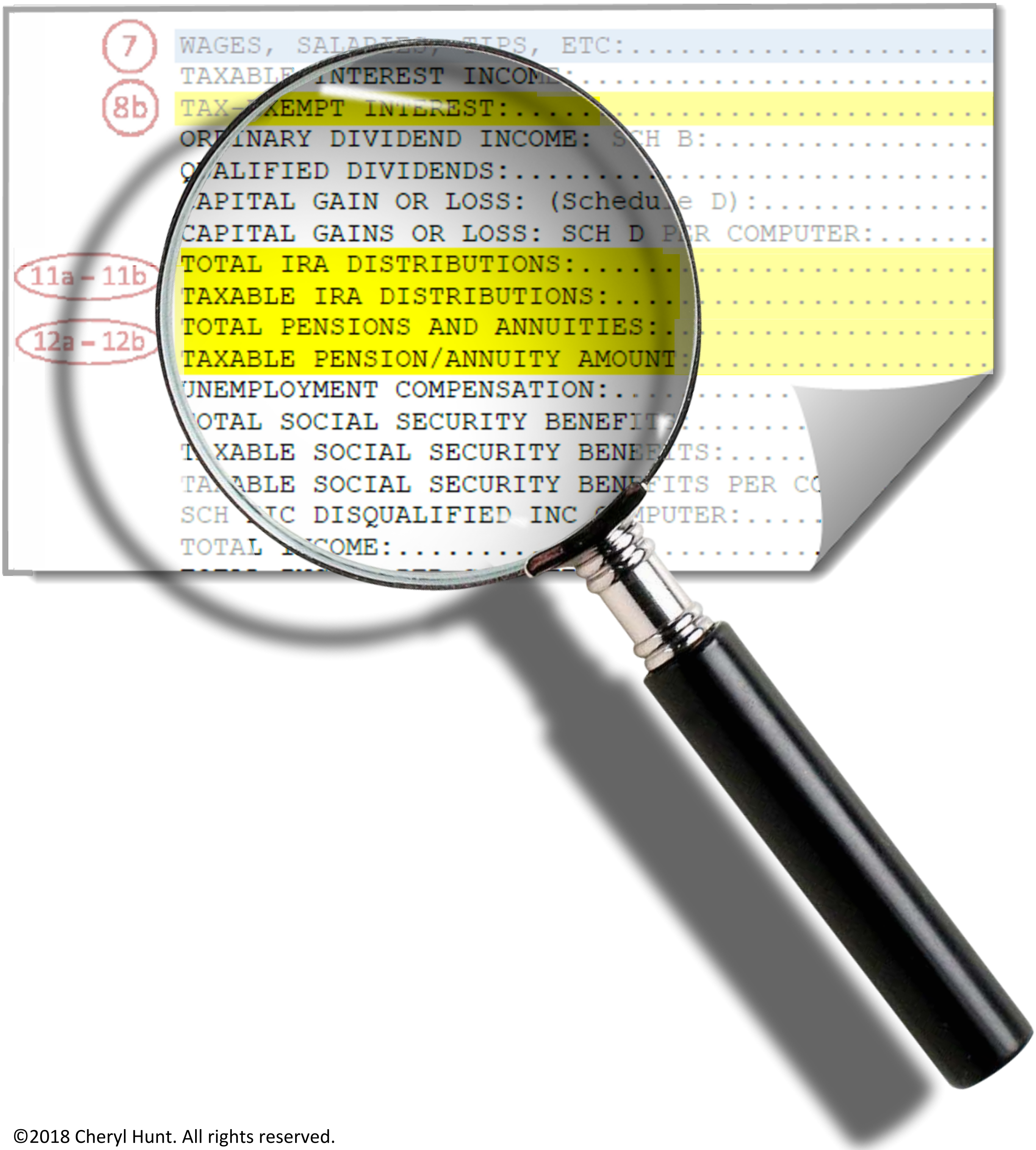
Tax Transcript Decoder©

COMPARISON OF 2016 TAX RETURN AND TAX TRANSCRIPT DATA
2018-2019 Award Year (*version 2.0*)



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Comparison of 2016 Tax Return and Tax Transcript Data

FAFSA instructions direct applicants to obtain information from certain lines on IRS income tax returns, which differ based on whether the tax filer completed a Form 1040, 1040A or 1040EZ. For the most part, the instructions identify the relevant lines on the tax return 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 sample tax returns and corresponding tax return transcripts. 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 2018-2019 award year.

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

Tax Return Line Items for 2018-2019 Verification

	2016 1040 EZ	2016 1040A	2016 1040
AGI	4	21	37
Income tax paid	10	28 minus 36	56 minus 46
Education credits		33	50
IRA deductions and payments		17	28 plus 32
Tax-exempt interest income	N/A	8b	8b
Untaxed portions of IRA distributions*		11a minus 11b	15a minus 15b
Untaxed portions of pensions*		12a minus 12b	16a minus 16b

Tax Return Transcript Line Items for 2018-2019 Verification

	2016 1040 EZ	2016 1040A	2016 1040
AGI	"ADJUSTED GROSS INCOME PER COMPUTER"		
Income tax paid**	"TOTAL TAX LIABILITY TP FIGURES PER COMPUTER" ***less*** "HEALTH CARE: INDIVIDUAL RESPONSIBILITY"	"TENTATIVE TAX PER COMPUTER" ***less*** "TOTAL CREDITS PER COMPUTER"	"INCOME TAX AFTER CREDITS PER COMPUTER" ***less*** "EXCESS ADVANCE PREMIUM TAX CREDIT REPAYMENT AMOUNT"
Education credits		"EDUCATION CREDIT PER COMPUTER"	
IRA deductions and payments		"IRA DEDUCTION PER COMPUTER"	"KEOGH/SEP CONTRIBUTION DEDUCTION" ***plus*** "IRA DEDUCTION PER COMPUTER"
Tax-exempt interest income	N/A	"TAX-EXEMPT INTEREST"	
Untaxed portions of IRA distributions*		"TOTAL IRA DISTRIBUTIONS" ***less*** "TAXABLE IRA DISTRIBUTIONS"	
Untaxed portions of pensions*		"TOTAL PENSIONS AND ANNUITIES" ***less*** "TAXABLE PENSION/ANNUITY AMOUNT"	

Exclude rollovers.

*****For all transcripts, if income tax paid is negative, enter '0' (zero).***

Sample IRS Form 1040EZ: Chloe Hernandez

Department of the Treasury—Internal Revenue Service

Form **1040EZ** **Income Tax Return for Single and Joint Filers With No Dependents** (99) **2016** OMB No. 1545-0074

Your first name and initial: Chloe G	Last name: Hernandez	**Your social security number:** AAA AA AAAA
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 a P.O. box, see instructions. 1629 F. Street	Apt. no.	▲ Make sure the SSN(s) above are correct.
City, town or post office, state, and ZIP code. If you have a foreign address, also complete spaces below (see instructions). Hadley, MA 99999		**Presidential Election Campaign** 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. ☐ You ☐ Spouse
Foreign country name	Foreign province/state/county / Foreign postal code	

Income

Attach Form(s) W-2 here.

Enclose, but do not attach, any payment.

1	Wages, salaries, and tips. This should be shown in box 1 of your Form(s) W-2. Attach your Form(s) W-2.	1	3,253 00
2	Taxable interest. If the total is over $1,500, you cannot use Form 1040EZ.	2	
3	Unemployment compensation and Alaska Permanent Fund dividends (see instructions).	3	
4	Add lines 1, 2, and 3. This is your **adjusted gross income.**	4	3,253 00
5	If someone can claim you (or your spouse if a joint return) as a dependent, check the applicable box(es) below and enter the amount from the worksheet on back. ☑ **You** ☐ **Spouse** If no one can claim you (or your spouse if a joint return), enter $10,350 if **single;** $20,700 if **married filing jointly.** See back for explanation.	5	3,603 00
6	Subtract line 5 from line 4. If line 5 is larger than line 4, enter -0-. This is your **taxable income.** ▶	6	0 00

Payments, Credits, and Tax

7	Federal income tax withheld from Form(s) W-2 and 1099.	7	218 05
8a	**Earned income credit (EIC)** (see instructions)	8a	
b	Nontaxable combat pay election. 8b		
9	Add lines 7 and 8a. These are your **total payments and credits.** ▶	9	218 05
10	**Tax.** Use the amount on **line 6 above** to find your tax in the tax table in the instructions. Then, enter the tax from the table on this line.	10	0 00
11	Health care: individual responsibility (see instructions) Full-year coverage ☐	11	
12	Add lines 10 and 11. This is your **total tax.**	12	0 00

Refund

Have it directly deposited! See instructions and fill in 13b, 13c, and 13d, or Form 8888.

13a	If line 9 is larger than line 12, subtract line 12 from line 9. This is your **refund.** If Form 8888 is attached, check here ▶ ☐	13a	218 05
▶ b	Routing number X X X X X X X X X ▶ **c** Type: ☑ Checking ☐ Savings		
▶ d	Account number X X X X X X X X X X X X X X X X X		

Amount You Owe

14	If line 12 is larger than line 9, subtract line 9 from line 12. This is the **amount you owe.** For details on how to pay, see instructions. ▶	14	

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, to the best of my knowledge and belief, it is true, correct, and accurately lists all amounts and sources of income I received during the tax year. Declaration of preparer (other than the taxpayer) is based on all information of which the preparer has any knowledge.

