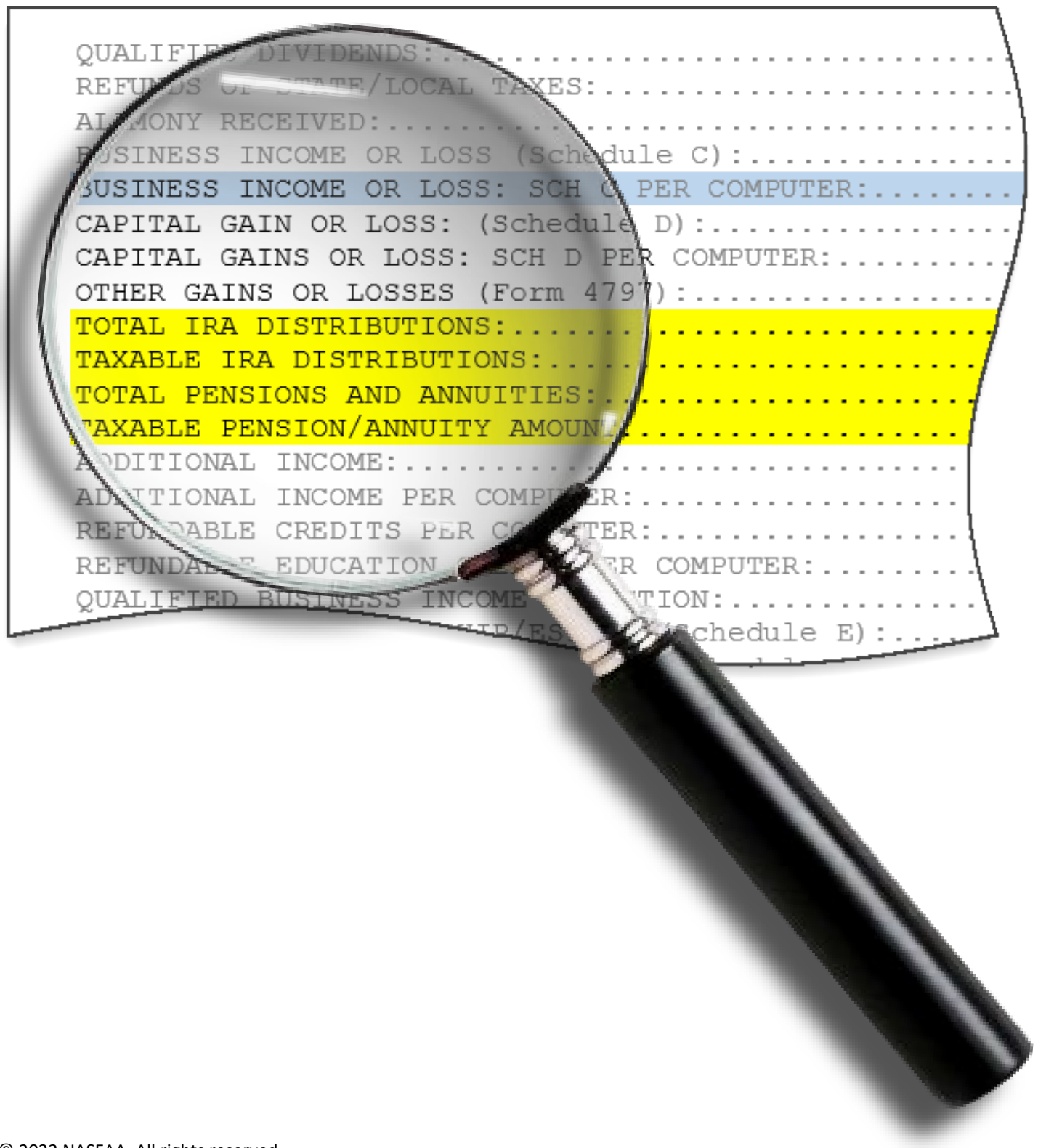


Tax Transcript Decoder®

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



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November 2022

Information in this publication is current as of November 20, 2022.

Comparison of 2021 Tax Return and Tax Transcript Data

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

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

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

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

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

2021 Tax Return Line Items for 2023-24 Verification

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

2021 Tax Return Transcript Line Items for 2023-24 Verification

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

*If negative, enter zero.

