

Filing Checklist for 2016 Tax Return Filed On Standard Forms

Prepared on: 12/12/2016 07:32:16 am

Return: C:\Users\Smokey\Desktop\Tax\2016 Whittenburg\Chapter 5\John Williams 2016 Tax Return.T16

To file your 2016 tax return, simply follow these instructions:

Step 1. Sign and date the 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

- Schedule A
- Schedule B

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 Express, Express 9:00, Express 10:30, Express 12:00, Express Worldwide, Express Envelope, Import Express 10:30, Import Express 12:00, and Import Express Worldwide.
- FedEx First Overnight, Priority Overnight, Standard Overnight, 2 Day, International Next Flight Out, International Priority, International First, or International Economy.
- United Parcel Service Next Day Air Early AM, 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
- Last Year's Data Worksheet
- Form 1099-INT/OID
- Home Mortgage Interest Worksheet
- Charitable Worksheet
- Health Care Coverage
- Health Care Summary

2016 return information - Keep this for your records

Here is some additional information about your 2016 return. Keep this information with your records.

You will need your 2016 AGI to electronically sign your return next year.

Quick Summary

Income		\$207,575
Adjustments	-	\$33,000
Adjusted gross income		\$174,575
Deductions	-	\$56,525
Exemption(s)	-	\$4,050
Taxable income		\$114,000

Tax withheld or paid already		\$32,000
Actual tax due	-	\$24,957
Refund applied to next year		\$7,043

Refund

\$7,043

Form 1040 Department of the Treasury—Internal Revenue Service (99)		2016		OMB No. 1545-0074	IRS Use Only—Do not write or staple in this space.
For the year Jan. 1–Dec. 31, 2016, or other tax year beginning , 2016, ending , 20					
Your first name and initial John		Last name Williams		See separate instructions. Your social security number 555-94-9358	
If a joint return, spouse's first name and initial		Last name		Spouse's social security number	
Home address (number and street). If you have an APO, FPO, or MPO, see instructions. 1324 Forest Dr.		City, town or post office, state, and ZIP code. If you have a foreign address, also complete spaces below (see instructions). Reno NV 89501		Home address (number and street). If you have an APO, FPO, or MPO, see instructions. and on line 6c are correct.	
Foreign country name		Foreign province/state/county		Foreign postal code	
Filing Status		Presidential Election Campaign			
1 <input checked="" type="checkbox"/> Single		Check here if you, or your spouse if filing jointly, want \$3 to go to this fund. Checking a box below will not change your tax or refund <input type="checkbox"/> You <input type="checkbox"/> Spouse			
2 <input type="checkbox"/> Married filing jointly (even if only one had income)		4 <input type="checkbox"/> Head of household (with qualifying person). (See instr.) If the qualifying person is a child but not your dependent, enter this child's name here.			
3 <input type="checkbox"/> Married filing separately. Enter spouse's SSN above and full name here.		5 <input type="checkbox"/> Qualifying widow(er) with dependent child			
Exemptions		Boxes checked on 6a and 6b			
6a <input checked="" type="checkbox"/> Yourself. If someone can claim you as a dependent, do not check box 6a		1			
b <input type="checkbox"/> Spouse		No. of children on 6c who:			
c Dependents:		• lived with you			
(1) First name Last name social security number (2) Relationship to you (3) Age (4) X if under age 17 (5) Qualifying for child tax credit (see instructions)		• did not live with you due to divorce (see instructions)			
If more than four dependents, see instructions and check here <input type="checkbox"/>		Dependents on 6c not entered above			
d Total number of exemptions claimed		Add numbers on lines above 1			
Income		7 Wages, salaries, tips, etc. Attach Form(s) W-2			
8a Taxable interest. Attach Schedule B if required		7 194,000			
b Tax-exempt interest. Do not include on line 8a		8a 13,575			
9a Ordinary dividends. Attach Schedule B if required		9a 0			
b Qualified dividends		9b 0			
10 Taxable refunds, credits, or offsets of state and local income taxes		10 0			
11 Alimony received		11 0			
12 Business income or (loss). Attach Schedule C or C-EZ		12 0			
13 Capital gain or (loss). Attach Schedule D if required. If not required, check here <input type="checkbox"/>		13 0			
14 Other gains or (losses). Attach Form 4797		14 0			
15a IRA distributions		15b Taxable amount			
16a Pensions and annuities		16b Taxable amount			
17 Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E		17 0			
18 Farm income or (loss). Attach Schedule F		18 0			
19 Unemployment compensation		19 0			
20a Social security benefits		20b Taxable amount			
21 Other income. List type and amount		21 0			
22 Combine the amounts in the far right column for lines 7 through 21. This is your total income		22 207,575			
Adjusted Gross Income		23 Educator expenses			
24 Certain business expenses of reservists, performing artists, and fee-basis government officials. Attach Form 2106 or 2106-EZ		24 0			
25 Health savings account deduction. Attach Form 8889		25 0			
26 Moving expenses. Attach Form 3903		26 0			
27 Deductible part of self-employment tax. Attach Schedule SE		27 0			
28 Self-employed SEP, SIMPLE, and qualified plans		28 0			
29 Self-employed health insurance deduction		29 0			
30 Penalty on early withdrawal of savings		30 0			
31a Alimony paid b Recipient's SSN 554-44-5555		31a 33,000			
32 IRA deduction		32 0			
33 Student loan interest deduction		33 0			
34 Tuition and fees. Attach Form 8859		34 0			
35 Domestic production activities deduction. Attach Form 8903		35 0			
36 Add lines 23 through 35		36 33,000			
37 Subtract line 36 from line 22. This is your adjusted gross income		37 174,575			
KIA For Disclosure, Privacy Act, and Paperwork Reduction Act Notice, see separate instructions. Form 1040 (2016)					