Your signature	Date	Your occupation	Daytime phone number
Chloe G. Hernandez	2/15/2017	Student	(555) 529-1614
Spouse's signature. If a joint return, **both** must sign.	Date	Spouse's occupation	If the IRS sent you an Identity Protection PIN, enter it here (see inst.)

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check ☐ if self-employed	PTIN
Firm's name ▶		Firm's EIN ▶		
Firm's address ▶		Phone no.		

For Disclosure, Privacy Act, and Paperwork Reduction Act Notice, see instructions. Cat. No. 11329W Form **1040EZ** (2016)

Use this form if

- Your filing status is single or married filing jointly. If you are not sure about your filing status, see instructions.
- You (and your spouse if married filing jointly) were under age 65 and not blind at the end of 2016. If you were born on January 1, 1952, you are considered to be age 65 at the end of 2016.
- You do not claim any dependents. For information on dependents, see Pub. 501.
- Your taxable income (line 6) is less than $100,000.
- You do not claim any adjustments to income. For information on adjustments to income, use the Tax Topics listed under *Adjustments to Income* at *www.irs.gov/taxtopics* (see instructions).
- The only tax credit you can claim is the earned income credit (EIC). The credit may give you a refund even if you do not owe any tax. You do not need a qualifying child to claim the EIC. For information on credits, use the Tax Topics listed under *Tax Credits* at *www.irs.gov/taxtopics* (see instructions). If you received a Form 1098-T or paid higher education expenses, you may be eligible for a tax credit or deduction that you must claim on Form 1040A or Form 1040. For more information on tax benefits for education, see Pub. 970.

Caution: If you can claim the premium tax credit or you received any advance payment of the premium tax credit in 2016, you must use Form 1040A or Form 1040.

- You had only wages, salaries, tips, taxable scholarship or fellowship grants, unemployment compensation, or Alaska Permanent Fund dividends, and your taxable interest was not over $1,500. But if you earned tips, including allocated tips, that are not included in box 5 and box 7 of your Form W-2, you may not be able to use Form 1040EZ (see instructions). If you are planning to use Form 1040EZ for a child who received Alaska Permanent Fund dividends, see instructions.

Filling in your return

If you received a scholarship or fellowship grant or tax-exempt interest income, such as on municipal bonds, see the instructions before filling in the form. Also, see the instructions if you received a Form 1099-INT showing federal income tax withheld or if federal income tax was withheld from your unemployment compensation or Alaska Permanent Fund dividends.

For tips on how to avoid common mistakes, see instructions.

Remember, you must report all wages, salaries, and tips even if you do not get a Form W-2 from your employer. You must also report all your taxable interest, including interest from banks, savings and loans, credit unions, etc., even if you do not get a Form 1099-INT.

Worksheet for Line 5 — Dependents Who Checked One or Both Boxes

Use this worksheet to figure the amount to enter on line 5 if someone can claim you (or your spouse if married filing jointly) as a dependent, even if that person chooses not to do so. To find out if someone can claim you as a dependent, see Pub. 501.

A. Amount, if any, from line 1 on front	3,253.00		
	+ 350.00 Enter total ▶	**A.**	3,603
B. Minimum standard deduction		**B.**	1,050
C. Enter the **larger** of line A or line B here		**C.**	3,603
D. Maximum standard deduction. If **single,** enter $6,300; if **married filing jointly,** enter $12,600		**D.**	6,300
E. Enter the **smaller** of line C or line D here. This is your standard deduction		**E.**	3,603
F. Exemption amount. • If single, enter -0-. • If married filing jointly and — —both you and your spouse can be claimed as dependents, enter -0-. —only one of you can be claimed as a dependent, enter $4,050.		**F.**	0
G. Add lines E and F. Enter the total here and on line 5 on the front		**G.**	3,603

(keep a copy for your records)

If you did not check any boxes on line 5, enter on line 5 the amount shown below that applies to you.

- Single, enter $10,350. This is the total of your standard deduction ($6,300) and your exemption ($4,050).
- Married filing jointly, enter $20,700. This is the total of your standard deduction ($12,600), your exemption ($4,050), and your spouse's exemption ($4,050).

Mailing Return

Mail your return by **April 18, 2017.** Mail it to the address shown on the last page of the instructions.

Sample Tax Transcript 1040EZ: Chloe Hernandez

Internal Revenue Service

United States Department of the Treasury

This Product Contains Sensitive Taxpayer Data

Request Date: 01-13-2018
Response Date: 01-13-2018
Tracking Number: XXXXXXXXXXXX

Tax Return Transcript

SSN Provided: AAA-AA-AAAA
Tax Period Ending: Dec. 31, 2016

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: AAA-AA-AAAA

NAME(S) SHOWN ON RETURN: CHLOE G HERNANDEZ
ADDRESS: 1629 F. St
HADLEY, 99999

FILING STATUS:	Single
FORM NUMBER:	1040EZ
CYCLE POSTED:	20171502
RECEIVED DATE:	Apr.15,2017
REMITTANCE:	$0.00
(5) EXEMPTION NUMBER:	0
PTIN:	
PREPARER EIN:	

Income

(1) WAGES, SALARIES, TIPS, ETC:	$3,253.00
TAXABLE INTEREST INCOME:	$0.00
TAX-EXEMPT INTEREST:	$0.00
UNEMPLOYMENT COMPENSATION:	$0.00

Adjustments to Income

ADJUSTED GROSS INCOME:	$3,253.00
(4) ADJUSTED GROSS INCOME PER COMPUTER:	$3,253.00
RECOMPUTED ADJUSTED GROSS INCOME PER COMPUTER:	$0.00
DEPENDENT ON ANOTHER TP:	YES
FORM 1040EZ DEDUCTION AND EXEMPTION PER COMPUTER:	$3,603.00

Tax and Credits

TAXABLE INCOME:	$0.00
TAXABLE INCOME PER COMPUTER:	$0.00

Other Taxes

TOTAL TAX LIABILITY TP FIGURES:	$0.00
* **TOTAL TAX LIABILITY TP FIGURES PER COMPUTER:**	**$0.00**

Payments

FEDERAL INCOME TAX WITHHELD:	$218.05
OTHER PAYMENT CREDIT AMOUNT:	$0.00
EARNED INCOME CREDIT:	$0.00
EARNED INCOME CREDIT PER COMPUTER:	$0.00
EARNED INCOME CREDIT NONTAXABLE COMBAT PAY:	$0.00
** **HEALTH CARE: INDIVIDUAL RESPONSIBILITY:**	**$0.00**
HEALTH CARE FULL-YEAR COVERAGE INDICATOR:	0

* **"Total Tax Liability TP Figures Per Computer"**
− ** **"Health Care: Individual Responsibility"**
(10) = *** **Income Tax Paid**

***If Income Tax Paid is negative, enter '0' (zero).*

Tracking Number: XXXXXXXXXXXX

SMALL EMPLOYER HEALTH INSURANCE PER COMPUTER:..$0.00
TOTAL PAYMENTS:..$218.05
TOTAL PAYMENTS PER COMPUTER:...$218.05

Refund or Amount Owed

REFUND AMOUNT:...$-218.05
BAL DUE/OVER PYMT USING TP FIG PER COMPUTER:...$-218.05
BAL DUE/OVER PYMT USING COMPUTER FIGURES:..$-218.05
FORM 8888 TOTAL REFUND PER COMPUTER:...$0.00

Third Party Designee

THIRD PARTY DESIGNEE ID NUMBER:..
AUTHORIZATION INDICATOR:...0
THIRD PARTY DESIGNEE NAME:...

This Product Contains Sensitive Taxpayer Data

Sample IRS Form 1040A: Adam Brady

Form **1040A** | Department of the Treasury—Internal Revenue Service | **U.S. Individual Income Tax Return** (99) | **2016** | IRS Use Only—Do not write or staple in this space.

Your first name and initial	Last name	OMB No. 1545-0074 / Your social security number
Adam E	Brady	B B B - B B - B B B B
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 a P.O. box, see instructions.	Apt. no.	▲ Make sure the SSN(s) above and on line 6c are correct.
425 Midway		

City, town or post office, state, and ZIP code. If you have a foreign address, also complete spaces below (see instructions).
Durham, NC 99999

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

Presidential Election Campaign
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. ☐ You ☐ Spouse

Filing status
Check only one box.
1 ☐ Single
2 ☐ Married filing jointly (even if only one had income)
3 ☐ Married filing separately. Enter spouse's SSN above and full name here. ▶
4 ☑ Head of household (with qualifying person). (See instructions.) If the qualifying person is a child but not your dependent, enter this child's name here. ▶
5 ☐ Qualifying widow(er) with dependent child (see instructions)

Exemptions
6a ☑ **Yourself.** If someone can claim you as a dependent, **do not** check box 6a.
b ☐ **Spouse**
Boxes checked on 6a and 6b: 1

c **Dependents:**

If more than six dependents, see instructions.

(1) First name Last name	(2) Dependent's social security number	(3) Dependent's relationship to you	(4) ✓ if child under age 17 qualifying for child tax credit (see instructions)
Patrick Brady	C C C - C C - C C C C	Son	☑
			☐
			☐
			☐
			☐
			☐

No. of children on 6c who:
• lived with you: 1
• did not live with you due to divorce or separation (see instructions):
Dependents on 6c not entered above:
Add numbers on lines above ▶ 2

d Total number of exemptions claimed.

