Code A)**. If any individual earning item is negative, do not include that amount in your calculation.

Appendix C

Criteria for 2023-24 Simplified Needs Formulas and Automatic Zero EFC Calculation

The following criteria is used to determine if students qualify to have their EFCs calculated using a simplified formula.

	Simplified (assets not considered)	Automatic Zero EFC		
	■ Parents had a 2021 AGI of \$49,999 or less (for tax filers), or if non-filers, income earned from work in 2021 is \$49,999 or less; and	■ Parents had a 2021 AGI of \$29,000 or less (for tax filers), or if non-filers, income earned from work in 2021 is \$29,000 or less; and		
Formula A Dependent student	 Either Parents filed a 2021 IRS Form 1040, but did not file a Schedule 1¹, filed a tax form from a Trust Territory², or were not required to file any income tax return or 	 Either Parents filed a 2021 IRS Form 1040, but did not file a Schedule 1¹, filed a tax form from a Trust Territory², or were not required to file any income tax return or 		
	 Anyone in the parents' household size (as defined on the FAFSA) received any designated means-tested federal benefits³ during 2021 or 2022, or Parent is a dislocated worker. 	 Anyone in the parents' household size (as defined on the FAFSA) received any designated means-tested federal benefits³ during 2021 or 2022, or Parent is a dislocated worker. 		
	Student (and spouse, if any) had a 2021 AGI of \$49,999 or less (for tax filers), or if non-filers, income earned from work in 2021 is \$49,999 or less; and			
Formula B Independent student without dependents (other than a spouse)	 Either Student (and spouse, if any) filed a 2021 IRS Form 1040, but did not file a Schedule 1¹, filed a tax form from a Trust Territory², or were not required to file any income tax return or Anyone in the student's household size (as 	Not applicable.		
	defined on the FAFSA) received any designated means-tested federal benefits ³ during 2021 or 2022, <u>or</u> - Student (or spouse, if any) is a dislocated worker.			
	■ Student (and spouse, if any) had a 2021 AGI of \$49,999 or less (for tax filers), or if non-filers, income earned from work in 2021 is \$49,999 or less; and	■ Student (and spouse, if any) had a 2021 AGI of \$29,000 or less (for tax filers), or if non-filers, income earned from work in 2021 is \$29,000 or less; and		
Formula C Independent student with dependents (other than a spouse)	 Either Student (and spouse, if any) filed a 2021 IRS Form 1040, but did not file a Schedule 1¹, filed a tax form from a Trust Territory², or were not required to file any income tax return or 	 Either Student (and spouse, if any) filed a 2021 IRS Form 1040, but did not file a Schedule 1¹, filed a tax form from a Trust Territory², or were not required to file any income tax return or 		
	 Anyone in the student's household size (as defined on the FAFSA) received any designated means-tested federal benefits³ during 2021 or 2022, or Student (or spouse, if any) is a dislocated worker. 	 Anyone in the student's household size (as defined on the FAFSA) received any designated means-tested federal benefits³ during 2021 or 2022, or Student (or spouse, if any) is a dislocated worker. 		

¹May also qualify if Schedule 1 was **only** filed to report the following additions or adjustments to income: unemployment compensation (line 7), Alaska Permanent Fund dividend (line 8f – may not be a negative value), educator expenses (line 11), IRA deduction (line 20), or student loan interest deduction (line 21).

²Trust Territory: Commonwealth of Puerto Rico, Guam, American Samoa, the U.S. Virgin Islands, the Republic of the Marshall Islands, the Federated States of Micronesia, or Palau.

³Benefits include Medicaid, Supplemental Security Income (SSI), Supplemental Nutrition Assistance (SNAP), Free or Reduced Price School Lunch, Temporary Assistance for Needy Families (TANF), and Special Supplemental Nutrition Program for Women, Infants and Children (WIC).

Appendix D

2021 IRS Form 1040 Schedules Required for Federal Verification

Many taxpayers will only need to file Form 1040 and no schedules; those with more complicated tax returns will need to complete one or more of the 2021 Form 1040 Schedules along with their Form 1040. These taxpayers include people claiming certain deductions or credits or owing additional taxes.

Besides Schedules 1, 2, and 3, the school does not need to collect copies of IRS schedules or forms attached to the tax return unless conflicting information in the student's file needs resolving. Absent conflicting information, federal verification requires the collection of schedules only for the three highlighted line items below (lines 10, 17, and 20).

