

COVER PAGE

Filing Checklist for 2013 Tax Return Filed On Standard Forms

Prepared on: 11/25/2013 05:23:27 pm

Return: C:\Users\Smokey\Desktop\Tax\2013 Whittenburg\Ch. 1\Ivan Incisor Ch 1 2013 Tax Return.T13

To file your 2013 tax return, simply follow these instructions:

Step 1. Sign and date the return

Because you're filing a joint return, Ivan and Irene both need to sign the tax return.

If your return is signed by a representative for you, you must have a power of attorney attached that specifically authorizes the representative to sign your return. To do this, you can use Form 2848, Power of Attorney and Declaration of Representative.

Step 2. Assemble the return

These forms should be assembled behind Form 1040 --U.S. Individual Income Tax Return

Staple these documents to the front of the first page of the return:

Form W-2: Wage and Tax Statement

1st

Step 3. Mail the return

Mail the return to this address:

Department of the Treasury
Internal Revenue Service
Fresno, CA 93888-0002

We recommend that you use one of these IRS-approved methods to send your return. Retain the proof of mailing to avoid a late filing penalty:

- U.S. Postal Service certified mail.
- DHL Same Day Service.
- FedEx Priority Overnight, Standard Overnight, 2Day, International Priority, or International First.
- United Parcel Service Next Day Air, Next Day Air Saver, 2nd Day Air, 2nd Day Air A.M., Worldwide Express Plus, or Worldwide Express.

Step 4. Keep a copy

Print a second copy of the return for your records. We recommend that you also print and retain these supporting forms, which don't need to be sent to the IRS:

- Background Worksheet
- Dependents Worksheet
- Last Year's Data Worksheet
- Form 1099-INT/OID

2013 return information - Keep this for your records

Here is some additional information about your 2013 return. Keep this information with your records.

You will need your 2013 AGI to electronically sign your return next year.

Quick Summary

Income		\$65,380
Adjustments	-	\$0
Adjusted gross income		\$65,380
Deductions	-	\$12,200
Exemption(s)	-	\$11,700
Taxable income		\$41,480
Tax withheld or paid already		\$6,000
Actual tax due	-	\$5,329
Refund applied to next year	-	\$0
Refund		\$671

Frgn ctry,prov/state/county,postal code:

Presidential **Note:** Checking a box below won't change your tax or refund.

Elec Campaign Check if you/spouse want \$3 to go to fund ☐ **You** ☐ **Spouse**

Filing Status **1** ☐ Single **4** ☐ Head of hshld. If qual person a child but not your dependent, child's name:

2 ☒ Married filing jointly (even if only one had income)

3 ☐ Married filing separately

5 ☐ Qual widow w/dep child

one box. Spouse name

Exemp- tions **6a** ☒ **Yourself** (but **NOT** if you can be someone's dependent)

b ☒ **Spouse**

c Dependents:

(1) First	Last Name	(2) SSN	(3) Relationship	(4) # Children Crdt	# Lived w/ you	Apart - div	Other
Ira	Incisor	690-99-9999	Son		1		

If > 4 dependents, check here ☐ **d** Total number of exemptions claimed Add nos. above 3

Income

7 Wages, etc

7

65,000

8a Taxable interest income. (Sch B if required)

8a

380

8b Tax-exempt interest

8b

0

9a Ordinary dividends

9a

0

b Qual divs

9b

0

MINI-WORKSHEET FOR LINE 7, WAGES

a. Wages not on W-2 Self: Spouse:

b. Total from line a 0

Note: Line b includes spouse amounts only if you are married filing a joint return.

c. Wages from W-2's 65,000

d. Total for line 7 65,000

MINI-WORKSHEET FOR LINE 10, TAXABLE REFUNDS OF STATE AND LOCAL INCOME TAXES

Note: This mini-worksheet requires certain information from your 2012 income tax return. If you did not create this tax return using last year's tax data, complete the Last Year's Data Worksheet before continuing.

a. Sum of "special case" amounts from Forms 1099-G (based on Pub. 525) a. 0

(If so, see IRS Pub. 525 and enter your taxable refunds manually on line 10.)

b. Amount of refunds (up to diff betw deds):

i. Refunds received (Form 1099-G) 0

Check to use amount on line i ☒

Check to calculate limit on taxable amt ☐

Limitation on Taxable Amount

H&R Block load last year users who calculated (but did not use) sales tax deduction in 2012:

1. Sales tax you could have deducted in 2012

Line 1 comes from the Last Year's Data Worksheet. We blank out lines 2 - 9 if line 1 is calculated.

Others:

2. 2012 number of exemptions

3. 2012 adjusted gross income

4. 2012 nontaxable income

Not
For
Filing

5. 2012 total available income
6. 2012 states of residence:
- (1) 2012 state at year-end
 2012 locality
 2012 state general sales tax rate %
CA and NV: Enter your 2012 combined state and local general sales tax rate on the following line.
 2012 local general sales tax rate %
- (2) 2012 other state
 2012 dates of residence in other state:
 From to
 2012 locality
 2012 state general sales tax rate %
CA and NV: Enter your 2012 combined state and local general sales tax rate on the following line.
 2012 Local general sales tax rate %
7. 2012 total from tables
8. 2012 sales tax for major purchases
9. 2012 state and local sales tax ded (line 7 + line 8)
10. 2012 state and local inc tax ded
11. Ln 10 minus Ln 9 (or line 1, if applicable)
12. Smaller of lines b(i) and 11
- ii. Line b(i) or 12 **b.**
- Note: We carry line 12 to line b if you indicate that you want to calculate the difference between your 2012 income and sales tax deductions. Otherwise we carry line b(i) to line b.**
- c. Itemized deductions allowed in 2012 **c.**
- d. 2012 filing status **d.**
 If line d is "3", "X" if itemizing ☐
- e. 2012 minimum standard deduction **e.**
- f. Number of boxes x'd on 2012 Form 1040, line 39a **f.**
- g. Ln f x \$1150 (\$1450 if Ln d is 1 or 4) **g.**
- h. Reserved **h.**
- i. Reserved **i.**
- j. 2012 standard deduction (Ln e + Ln g) **j.**
Note: We blank line j if line d is X'd.
- k. Sum of lines h, i, and j **k.**
- l. Line c - line k (not < 0) **l.**
- m. Smaller of line b or line l **m.**
- n. Sum of lines a and m (to line 10) **n.** 0

of W-2, W-2G, & 1099-R here.	10	Taxable refunds of state and local income taxes	10	0
	11	Alimony received	11	
	12	Business income or loss. Attach Sched C or C-EZ	12	0
	13	Capital gain/loss <input type="checkbox"/>	13	0
	14	Other gains or losses. Attach Form 4797	14	
	15a	IRA's 15a b Taxbl	15b	0
	16a	Pension, annuities 16a b Taxbl	16b	0
	17	Rent, royalty, partnership, S corp, trust (Sch E)	17	
	18	Farm income or loss. Attach Schedule F	18	0
	19	Unemploy compensation	19	
	20a	Soc Sec benefits 20a b Taxable ..	20b	
	21	Other income (type and amt)	21	0
Adjusted	22	Combine lines 7 through 21. Your total income ▶	22	65,380
	23	Educator expenses	23	
	24	Certain bus expenses of reservists, artists, fee-basis gov't officials	24	0
	25	Health insurance (attach Form 2282)	25	