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

Form 1040		Department of the Treasury—Internal Revenue Service (99)		2021		OMB No. 1545-0074		IRS Use Only—Do not write or staple in this space.																																																																					
Filing Status <input type="checkbox"/> Single <input checked="" type="checkbox"/> Married filing jointly <input type="checkbox"/> Married filing separately (MFS) <input type="checkbox"/> Head of household (HOH) <input type="checkbox"/> Qualifying widow(er) (QW) Check only one box. If you checked the MFS box, enter the name of your spouse. If you checked the HOH or QW box, enter the child's name if the qualifying person is a child but not your dependent ▶																																																																													
Your first name and middle initial KAYCE L				Last name DUTTON		Your social security number XXX XX 1234																																																																							
If joint return, spouse's first name and middle initial MONICA K				Last name DUTTON		Spouse's social security number XXX XX 5678																																																																							
Home address (number and street). If you have a P.O. box, see instructions. 4230 DARBY ST						Apt. no.		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. <input type="checkbox"/> You <input type="checkbox"/> Spouse																																																																					
City, town, or post office. If you have a foreign address, also complete spaces below. CORONA				State CA		ZIP code 92860																																																																							
Foreign country name		Foreign province/state/county		Foreign postal code																																																																									
At any time during 2021, did you receive, sell, exchange, or otherwise dispose of any financial interest in any virtual currency? <input type="checkbox"/> Yes <input type="checkbox"/> No																																																																													
Standard Deduction Someone can claim: <input type="checkbox"/> You as a dependent <input type="checkbox"/> Your spouse as a dependent <input type="checkbox"/> Spouse itemizes on a separate return or you were a dual-status alien																																																																													
Age/Blindness You: <input type="checkbox"/> Were born before January 2, 1957 <input type="checkbox"/> Are blind Spouse: <input type="checkbox"/> Was born before January 2, 1957 <input type="checkbox"/> Is blind																																																																													
Dependents (see instructions):																																																																													
(1) First name		Last name		(2) Social security number		(3) Relationship to you		(4) <input checked="" type="checkbox"/> If qualifies for (see instructions):																																																																					
TATE DUTTON		XXX XX 9101		SON		<input checked="" type="checkbox"/> Child tax credit		<input type="checkbox"/> Credit for other dependents																																																																					
JOHN DUTTON		XXX XX 1121		SON		<input checked="" type="checkbox"/>		<input type="checkbox"/>																																																																					
						<input type="checkbox"/>		<input type="checkbox"/>																																																																					
						<input type="checkbox"/>		<input type="checkbox"/>																																																																					
If more than four dependents, see instructions and check here ▶ <input type="checkbox"/>																																																																													
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:10%; text-align: center;">1</td> <td style="width:60%;">Wages, salaries, tips, etc. Attach Form(s) W-2</td> <td style="width:10%; text-align: center;">1</td> <td style="width:20%; text-align: right;">202,095*</td> </tr> <tr> <td style="text-align: center;">2a</td> <td>Tax-exempt interest</td> <td style="text-align: center;">2a</td> <td style="text-align: right;">747</td> </tr> <tr> <td style="text-align: center;">3a</td> <td>Qualified dividends</td> <td style="text-align: center;">3a</td> <td></td> </tr> <tr> <td style="text-align: center;">4a</td> <td>IRA distributions</td> <td style="text-align: center;">4a</td> <td></td> </tr> <tr> <td style="text-align: center;">5a</td> <td>Pensions and annuities</td> <td style="text-align: center;">5a</td> <td></td> </tr> <tr> <td style="text-align: center;">6a</td> <td>Social security benefits</td> <td style="text-align: center;">6a</td> <td></td> </tr> <tr> <td style="text-align: center;">7</td> <td>Capital gain or (loss). Attach Schedule D if required. If not required, check here ▶ <input type="checkbox"/></td> <td style="text-align: center;">7</td> <td></td> </tr> <tr> <td style="text-align: center;">8</td> <td>Other income from Schedule 1, line 10</td> <td style="text-align: center;">8</td> <td></td> </tr> <tr> <td style="text-align: center;">9</td> <td>Add lines 1, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income ▶</td> <td style="text-align: center;">9</td> <td style="text-align: right;">202,842</td> </tr> <tr> <td style="text-align: center;">10</td> <td>Adjustments to income from Schedule 1, line 26</td> <td style="text-align: center;">10</td> <td></td> </tr> <tr> <td style="text-align: center;">11</td> <td>Subtract line 10 from line 9. This is your adjusted gross income ▶</td> <td style="text-align: center;">11</td> <td style="text-align: right;">202,842</td> </tr> <tr> <td style="text-align: center;">12a</td> <td>Standard deduction or itemized deductions (from Schedule A)</td> <td style="text-align: center;">12a</td> <td style="text-align: right;">34,885</td> </tr> <tr> <td style="text-align: center;">b</td> <td>Charitable contributions if you take the standard deduction (see instructions)</td> <td style="text-align: center;">12b</td> <td></td> </tr> <tr> <td style="text-align: center;">c</td> <td>Add lines 12a and 12b</td> <td style="text-align: center;">12c</td> <td style="text-align: right;">34,885</td> </tr> <tr> <td style="text-align: center;">13</td> <td>Qualified business income deduction from Form 8995 or Form 8995-A</td> <td style="text-align: center;">13</td> <td style="text-align: right;">34,885</td> </tr> <tr> <td style="text-align: center;">14</td> <td>Add lines 12c and 13</td> <td style="text-align: center;">14</td> <td></td> </tr> <tr> <td style="text-align: center;">15</td> <td>Taxable income. Subtract line 14 from line 11. If zero or less, enter -0-</td> <td style="text-align: center;">15</td> <td style="text-align: right;">167,957</td> </tr> </table>										1	Wages, salaries, tips, etc. Attach Form(s) W-2	1	202,095*	2a	Tax-exempt interest	2a	747	3a	Qualified dividends	3a		4a	IRA distributions	4a		5a	Pensions and annuities	5a		6a	Social security benefits	6a		7	Capital gain or (loss). Attach Schedule D if required. If not required, check here ▶ <input type="checkbox"/>	7		8	Other income from Schedule 1, line 10	8		9	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income ▶	9	202,842	10	Adjustments to income from Schedule 1, line 26	10		11	Subtract line 10 from line 9. This is your adjusted gross income ▶	11	202,842	12a	Standard deduction or itemized deductions (from Schedule A)	12a	34,885	b	Charitable contributions if you take the standard deduction (see instructions)	12b		c	Add lines 12a and 12b	12c	34,885	13	Qualified business income deduction from Form 8995 or Form 8995-A	13	34,885	14	Add lines 12c and 13	14		15	Taxable income. Subtract line 14 from line 11. If zero or less, enter -0-	15	167,957
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For Disclosure, Privacy Act, and Paperwork Reduction Act Notice, see separate instructions.