INDICATORS THAT SCHEDULE 1, 2, OR 3 WAS FILED:

IF YOU	THEN USE
Have additional income, such as business or farm income or loss, unemployment compensation, prize or award money, or gambling winnings. Have any deductions to claim, such as student loan interest deduction, self-employment tax, or educator expenses. • 1040 Line 8 is not blank and not zero*, or 1040 Line 10 is not blank and not zero* 2023-24 FAFSA questions #35 (S) and #82 (P) ask if Schedule 1 was (or will be) filed with a 2021 tax return. A note on p. 9 of the FAFSA reads: Answer "No" if you (and if married, your spouse) did not file a Schedule 1. Answer "No" if you (and if married, your spouse) did or will file a Schedule 1 to report only one or more of the following items: 1. Unemployment compensation (line 7) 2. Alaska Permanent Fund dividends (line 8f – may not be a negative value) 3. Educator expenses (line 11) 4. IRA deduction (line 20) 5. Student loan interest deduction (line 21) Answer "Yes" if you (or if married, your spouse) filed or will file a Schedule 1 and reported additional income or adjustments to income on any lines other than or in addition to the five exceptions listed above.	Schedule 1
Owe alternative minimum tax or need to make an excess advance premium tax credit repayment. Owe other taxes, such as self-employment tax, household employment taxes, additional tax on IRAs or other qualified retirement plans and tax-favored accounts. 1040 Line 17 is not blank and not zero*, or 1040 Line 23 is not blank and not zero*	Schedule 2
Can claim a nonrefundable credit other than the child tax credit or the credit for other dependents, such as the foreign tax credit, education credits, or general business credit. Can claim a refundable credit other than the earned income credit, American Opportunity Credit, or additional child tax credit, such as the net premium tax credit or health coverage tax credit. Have other payments, such as an amount paid with a request for an extension to file or excess social security tax withheld. 1040 Line 20 is not blank and not zero*, or 1040 Line 31 is not blank and not zero*	Schedule 3

^{*}Zero is not an amount for this purpose because zero would be ignored in the calculation of the AGI. Blank, "None" or "N/A" also is not an amount. A positive or negative figure is an amount indicating there was additional income or income adjustments that are included in the calculation of the AGI, even if it is negative income.

Sample 2021 IRS Form 1040 – Page 1

	1	Wages, salaries, tips, etc. Attach	n Form(s) W-2	,		1	202,095
Attach	2a	Tax-exempt interest	2a	b Taxable interest		2b	747
Sch. B if required.	3a	Qualified dividends	3a	b Ordinary dividend	ls	3b	
required.	4a	IRA distributions	4a	b Taxable amount	Collect Schedu	ıle <u>1</u>	if
	5a	Pensions and annuities	5a	b Taxable amount			
Standard	6a	Social security benefits	6a	b Taxable amount	Line 10 is not b	iank,	and not zero
Deduction for—	7	Capital gain or (loss). Attach Sch	nedule D if required. If not i	required, check here			
Single or Married filing	8	Other income from Schedule 1,	line 10			8	
separately, \$12,550	9	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income					
Married filing	10	Adjustments to income from Schedule 1, line 26					
jointly or Qualifying	11	Subtract line 10 from line 9. This is your adjusted gross income					
widow(er), \$25,100	12a	Standard deduction or itemized deductions (from Schedule A) 12a 34,885					
Head of	b	Charitable contributions if you tal-	ce the standard deduction (see instructions) 12b			
household, \$18,800	С	Add lines 12a and 12b					
If you checked	13	Qualified business income deduction from Form 8995 or Form 8995-A					
any box under Standard	14	Add lines 12c and 13				14	34,885
Deduction, see instructions.	15	Taxable income. Subtract line 1	14 from line 11. If zero or le	ess, enter -0		15	167,957