25	Health savings acct ded (Fm 8889)	25	0
26	Moving exps (Form 3903)	26	0
27	Deductible self-empl tax (Sch SE)	27	0
28	SE SEP/SIMPLE/qualified plans.	28	0

**MINI-WORKSHEET FOR LINE 29, SELF-EMPLOYED
HEALTH INSURANCE DEDUCTION**

- a. Total paid in 2013 for 2013 health insurance coverage established under your business (or the S corporation in which you were a more-than-2-percent shareholder) for you, your spouse, and your dependents. Your insurance can also cover your child who was under age 27 at the end of 2013, even if the child was not your dependent

Note: Do not include amounts for any month you were eligible to participate in an employer-sponsored health plan (see instr.) or amounts paid from retirement plan distributions that were nontaxable because you are a retired public safety officer.

Note: See the IRS instructions if, during 2013, you were an eligible trade adjustment assistance (TAA) recipient, alternative TAA (ATAA) recipient, reemployment trade adjustment assistance (RTAA) recipient, Pension Benefit Guaranty Corporation pension recipient, or more-than-2-percent shareholder in an S corporation.

Note: Your personal services must have been a material income-producing factor in the business.

- b. Amount from Schedule K-1, line 13 0
- c. Line a plus line b 0
- d. Check here if the business under which the insurance plan was established was an S corp., and you were a more-than-2% shareholder in the S corp. ☐
- e. Net profit and any other earned income from the business under which the insurance plan is established, less 1040 lines 27 and 28 0

Note: We calculate line e. for you in most cases. But note these special rules:

- If you have more than one source of self-employment income, or if you are filing Form 2555 or Form 2555-EZ, use the worksheet in IRS Publication 535 to figure your entry for line e.
- If you checked box d., enter your Medicare wages (box 5 of Form W-2) from the S corp. on line e. You may need to make additional adjustments on line e. if, in addition to the S corp, you have another health plan and source of self-employment.
- See the IRS instructions and override as necessary if you have Conservation Reserve Program payments that are exempt from self-employment tax.

- f. Smaller line c. or e. (for line 29) 0
- g. Extra premiums included on line c. that were for nondependent children under age 27 for whom a medical expense deduction can't be claimed

Note: You might need to adjust our calculations on line 1 of Schedule A if you had more than one source of income that could support the self-employed health insurance deduction and you paid additional premiums to cover a nondependent child.

29	Self-employed health ins deduction	29	0
30	Penalty on early w/drawal of svgs	30	0

31a Alimony pd . . . bRecip SSN ▶

31a

**MINI-WORKSHEET FOR LINE 32,
IRA DEDUCTION**

- a. Your IRA deduction
- b. Your spouse's IRA deduction
- c. Total (to line 32) 0

Gross 32 IRA deduction (see instr) **32** 0

**MINI-WORKSHEET FOR LINE 33,
STUDENT LOAN INTEREST DEDUCTION**

Note: *If you are claimed as a dependent on someone else's return, or if you are married filing a separate return, you are not eligible for this deduction.*

- a. Qualifying interest
- b. Maximum interest deduction
- c. Eligible interest. Smaller line a or b
- d. Total income (Form 1040 line 22)
- e. Total of amounts from Form 1040, lines 23 through 32, and amount to left of line 36
- f. Foreign earned income and housing deduction
- g. Income excluded from Puerto Rico, Guam, American Samoa, or N. Mariana Islands
- h. Modified AGI. Ln d - Ln e + Lns f and g
- i. Phaseout threshold (\$60,000; \$125,000 jnt)
- j. Line h - line i
- k. Reduction amount (line c times line j divided by \$15,000 if not joint, \$30,000 joint)
- l. Deduction (line c - line k). To line 33

Income 33 Student loan interest deduction **33**

34 Tuition & fees. Attach Form 8917 **34**

35 Dom. prod. act. ded. (Fm 8903) **35** 0

36 Lns 23 - 35 ▶ **36** 0

37 Line 22 - line 36. Your **adjusted gross income** ▶ **37** 65,380

KIA

END OF PAGE 1

Tax and 38 Amount on line 37 (adjusted gross income) 38 65,380

Credits 39a You born before Jan 2, 1949 Blind 39a 0
Sp born before Jan 2, 1949 Blind

MINI-WORKSHEET FOR LINE 39b

a. Married, filing separately and spouse itemizes

b. Are you a dual-status alien

b Sp itemizes on sep rtn/dual-status alien 39b

MINI-WORKSHEET FOR LINE 40,
STANDARD VS ITEMIZED DEDUCTION

a. Your standard deduction (calculated) 12,200

b. Itemized deductions (from Schedule A)

c. "X" if you are required to itemize (calculated)

d. "X" if you want to itemize, even if lower deduction

e. "X" if you are married filing separately and
are taking the standard deduction (calculated)

f. Larger of a. and b. (or, if c or d is "X", then b;
if e is "X", then a) Carry to line 40 12,200

40 Itemized deductions or standard deduction 40 12,200

Check here if you itemized

41 Subtract line 40 from line 38 41 53,180

MINI-WORKSHEET FOR PERSONAL EXEMPTIONS

a. Is amount on line 38 more than amount shown
below on line d for your filing status?
X No. Stop. Multiply \$3,900 by line 6d and
enter result on line 42.
Yes. Continue.