Income

Attach Form(s) W-2 here. Also attach Form(s) 1099-R if tax was withheld.

If you did not get a W-2, see instructions.

7	Wages, salaries, tips, etc. Attach Form(s) W-2.	7	43,455 00
8a	**Taxable** interest. Attach Schedule B if required.	8a	
b	**Tax-exempt** interest. **Do not** include on line 8a.	8b	
9a	Ordinary dividends. Attach Schedule B if required.	9a	
b	Qualified dividends (see instructions).	9b	
10	Capital gain distributions (see instructions).	10	
11a	IRA distributions. 11a	11b Taxable amount (see instructions). 11b	
12a	Pensions and annuities. 12a	12b Taxable amount (see instructions). 12b	
13	Unemployment compensation and Alaska Permanent Fund dividends.	13	
14a	Social security benefits. 14a	14b Taxable amount (see instructions). 14b	
15	Add lines 7 through 14b (far right column). This is your **total income.** ▶	15	43,455 00

Adjusted gross income

16	Educator expenses (see instructions).	16	
17	IRA deduction (see instructions).	17	
18	Student loan interest deduction (see instructions).	18	
19	Tuition and fees. Attach Form 8917.	19	
20	Add lines 16 through 19. These are your **total adjustments.**	20	
21	Subtract line 20 from line 15. This is your **adjusted gross income.** ▶	21	43,455 00

For Disclosure, Privacy Act, and Paperwork Reduction Act Notice, see separate instructions. Cat. No. 11327A Form **1040A** (2016)

Tax, credits, and payments

22	Enter the amount from line 21 (adjusted gross income).			22	43,455 00
23a	Check if: ☐ **You** were born before January 2, 1952, ☐ Blind / ☐ **Spouse** was born before January 2, 1952, ☐ Blind } **Total boxes checked** ▶ 23a				0
b	If you are married filing separately and your spouse itemizes deductions, check here ▶ 23b ☐				
24	Enter your **standard deduction.**			24	9,300 00
25	Subtract line 24 from line 22. If line 24 is more than line 22, enter -0-.			25	34,155 00
26	**Exemptions.** Multiply $4,050 by the number on line 6d.			26	8,100 00
27	Subtract line 26 from line 25. If line 26 is more than line 25, enter -0-. This is your **taxable income.** ▶			27	26,055 00
28	**Tax,** including any alternative minimum tax (see instructions).	28	3,249 00		
29	Excess advance premium tax credit repayment. Attach Form 8962.	29			
30	Add lines 28 and 29.			30	3,249 00
31	Credit for child and dependent care expenses. Attach Form 2441.	31	600 00		
32	Credit for the elderly or the disabled. Attach Schedule R.	32			
33	Education credits from Form 8863, line 19.	33			
34	Retirement savings contributions credit. Attach Form 8880.	34			
35	Child tax credit. Attach Schedule 8812, if required.	35	1,000 00		
36	Add lines 31 through 35. These are your **total credits.**			36	1,600 00
37	Subtract line 36 from line 30. If line 36 is more than line 30, enter -0-.			37	1,649 00
38	Health care: individual responsibility (see instructions). Full-year coverage ☑			38	
39	Add line 37 and line 38. This is your **total tax.**			39	1,649 00
40	Federal income tax withheld from Forms W-2 and 1099.	40	4,270		
41	2016 estimated tax payments and amount applied from 2015 return.	41			
42a	**Earned income credit (EIC).**	42a			
b	Nontaxable combat pay election. 42b				
43	Additional child tax credit. Attach Schedule 8812.	43			
44	American opportunity credit from Form 8863, line 8.	44			
45	Net premium tax credit. Attach Form 8962.	45			
46	Add lines 40, 41, 42a, 43, 44, and 45. These are your **total payments.** ▶			46	4,270 00

Standard Deduction for—
- People who check any box on line 23a or 23b **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

If you have a qualifying child, attach Schedule EIC.

Line 28
− Line 36
= Income Tax Paid

Refund

47	If line 46 is more than line 39, subtract line 39 from line 46. This is the amount you **overpaid.**	47	2,621 00
48a	Amount of line 47 you want **refunded to you.** If Form 8888 is attached, check here ▶ ☐	48a	2,621 00
▶ b	Routing number X X X X X X X X X ▶ **c** Type: ☑ Checking ☐ Savings		
▶ d	Account number X X X X X X X X X X X X X X X X X		
49	Amount of line 47 you want **applied to your 2017 estimated tax.**	49	

Direct deposit? See instructions and fill in 48b, 48c, and 48d or Form 8888.

Amount you owe

50	**Amount you owe.** Subtract line 46 from line 39. For details on how to pay, see instructions. ▶	50	
51	Estimated tax penalty (see instructions).	51	

Third party designee

Do you want to allow another person to discuss this return with the IRS (see instructions)? ☐ **Yes.** Complete the following. ☐ **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 accurately list all amounts and sources of income I received during the tax year. Declaration of preparer (other than the taxpayer) is based on all information of which the preparer has any knowledge.

Your signature	Date	Your occupation	Daytime phone number
Adam E. Brady	1/18/2017	Trainer	(555) 541-6200
Spouse's signature. If a joint return, **both** must sign.	Date	Spouse's occupation	If the IRS sent you an Identity Protection PIN, enter it here (see inst.)

Paid preparer use only

Print/type preparer's name	Preparer's signature	Date	Check ▶ ☐ if self-employed	PTIN
Firm's name ▶			Firm's EIN ▶	
Firm's address ▶			Phone no.	

Form **1040A** (2016)

Internal Revenue Service

United States Department of the Treasury

This Product Contains Sensitive Taxpayer Data

Request Date: 01-02-2018
Response Date: 01-02-2018
Tracking Number: XXXXXXXXXXXX

Tax Return Transcript

SSN Provided: BBB-BB-BBBB
Tax Period Ending: Dec. 31, 2016

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

NAME(S) SHOWN ON RETURN: ADAM E. BRADY — SSN: BBB-BB-BBBB
SPOUSE SSN:

ADDRESS: 425 MIDWAY
DURHAM, NC 99999

	FILING STATUS:	HEAD OF HOUSEHOLD
	FORM NUMBER:	1040A
	CYCLE POSTED:	20170502
	RECEIVED DATE:	Apr.15, 2017
	REMITTANCE:	$0.00
6d	EXEMPTION NUMBER:	2
6c	DEPENDENT 1 NAME CTRL:	BRAD
	DEPENDENT 1 SSN:	CCC-CC-CCCC
	DEPENDENT 2 NAME CTRL:	
	DEPENDENT 2 SSN:	
	DEPENDENT 3 NAME CTRL:	
	DEPENDENT 3 SSN:	
	DEPENDENT 4 NAME CTRL:	
	DEPENDENT 4 SSN:	
	PTIN:	
	PREPARER EIN:	

Income

7	WAGES, SALARIES, TIPS, ETC:	$43,455.00
	TAXABLE INTEREST INCOME:	$0.00
8b	TAX-EXEMPT INTEREST:	$0.00
	ORDINARY DIVIDEND INCOME: SCH B:	$0.00
	QUALIFIED DIVIDENDS:	$0.00
	CAPITAL GAIN OR LOSS: (Schedule D):	$0.00
	CAPITAL GAINS OR LOSS: SCH D PER COMPUTER:	$0.00
11a – 11b	TOTAL IRA DISTRIBUTIONS:	$0.00
	TAXABLE IRA DISTRIBUTIONS:	$0.00
12a – 12b	TOTAL PENSIONS AND ANNUITIES:	$0.00
	TAXABLE PENSION/ANNUITY AMOUNT:	$0.00
	UNEMPLOYMENT COMPENSATION:	$0.00
	TOTAL SOCIAL SECURITY BENEFITS:	$0.00
	TAXABLE SOCIAL SECURITY BENEFITS:	$0.00
	TAXABLE SOCIAL SECURITY BENEFITS PER COMPUTER:	$0.00
	SCH EIC DISQUALIFIED INC COMPUTER:	$0.00
	TOTAL INCOME:	$43,455.00
	TOTAL INCOME PER COMPUTER:	$43,455.00

Adjustments to Income

	EDUCATOR EXPENSES:	$0.00
	EDUCATOR EXPENSES PER COMPUTER:	$0.00
	EARLY WITHDRAWAL OF SAVINGS PENALTY:	$0.00
	IRA DEDUCTION:	$0.00
17	IRA DEDUCTION PER COMPUTER:	$0.00

STUDENT LOAN INTEREST DEDUCTION:....................$0.00
STUDENT LOAN INTEREST DEDUCTION PER COMPUTER:....................$0.00
TUITION AND FEES DEDUCTION:....................$0.00
TUITION AND FEES DEDUCTION PER COMPUTER:....................$0.00
TOTAL ADJUSTMENTS:....................$0.00
TOTAL ADJUSTMENTS PER COMPUTER:....................$0.00
ADJUSTED GROSS INCOME:....................$43,455.00
21 ADJUSTED GROSS INCOME PER COMPUTER:....................$43,455.00