Tax and Credits

Standard Deduction for—

• People who check any box on line 39a or 39b or who can be claimed as a dependent, see instructions.

• All others:
Single or Married filing separately, \$6,300
Married filing jointly or Qualifying widow(er), \$12,600
Head of household, \$9,300

38	Amount from line 37 (adjusted gross income)	38	174,575
39a	Check <input type="checkbox"/> You were born before January 2, 1952, <input type="checkbox"/> Blind. <input type="checkbox"/> Spouse was born before January 2, 1952, <input type="checkbox"/> Blind. Total boxes checked <input type="checkbox"/> 39a		
b	If your spouse itemizes on a separate return or you were a dual-status alien, check here <input type="checkbox"/> 39b		
40	Itemized deductions (from Schedule A) or your standard deduction (see instructions)	40	56,525
41	Subtract line 40 from line 38	41	118,050
42	Excess advance premium tax credit repayment. Attach Form 8962	42	0
43	Taxable income. Subtract line 42 from line 41. If line 42 is more than line 41, enter -0-	43	118,050
44	Tax (see instructions). Check if any from: a <input type="checkbox"/> Form(s) 8814 b <input type="checkbox"/> Form 4972 c <input type="checkbox"/>	44	24,957
45	Alternative minimum tax (see instructions). Attach Form 6251	45	0
46	Excess advance premium tax credit repayment. Attach Form 8962	46	
47	Add lines 44, 45, and 46	47	24,957
48	Foreign tax credit. Attach Form 1116 if required	48	0
49	Credit for child and dependent care expenses. Attach Form 2441	49	
50	Education credits from Form 8863, line 19	50	
51	Retirement savings contributions credit. Attach Form 8880	51	0
52	Child tax credit. Attach Schedule 8812, if required	52	
53	Residential energy credits. Attach Form 5695	53	
54	Other credits from Form: a <input type="checkbox"/> 3800 b <input type="checkbox"/> 8801 c <input type="checkbox"/>	54	0
55	Add lines 48 through 54. These are your total credits	55	0
56	Subtract line 55 from line 47. If line 55 is more than line 47, enter -0-	56	24,957

Other Taxes

57	Self-employment tax. Attach Schedule SE	57	0
58	Unreported social security and Medicare tax from Form: a <input type="checkbox"/> 4137 b <input type="checkbox"/> 8919	58	0
59	Additional tax on IRAs, other qualified retirement plans, etc. Attach Form 5329 if required	59	0
60a	Household employment taxes from Schedule H	60a	0
b	First-time homebuyer credit repayment. Attach Form 5405 if required	60b	0
61	Health care: individual responsibility (see instructions) Full-year coverage <input checked="" type="checkbox"/>	61	
62	Taxes from: a <input type="checkbox"/> Form 8959 b <input type="checkbox"/> Form 8960 c <input type="checkbox"/> Instructions; enter code(s)	62	0
63	Add lines 56 through 62. This is your total tax	63	24,957

Payments

If you have a qualifying child, attach Schedule EIC.