b. Line 6d multiplied by \$3,900

c. Amount on Line 38

d. Ceiling amount
Married filing jointly or
Qualifying widow(er) 300,000
Married filing separately 150,000
Single 250,000
Head of household 275,000

e. Line c minus line d

f. Is line e more than \$122,500 (\$61,250 if
married filing separately)?
Yes. Stop. Enter -0- on line 42.
No. Divide line e by \$2,500 (\$1,250
if married filing separately)

g. Line f multiplied by 2% (.02)
Note: We limit line g to 1.00.

h. Line b multiplied by line g

i. Deduction for exemptions.
Line b minus line h (to line 42)

42 Exemptions. If line 38 is \$150,000 or less, multiply
\$3,900 by number on line 6d (see instructions) 42 11,700

43 Taxable income. Ln 41 minus 42 (not less than 0) 43 41,480

FOREIGN EARNED INCOME TAX WORKSHEET

a. Form 1040, line 43

b. Form 2555, line 45 and 50, or Form 2555-EZ,
line 18

c. Lines a + b

d. Tax on line c

e. Tax on line b

f. Line d. minus line e. If zero or less, enter 0

44 Tax. See instr. Check if total includes tax from
a 8814 b 4972 c 44 5,329

45 Alternative minimum tax. (Form 6251) 45 0

46 Add lines 44 and 45 46 5,329

**MINI-WORKSHEET FOR LINE 47,
FOREIGN TAX CREDIT**

- a. Foreign tax credit from Form(s) 1099-DIV, 1099-INT, 1099-MISC, and Schedule(s) K-1 (partnerships/S corps) 0
Note: We blank line a if you use Form(s) 1116.
- b. Smaller of line a. and line 44 0
- c. Foreign tax credit from Form(s) 1116 0
- d. Line b + line c. To line 47 0

47	Foreign tax credit (1116 if req'd)	47	0	
48	Child care credit (Form 2441)	48		
49	Educ credits from Fm 8863, line 19	49		
50	Retirement savings crdt (Fm 8880)	50	0	
51	Child tax credit	51		
Note: Attach Schedule 8812, if required.				
52	Residential energy crdts (Fm 5695)	52		
53	Other credits. Check: a <input type="checkbox"/> Fm 3800 b <input type="checkbox"/> 8801 c <input type="checkbox"/> Specify	53	0	
54	Add lines 47 through 53. Your total credits	54		0
55	Subtract line 54 from line 46 (not less than 0)	55		5,329
Other Taxes	56 Self-employment tax. (Sched SE)	56		0
	57 Unreported tax from: a <input type="checkbox"/> Fm 4137 b <input type="checkbox"/> Fm 8919	57		0
	58 Tax on IRAs, qualified plans, etc. (Form 5329)	58		0
59a	Household employment taxes from Schedule H	59a		0
	b First-time homebuyer credit repayment. Form 5405	59b		0
60	Taxes from: a <input type="checkbox"/> Form 8959 b <input type="checkbox"/> Form 8960 c <input type="checkbox"/> Instructions; enter code	60		0
61	Lns 55 to 60. Total tax	61		5,329

**MINI-WORKSHEET FOR LINE 62,
FEDERAL TAX WITHHELD**

- a. Backup withholding (Bkgd Wks, 1099-DIV, 1099-INT/OID, 1099-MISC, K-1) 0
- b. Oth fed inc tax w/h (W-2, W-2G, 1099-G, 1099-R, SSA-1099, RRB-1099) 6,000
- c. Add'l Medicare tax withholding from Form 8959 0
- d. Total federal tax withheld (to line 62) 6,000

62	Federal income tax withheld	62	6,000	
63	2013 est tax + amt from 12 return	63	0	
64a	EIC	64a		
	b Nontax combat pay 64b			
Note: Attach Schedule EIC if you have a qualifying child.				
65	Add'l chld tax cr. Attach Sch 8812	65		
66	American opp crdt, Fm 8863, ln 8	66		
67	Reserved	67		
68	Amt pd with extension request	68		

**MINI-WORKSHEET FOR LINE 69,
EXCESS SOC SEC AND RRTA**

(Fill in W-2's first; leave blank unless 2 or more employers.)

- a. "X" if more than 1 employer. Self: ☐ Spouse: ☐
- b. Eligible Soc Sec tax paid. Self: _____ Spouse: _____
- c. Eligible RRTA tax paid. Self: _____ Spouse: _____
- d. Sum of lines b and c. Self: 0 Spouse: 0
- e. If a="X", amount on line d minus \$7049.40 Self: 0 Spouse: 0
- f. Total on line e. Carry to ln 69TOTAL: 0

69	Excess Soc Sec & RRTA tax withheld	69	0	
70	Crdt for fed tax on fuels (F 4136)	70		

**MINI-WORKSHEET FOR LINE 71,
MISCELLANEOUS CREDITS**

- a. Credits from Forms 2439, 8801 (line 27), or 8885 0
- b. Credit for repayment of amounts you included in

income in an earlier year because it appeared
you had a right to the income

c. Total for line 71 0

71 Credits from: a ☐ 2439 b ☐ Reserved

c ☐ 8885 d ☐ 71 0

72 Lines 62, 63, 64a, 65 - 71. Total payments 72 6,000

Refund 73 If line 72 is larger than line 61, amt overpaid 73 671

Direct 74a Amount of line 73 you want refunded to you.

Check if Form 8888 is attached: ☐ 74a 671

deposit? b Routing number XXXXXXXXXX c Type: ☒ Checking ☐ Savings

See d Account number XXXXXXXXXXXXXXXXXXXX

instr. 75 Amt to apply to 2014 estimated tax 75 0

Amount 76 Amount you owe (including Form 2210 penalty) 76

Note: For details on how to pay, see IRS instr.

Payment Voucher, see IRS instructions.

You Owe 77 Amount of penalty on Form 2210 77

Desi- Allow another to discuss return with IRS? ☐ Yes. Complete following ☒ No

gnee Designee's name: Phone PIN

Note: If you are signing for your child, sign his or her name, and
write "By" and then your name, and then, "parent for minor child."

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

Signature: Date Your occupation Day tel.