Tax and Credits

65-OR-OVER:....................NO
BLIND:....................NO
SPOUSE 65-OR-OVER:....................NO
SPOUSE BLIND:....................NO
EXEMPTION AMOUNT PER COMPUTER:....................$8,100.00
TAXABLE INCOME:....................$26,055.00
TAXABLE INCOME PER COMPUTER:....................$26,055.00
TENTATIVE TAX:....................$3,249.00
* **TENTATIVE TAX PER COMPUTER:....................$3,249.00**
EXCESS ADVANCE PREMIUM TAX CREDIT REPAYMENT AMOUNT:....................$0.00
EXCESS ADVANCE PREMIUM TAX CREDIT REPAYMENT VERIFIED AMOUNT:....................$0.00
CHILD & DEPENDENT CARE CREDIT:....................$600.00
CHILD & DEPENDENT CARE CREDIT PER COMPUTER:....................$600.00
CREDIT FOR ELDERLY AND DISABLED:....................$0.00
CREDIT FOR ELDERLY AND DISABLED PER COMPUTER:....................$0.00
EDUCATION CREDIT:....................$0.00
33 EDUCATION CREDIT PER COMPUTER:....................$0.00
GROSS EDUCATION CREDIT PER COMPUTER:....................$0.00
RETIREMENT SAVINGS CNTRB CREDIT:....................$0.00
RETIREMENT SAVINGS CNTRB CREDIT PER COMPUTER:....................$0.00
PRIM RET SAV CNTRB: F8880 LN6A:....................$0.00
SEC RET SAV CNTRB: F8880 LN6B:....................$0.00
CHILD TAX CREDIT:....................$1,000.00
CHILD TAX CREDIT PER COMPUTER:....................$1,000.00
ADOPTION CREDIT: F8839:....................$0.00
ADOPTION CREDIT PER COMPUTER:....................$0.00
TOTAL CREDITS:....................$1,600.00
** **TOTAL CREDITS PER COMPUTER:....................$1,600.00**

Other Taxes

OTHER TAXES PER COMPUTER:....................$0.00
TOTAL TAX LIABILITY TP FIGURES:....................$1,649.00
TOTAL TAX LIABILITY TP FIGURES PER COMPUTER:....................$1,649.00

*** "Tentative Tax Per Computer"**
− ** "Total Credits Per Computer"
28 – 36 **= *** Income Tax Paid**

Payments

FEDERAL INCOME TAX WITHHELD:....................$4,270.00
HEALTH CARE: INDIVIDUAL RESPONSIBILTY:....................$0.00
HEALTH CARE FULL-YEAR COVERAGE INDICATOR:....................1
ESTIMATED TAX PAYMENTS:....................$0.00
OTHER PAYMENT CREDIT AMOUNT:....................$0.00
REFUNDABLE EDUCATION CREDIT:....................$0.00
REFUNDABLE EDUCATION CREDIT PER COMPUTER:....................$0.00
REFUNDABLE EDUCATION CREDIT VERIFIED:.... ....$0.00
EARNED INCOME CREDIT:....................$0.00
EARNED INCOME CREDIT PER COMPUTER:....................$0.00
EARNED INCOME CREDIT NONTAXABLE COMBAT PAY:....................$0.00
SCHEDULE 8812 NONTAXABLE COMBAT PAY:....................$0.00
SCHEDULE 8812 TOT SS/MEDICARE WITHHELD:....................$0.00
SCHEDULE 8812 ADDITIONAL CHILD TAX CREDIT:....................$0.00

******If Income Tax Paid is negative, enter '0' (zero).***

SCHEDULE 8812 ADDITIONAL CHILD TAX CREDIT PER COMPUTER:....................................$0.00
SCHEDULE 8812 ADDITIONAL CHILD TAX CREDIT VERIFIED:..$0.00
PREMIUM TAX CREDIT AMOUNT:..$0.00
PREMIUM TAX CREDIT VERIFIED AMOUNT:...$0.00
SMALL EMPLOYER HEALTH INSURANCE PER COMPUTER:...$0.00
TOTAL PAYMENTS:...$4,270.00
TOTAL PAYMENTS PER COMPUTER:..$4,270.00

Refund or Amount Owed

REFUND AMOUNT:...$-2,621.00
APPLIED TO NEXT YEAR'S ESTIMATED TAX:...$0.00
ESTIMATED TAX PENALTY:..$0.00
BAL DUE/OVER PYMT USING TP FIG PER COMPUTER:...$-2,621.00
BAL DUE/OVER PYMT USING COMPUTER FIGURES:..$-2,621.00
FORM 8888 TOTAL REFUND PER COMPUTER:..$0.00

Third Party Designee

THIRD PARTY DESIGNEE ID NUMBER:...
AUTHORIZATION INDICATOR:...0
THIRD PARTY DESIGNEE NAME:..

Form 2441--Child and Dependent Care Expenses

PROV NAME CNTRL:..ALPH
CARE PROV SSN:...XXX-XX-XXXX
DEPENDENT CARE EMPLOYER BENEFITS AMT:...$0.00
QUALIFIED EXPENSES EMPLOYER INCURRED AMT:...$0.00
DEPENDENT CARE EXCLUSION AMOUNT:..$0.00

PART II CREDIT FOR CHILD AND DEPENDENT CARE EXPENSES

NUMBER OF QUALIFYING PERSONS:..1
SSNS NOT REQ'D IND:..0
CHILD 1 NAME CONTROL:...BRAD
CHILD 1 SSN:...CCC-CC-CCCC
CHILD 1 QUALFIED EXPENSE:...$9,116.00
CHILD 2 NAME CONTROL:...
CHILD 2 SSN:..
CHILD 2 QUALFIED EXPENSE:...$0.00
AMOUNT OF QUALIFIED EXPENSES:...$3,000.00
EARNED INCOME-PRIMARY:...$43,455.00
EARNED INCOME-SECONDARY:...$43,455.00
PRIOR YEAR CHILD CARE EXPENSES:...$0.00
PRIOR YEAR CHILD CARE EXPENSES PER COMPUTER:..$0.00
CHILD AND DEPENDENT CARE BASE AMOUNT PER COMPUTER:......................................$3,000.00

PART III DEPENDENT CARE BENEFITS

DEPENDENT CARE EMPLOYER BENEFITS:...$0.00
QUALIFIED EXPENSES EMPLOYER INCURRED:...$0.00
DEPENDENT CARE EXCLUDED BENEFITS:...$0.00
GROSS CHILD CARE CREDIT PER COMPUTER:...$600.00
TOTAL QUALIFYING EXPENSES PER COMPUTER:...$3,000.00

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

PART III – ALLOWABLE EDUCATION CREDITS

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

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Sample IRS Form 1040: Ernie and Babs Weston

Form **1040** Department of the Treasury—Internal Revenue Service (99)
U.S. Individual Income Tax Return **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 | See separate instructions.

Your first name and initial	Last name	Your social security number
Ernie D	Weston	HHH HH HHHH
If a joint return, spouse's first name and initial	Last name	Spouse's social security number
Babs L	Weston	III II IIII

Home address (number and street). If you have a P.O. box, see instructions. Apt. no.
2232 Main Street

▲ Make sure the SSN(s) above and on line 6c are correct.

City, town or post office, state, and ZIP code. If you have a foreign address, also complete spaces below (see instructions).
Eugene, OR 99999

Foreign country name | Foreign province/state/county | Foreign postal code

Presidential Election Campaign
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. ☐ **You** ☐ **Spouse**

Filing Status

Check only one box.

1 ☐ Single
2 ☑ Married filing jointly (even if only one had income)
3 ☐ Married filing separately. Enter spouse's SSN above and full name here. ▶
4 ☐ Head of household (with qualifying person). (See instructions.) If the qualifying person is a child but not your dependent, enter this child's name here. ▶
5 ☐ Qualifying widow(er) with dependent child

Exemptions

6a ☑ **Yourself.** If someone can claim you as a dependent, **do not** check box 6a
b ☑ **Spouse**

Boxes checked on 6a and 6b: 2

c **Dependents:**

(1) First name Last name	(2) Dependent's social security number	(3) Dependent's relationship to you	(4) ✓ if child under age 17 qualifying for child tax credit (see instructions)
			☐
			☐
			☐
			☐

If more than four dependents, see instructions and check here ▶ ☐

No. of children on 6c who:
- **lived with you**
- **did not live with you due to divorce or separation (see instructions)**

Dependents on 6c not entered above

d Total number of exemptions claimed — **Add numbers on lines above ▶** 2

Income

Attach Form(s) W-2 here. Also attach Forms W-2G and 1099-R if tax was withheld.

If you did not get a W-2, see instructions.