64	Federal income tax withheld from Forms W-2 and 1099	64	32,000
65	2016 estimated tax payments and amount applied from 2015 return	65	0
66a	Earned income credit (EIC)	66a	
b	Nontaxable combat pay election	66b	
67	Additional child tax credit. Attach Schedule 8812	67	
68	American opportunity credit from Form 8863, line 8	68	
69	Net premium tax credit. Attach Form 8962	69	
70	Excess social security and tier 1 RRTA tax withheld	70	0
71	Excess social security and tier 1 RRTA tax withheld	71	0
72	Credit for federal tax on fuels. Attach Form 4136	72	
73	Credits from Form: a <input type="checkbox"/> 2439 b <input type="checkbox"/> Reserved c <input type="checkbox"/> 8885 d <input type="checkbox"/>	73	0
74	Add lines 64, 65, 66a, and 67 through 73. These are your total payments	74	32,000

Refund

Direct deposit? See instructions.

75	If line 74 is more than line 63, subtract line 63 from line 74. This is the amount you overpaid	75	7,043
76a	Amount of line 75 you want refunded to you. If Form 8888 is attached, check here <input type="checkbox"/>	76a	7,043
b	Routing number XXXXXXXXXX	c	Type: <input checked="" type="checkbox"/> Checking <input type="checkbox"/> Savings
d	Account number XXXXXXXXXXXXXXXXXXXX		
77	Amount of line 75 you want applied to your 2017 estimated tax	77	0

Amount You Owe

78	Amount you owe. Subtract line 74 from line 63. For details on how to pay, see instructions	78	
79	Estimated tax penalty (see instructions)	79	

Third Party Designee

Do you want to allow another person to discuss this return with the IRS (see instructions)? ☐ Yes. Complete below ☒ No

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

Sign Here

Joint return? See instructions. Keep a copy for your records.

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

Your signature _____ Date _____ Your occupation _____ Daytime phone number _____

Spouse's signature, if a joint return, both must sign. _____ Date _____ Spouse's occupation _____ If the IRS sent you an Identity Protection Notice, sign here. _____

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed PTIN
Firm's name	Firm's EIN	Phone no.	
Firm's address			

**SCHEDULE A
(Form 1040)**

Department of the Treasury
Internal Revenue Service (99)

Name(s) shown on Form 1040

John

Williams

Itemized Deductions

► Information about Schedule A and its separate instructions is at www.irs.gov/schedulea.

► Attach to Form 1040.

OMB No. 1545-0074

2016

Attachment
Sequence No. **07**

Your social security number
555-94-9358

**Medical
and
Dental
Expenses**

Caution. Do not include expenses reimbursed or paid by others.

Medical and dental expenses (see instructions)

2 Enter amount from Form 1040, line 38 2 174,575

3 Multiply line 2 by 10% (0.10). But if either you or your spouse was born before January 2, 1952, multiply line 2 by 7.5% (0.075) instead 3 17,458

4 Subtract line 3 from line 1. If line 3 is more than line 1, enter -0- 4 0

**Taxes You
Paid**

5 State and local (check only one box):

a. ☐ Income taxes, or

b. ☒ General sales taxes

6 Real estate taxes (see instructions) 6 2,640

7 Personal property taxes 7 0

8 Other taxes. List type and amount ► 8 0

9 Add lines 5 through 8 9 6,200

**Interest
You Paid**

10 Home mortgage interest and points reported to you on Form 1098 10 18,900

11 Other mortgage interest not reported to you on Form 1098. If paid to the person from whom you bought the home, see instructions and show that person's name, identifying no., and address ► 11 0

12 Points not reported to you on Form 1098. See instructions for special rules 12 0

13 Mortgage insurance premiums (see instructions) 13 0

14 Investment interest. Attach Form 4952 if required. (See instructions.) 14 0

15 Add lines 10 through 14 15 18,900

**Gifts to
Charity**

If you made a gift and got a benefit for it, see instructions.