Sign here Spouse's sig (req'd if jt.) Date Spouse's occupation IP PIN

Homemaker

Preparer name Preparer signature Date Self-empl? ☐ PTIN

Keep a copy for your records. Firm's name Firm's EIN

Firm's address Ph

END OF FORM

SUPPORTING FORMS

RE: 2013 Tax Returns

PREPARED FOR: Ivan Incisor

SSN: 477-34-4321

PRINTED ON: November 25, 2013

PREPARED USING: H&R Block 2013 [2901]

SUPPORTING FORMS WHICH CAN BE SUBMITTED TO THE IRS

SUPPORTING FORMS IN YOUR RETURN

1. - Background Worksheet - Background Information Worksheet
2. - Dependents Worksheet - Worksheet for Dependents
3. - Last Year's Data Worksheet - Last Year's Data Worksheet
4. - Form 1099-INT/OID - Interest Income Worksheet

***** **DO NOT MAIL THIS PAGE** *****

1. YOUR NAME, ADDRESS AND TELEPHONE NUMBER

Your name (first, MI, last, Jr/III)IvanI Incisor

Spouse's name (first,MI,last,Jr/III)IreneIncisor

C/O information, if necessary

☐ Foreign address (not APO/FPO)

Your street and apartment # (if any)468 Mule Deer Lane

Your city, state, and ZIP codeSpokane, WA 99206

Foreign country

Foreign province/state/county

Foreign postal code

Your telephone number (daytime)

☐ I live outside the U.S. and Puerto Rico and my main place of work is outside the U.S. and Puerto Rico, or I'm in military or naval service outside the U.S. and Puerto Rico.

☐ Check here if you received a letter from the IRS with an identity protection personal identification number (IP PIN).
IP PIN's are uncommon. They are sent to certain taxpayers taxpayers who have had a problem with identity theft.
Taxpayer 6-digit IP PIN
Spouse 6-digit IP PIN

2. GENERAL INFORMATION

	Yours	Your spouse's
a. Social Security number	477-34-4321	637-34-4927
b. Date of birth (MM/DD/YYYY)	1/1/1965	1/1/1968
c. "X" if legally blind	<input type="checkbox"/>	<input type="checkbox"/>
d. Enter "X" if disabled	<input type="checkbox"/>	<input type="checkbox"/>
e. Occupation	Dentist	Homemaker
f. "X" if you want \$3 to go to Pres. Elec. Campaign Fund	<input type="checkbox"/>	<input type="checkbox"/>

g. If this return is for a deceased person, enter the date of death

h. Full-time student (see help panel for details)

Primary taxpayer

Spouse

3. FILING STATUS

a. Choose your filing status below:
☐ Single
☒ Married filing joint return
☐ Married filing separate return
☐ Head of household
☐ Qualifying widow(er)
If you have not yet made an entry, we choose married filing a joint return. For more information, see the filing status section of the IRS instructions for Form 1040.

b. If you are married filing separately, check the applicable box.
I want to itemize my deductions
I want to use the standard deduction

c. Check the box if you are married filing separately AND you and your spouse lived apart throughout 2013

d. If filing status is head of household, and qualifying person is a child but not your dependent, enter the child's name and SSN
Click here to clear or make a new selection
Note: Once you enter information on line d, we will carry that data into a copy of the Dependents Worksheet as a nondependent. To delete or edit this information, you'll need to delete or edit the copy of the Dependents Worksheet that applies to this person. If you determine this person is your dependent after completing the Dependent Worksheet, we'll set the above fields null.

e. If qualifying widow(er), enter the year your spouse died

f. Dual-Status Alien: Enter "X" if you or your spouse is a dual-status alien AND you are NOT entering on this tax return your combined worldwide

AND you are NOT entering on this tax return your combined worldwide income. If you enter "X," your standard deduction is zero ☐

BACKGROUND INFO CONTINUED ON PAGE 2

END OF PAGE 1

BACKGROUND (CONT'D) PAGE 2

2013

**Not
For
Filing**

4. EXEMPTIONS FOR YOU AND YOUR SPOUSE

- a. Place an "X" here if anyone else (a parent, e.g.) can claim you as a dependent on his or her tax return. (Joint filers enter "X" only if someone else can claim you, **AND** your tax before withholding is zero.)
- b. Enter "Y" if you are entitled to an exemption for yourself
(This is always "Y," unless the question above is "X.")
- c. If married, place an "X" here if anyone else (a parent, e.g.) can claim **your spouse** as an exemption on his or her tax return. (Joint filers enter "X" only if someone else can claim your spouse, **AND** your tax before withholding is zero.)
- d. Enter "X" if you are entitled to an exemption for your spouse
(Married filing jointly or, in some cases, married filing separately or head of household. See IRS 1040/1040A instructions for details.)

Your Exemption for Alternative Minimum Tax

- e. You had at least one parent living on the last day of 2013
If you answered yes to the previous question and you were ages 18-23 on the last day of 2013, answer the next question.
- f. Your earned income was less than half of your support in 2013

5. TAXES PAID/WITHHELD

- a. Estimated taxes paid (do not include 2012 refund applied):

Date	Amount

Total estimated tax payments 0

Note: If you and your spouse each filed separate extensions but are now filing a joint return, or if you jointly filed an extension but are now filing separate returns, see the IRS instructions to Form 4868 and adjust the amount on line b. accordingly.

- b. Amount paid with Form 4868 (for October returns)

MINI-WORKSHEET FOR LINE 5c

a. Withholding from imported Form 1099-B's 0

b. Withholding from other Form 1099-B's

c. Total withholding on Form 1099-B 0

- c. Withholding on Form 1099-B 0
- d. Withholding on Form 1099-PATR

6. PAYING YOUR TAXES BY CREDIT CARD

- a. Confirmation number, if taxes are being paid by credit card.
- b. Amount charged to credit card (not including convenience fee), if taxes are being paid by credit card

7. REFUND INFORMATION

Direct Deposit

Would you like to speed your refund by having the IRS deposit it directly into your account at a bank or other financial institution in the United States? If so, fill in the following regarding the account and place an X here

- 1a. Routing Transit Number ("RTN")
- b. Depositor Account Number ("DAN")

Note: Here is a sample of the numbers you might find at the bottom of a check, with "RTN," "DAN," and check number identified.

RTN: DAN: Check number:
123404567 123-4567 0101

- c. Type of account:
- ☒ Checking ☐ Savings

- d. Amount to be deposited in first account
- 2a. Routing Transit Number ("RTN")
- b. Depositor Account Number ("DAN")
- c. Type of account:
☒ Checking ☐ Savings
- d. Amount to be deposited in second account
- 3a. Routing Transit Number ("RTN")
- b. Depositor Account Number ("DAN")
- c. Type of account:
☒ Checking ☐ Savings
- d. Amount to be deposited in third account

Applying Refund to Your 2014 Estimated Tax

If you are due a refund this year, do you want to apply any of it to 2014
estimated tax? If so, please enter the amount here

BACKGROUND INFO CONTINUED ON PAGE 3

END OF PAGE 2

8. THIRD PARTY DESIGNEE

Do you want to allow another person to discuss this return with the IRS? ☐ Yes ☒ No

If Yes, complete the following information:

Designee's name: _____

Designee's phone number: _____

Designee's personal identification number (PIN): _____

9. RETURN ASSISTANCE

How was this return prepared:

☒ By yourself.