7	Wages, salaries, tips, etc. Attach Form(s) W-2	7	70,504 00
8a	**Taxable** interest. Attach Schedule B if required	8a	433 00
b	**Tax-exempt** interest. **Do not** include on line 8a — 8b		
9a	Ordinary dividends. Attach Schedule B if required	9a	
b	Qualified dividends — 9b		
10	Taxable refunds, credits, or offsets of state and local income taxes	10	815 00
11	Alimony received	11	
12	Business income or (loss). Attach Schedule C or C-EZ	12	(993) 00
13	Capital gain or (loss). Attach Schedule D if required. If not required, check here ▶ ☐	13	
14	Other gains or (losses). Attach Form 4797	14	
15a	IRA distributions — 15a; b Taxable amount	15b	
16a	Pensions and annuities — 16a; b Taxable amount	16b	
17	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E	17	3,505 00
18	Farm income or (loss). Attach Schedule F	18	
19	Unemployment compensation	19	11,340 00
20a	Social security benefits — 20a; b Taxable amount	20b	
21	Other income. List type and amount	21	
22	Combine the amounts in the far right column for lines 7 through 21. This is your **total income** ▶	22	85,604 00

Adjusted Gross Income

23	Educator expenses	23	
24	Certain business expenses of reservists, performing artists, and fee-basis government officials. Attach Form 2106 or 2106-EZ	24	
25	Health savings account deduction. Attach Form 8889	25	
26	Moving expenses. Attach Form 3903	26	
27	Deductible part of self-employment tax. Attach Schedule SE	27	
28	Self-employed SEP, SIMPLE, and qualified plans	28	
29	Self-employed health insurance deduction	29	
30	Penalty on early withdrawal of savings	30	
31a	Alimony paid b Recipient's SSN ▶	31a	
32	IRA deduction	32	
33	Student loan interest deduction	33	
34	Tuition and fees. Attach Form 8917	34	
35	Domestic production activities deduction. Attach Form 8903	35	
36	Add lines 23 through 35	36	
37	Subtract line 36 from line 22. This is your **adjusted gross income** ▶	37	85,604 00

For Disclosure, Privacy Act, and Paperwork Reduction Act Notice, see separate instructions. Cat. No. 11320B Form **1040** (2016)

	38	Amount from line 37 (adjusted gross income)			38	85,604 00
Tax and Credits	39a	Check if: ☐ **You** were born before January 2, 1952, ☐ Blind. ☐ **Spouse** was born before January 2, 1952, ☐ Blind. **Total boxes checked ▶ 39a** 0				
	b	If your spouse itemizes on a separate return or you were a dual-status alien, check here ▶ 39b ☐				
Standard Deduction for—	40	**Itemized deductions** (from Schedule A) **or** your **standard deduction** (see left margin)			40	23,121 00
• People who check any box on line 39a or 39b **or** who can be claimed as a dependent, see instructions.	41	Subtract line 40 from line 38			41	62,483 00
• All others:	42	**Exemptions.** If line 38 is $155,650 or less, multiply $4,050 by the number on line 6d. Otherwise, see instructions			42	8,100 00
Single or Married filing separately, $6,300	43	**Taxable income.** Subtract line 42 from line 41. If line 42 is more than line 41, enter -0-			43	54,383 00
Married filing jointly or Qualifying widow(er), $12,600	44	**Tax** (see instructions). Check if any from: **a** ☐ Form(s) 8814 **b** ☐ Form 4972 **c** ☐			44	7,229 00
Head of household, $9,300	45	**Alternative minimum tax** (see instructions). Attach Form 6251			45	
	46	Excess advance premium tax credit repayment. Attach Form 8962			46	0 00
	47	Add lines 44, 45, and 46 ▶			47	7,229 00
	48	Foreign tax credit. Attach Form 1116 if required	48			
	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			
	52	Child tax credit. Attach Schedule 8812, if required	52			
	53	Residential energy credits. Attach Form 5695	53			
	54	Other credits from Form: **a** ☐ 3800 **b** ☐ 8801 **c** ☐	54			
	55	Add lines 48 through 54. These are your **total credits**			55	0 00
	56	Subtract line 55 from line 47. If line 55 is more than line 47, enter -0- ▶			56	7,229 00
Other Taxes	57	Self-employment tax. Attach Schedule SE			57	
	58	Unreported social security and Medicare tax from Form: **a** ☐ 4137 **b** ☐ 8919			58	
	59	Additional tax on IRAs, other qualified retirement plans, etc. Attach Form 5329 if required			59	
	60a	Household employment taxes from Schedule H			60a	
	b	First-time homebuyer credit repayment. Attach Form 5405 if required			60b	
	61	Health care: individual responsibility (see instructions) Full-year coverage ☐			61	
	62	Taxes from: **a** ☐ Form 8959 **b** ☐ Form 8960 **c** ☐ Instructions; enter code(s)			62	
	63	Add lines 56 through 62. This is your **total tax** ▶			63	0 00
Payments	64	Federal income tax withheld from Forms W-2 and 1099	64	12,242 00		
	65	2016 estimated tax payments and amount applied from 2015 return	65			
If you have a qualifying child, attach Schedule EIC.	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	Amount paid with request for extension to file	70			
	71	Excess social security and tier 1 RRTA tax withheld	71			
	72	Credit for federal tax on fuels. Attach Form 4136	72			
	73	Credits from Form: **a** ☐ 2439 **b** ☐ Reserved **c** ☐ 8885 **d** ☐	73			
	74	Add lines 64, 65, 66a, and 67 through 73. These are your **total payments** ▶			74	12,242 00
Refund	75	If line 74 is more than line 63, subtract line 63 from line 74. This is the amount you **overpaid**			75	5,013 00
	76a	Amount of line 75 you want **refunded to you.** If Form 8888 is attached, check here ▶ ☐			76a	5,013 00
Direct deposit? See instructions.	▶ b	Routing number X X X X X X X X X ▶ **c** Type: ☑ Checking ☐ Savings				
	▶ d	Account number X X X X X X X X X X X X X X X X X				
	77	Amount of line 75 you want **applied to your 2017 estimated tax** ▶	77			
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			

Line 56
− Line 46
= Income Tax Paid

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
Ernie D. Weston	2/01/2017	Systems Analyst	(555) 221-3498
Spouse's signature. If a joint return, **both** must sign.	Date	Spouse's occupation	If the IRS sent you an Identity Protection PIN, enter it here (see inst.)
Babs L. Weston	2/01/2017	Piano Teacher	

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check ☐ if self-employed	PTIN

Firm's name ▶ Firm's EIN ▶

Firm's address ▶ Phone no.

www.irs.gov/form1040 Form **1040** (2016)

Sample Tax Transcript 1040: Ernie and Babs Weston

Internal Revenue Service

United States Department of the Treasury

This Product Contains Sensitive Taxpayer Data

Request Date: 06-11-2017
Response Date: 06-11-2017
Tracking Number: XXXXXXXXXXXX

Tax Return Transcript

SSN Provided: HHH-HH-HHHH
Tax Period Ending: Dec. 31, 2016

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: HHH-HH-HHHH
SPOUSE SSN: III-II-IIII

NAME(S) SHOWN ON RETURN: ERNIE D & BABS L WESTON

ADDRESS: 2232 MAIN ST
EUGENE, OR 99999

	FILING STATUS:	MARRIED FILING JOINT
	FORM NUMBER:	1040
	CYCLE POSTED:	20171005
	RECEIVED DATE:	Apr.15, 2017
	REMITTANCE:	$0.00
6d	EXEMPTION NUMBER:	2
	DEPENDENT 1 NAME CTRL:	
	DEPENDENT 1 SSN:	
	DEPENDENT 2 NAME CTRL:	
6c	DEPENDENT 2 SSN:	
	DEPENDENT 3 NAME CTRL:	
	DEPENDENT 3 SSN:	
	DEPENDENT 4 NAME CTRL:	
	DEPENDENT 4 SSN:	
	PTIN:	
	PREPARER EIN:	

Income

7	WAGES, SALARIES, TIPS, ETC:	$70,504.00
	TAXABLE INTEREST INCOME: SCH B:	$433.00
8b	TAX-EXEMPT INTEREST:	$0.00
	ORDINARY DIVIDEND INCOME: SCH B:	$0.00
	QUALIFIED DIVIDENDS:	$0.00
	REFUNDS OF STATE/LOCAL TAXES:	$815.00
	ALIMONY RECEIVED:	$0.00
	BUSINESS INCOME OR LOSS (Schedule C):	$-993.00
12	BUSINESS INCOME OR LOSS: SCH C PER COMPUTER:	$-993.00
	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
15a – 15b	TOTAL IRA DISTRIBUTIONS:	$0.00
	TAXABLE IRA DISTRIBUTIONS:	$0.00
16a – 16b	TOTAL PENSIONS AND ANNUITIES:	$0.00
	TAXABLE PENSION/ANNUITY AMOUNT:	$0.00
	RENT/ROYALTY/PARTNERSHIP/ESTATE (Schedule E):	$3,505.00
	RENT/ROYALTY/PARTNERSHIP/ESTATE (Schedule E) PER COMPUTER:	$3,505.00
	RENT/ROYALTY INCOME/LOSS PER COMPUTER:	$3,505.00
	ESTATE/TRUST INCOME/LOSS PER COMPUTER:	$0.00
	PARTNERSHIP/S-CORP INCOME/LOSS PER COMPUTER PER COMPUTER:	$0.00
	FARM INCOME OR LOSS (Schedule F):	$0.00
18	FARM INCOME OR LOSS (Schedule F) PER COMPUTER:	$0.00
	UNEMPLOYMENT COMPENSATION:	$11,340.00

	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 EARNED INCOME PER COMPUTER:	$0.00
	SCH EIC DISQUALIFIED INC COMPUTER:	$0.00
	TOTAL INCOME:	$85,604.00
	TOTAL INCOME PER COMPUTER:	$85,604.00