Cat. No. 11320B

Form **1040** (2021)

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

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

Form 1040 (2021)		Page 2
16	Tax (see instructions). Check if any from Form(s): 1 <input type="checkbox"/> 8814 2 <input type="checkbox"/> 4972 3 <input type="checkbox"/> _____	16 28,448
17	Amount from Schedule 2, line 3	17
18	Add lines 16 and 17	18 28,448
19	Nonrefundable child tax credit or credit for other dependents from Schedule 3, line 8	19
20	Amount from Schedule 3, line 8	20
21	Add lines 19 and 20	21
22	Subtract line 21 from line 18. If zero or less, enter -0-	22 28,448
23	Other taxes, including self-employment tax, from Schedule 2, line 21	23
24	Add lines 22 and 23. This is your total tax	24 28,448
25	Federal income tax withheld from:	
a	Form(s) W-2	25a 17,229
b	Form(s) 1099	25b
c	Other forms (see instructions)	25c 1
d	Add lines 25a through 25c	25d 17,730
26	2021 estimated tax payments and amount applied from 2020 return	26
27a	Earned income credit (EIC). Check here if you were born after January 1, 1998, and before January 2, 2004, and you satisfy all the other requirements for taxpayers who are at least age 18, to claim the EIC. See instructions <input type="checkbox"/>	27a
b	Nontaxable combat pay election	27b
c	Prior year (2019) earned income	27c
28	Refundable child tax credit or additional child tax credit from Schedule 8812	28 2,092
29	American opportunity credit from Form 8863, line 8	29
30	Recovery rebate credit. See instructions	30
31	Amount from Schedule 3, line 15	31
32	Add lines 27a and 28 through 31. These are your total other payments and refundable credits	32 2,092
33	Add lines 25d, 26, and 32. These are your total payments	33 19,822
Refund	34 If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid	34
35a	Amount of line 34 you want refunded to you . If Form 8888 is attached, check here <input type="checkbox"/>	35a
b	Routing number	c Type: <input type="checkbox"/> Checking <input type="checkbox"/> Savings
d	Account number	
36	Amount of line 34 you want applied to your 2022 estimated tax	36
Amount You Owe	37 Amount you owe. Subtract line 33 from line 24. For details on how to pay, see instructions	37 8,626
38	Estimated tax penalty (see instructions)	38
Third Party Designee	Do you want to allow another person to discuss this return with the IRS? See instructions <input type="checkbox"/> Yes. Complete below. <input type="checkbox"/> No	
	Designee's name	Phone no.
		Personal identification number (PIN)
Sign Here	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
Kayce L Dutton	04/15/22	CATTLE COMMISSIONER
Spouse's signature. If a joint return, both must sign.	Date	Spouse's occupation
	04/15/22	TEACHER
Phone no.	Email address	
Paid Preparer Use Only	Preparer's name	Preparer's signature
	Firm's name	Date
	Firm's address	PTIN
		Check if: <input type="checkbox"/> Self-employed
		Phone no.
		Firm's EIN