Sample 2021 IRS Form 1040 - Page 2

•	S			1		
16	Tax (see instructions). Check if any from F	Collect Schedule 2 if			16	28,448
17	Amount from Schedule 2, line 3	Line 17 is not blank, and not	zoro*		17	
18	Add lines 16 and 17	Line 17 is not blank, and not	2010		18	28,448
19	Nonrefundable child tax credit or credit		12		19	
20	Amount from Schedule 3, line 8				20	
21	Add lines 19 and 20			. /.	21	
22	Subtract line 21 from line 18. If zero or le	ss, enter - Collect Schedule 3	<u>3</u> if		22	28,448
23	Other taxes, including self-employment t	ax, from S Line 20 is not blank	and no	ot zero*	23	
24	Add lines 22 and 23. This is your total ta		, arra rre	. >	24	28,448
25	Federal income tax withheld from:					
а	Form(s) W-2		25a	17,729		
b	Form(s) 1099		25b			
С	Other forms (see instructions)		25c	1		
d	Add lines 25a through 25c				25d	17,730
If you have a 26	2021 estimated tax payments and amoun	nt applied from 2020 return			26	
qualifying child, 27a	Earned income credit (EIC)		27a			
attach Sch. EIC.	Check here if you were born after J January 2, 2004, and you satisfy all taxpayers who are at least age 18, to cla	the other requirements for				
b	Nontaxable combat pay election	27 b				
С	Prior year (2019) earned income	27c				
28	Refundable child tax credit or additional ch	nild tax credit from Schedule 8812	28	2,092		
29	American opportunity credit from Form 8	8863, line 8	29			
30	Recovery rebate credit. See instructions		30			
31	Amount from Schedule 3, line 15		31			

^{*}Zero is not an amount for this purpose because zero would be ignored in the calculation of the AGI. Blank, "None" and "N/A" also is not an amount. A positive or negative figure is an amount indicating there was additional income on Schedule 1, Line 9, that is included in the calculation of the AGI, even if it is negative income.

Note: There are instances when Schedule 1, 2, or 3 was filed, but you do not need a copy of that schedule for federal verification purposes unless there is conflicting information. If any of the following line items are the *sole reason* the taxpayer filed the schedule, you **do <u>not</u>** need to collect a copy of that schedule:

- Schedule 1, Line 8
- Schedule 2, Line 23
- Schedule 3, Line 31

Appendix E

Current Year Transcript Availability

Use the table below to determine the general timeframe when you can request a transcript for a current year Form 1040 return filed on or before the April due date. Availability varies based on the method you used to file your return and whether you have a refund or balance due.

Note: If you made estimated tax payments and/or applied your overpayment from a prior year tax return to your current year tax return, you can request a <u>tax account transcript</u> to confirm these payments or credits a few weeks after the beginning of the calendar year prior to filing your current year return.

When your original return shows a	and you filed <i>electronically</i> , then	and you filed on <i>paper</i> , then			
refund amount or no balance due,	allow 2-3 weeks after return submission before you request a transcript.	allow 6-8 weeks after you mailed your return before you request a transcript.			
balance due and you paid in full with your return,	allow 2-3 weeks after return submission before you request a transcript.	we process your return in June			
balance due and you paid in full after submitting the return,	allow 3-4 weeks after full payment before you request a transcript.	in mid to late June.			
balance due and you didn't pay in full,	we process your return in mid- May and you can request a transcript by late May.	Note: we process all payments upon receipt.			

https://www.irs.gov/individuals/transcript-availability

Appendix F

References, Resources and Websites – Tax Returns and Transcripts

U.S. DEPARTMENT OF EDUCATION

Federal Register

• Free Application for Federal Student Aid (FAFSA®) Information to be Verified for the 2023-24 Award Year

Dear Colleague Letter

2023-2024 Suggested Verification Text (GEN-22-09)

2023-24 Free Application for Federal Student Aid (FAFSA®) and FAFSA on the Web Worksheet

ENGLISH

- Final 2023-24 Free Application for Federal Student Aid (FAFSA®)
- Final 2023-24 FAFSA on the Web Worksheet

SPANISH

- Final 2023-24 Free Application for Federal Student Aid (FAFSA®)
- Final 2023-24 FAFSA on the Web Worksheet

2022-23 Federal Student Aid Handbook

- Application and Verification Guide
 - Chapter 2: Filling Out the FAFSA
 - Chapter 3: Expected Family Contribution (EFC)
 - Chapter 4: Verification, Updates, and Corrections

Program Integrity Questions and Answers – Verification

Glossary - Federal Student Aid Handbook Glossary

INTERNAL REVENUE SERVICE

- Current Year Transcript Availability
- Secure Access: How to Register for Certain Online Self-Help Tools
- Transcript Types and Ways to Order Them
- Get Transcript FAQs
- 4506T-EZ: Short Form Request for Individual Tax Return Transcript
- 4506-T: Request for Transcript of Tax Return (transcript and other return information)
- 2021 IRS Publication 17, p. 1: What's New