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
25	HEALTH SAVINGS ACCT DEDUCTION PER COMPTR:	$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
28	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
	IRA DEDUCTION:	$0.00
32	IRA DEDUCTION PER COMPUTER:	$0.00
	STUDENT LOAN INTEREST DEDUCTION:	$0.00
	STUDENT LOAN INTEREST DEDUCTION PER COMPUTER:	$0.00
	STUDENT LOAN INTEREST DEDUCTION VERIFIED:	$0.00
	TUITION AND FEES DEDUCTION:	$0.00
	TUITION AND FEES DEDUCTION PER COMPUTER:	$0.00
	DOMESTIC PRODUCTION ACTIVITIES DEDUCTION:	$0.00
	OTHER ADJUSTMENTS:	$0.00
	ARCHER MSA DEDUCTION:	$0.00
	ARCHER MSA DEDUCTION PER COMPUTER:	$0.00
	TOTAL ADJUSTMENTS:	$0.00
	TOTAL ADJUSTMENTS PER COMPUTER:	$0.00
	ADJUSTED GROSS INCOME:	$85,604.00
37	ADJUSTED GROSS INCOME PER COMPUTER:	$85,604.00

Tax and Credits

	65-OR-OVER:	NO
	BLIND:	NO
	SPOUSE 65-OR-OVER:	NO
	SPOUSE BLIND:	NO
	STANDARD DEDUCTION PER COMPUTER:	$0.00
	ADDITIONAL STANDARD DEDUCTION PER COMPUTER:	$0.00
	TAX TABLE INCOME PER COMPUTER:	$62,483.00
	EXEMPTION AMOUNT PER COMPUTER:	$8,100.00
	TAXABLE INCOME:	$54,383.00
	TAXABLE INCOME PER COMPUTER:	$54,383.00
	TOTAL POSITIVE INCOME PER COMPUTER:	$86,597.00
	TENTATIVE TAX:	$7,229.00
	TENTATIVE TAX PER COMPUTER:	$7,229.00
	FORM 8814 ADDITIONAL TAX AMOUNT:	$0.00
	TAX ON INCOME LESS SOC SEC INCOME PER COMPUTER:	$0.00
	FORM 6251 ALTERNATIVE MINIMUM TAX:	$0.00
	FORM 6251 ALTERNATIVE MINIMUM TAX PER COMPUTER:	$0.00
	FOREIGN TAX CREDIT:	$0.00
	FOREIGN TAX CREDIT PER COMPUTER:	$0.00
	FOREIGN INCOME EXCLUSION PER COMPUTER:	$0.00
	FOREIGN INCOME EXCLUSION TAX PER COMPUTER:	$0.00
*	**EXCESS ADVANCE PREMIUM TAX CREDIT REPAYMENT AMOUNT:**	**$0.00**
	EXCESS ADVANCE PREMIUM TAX CREDIT REPAYMENT VERIFIED AMOUNT:	$0.00
	CHILD & DEPENDENT CARE CREDIT:	$0.00
	CHILD & DEPENDENT CARE CREDIT PER COMPUTER:	$0.00
	CREDIT FOR ELDERLY AND DISABLED:	$0.00

CREDIT FOR ELDERLY AND DISABLED PER COMPUTER:..$0.00
EDUCATION CREDIT:...$0.00
50 EDUCATION CREDIT PER COMPUTER:...$0.00
GROSS EDUCATION CREDIT PER COMPUTER:..$0.00
RETIREMENT SAVINGS CNTRB CREDIT:..$0.00
RETIREMENT SAVINGS CNTRB CREDIT PER COMPUTER:.......................................$0.00
PRIM RET SAV CNTRB: F8880 LN6A:...$0.00
SEC RET SAV CNTRB: F8880 LN6B:..$0.00
TOTAL RETIREMENT SAVINGS CONTRIBUTION: F8880 CMPTR:..................................$0.00
RESIDENTIAL ENERGY CREDIT:..$0.00
RESIDENTIAL ENERGY CREDIT PER COMPUTER:..$0.00
CHILD TAX CREDIT:...$0.00
CHILD TAX CREDIT PER COMPUTER:..$0.00
ADOPTION CREDIT: F8839:...$0.00
ADOPTION CREDIT PER COMPUTER:...$0.00
FORM 8396 MORTGAGE CERTIFICATE CREDIT:...$0.00
FORM 8396 MORTGAGE CERTIFICATE CREDIT PER COMPUTER:..................................$0.00
F3800, F8801 AND OTHER CREDIT AMOUNT:...$0.00
FORM 3800 GENERAL BUSINESS CREDITS:...$0.00
FORM 3800 GENERAL BUSINESS CREDITS PER COMPUTER:.....................................$0.00
PRIOR YR MIN TAX CREDIT: F8801:...$0.00
PRIOR YR MIN TAX CREDIT: F8801 PER COMPUTER:..$0.00
F8936 ELECTRIC MOTOR VEHICLE CREDIT AMOUNT:...$0.00
F8936 ELECTRIC MOTOR VEHICLE CREDIT PER COMPUTER:....................................$0.00
F8910 ALTERNATIVE MOTOR VEHICLE CREDIT AMOUNT:.......................................$0.00
F8910 ALTERNATIVE MOTOR VEHICLE CREDIT PER COMPUTER:..................................$0.00
OTHER CREDITS:..$0.00
TOTAL CREDITS:..$0.00
TOTAL CREDITS PER COMPUTER:...$0.00
** **INCOME TAX AFTER CREDITS PER COMPUTER:..$7,229.00**

** "Income Tax After Credits Per Computer"
− * "Excess Advance Premium Tax Credit Repayment Amount"
56 – 46 = *** Income Tax Paid

Other Taxes

SE TAX:...$0.00
SE TAX PER COMPUTER:..$0.00
SOCIAL SECURITY AND MEDICARE TAX ON UNREPORTED TIPS:.................................$0.00
SOCIAL SECURITY AND MEDICARE TAX ON UNREPORTED TIPS PER COMPUTER:.....................$0.00
TAX ON QUALIFIED PLANS F5329 (PR):..$0.00
TAX ON QUALIFIED PLANS F5329 PER COMPUTER:..$0.00
IRAF TAX PER COMPUTER:..$0.00
TP TAX FIGURES (REDUCED BY IRAF) PER COMPUTER:...................................$7,229.00
IMF TOTAL TAX (REDUCED BY IRAF) PER COMPUTER:....................................$7,229.00
OTHER TAXES PER COMPUTER:...$0.00
UNPAID FICA ON REPORTED TIPS:...$0.00
OTHER TAXES:..$0.00
RECAPTURE TAX: F8611:...$0.00
HEALTH CARE RESPONSIBILITY PENALTY:..$0.00
HEALTH CARE RESPONSIBILITY PENALTY VERIFIED:...$0.00
HOUSEHOLD EMPLOYMENT TAXES:..$0.00
HOUSEHOLD EMPLOYMENT TAXES PER COMPUTER:...$0.00
RECAPTURE TAXES:..$0.00
TOTAL ASSESSMENT PER COMPUTER:...$7,229.00
TOTAL TAX LIABILITY TP FIGURES:..$7,229.00
TOTAL TAX LIABILITY TP FIGURES PER COMPUTER:.....................................$7,229.00

Payments

FEDERAL INCOME TAX WITHHELD:..$12,242.00
HEALTH CARE: INDIVIDUAL RESPONSIBILTY:..$0.00
HEALTH CARE FULL-YEAR COVERAGE INDICATOR:...1
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
EARNED INCOME CREDIT:...$0.00
EARNED INCOME CREDIT PER COMPUTER:...$0.00

****If Income Tax Paid is negative, enter '0' (zero).*

EARNED INCOME CREDIT NONTAXABLE COMBAT PAY:..$0.00
SCHEDULE 8812 NONTAXABLE COMBAT PAY:..$0.00
EXCESS SOCIAL SECURITY & RRTA TAX WITHHELD:...$0.00
SCHEDULE 8812 TOT SS/MEDICARE WITHHELD:...$0.00
SCHEDULE 8812 ADDITIONAL CHILD TAX CREDIT:..$0.00
SCHEDULE 8812 ADDITIONAL CHILD TAX CREDIT PER COMPUTER:.............................$0.00
SCHEDULE 8812 ADDITIONAL CHILD TAX CREDIT VERIFIED:.................................$0.00
AMOUNT PAID WITH FORM 4868:...$0.00
FORM 2439 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
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
SMALL EMPLOYER HEALTH INSURANCE PER COMPUTER:.......................................$0.00
SMALL EMPLOYER HEALTH INSURANCE PER COMPUTER (2):...................................$0.00
FORM 2439 AND OTHER CREDITS:..$0.00
TOTAL PAYMENTS:..$12,242.00
TOTAL PAYMENTS PER COMPUTER:...$12,242.00

Refund or Amount Owed

REFUND AMOUNT:...$-5,013.00
APPLIED TO NEXT YEAR’S ESTIMATED TAX:...$0.00
ESTIMATED TAX PENALTY:..$0.00
TAX ON INCOME LESS STATE REFUND PER COMPUTER:.......................................$0.00
BAL DUE/OVER PYMT USING TP FIG PER COMPUTER:...................................$-5,013.00
BAL DUE/OVER PYMT USING COMPUTER FIGURES:......................................$-5,013.00
FORM 8888 TOTAL REFUND PER COMPUTER:..$0.00

Third Party Designee

THIRD PARTY DESIGNEE ID NUMBER:...
AUTHORIZATION INDICATOR:...0
THIRD PARTY DESIGNEE NAME:..