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

SCHEDULE 1 (Form 1040) <small>Department of the Treasury Internal Revenue Service</small>	Additional Income and Adjustments to Income ▶ Attach to Form 1040, 1040-SR, or 1040-NR. ▶ Go to www.irs.gov/Form1040 for instructions and the latest information.	OMB No. 1545-0074 <div style="font-size: 2em; font-weight: bold;">2021</div> Attachment Sequence No. 01
Name(s) shown on Form 1040, 1040-SR, or 1040-NR		Your social security number
Part I Additional Income		
1	Taxable refunds, credits, or offsets of state and local income taxes	1
2a	Alimony received	2a
b	Date of original divorce or separation agreement (see instructions) ▶ _____	
3	Business income or (loss). Attach Schedule C	3
4	Other gains or (losses). Attach Form 4797	4
5	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E	5
6	Farm income or (loss). Attach Schedule F	6
7	Unemployment compensation	7
8	Other income:	
a	Net operating loss	8a ()
b	Gambling income	8b
c	Cancellation of debt	8c
d	Foreign earned income exclusion from Form 2555	8d ()
e	Taxable Health Savings Account distribution	8e
f	Alaska Permanent Fund dividends	8f
g	Jury duty pay	8g
h	Prizes and awards	8h
i	Activity not engaged in for profit income	8i
j	Stock options	8j
k	Income from the rental of personal property if you engaged in the rental for profit but were not in the business of renting such property	8k
l	Olympic and Paralympic medals and USOC prize money (see instructions)	8l
m	Section 951(a) inclusion (see instructions)	8m
n	Section 951A(a) inclusion (see instructions)	8n
o	Section 461(l) excess business loss adjustment	8o
p	Taxable distributions from an ABLE account (see instructions)	8p
z	Other income. List type and amount ▶ _____	8z
9	Total other income. Add lines 8a through 8z	9
10	Combine lines 1 through 7 and 9. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 8	10

For Paperwork Reduction Act Notice, see your tax return instructions. Cat. No. 71479F Schedule 1 (Form 1040) 2021

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

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

Schedule 1 (Form 1040) 2021

Page **2**

Part II Adjustments to Income

11	Educator expenses	11	
12	Certain business expenses of reservists, performing artists, and fee-basis government officials. Attach Form 2106	12	
13	Health savings account deduction. Attach Form 8889	13	
14	Moving expenses for members of the Armed Forces. Attach Form 3903	14	
15	Deductible part of self-employment tax. Attach Schedule SE	15	
16	Self-employed SEP, SIMPLE, and qualified plans	16	
17	Self-employed health insurance deduction	17	
18	Penalty on early withdrawal of savings	18	
19a	Alimony paid	19a	
b	Recipient's SSN		
c	Date of original divorce or separation agreement (see instructions) ▶		
20	IRA deduction	20	
21	Student loan interest deduction	21	
22	Reserved for future use	22	
23	Archer MSA deduction	23	
24	Other adjustments:		
a	Jury duty pay (see instructions)	24a	
b	Deductible expenses related to income reported on line 8k from the rental of personal property engaged in for profit	24b	
c	Nontaxable amount of the value of Olympic and Paralympic medals and USOC prize money reported on line 8l	24c	
d	Reforestation amortization and expenses	24d	
e	Repayment of supplemental unemployment benefits under the Trade Act of 1974	24e	
f	Contributions to section 501(c)(18)(D) pension plans	24f	
g	Contributions by certain chaplains to section 403(b) plans	24g	
h	Attorney fees and court costs for actions involving certain unlawful discrimination claims (see instructions)	24h	
i	Attorney fees and court costs you paid in connection with an award from the IRS for information you provided that helped the IRS detect tax law violations	24i	
j	Housing deduction from Form 2555	24j	
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form 1041)	24k	
z	Other adjustments. List type and amount ▶	24z	
25	Total other adjustments. Add lines 24a through 24z	25	
26	Add lines 11 through 23 and 25. These are your adjustments to income . Enter here and on Form 1040 or 1040-SR, line 10, or Form 1040-NR, line 10a	26	

Schedule 1 (Form 1040) 2021

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

SCHEDULE 2 (Form 1040) <small>Department of the Treasury Internal Revenue Service</small>	Additional Taxes ▶ Attach to Form 1040, 1040-SR, or 1040-NR. ▶ Go to www.irs.gov/Form1040 for instructions and the latest information.	OMB No. 1545-0074 <div style="font-size: 2em; font-weight: bold;">2021</div> Attachment Sequence No. 02
Name(s) shown on Form 1040, 1040-SR, or 1040-NR		Your social security number