☐ With help of an IRS-sponsored program (if so, enter one of the following: TC, TCE, TC-X, TCE-X, VITA, VITA-T, Self-Help, IRS-Prepared, IRS-Reviewed, Outreach): _____

10. STATE TAX RETURNS

Enter information below about any 2013 state tax returns you're filing.
For each state, select the residency status that applies for 2013.

Name of state(s)	Your residency status	Spouse's residency status
_____	_____	_____
_____	_____	_____
_____	_____	_____

SECTION I BASIC INFORMATION

Tell us about the person you want to claim as a dependent:

First Name	MI	Last Name	Soc. Sec. No.	Date of Birth	ITIN
Ira		Incisor	690-99-9999	6/1/1996	

Relationship	Type of Dependent
Son	Child Lived with You
	Time Lived With You
	Lived With All Year or Born

Month's person lived with you 17

Person's age 17

DOB stringJune 1, 1996

Person is fosterchild placed with you by court order/placement agency ☐

	Yes	No
Was this person a US citizen/resident alien of the US in 2013?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
If no, was this person a resident of Canada or Mexico in 2013?	<input type="checkbox"/>	<input type="checkbox"/>
Is this person your adopted child who lived with you all year?	<input type="checkbox"/>	<input type="checkbox"/>
If tax ID is an ITIN is substantial presence test satisfied?..	<input type="checkbox"/>	<input type="checkbox"/>
If NO to substantial presence test are there special circumstances?	<input type="checkbox"/>	<input type="checkbox"/>

SECTION II QUICK ENTRY

If you're not sure this person qualifies, check NO and go to Section III.

	Yes	No
Are you sure this person qualifies as your dependent in 2013	<input checked="" type="checkbox"/>	<input type="checkbox"/>

IF YOU ANSWERED YES - STOP!

You do not need to complete the rest of this worksheet.

We will prevent you from checking this box if you have not completed all the information in Section I, or if we've determined (based upon that information) this person cannot be your dependent.

QUICK ENTRY QUALIFYING CHILD VALIDATION	
a. Relationship test	<input checked="" type="checkbox"/>
b. Age test	<input checked="" type="checkbox"/>
c. Support test.....	<input checked="" type="checkbox"/>
d. Residence test...	<input checked="" type="checkbox"/>

SECTION III DEPENDENT QUALIFICATION TESTS

Do not complete this Section unless you answered NO in Section II.

PART A ALL DEPENDENTS

	Yes	No
1. Will the person named in Section I file a joint return in 2013?	<input type="checkbox"/>	<input type="checkbox"/>
* If NO, go to line 3.		
* If YES, go to line 2.		
2. Does this person satisfy the exception to the dependent joint return test?	<input type="checkbox"/>	<input type="checkbox"/>
See the FAQ to the right to learn about the exception to joint return test.		
* If YES, go to Part B, line 3.		
* If NO STOP . You cannot claim this person as your dependent.		

PART B DETERMINE WHETHER PERSON IS YOUR QUALIFYING CHILD

3. If this person is your child, are any of these statements true? ☐ ☐

- * You are divorced or legally separated under a decree of divorce or separate maintenance from the child's other parent.
- * You are separated under a written separation agreement from the child's other parent.
- * You lived apart during the last 6 months of the calendar year.

Answer NO if this person is not your child.

- * If NO, go to line 4.
- * If YES, complete the MINI-WORKSHEET FOR LINE 3.

MINI-WORKSHEET FOR LINE 3	
DIVORCE & SEPARATION RULES	
AND MULTIPLE SUPPORT AGREEMENTS	
	Yes No
a. Did you (and your spouse if married filing jointly) provide more than 1/2 the support for this child during 2013?	<input type="checkbox"/> <input type="checkbox"/>
* If YES, skip (b) through (c) and go to line (d).	
b. Did this child's other parent provide more than 1/2 the	

- support for this child during 2013? ☐ ☐
- * If YES, skip (c) and go to line (d).
- c. Did both of you together provide more than 1/2 of this child's support during 2013? ☐ ☐
- * If NO, skip (d) through (f) and go to line (g).
- d. Did you live with this child for more than 1/2 of 2013? ☐ ☐
- * If YES, skip (e) through (g) and go to line (h).
- e. Did this child's other parent live with this child for more than 1/2 of 2013? ☐ ☐
- * If YES, skip (f) through (g) and go to line (h).
- f. Was the time this child lived with you and his/her other parent (when combined) more than 1/2 of 2013? ☐ ☐
- If YES, skip (g) and go to line (h).
- g. Are you eligible to claim a 2013 exemption for this child under a multiple support agreement? ☐ ☐
- * If NO, **STOP**.
Do not complete the rest of this WORKSHEET.
This child is not your dependent this year.
- * If YES, do not complete the rest of this MINI-WORKSHEET, but go to line 4.
- Note:** *If this child qualifies as your dependent, make sure you attach Form 2120 to your 2013 tax return.*
- h. Does a divorce or separation agreement give you the dependent exemption? ☐ ☐
- * If YES, do not complete the rest of this MINI-WORKSHEET, but go to line 4.
- Note:** *Answer YES if you have an agreement to claim this dependent in alternate years, and this is your year.*
- i. Does a divorce or separation agreement give this child's other parent the dependent exemption? ☐ ☐
- * If NO, and you answered YES to d, do not complete the rest of this MINI-WORKSHEET, but go to line 4.
- Note:** *Answer YES if you have an agreement to claim this dependent in alternate years, and this is NOT your year.*
- j. Will the other parent release his/her claim for this person's dependent exemption to you for 2013? ☐ ☐
- * If NO, **STOP**.
Do not complete the rest of this WORKSHEET.
This child is not your dependent this year.
- * If YES, go to line 4.
- Note:** *If this child qualifies as your dependent, make sure you attach Form 8332, signed by the child's other parent to your 2013 tax return.*