Schedule A--Itemized Deductions

MEDICAL/DENTAL

MEDICAL AND DENTAL EXPENSES:..$0.00
ADJUSTED GROSS INCOME PERCENTAGE:...$0.00
ADJUSTED GROSS INCOME PERCENTAGE PER COMPUTER 10 PERCENT:.......................$8,560.00
ADJUSTED GROSS INCOME PERCENTAGE PER COMPUTER 7.5 PERCENT:......................$6,420.00
NET MEDICAL DEDUCTION:..$0.00
NET MEDICAL DEDUCTION PER COMPUTER:...$0.00

TAXES PAID

STATE AND LOCAL INCOME TAXES:...$5,654.00
INCOME TAX OR GENERAL SALES TAX:..$0.00
REAL ESTATE TAXES:..$5,316.00
PERSONAL PROPERTY TAXES:..$0.00
OTHER TAXES AMOUNT:...$0.00
SCH A TAX DEDUCTIONS:..$10,970.00
SCH A TAX PER COMPUTER:..$10,970.00

INTEREST PAID

MORTGAGE INTEREST (FINANCIAL):..$9,723.00
MORTGAGE INTEREST (INDIVIDUAL):...$0.00
DEDUCTIBLE POINTS:..$0.00
QUALIFIED MORTGAGE INSURANCE PREMIUMS:..$1,958.00
DEDUCTIBLE INVESTMENT INTEREST:...$0.00
TOTAL INTEREST DEDUCTION:..$11,681.00
TOTAL INTEREST DEDUCTION PER COMPUTER:...$11,681.00

CHARITABLE CONTRIBUTIONS

CASH CONTRIBUTIONS:..$130.00
OTHER THAN CASH: Form 8283:..$340.00
CARRYOVER FROM PRIOR YEAR:..$0.00
SCH A TOTAL CONTRIBUTIONS:...$470.00
SCH A TOTAL CONTRIBUTIONS PER COMPUTER:...$470.00

CASUALTY AND THEFT LOSS

CASUALTY OR THEFT LOSS:...$0.00

JOBS AND MISCELLANEOUS

UNREIMBURSED EMPLOYEE EXPENSE AMOUNT:..$0.00
TOTAL LIMITED MISC EXPENSES:...$0.00
NET LIMTED MISC DEDUCTION:...$0.00
NET LIMITED MISC DEDUCTION PER COMPUTER:.......................................$0.00

OTHER MISCELLANEOUS

OTHER THAN GAMBLING AMOUNT:...$0.00
OTHER MISC DEDUCTIONS:...$0.00

TOTAL ITEMIZED DEDUCTIONS

TOTAL ITEMIZED DEDUCTIONS:...$23,121.00
TOTAL ITEMIZED DEDUCTIONS PER COMPUTER:.....................................$23,121.00
RECOMPUTED TOTAL ITEMIZED DEDUCTIONS PER COMPUTER:...........................$0.00
ELECT ITEMIZED DEDUCTION INDICATOR:...
SCH A ITEMIZED PERCENTAGE PER COMPUTER:...$0.00

Schedule C--Profit or Loss From Business

SOCIAL SECURITY NUMBER:...III-II-IIII
EMPLOYER ID NUMBER:...
BUSINESS NAME:..MUSIC MASTERY INC
DESCRIPTION OF BUSINESS/PROFESSION:.................................PIANO TEACHER TEACHI
NAICS CODE:...611610
ACCT MTHD:...Other
FIRST TIME SCHEDULE C FILED:...N
STATUTORY EMPLOYEE IND:...N

INCOME

GROSS RECEIPTS OR SALES:...$1,500.00
RETURNS AND ALLOWANCES:...$0.00
NET GROSS RECEIPTS:..$1,500.00
COST OF GOODS SOLD:...$0.00
SCHEDULE C FORM 1099 REQUIRED:..NO
SCHEDULE C FORM 1099 FILED:...NONE
OTHER INCOME:..$0.00

EXPENSES

CAR AND TRUCK EXPENSES:...$348.00
DEPRECIATION:..$0.00
INSURANCE (OTHER THAN HEALTH):..$0.00
MORTGAGE INTEREST:..$0.00
LEGAL AND PROFESSIONAL SERVICES:...$0.00
REPAIRS AND MAINTENANCE:..$0.00
TRAVEL:...$676.00
MEALS AND ENTERTAINMENT:..$7.00
WAGES:..$0.00
OTHER EXPENSES:..$0.00
TOTAL EXPENSES:...$2,493.00
EXP FOR BUSINESS USE OF HOME:...$0.00
SCH C NET PROFIT OR LOSS PER COMPUTER:.......................................$-993.00
AT RISK CD:...
OFFICE EXPENSE AMOUNT:..$305.00
UTILITIES EXPENSE AMOUNT:..$0.00

COST OF GOODS SOLD

INVENTORY AT BEGINNING OF YEAR:..$0.00
INVENTORY AT END OF YEAR:..$0.00

Schedule E--Supplemental Income and Loss

INCOME OR LOSS FROM RENTAL REAL ESTATE AND ROYALTIES

SCHEDULE E FORM 1099 REQUIRED:...No box checked
SCHEDULE E FORM FILED:...Neither box checked
TOTAL RENTS RECEIVED:..$0.00
TOTAL ROYALTIES RECEIVED:..$0.00
TOTAL MORTGAGE INTEREST ALL PROPERTIES:..$0.00
TOTAL DEPRECIATION OR DEPLETION FOR ALL PROPERTIES:......................................$0.00
TOTAL EXPENSES FOR ALL PROPERTIES:...$0.00
TOTAL RENTAL REAL ESTATE AND ROYALTY INCOME OR LOSS:.....................................$0.00
RENT & ROYALTY INCOME:...$3,505.00
RENT & ROYALTY LOSSES:...$0.00
REPAIRS EXPENSE COLUMN A:..$1,613.00
REPAIRS EXPENSE COLUMN B:..$0.00
REPAIRS EXPENSE COLUMN C:..$0.00

INCOME OR LOSS FROM PARTNERSHIPS AND S CORPS

PRTSHP/CORP PASSIVE INCOME:..$0.00
PRTSHP/CORP NONPASSIVE INCOME:...$0.00
PRTSHP/CORP PASSIVE LOSS:..$0.00
PRTSHP/CORP NONPASSIVE LOSS:...$0.00
PARTNERSHIP INCOME:..$0.00
PARTNERSHIP LOSS:..$0.00

INCOME OR LOSS FROM ESTATES AND TRUSTS

ESTATE/TRUST PASSIVE INCOME:...$0.00
ESTATE/TRUST PASSIVE LOSS:...$0.00
ESTATE AND TRUST INCOME:...$0.00
ESTATE AND TRUST LOSS:...$0.00
PASSIVE LOSS NOT REPORTED ON F8582:..N
SCH K1 ES PAYMENT INDICATOR:...N

INCOME OR LOSS FROM REAL ESTATE MORTGAGE INVESTMENT CONDUITS

REAL ESTATE MORTGAGE INCOME/LOSS:..$0.00

SUMMARY

NET FARM RENT INCOME/LOSS:...$0.00
GROSS FARMING & FISHING INCOME:..$0.00

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

PART III – ALLOWABLE EDUCATION CREDITS

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

This Product Contains Sensitive Taxpayer Data

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Appendices

Appendix A
Sample 2016 W-2 Form

Appendix B
Criteria for 2018-2019 Simplified Needs Formulas and Automatic Zero EFC Calculation

Appendix C
2016 Federal Tax Year: Eligible to File a 1040A/EZ?

Appendix D
Current Year Transcript Availability

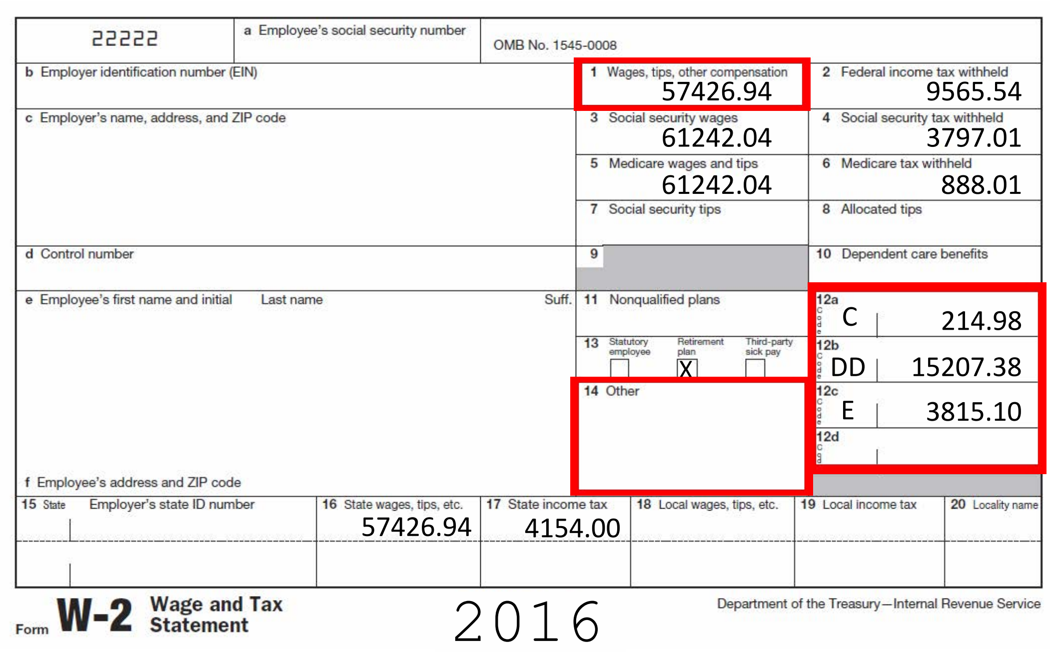
Appendix E
References, Resources and Websites – Tax Returns and Transcripts

Appendix A

Sample 2016 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, coded 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.