Part I Tax

Income Tax Paid*

1040 Line 22
minus
Schedule 2, Line 2

1 Alternative minimum tax. Attach Form 6251	1	
2 Excess advance premium tax credit repayment. Attach Form	2	
3 Add lines 1 and 2. Enter here and on Form 1040, 1040-SR, or 1040-NR	3	

Part II Other Taxes

*If negative, enter zero

4 Self-employment tax. Attach Schedule SE	4	
5 Social security and Medicare tax on unreported tip income. Attach Form 4137	5	
6 Uncollected social security and Medicare tax on wages. Attach Form 8919	6	
7 Total additional social security and Medicare tax. Add lines 5 and 6	7	
8 Additional tax on IRAs or other tax-favored accounts. Attach Form 5329 if required	8	
9 Household employment taxes. Attach Schedule H	9	
10 Repayment of first-time homebuyer credit. Attach Form 5405 if required	10	
11 Additional Medicare Tax. Attach Form 8959	11	
12 Net investment income tax. Attach Form 8960	12	
13 Uncollected social security and Medicare or RRTA tax on tips or group-term life insurance from Form W-2, box 12	13	
14 Interest on tax due on installment income from the sale of certain residential lots and timeshares	14	
15 Interest on the deferred tax on gain from certain installment sales with a sales price over \$150,000	15	
16 Recapture of low-income housing credit. Attach Form 8611	16	

(continued on page 2)

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

Cat. No. 71478U

Schedule 2 (Form 1040) 2021

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

Schedule 2 (Form 1040) 2021

Page **2**

Part II Other Taxes (continued)

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

Schedule 2 (Form 1040) 2021

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

SCHEDULE 3 (Form 1040) <small>Department of the Treasury Internal Revenue Service</small>	Additional Credits and Payments ▶ Attach to Form 1040, 1040-SR, or 1040-NR. ▶ Go to www.irs.gov/Form1040 for instructions and the latest information.	OMB No. 1545-0074 <div style="font-size: 2em; font-weight: bold;">2021</div> Attachment Sequence No. 03
Name(s) shown on Form 1040, 1040-SR, or 1040-NR		Your social security number

Part I Nonrefundable Credits

1 Foreign tax credit. Attach Form 1116 if required	1	
2 Credit for child and dependent care expenses from Form 2441, line 11. Attach Form 2441	2	
3 Education credits from Form 8863, line 19	3	
4 Retirement savings contributions credit. Attach Form 8880	4	
5 Residential energy credits. Attach Form 5695	5	
6 Other nonrefundable credits:		
a General business credit. Attach Form 3800	6a	
b Credit for prior year minimum tax. Attach Form 8801	6b	
c Adoption credit. Attach Form 8839	6c	
d Credit for the elderly or disabled. Attach Schedule R	6d	
e Alternative motor vehicle credit. Attach Form 8910	6e	
f Qualified plug-in motor vehicle credit. Attach Form 8936	6f	
g Mortgage interest credit. Attach Form 8396	6g	
h District of Columbia first-time homebuyer credit. Attach Form 8859	6h	
i Qualified electric vehicle credit. Attach Form 8834	6i	
j Alternative fuel vehicle refueling property credit. Attach Form 8911	6j	
k Credit to holders of tax credit bonds. Attach Form 8912	6k	
l Amount on Form 8978, line 14. See instructions	6l	
z Other nonrefundable credits. List type and amount ▶ _____	6z	
7 Total other nonrefundable credits. Add lines 6a through 6z	7	
8 Add lines 1 through 5 and 7. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 20	8	

(continued on page 2)

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

Schedule 3 (Form 1040) 2021

Page **2**

Part II Other Payments and Refundable Credits

9	Net premium tax credit. Attach Form 8962	9	
10	Amount paid with request for extension to file (see instructions)	10	
11	Excess social security and tier 1 RRTA tax withheld	11	
12	Credit for federal tax on fuels. Attach Form 4136	12	
13	Other payments or refundable credits:		
a	Form 2439	13a	
b	Qualified sick and family leave credits from Schedule(s) H and Form(s) 7202 for leave taken before April 1, 2021	13b	
c	Health coverage tax credit from Form 8885	13c	
d	Credit for repayment of amounts included in income from earlier years	13d	
e	Reserved for future use	13e	
f	Deferred amount of net 965 tax liability (see instructions)	13f	
g	Credit for child and dependent care expenses from Form 2441, line 10. Attach Form 2441	13g	
h	Qualified sick and family leave credits from Schedule(s) H and Form(s) 7202 for leave taken after March 31, 2021	13h	
z	Other payments or refundable credits. List type and amount ► _____	13z	
14	Total other payments or refundable credits. Add lines 13a through 13z	14	
15	Add lines 9 through 12 and 14. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 31	15	