- | | Yes | No |
|---|--------------------------|--------------------------|
| 4. Did this person live in your home for more than half the year? <input type="checkbox"/> <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| If YES, go to line 5. | | |
| If NO: | | |
| * If you also answered NO to line 3 go to Part C. You cannot claim this person as your Qualifying Child, but you may be able to claim this person as your Qualifying Relative. | | |
| * If you answered YES to line 3 and YES to line h or line j of the MINI-WORKSHEET FOR LINE 3 go to line 5. | | |
| * If you answered YES to line 3 and you did NOT check line h or line j of the MINI-WORKSHEET FOR LINE 3, go to Part C. You cannot claim this person as your Qualifying Child, but you may be able to claim this person as your Qualifying Relative. | | |
| 5. Is this person's relationship valid for a Qualifying Child? <input type="checkbox"/> <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <i>We calculate this answer based upon the relationship selected in Section I.</i> | | |
| <input type="checkbox"/> Check this box if this person is your fosterchild, placed in your care by an authorized placement agency or by judgment, decree, or other valid court order. | | |
| * If YES go to line 6. | | |
| * If NO go to PART C. You cannot claim this person as your Qualifying Child, but you may be able to claim this person as your Qualifying Relative. | | |
| 6. Was this person under age 19 at the end of the year? <input type="checkbox"/> <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <i>We calculate this based on this person's date of birth in Section I.</i> | | |
| * If YES, skip lines 7, 9 and go to line 10. | | |

* If NO, go to line 7.

7. Was this person a student in 2013? ☐ ☐

* If NO, go to line 9.

* If YES, go to line 8.

8. Was this person under age 24 at the end of the year? ☐ ☐

We calculate this based on this person's date of birth in Section I.

* If YES, skip line 9 and go to line 10.

* If NO, go to line 9.

9. Was this person permanently and totally disabled? ☐ ☐

* If YES, go to line 11.

* If NO go to line 10.

10. Is this person younger than taxpayer (or spouse if MFJ)? ☒ ☐

* If YES, go to line 11.

* If NO go to PART C. You cannot claim this person as your Qualifying Child, but you may be able to claim this person as your Qualifying Relative.

11. Did this person provide over half his/her own support in 2013? ☐ ☐

* If NO, read the caution below and go to line 12.

* If YES, **STOP. You cannot claim this person as your dependent.**

CAUTION! *It's possible that someone can be the Qualifying Child of more than one person, but only one person can claim that Qualifying Child as a dependent. If two people claim the same Qualifying Child as a dependent, the exemption will be permitted only for the person with the better claim under law. Use the MINI-WORKSHEET FOR LINE 12 to see if you have the better claim against anyone else who might claim an exemption for this person.*

TIP! You can check YES for line 12 without completing the MINI-WORKSHEET FOR LINE 12 if you are this person's parent and you are filing a joint return with his/her other parent.

MINI-WORKSHEET FOR LINE 12

Yes No

a. Are you this person's parent? ☐ ☐

b. Is the other taxpayer who can claim the person in Section I as a Qualifying Child this person's parent? ☐ ☐

* If you answered Yes to (a) and No to (b) **STOP.**

Your have the better claim.

* If you answered YES to (b) and NO to (a) **STOP.**

This person's parent has the better claim.

* If you answered NO to (a) and (b) go to (e).

* If you answered YES to (a) and (b) go to (c).

c. Did this person reside with you longer than with the other person's parent during 2013? ☐ ☐

If YES **STOP. You have the better claim.**

d. Did this person reside with you for the same amount of time as with the other parent during 2013? ☐ ☐

If NO **STOP. The other parent has the better claim.**

e. Was your federal adjusted gross income (AGI) higher than the AGI of the other taxpayer during 2013? ☐ ☐

If YES **STOP, you have the better claim.**

12. Do you want to claim this person as your dependent? ☐ ☐

If you do not have the better claim to the dependent exemption, you should only answer YES to line 12 if you know the other taxpayer will not claim this person as a dependent.

PART C DETERMINE WHETHER PERSON IS YOUR QUALIFYING RELATIVE

Complete this Part only if this person is not a Qualifying Child and we directed you to complete this Part in Part B.

Yes No

13. Although not your Qualifying Child, is this person a Qualifying Child for somebody else? ☐ ☐

See the FAQ to the right to see who can be a Qualifying Child.

* If NO, go to line 14.

* If YES **STOP.** You cannot claim this person as your dependent.

14. Is this person's relationship valid for a Qualifying Relative? ☐ ☐

See the FAQ to the right to see who can be a Qualifying Relative.

* If YES, go to line 15.

* If NO **STOP.** You cannot claim this person as your dependent.

15. Did this person have more than \$3,900 of gross income in 2013? ☐ ☐

See the FAQ to the right to learn what is considered gross income.

* If NO, go to line 16.

* If YES **STOP**. You cannot claim this person as your dependent.

- 16.** Did you (and your spouse if married filing jointly) provide more than half the support for this person during 2013? ☐ ☐

TIP! Answer YES if a multiple support agreement lets you claim this person.

Note: We calculate line 16 if you completed the MINI-WORKSHEET FOR LINE 5.

See the FAQ to the right to learn what is considered support.

* If YES, this person is your Qualifying Relative and we'll make this person your dependent.

* If NO, this person is not your Qualifying Relative or your dependent.

Use this Worksheet to enter information from your 2012 tax return for use in our calculations.

2012 Form 1040, 1040A or 1040EZ

1a Filing status:

☐ Single

☒ Married filing joint return

☐ Married filing separate return

☐ Head of household

☐ Qualifying widow(er)

Spouse's Social Security number

637-34-4927

If you and your spouse filed separate returns last year, check the box if your spouse itemized deductions

☐

1b Form filed:

Eligible for:

☒ Form 1040

☒ Form 1040A

☐ Form 1040EZ

Filed:

☒ Form 1040

☐ Form 1040A

☐ Form 1040EZ

2 Number of exemptions (1040 line 6, 1040A line 6)

3

3 Number of additional deductions (1040 line 39a, 1040A line 23a)

0

Note: Your entry on line 2 must be between 0 and 4.