16 Gifts by cash or check. If you made any gift of \$250 or more, see instructions 16 31,425

17 Other than by cash or check. If any gift of \$250 or more, see instructions. You must attach Form 8283 and a copy of the receipt. 17 0

18 Carryover from prior year 18 0

19 Add lines 16 through 18 19 31,425

**Casualty and
Theft Losses**

20 Casualty or theft loss(es). Attach Form 4684. (See instructions.) 20 0

**Job Expenses
and Certain
Miscellaneous
Deductions**

21 Unreimbursed employee expenses—job travel, union dues, job education, etc. Attach Form 2106 or 2106-EZ if required. (See instructions.) ► 21 0

22 Tax preparation fees 22 900

23 Other expenses—investment, safe deposit box, etc. List type and amount ► 23 0

24 Add lines 21 through 23 24 900

25 Enter amount from Form 1040, line 38 25 174,575

26 Multiply line 25 by 2% (0.02) 26 3,492

27 Subtract line 26 from line 24. If line 26 is more than line 24, enter -0- 27 0

**Other
Miscellaneous
Deductions**

28 Other—from list in instructions. List type and amount ► 28 0

**Total
Itemized
Deductions**

29 Is Form 1040, line 38, over \$5,650?

☐ No. Your deduction is not limited. Add the amounts in the far right column for lines 4 through 28. Also, enter this amount on Form 1040, line 40.

☒ Yes. Your deduction may be limited. See the Itemized Deductions Worksheet in the instructions to figure the amount to enter.

30 If you elect to itemize deductions even though they are less than your standard deduction, check here ► 30 56,525

SCHEDULE B
(Form 1040A or 1040)

Department of the Treasury
Internal Revenue Service (99)

Name(s) shown on return
John Williams

Interest and Ordinary Dividends

▶ Attach to Form 1040A or 1040.

▶ Information about Schedule B and its instructions is a www.irs.gov/scheduleb.

OMB No. 1545-0074

2016
Attachment
Sequence No. **08**

Your social security number
555-94-9358

Part I
Interest

- 1** List name of payer. If any interest is from a seller-financed mortgage and the buyer used the property as a personal residence, see instructions and list this interest first. Also, show that buyer's social security number and address.

Nevada National Bank

(See instructions for Schedule B, and the instructions for Form 1040A, or Form 1040, line 8a.)

Note: If you 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 form.

DRAFT FORM -- DO NOT FILE.

Final form will be available through a program update.

- 2** Add the amounts on line 1
- 3** Excludable interest on series EE and I U.S. savings bonds issued after 1989. Attach Form 8815
- 4** Subtract line 3 from line 2. Enter the result here and on Form 1040A, or Form 1040, line 8a ▶

Note: If line 4 is over \$1,500, you must complete Part III.

Amount

13,575

Part II

Ordinary Dividends

(See instructions for Schedule B, and the instructions for Form 1040A, or Form 1040, line 9a.)

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 on that form.

- 5** List name of payer ▶

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Final form will be available through a program update.

- 6** Add the amounts on line 5. Enter the total here and on Form 1040A, or Form 1040, line 9a ▶

Note. If line 6 is over \$1,500, you must complete Part III.

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.

Part III
Foreign Accounts and Trusts
(See instructions.)

- 7a** At any time during 2016, did you have a financial interest in or signature authority over a financial account (such as a bank account, securities account, or brokerage account) located in a foreign country? See instruction
- If "Yes," are you required to file FinCEN Form 114, Report of Foreign Bank and Financial Assets (FBAR), to your financial institution?
- b** If you are required to file FinCEN Form 114, enter the name of the foreign country where the financial account is located ▶
- 8** During 2016, did you receive a distribution from, or were you the grantor of, or transferor to, a foreign trust? If "Yes," you may have to file Form 3520. See instructions.

Yes	No
	X
	X

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