Schedule 3 (Form 1040) 2021

SCHEDULE A (Form 1040) <small>Department of the Treasury Internal Revenue Service (99)</small>		Itemized Deductions ▶ Go to www.irs.gov/ScheduleA for instructions and the latest information. ▶ Attach to Form 1040 or 1040-SR. Caution: If you are claiming a net qualified disaster loss on Form 4684, see the instructions for line 16.		OMB No. 1545-0074 <div style="font-size: 2em; font-weight: bold; margin: 0;">2021</div> Attachment Sequence No. 07	
Name(s) shown on Form 1040 or 1040-SR KAYCE L DUTTON MONICA K DUTTON				Your social security number XXX-XX-1234	
Medical and Dental Expenses	Caution: Do not include expenses reimbursed or paid by others.				
	1	Medical and dental expenses (see instructions)	1		
	2	Enter amount from Form 1040 or 1040-SR, line 11	2	202,842	
	3	Multiply line 2 by 7.5% (0.075)	3	15,213	
	4	Subtract line 3 from line 1. If line 3 is more than line 1, enter -0-	4		
Taxes You Paid	5 State and local taxes.				
	a State and local income taxes or general sales taxes. You may include either income taxes or general sales taxes on line 5a, but not both. If you elect to include general sales taxes instead of income taxes, check this box <input type="checkbox"/>				
	5a		5a	12,902	
	5b		5b	15,122	
	5c		5c		
	5d		5d	28,024	
	5e		5e	10,000	
	6	Other taxes. List type and amount ▶	6		
	7	Add lines 5e and 6	7		10,000
	Interest You Paid <small>Caution: Your mortgage interest deduction may be limited (see instructions).</small>	8 Home mortgage interest and points. If you didn't use all of your home mortgage loan(s) to buy, build, or improve your home, see instructions and check this box <input type="checkbox"/>			
a Home mortgage interest and points reported to you on Form 1098. See instructions if limited					
8a			8a	24,370	
b Home mortgage interest not reported to you on Form 1098. See instructions if limited. If paid to the person from whom you bought the home, see instructions and show that person's name, identifying no., and address					
8b			8b		
c Points not reported to you on Form 1098. See instructions for special rules					
8c			8c		
8d			8d		
8e			8e	24,370	
9		Investment interest. Attach Form 4952 if required. See instructions.	9		
10	Add lines 8e and 9	10		24,370	
Gifts to Charity <small>Caution: If you made a gift and got a benefit for it, see instructions.</small>	11 Gifts by cash or check. If you made any gift of \$250 or more, see instructions				
	11		11	215	
	12 Other than by cash or check. If you made any gift of \$250 or more, see instructions. You must attach Form 8283 if over \$500.				
	12		12	300	
	13	Carryover from prior year	13		
	14	Add lines 11 through 13	14		515
Casualty and Theft Losses	15 Casualty and theft loss(es) from a federally declared disaster (other than net qualified disaster losses). Attach Form 4684 and enter the amount from line 18 of that form. See instructions				
	15		15		
Other Itemized Deductions	16 Other—from list in instructions. List type and amount ▶				
	16		16		
Total Itemized Deductions	17 Add the amounts in the far right column for lines 4 through 16. Also, enter this amount on Form 1040 or 1040-SR, line 12a				
	17		17		34,885
	18 If you elect to itemize deductions even though they are less than your standard deduction, check this box <input type="checkbox"/>				

For Paperwork Reduction Act Notice, see the Instructions for Forms 1040 and 1040-SR.

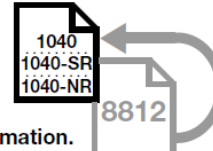
Cat. No. 17145C

Schedule A (Form 1040) 2021

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

SCHEDULE 8812
(Form 1040)Department of the Treasury
Internal Revenue Service (99)**Credits for Qualifying Children
and Other Dependents**

▶ Attach to Form 1040, 1040-SR, or 1040-NR.