22222
a Employee's social security number
OMB No. 1545-0008
b Employer identification number (EIN)
1 Wages, tips, other compensation 57426.94
2 Federal income tax withheld 9565.54
c Employer's name, address, and ZIP code
3 Social security wages 61242.04
4 Social security tax withheld 3797.01
5 Medicare wages and tips 61242.04
6 Medicare tax withheld 888.01
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.
11 Nonqualified plans
12a C 214.98
13 Statutory employee / Retirement plan X / Third-party sick pay
12b DD 15207.38
14 Other
12c E 3815.10
12d
f Employee's address and ZIP code
15 State Employer's state ID number
16 State wages, tips, etc. 57426.94
17 State income tax 4154.00
18 Local wages, tips, etc.
19 Local income tax
20 Locality name
Form W-2 Wage and Tax Statement 2016
Department of the Treasury—Internal Revenue Service

Form W-2 Reference Guide for Box 12 Codes

A	Uncollected social security or RRTA tax on tips	K	20% excise tax on excess golden parachute payments	V	Income from exercise of nonstatutory stock option(s)
B	Uncollected Medicare tax on tips (but not Additional Medicare Tax)	L	Substantiated employee business expense reimbursements	W	Employer contributions (including employee contributions through a cafeteria plan) to an employee's health savings account (HSA)
C	Taxable cost of group-term life insurance over $50,000	M	Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only)	Y	Deferrals under a section 409A nonqualified deferred compensation plan
D	Elective deferrals to a section 401(k) cash or deferred arrangement plan (including a SIMPLE 401(k) arrangement	N	Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (but not Additional Medicare Tax) (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	P	Excludable moving expense reimbursements paid directly to employee	AA	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	BB	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
H	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	T	Adoption benefits		

Appendix B

Criteria for 2018-2019 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
Formula A Dependent student	▪ Parents had a 2016 AGI of $49,999 or less (for tax filers), or if non-filers, income earned from work in 2016 is $49,999 or less; **and** ▪ Either - Parents filed or are eligible to file 2016 IRS Form 1040A or 1040EZ (or 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 benefits* during 2016 or 2017, **or** - Parent is a dislocated worker.	▪ Parents had a 2016 AGI of $25,000 or less (for tax filers), or if non-filers, income earned from work in 2016 is $25,000 or less; **and** ▪ Either - Parents filed or are eligible to file 2016 IRS Form 1040A or 1040EZ (or 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 benefits* during 2016 or 2017, **or** - Parent is a dislocated worker.
Formula B Independent student **without** dependents (other than a spouse)	▪ Student (and spouse, if any) had a 2016 AGI of $49,999 or less (for tax filers), or if non-filers, income earned from work in 2016 is $49,999 or less; **and** ▪ Either - Student (and spouse, if any) filed or are eligible to file 2016 IRS Form 1040A or 1040EZ (or 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 benefits* during 2016 or 2017, **or** - Student (or spouse, if any) is a dislocated worker.	Not applicable.
Formula C Independent student **with** dependents (other than a spouse)	▪ Student (and spouse, if any) had a 2016 AGI of $49,999 or less (for tax filers), or if non-filers, income earned from work in 2016 is $49,999 or less; **and** ▪ Either - Student (and spouse, if any) filed or are eligible to file 2016 IRS Form 1040A or 1040EZ (or 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 benefits* during 2016 or 2017, **or** - Student (or spouse, if any) is a dislocated worker.	▪ Student (and spouse, if any) had a 2016 AGI of $25,000 or less (for tax filers), or if non-filers, income earned from work in 2016 is $25,000 or less; **and** ▪ Either - Student (and spouse, if any) filed or are eligible to file 2016 IRS Form 1040A or 1040EZ (or 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 benefits* during 2016 or 2017, **or** - Student (or spouse, if any) is a dislocated worker.

**Benefits 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 C

2016 Federal Tax Year: Eligible to File a 1040A/EZ?

"If you have filed or will file a 1040, were you eligible to file a 1040A or 1040EZ" (2018-2019 FAFSA questions 35 and 83.)

YES, **IF** taxable income from line 43 is less than $100,000 –**AND**–
IF amounts (other than zero) do not appear on the following lines, except as noted below for lines 13, 40 and 44:

1040 Section	Line #	Description
Income	10	Taxable refunds, credits or offsets of state and local income taxes
	11	Alimony received
	12	Business income or loss
	13	Capital gain or loss (ignore amount unless Schedule D was required)
	14	Other gains or losses
	17	Rental real estate, royalties, partnerships, etc.
	18	Farm income or loss
	21	Other income
Adjusted Gross Income	24	Certain business expenses of reservists, performing artists and fee-basis government officials
	25	Health savings account deduction
	26	Moving expenses
	27	Deductible part of self-employment tax
	28	Self-employed SEP, SIMPLE, and qualified plans
	29	Self-employed health insurance deduction
	30	Penalty on early withdrawal of savings
	31a	Alimony paid
	35	Domestic production activities deduction
Tax and Credits	40	Itemized or standard deduction (ignore amount unless itemized deductions were taken) *
	43	Taxable income must be less than $100,000
	44	Tax (ignore amount unless any box is checked on line 44)
	48	Foreign tax credit
	53	Residential energy credits
	54	Other credits from Form 3800, 8801 or other
Other Taxes	57	Self-employment tax
	58	Unreported social security and Medicare tax from Form 4137 or 891.
	59	Additional tax on IRAs, other qualified retirement plans, etc.
	60a	Household employment taxes from Schedule H
	60b	First-time homebuyer credit repayment
	62	Taxes from Form 8959, 8960 or other
Payments	70	Amount paid with request for extension to file
	71	Excess social security and tier 1 RRTA tax withheld
	72	Credit for federal tax on fuels
	73	Credits from Form 2439, 8885 or other

On an IRS tax return transcript, the 'Standard Deduction Per Computer' line amount will show as a zero for someone who itemized.

If all of the above conditions apply, the tax filer was eligible to file a 1040A or 1040EZ but filed a 1040 for other reasons. Therefore, the tax filer should answer YES to question 35 (student) or 83 (parent) on the 2018-2019 FAFSA.

Appendix D

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, 1040A, or 1040EZ 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 tax account transcript to confirm these payments or credits a few weeks after the beginning of the calendar year prior to filing your current year return.

<table>
<tr><th>When your original return shows a …</th><th>and you filed electronically, then</th><th>and you filed on paper, then</th></tr>
<tr><td>refund amount or no balance due,</td><td>allow 2-3 weeks after return submission before you request a transcript.</td><td>allow 6-8 weeks after you mailed your return before you request a transcript.</td></tr>
<tr><td>balance due and you paid in full with your return,</td><td>allow 2-3 weeks after return submission before you request a transcript.</td><td rowspan="3">we process your return in June and you can request a transcript in mid to late June.

Note: we process all payments upon receipt.</td></tr>
<tr><td>balance due and you paid in full after submitting the return,</td><td>allow 3-4 weeks after full payment before you request a transcript.</td></tr>
<tr><td>balance due and you didn't pay in full,</td><td>we process your return in mid-May and you can request a transcript by late May.</td></tr>
</table>

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

Appendix E

References, Resources and Websites -- Tax Returns and Transcripts

U.S. Department of Education

Dear Colleague Letters

- Subject: 2018-2019 Award Year: FAFSA® Information to be Verified and Acceptable Documentation
  https://ifap.ed.gov/dpcletters/GEN1705.html

Electronic Announcements

- Subject: Update to Previously Announced Verification process for Nontax-Filers
  https://ifap.ed.gov/eannouncements/072117UpdatePrevAnnouncVerifProcforNontaxFilers.html

- Subject: Changes to the IRS Data Retrieval Tool Process for the 2018-2019 FAFSA
  https://ifap.ed.gov/eannouncements/080717ChangestoIRSDRT1819FAFSAForm.html

- Subject: 2018-2019 Verification Suggested Text Package
  https://ifap.ed.gov/eannouncements/081617VerificationSuggestedTextPackage1819.html

2018-2019 Federal Student Aid Handbook

- *Application and Verification Guide*
  Chapter 2: Filling Out the FAFSA
  Chapter 4: Verification, Updates, and Corrections
  www.ifap.ed.gov

Program Integrity Q&A – Verification

- *https://www2.ed.gov/policy/highered/reg/hearulemaking/2009/verification.html*

Internal Revenue Service

- Current Year Transcript Availability
  https://www.irs.gov/individuals/transcript-availability

- Secure Access: How to Register for Certain Online Self-Help Tools
  https://www.irs.gov/individuals/secure-access-how-to-register-for-certain-online-self-help-tools

- Transcript Types and Ways to Order Them
  https://www.irs.gov/individuals/tax-return-transcript-types-and-ways-to-order-them

- Get Transcript FAQs
  https://www.irs.gov/individuals/get-transcript-faqs

- 4506T-EZ: Short Form Request for Individual Tax Return Transcript
  https://www.irs.gov/pub/irs-pdf/f4506tez.pdf

- 4506-T: Request for Transcript of Tax Return (transcript and other return information)
  https://www.irs.gov/pub/irs-pdf/f4506t.pdfĚ