4 Adjusted gross income (1040 line 37, 1040A ln 21, 1040EZ ln 4)

65,380

5 Itemized deductions (1040, above line 40)

6 Tax less certain credits (1040 line 55, 1040A line 35, 1040EZ line 10)

5,441

7 Self-employment tax (1040 line 56)

0

8 Alternative minimum tax (1040 line 45, 1040A line 28 write-in)

0

9a Household employment tax (1040 line 59a)

0

9b Homebuyer credit repayment, Form 5405, line 8 (1040 line 59b)

0

10 Earned income credit (1040 ln 64a, 1040A ln 38a, 1040EZ ln 8a)

0

11 Refund applied to 2013 (1040 line 75, 1040A line 44)

0

12 Interest on tax due on installment income from lots/timeshares

13 Interest on deferred tax on gain from certain installment sales with sales price over \$150,000

14 Tax on income received from nonqualified deferred compensation plan that fails to meet requirements

2012 Schedule D

15 Used Schedule D Tax Worksheet

☐ Yes ☐ No

16 Line 6 of Qualified Dividends and Capital Gain Tax Worksheet or line 13 of Schedule D Tax Worksheet

17 Line 19 of Schedule D

18 Line 10 of Schedule D Tax Worksheet

19 Line 7 of Qualified Dividends and Capital Gain Tax Worksheet or line 14 of Schedule D Tax Worksheet

Note: Enter the amounts on lines 20 and 21 as positive numbers.

20 Short-term capital loss carryforward (line 8 of Capital Loss Carryover Worksheet in 2013 Schedule D instructions)

21 Long-term capital loss carryforward (line 13 of Capital Loss Carryover Worksheet in 2013 Schedule D instructions)

2012 Form 2555

Note: Lines 22 - 25 are for the housing deduction carryover.

22 Line 46 (yours)

23 Line 48 (yours)

24 Line 46 (spouse's)

25 Line 48 (spouse's)

2012 Form 4136

26 Total fuel tax credit (line 17)

2012 Form 4952

27 Disallowed investment interest expense (line 7)

28 Disallowed investment interest expense (AMT) (line 7)

2012 Form 5329

29 Tax on early distribution (line 4) (yours)

30 Tax on early distribution (line 4) (spouse's)

31 Tax on distribution from education account (line 8) (yours)

32 Tax on distribution from education account (line 8) (spouse's)

2012 Form 5405

33 2012 Homebuyer credit re-payment

2012 Form 5695

34 Residential energy efficient property cr carryforward (line 18)

2012 Form 6251

35 Adjusted gross income minus itemized deductions (line 1)

36 Medical and dental expenses (line 2)

37 Taxes from Schedule A if you itemize (line 3)

38 Certain interest on a home mortgage (line 4)

39 Miscellaneous deductions (line 5)

40 Amount from line 6 (enter as negative)

41 Tax refund from Form 1040 (line 7; enter as negative)

42 Investment interest expense (reg. - AMT) (line 8)

43 Depletion differences (line 9)

44 Net operating loss (line 10; enter as positive)

45 Interest from specified private activity bonds (line 12)

46 Qualified small business stock (line 13)

47 Regular tax minus 4972 amount and foreign tax credit (line 34)

LAST YEAR'S DATA (CONT'D) PAGE 3

2013

Ivan I Incisor

SSN: 477-34-4321

2012 Form 8801

48 Prior Year AMT less AMT (Line 18)

49 Fuel credit (Line 20)

50 Allowable minimum tax credit (line 25)

51 Minimum tax credit carryforward (line 28)

52 Line 57 of 2010 return (line 57)

2012 Form 8812

53 Additional child tax credit (line 13)

2012 Form 8859

54 DC first-time homebuyer credit carryforward (line 4)

2012 Form 8885

55 Health insurance credit (yours)

56 Health insurance credit (spouse's)

Miscellaneous 2012 Taxes

57 Recapture of investment credit

58 Recapture of low-income housing credit

59 Recapture of qualified electric veh credit

60 Recapture of Indian employment credit

61 Recapture of new markets credit

62 Section 72(m)(5) excess benefits tax

63 Tax on excess parachute payments

64 Tax on accumulation distribution of trusts

65 Tax on medical savings account distributions

66 Recapture of employer-provided childcare facilities

67 Tax on health savings account distributions

68 Tax on Medicare Advantage MSA distributions

69 Recapture of alternative motor vehicle credit

70 Recapture of alternative fuel vehicle refueling property credit

71 Recapture of health coverage tax credit advance payment

72 Certain tax on Sec. 457A deferred compensation

73 Tax for failure to maintain HDHP coverage

74	Recap of charitable deduction for fractional tang pers prop int	_____
Note: Lines 75 - 79 are for determining whether your state income tax refund is taxable.		
75	<input type="checkbox"/> Income taxes deducted	
	<input type="checkbox"/> General sales taxes deducted	
76	<input type="checkbox"/> Sales tax calculated	
77	State or local income tax deducted	_____
78	Sales tax you could have deducted	_____
79	Sales tax on major purchases	_____

Electronic Filing Information

80	Personal Identification Number (PIN)	_____
	Spouse's Personal Identification Number (PIN)	_____

Amounts Needed for Form 2210

81	Refundable Part of the American Opportunity Credit (F8863, L14)	_____
82	Adoption Credit	_____
83	Credit Determined Under Section 1341(a)(5)(B)	_____

Is this interest for:

☒ You ☐ Your spouse ☐ Both of you

What kind of interest is this:

☒ Interest reported on Form 1099-INT (fill in 1099-INT below)
(go to "Exempt Interest" below)

☐ Original issue discount/interest reported on Form 1099-OID
(fill in 1099-OID below)

☐ Seller-financed mortgage interest (go to "Seller-Financed
Mortgage Interest" below)

☐ Other interest (fill in 1099-INT below)

If you need to make any adjustments, also complete the "Adjustments" section at the bottom of this form.

Interest paid by: Pacific Northwest Bank

FORM 1099-INT

Box 1 - Interest income: \$ 380

Box 2 - Early withdrawal penalty: \$

Box 3 - Interest on U.S. Savings Bonds and Treasury obligations: \$ _____
Box 3 includes Series EE or I Savings Bond interest ☐

Box 4 - Federal income tax withheld: \$

Box 5 - Investment expenses: \$

Note: if you did not receive a Form 1099-INT, don't use boxes 6 and 7 below. Instead, report your foreign taxes on Form 1116.