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

OMB No. 1545-0074

2021Attachment
Sequence No. **47**Name(s) shown on return
KAYCE L DUTTONYour social security number
XXX-XX-1234**Part I-A Child Tax Credit and Credit for Other Dependents**

1	Enter the amount from line 11 of your Form 1040, 1040-SR, or 1040-NR	1	202,842
2a	Enter income from Puerto Rico that you excluded	2a	
b	Enter the amounts from lines 45 and 50 of your Form 2555	2b	
c	Enter the amount from line 15 of your Form 4563	2c	
d	Add lines 2a through 2c	2d	
3	Add lines 1 and 2d	3	202,842
4a	Number of qualifying children under age 18 with the required social security number	4a	2
b	Number of children included on line 4a who were under age 6 at the end of 2021	4b	2
c	Subtract line 4b from line 4a	4c	
5	If line 4a is more than zero, enter the amount from the Line 5 Worksheet ; otherwise, enter -0-	5	4,550
6	Number of other dependents, including any qualifying children who are not under age 18 or who do not have the required social security number Caution: Do not include yourself, your spouse, or anyone who is not a U.S. citizen, U.S. national, or U.S. resident alien. Also, do not include anyone you included on line 4a.	6	
7	Multiply line 6 by \$500	7	
8	Add lines 5 and 7	8	4,550
9	Enter the amount shown below for your filing status. • Married filing jointly—\$400,000 } • All other filing statuses—\$200,000 }	9	400,000
10	Subtract line 9 from line 3. • If zero or less, enter -0-. • If more than zero and not a multiple of \$1,000, enter the next multiple of \$1,000. For example, if the result is \$425, enter \$1,000; if the result is \$1,025, enter \$2,000, etc. }	10	
11	Multiply line 10 by 5% (0.05)	11	
12	Subtract line 11 from line 8. If zero or less, enter -0-	12	4,550
13	Check all the boxes that apply to you (or your spouse if married filing jointly). A Check here if you (or your spouse if married filing jointly) had a principal place of abode in the United States for more than half of 2021 <input checked="" type="checkbox"/> B Check here if you (or your spouse if married filing jointly) were a bona fide resident of Puerto Rico for 2021 <input type="checkbox"/>		

Part I-B Filers Who Check a Box on Line 13**Caution:** If you did not check a box on line 13, do not complete Part I-B; instead, skip to Part I-C.

14a	Enter the smaller of line 7 or line 12	14a	
b	Subtract line 14a from line 12	14b	4,550
c	If line 14a is zero, enter -0-; otherwise, enter the amount from the Credit Limit Worksheet A	14c	
d	Enter the smaller of line 14a or line 14c	14d	
e	Add lines 14b and 14d	14e	4,550
f	Enter the aggregate amount of advance child tax credit payments you (and your spouse if filing jointly) received for 2021. See your Letter(s) 6419 for the amounts to include on this line. If you are missing Letter 6419, see the instructions before entering an amount on this line. If you didn't receive any advance child tax credit payments for 2021, enter -0- Caution: If the amount on this line doesn't match the aggregate amounts reported to you (and your spouse if filing jointly) on your Letter(s) 6419, the processing of your return will be delayed.	14f	2,458
g	Subtract line 14f from line 14e. If zero or less, enter -0- on lines 14g through 14i and go to Part III	14g	2,092
h	Enter the smaller of line 14d or line 14g. This is your credit for other dependents. Enter this amount on line 19 of your Form 1040, 1040-SR, or 1040-NR	14h	
i	Subtract line 14h from line 14g. This is your refundable child tax credit. Enter this amount on line 28 of your Form 1040, 1040-SR, or 1040-NR	14i	2,092

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

Cat. No. 59761M

Schedule 8812 (Form 1040) 2021

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

Part I-C Filers Who Do Not Check a Box on Line 13**Caution:** If you checked a box on line 13, do not complete Part I-C.

15a	Enter the amount from the Credit Limit Worksheet A	15a	
b	Enter the smaller of line 12 or line 15a Additional child tax credit. Complete Parts II-A through II-C if you meet each of the following items. 1. You are not filing Form 2555. 2. Line 4a is more than zero. 3. Line 12 is more than line 15a.	15b	
c	If you completed Parts II-A through II-C, enter the amount from line 27; otherwise, enter -0-	15c	
d	Add lines 15b and 15c	15d	
e	Enter the aggregate amount of advance child tax credit payments you (and your spouse if filing jointly) received for 2021. See your Letter(s) 6419 for the amounts to include on this line. If you are missing Letter 6419, see the instructions before entering an amount on this line. If you didn't receive any advance child tax credit payments for 2021, enter -0- Caution: If the amount on this line doesn't match the aggregate amounts reported to you (and your spouse if filing jointly) on your Letter(s) 6419, the processing of your return will be delayed.	15e	
f	Subtract line 15e from line 15d. If zero or less, enter -0- on lines 15f through 15h and go to Part III	15f	
g	Enter the smaller of line 15b or line 15f. This is your nonrefundable child tax credit and credit for other dependents. Enter this amount on line 19 of your Form 1040, 1040-SR, or 1040-NR.	15g	
h	Subtract line 15g from line 15f. This is your additional child tax credit. Enter this amount on line 28 of your Form 1040, 1040-SR, or 1040-NR.	15h	

Part II-A Additional Child Tax Credit (use only if completing Part I-C)**Caution:** If you file Form 2555, do not complete Parts II-A through II-C; you cannot claim the additional child tax credit.**Caution:** If you checked a box on line 13, do not complete Parts II-A through II-C; you cannot claim the additional child tax credit.