Box 6 - Foreign tax paid: \$

Box 7 - Foreign country or U.S. possession:

Box 8 - Tax-exempt interest: \$

MINI-WORKSHEET FOR LINE 8

a.	Portion of this interest item that's exempt from state tax in the state for which you'll be filing a state tax return as a full-year resident	\$
----	---	----

Box 9 - Specified private activity bond interest: \$

Box 10 - Tax-exempt bond CUSIP no.:

Box 11 - State(s):

Box 12 - State identification number(s):

Box 13 - State tax withheld: \$ _____

FORM 1099-OID

Box 1 - Original issue discount for 2013: \$

Box 2 - Other periodic interest: \$

MINI-WORKSHEET FOR LINE 2

Answer the following question if you'll be using a state edition of our program to prepare your state tax return.

a.	Portion of box 2 from U.S. Treasury obligations	\$
-----------	---	----

Box 3 - Early withdrawal penalty: \$

Box 4 - Federal income tax withheld: \$

Box 5 - Foreign tax paid: \$

Box 6 - Foreign country or U.S. possession: \$

Box 8 -	Original issue discount on U.S. Treasury obligations:	\$
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Box 9 -	Investment expenses:	\$
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Box 10 - State(s):

Box 11 - State identification number(s): _____

Box 12 - State tax withheld: \$ _____
\$ _____

SELLER-FINANCED MORTGAGE INTEREST

If this interest is from a seller-financed mortgage and the buyer used the property as a personal residence, enter the following information:

Buyer's name _____
Buyer's Social Security number _____
Buyer's street address _____
Buyer's city _____
Buyer's state _____
Buyer's ZIP _____
Interest received in 2013 _____

Note: *Be sure to give your Social Security number to the buyer, or you may be subject to a \$50 penalty.*

ADJUSTMENTS

Enter below the type and amount of any adjustments that you may need to make to this interest item:

Type of adjustment:

- ☐ Nominee interest
- ☐ OID adjustment
- ☐ Accrued interest adjustment required
- ☐ Amortizable bond premium
- ☐ U.S. Savings Bond adjustment (not the same as Form 8815 adj.)
- ☐ Other adjustment (frozen deposit, etc.)

Amount of adjustment: _____

Is this W-2 for: ☒ Yourself ☐ Your spouse

Note: If your Form W-2 is marked "Void," do not enter it in here.
You should contact your employer to receive a corrected Form W-2.

☐ Check here if you received a W-2c correcting this W-2.

a. Employee's SSN: 477-34-4321 Void ☐

☐ Do NOT carry SSN from Background Wkst

Note: We do not carry ITINs from the Background Worksheet. You need to manually enter the Social Security number shown in box a of this W-2.

b. Employer ID No.	1. Wages, etc. 65,000	2. Fed Tax WH 6,000	
	3. Soc Sec Wages	4. SocSec Tax WH	
	5. Med. Wages	6. Med. Tax WH	
c. Employer/payer name, address, and zip code: Name1: Name2: Street: City: State: ZIP: <input type="checkbox"/> Check if foreign address. Note: See help panel for special data entry instructions.	7. Soc Sec Tips	8. Alloc. tips	
	d. Control Number	9.	10. Depndnt Care
	e. Employee's name (1st,Mi,last,Jr) Ivan I Incisor <input type="checkbox"/> Do NOT carry name from Bkgd Wkst	11. Nonqual plans	12. See instrns. Code Amt.
f. Employee's address and ZIP code Add1: 468 Mule Deer Lane Add2: Apt No. Town/City Spokane State & ZIP WA 99206 <input type="checkbox"/> Do NOT carry addr from Bkgd Wkst	13. Statutory employee .. <input type="checkbox"/> Retirement plan <input type="checkbox"/> Third party sick pay ... <input type="checkbox"/>	Note: If you have a Code P amount, complete the additional info. section below.	

Note: To e-file your address and your employer's address must be entered exactly as it appears on the W-2.

14. Other Description Other Amt.

15. State	Employer State Tax ID #	16. State Wages	17. State Tax	18. Local Wages	19. Local Tax	20. Locality Name

ADDITIONAL INFORMATION FOR BOX 8 (TIPS) TO CARRY TO FORM 4137

1. If you have records of all unreported tips you received in 2013, and you want to use that amount instead of Box 8, check "Enter my own tips."
☐ Use box 8
☐ Enter my own tips

2. Cash and charge tips equal to \$20 or more in a calendar month received but not reported to your employer

3. Cash and charge tips received but not reported to your employer because the total was less than \$20 in a calendar month

Note: The \$20 per month limitation on lines 2 and 3 applies separately to each employer.

Not
For
Filing

ADDITIONAL INFORMATION FOR BOX 10 (DEPENDENT CARE BENEFITS)

If an amount appears in box 10 above, check the box that applies.

The benefits were for:

1. A care provider you hired and paid ☐
2. A care provider hired and paid by your employer ☐
3. On-site care provided by your employer ☐

Did you contribute to a flexible spending account during 2013?

☐ Yes
☐ No

ADDITIONAL INFORMATION FOR BOX 11 (NONQUALIFIED/457(B) PLAN DISTRIBUTIONS)

- a. Check this box if you received a distribution from a nonqualified plan or nongovernmental Section 457(b) plan ☐
- b. Is the amount in box 11 above a distribution from a nonqualified plan or nongovernmental Section 457(b) plan?

☐ Yes
☐ No

- If Yes, we carry the amount from box 11 to line c below.
- If No, enter the distribution amount received from your nonqualified plan or nongovernmental 457(b) plan _____
- c. Distribution amount received from your nonqualified plan or nongovernmental 457(b) plan (from box 11 of W-2 or line b above) _____

ADDITIONAL INFORMATION FOR BOX 12 (CODE P)

If you have a box 12 Code P amount, you received employer-provided relocation benefits. If you moved only once, you will not need to make an additional entry. We'll carry that amount to copy 1 of Form 3903 when you check the box below.

Box 12 amounts with Code P _____

If you moved more than once, check the box and assign the box 12 amount to the copy of Form 3903 corresponding to the move for which these benefits were paid (for example, copy 2 for your 2nd move, copy 3 for your 3rd, etc.).

Number of copies of Form 3903 (moves) presently in your return _____ 0

Check here to assign to Form 3903 ☐ Form 3903 Copy # _____ 1

ADDITIONAL INFORMATION FOR BOX 13 (STATUTORY EMPLOYEES)

If the Statutory Employee box in box 13 is checked, we do not carry your box 1 wages to line 7 of Form 1040. Instead, we carry these wages to the Schedule C you designate here _____

ADDITIONAL MISCELLANEOUS INFORMATION

- ☐ **Non-standard W-2.** Check here if this W-2 is handwritten, looks like it was prepared on a typewriter, or appears to be altered in any way.
- ☐ **Minister/Religious Employee.** Check this box if you are a minister or religious employee with no Social Security and Medicare tax withheld on your W-2.

KIA