16a	Subtract line 15b from line 12. If zero, skip Parts II-A and II-B and enter -0- on line 27	16a	
b	Number of qualifying children under 18 with the required social security number: _____ x \$1,400. Enter the result. If zero, skip Parts II-A and II-B and enter -0- on line 27 TIP: The number of children you use for this line is the same as the number of children you used for line 4a.	16b	
17	Enter the smaller of line 16a or line 16b	17	
18a	Earned income (see instructions)	18a	
b	Nontaxable combat pay (see instructions)	18b	
19	Is the amount on line 18a more than \$2,500? <input type="checkbox"/> No. Leave line 19 blank and enter -0- on line 20. <input type="checkbox"/> Yes. Subtract \$2,500 from the amount on line 18a. Enter the result	19	
20	Multiply the amount on line 19 by 15% (0.15) and enter the result Next. On line 16b, is the amount \$4,200 or more? <input type="checkbox"/> No. If line 20 is zero, enter -0- on line 15c. Otherwise, skip Part II-B and enter the smaller of line 17 or line 20 on line 27. <input type="checkbox"/> Yes. If line 20 is equal to or more than line 17, skip Part II-B and enter the amount from line 17 on line 27. Otherwise, go to line 21.	20	

Part II-B Certain Filers Who Have Three or More Qualifying Children

21	Withheld social security, Medicare, and Additional Medicare taxes from Form(s) W-2, boxes 4 and 6. If married filing jointly, include your spouse's amounts with yours. If your employer withheld or you paid Additional Medicare Tax or tier 1 RRTA taxes, see instructions	21	
22	Enter the total of the amounts from Schedule 1 (Form 1040), line 15; Schedule 2 (Form 1040), line 5; Schedule 2 (Form 1040), line 6; and Schedule 2 (Form 1040), line 13	22	
23	Add lines 21 and 22	23	
24	1040 and 1040-SR filers: Enter the total of the amounts from Form 1040 or 1040-SR, line 27a, and Schedule 3 (Form 1040), line 11. 1040-NR filers: Enter the amount from Schedule 3 (Form 1040), line 11. }	24	
25	Subtract line 24 from line 23. If zero or less, enter -0-	25	
26	Enter the larger of line 20 or line 25 Next, enter the smaller of line 17 or line 26 on line 27.	26	

Part II-C Additional Child Tax Credit

27	Enter this amount on line 15c	27	
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Part III Additional Tax (use only if line 14g or line 15f, whichever applies, is zero)

28a	Enter the amount from line 14f or line 15e, whichever applies	28a	
b	Enter the amount from line 14e or line 15d, whichever applies	28b	
29	Excess advance child tax credit payments. Subtract line 28b from line 28a. If zero, stop; you do not owe the additional tax	29	
30	Enter the number of qualifying children taken into account in determining the annual advance amount you received for 2021. See your Letter 6419 for this number. If you are missing your Letter 6419, you are filing a joint return, or you received more than one Letter 6419, see the instructions before entering a number on this line Caution: If the amount on this line doesn't match the number of qualifying children reported to you (and your spouse if filing jointly) on your Letter(s) 6419, the processing of your return will be delayed.	30	
31	Enter the smaller of line 4a or line 30	31	
32	Subtract line 31 from line 30. If zero, skip to line 40 and enter the amount from line 29; otherwise, continue to line 33	32	
33	Enter the amount shown below for your filing status. <ul style="list-style-type: none"> • Married filing jointly or Qualifying widow(er)—\$60,000 • Head of household—\$50,000 • All other filing statuses—\$40,000 	33	
34	Subtract line 33 from line 3. If zero or less, enter -0-	34	
35	Enter the amount from line 33	35	
36	Divide line 34 by line 35. Enter the result as a decimal (rounded to at least three places). If the result is 1.000 or more, enter 1.000	36	
37	Multiply line 32 by \$2,000	37	
38	Multiply line 37 by line 36	38	
39	Subtract line 38 from line 37	39	
40	Subtract line 39 from line 29. If zero or less, enter -0-. This is your additional tax. If more than zero, enter this amount on Schedule 2 (Form 1040), line 19	40	

Schedule 8812 (Form 1040) 2021

Additional Medicare Tax

OMB No. 1545-0074

2021
Attachment
Sequence No. **71**

- If any line does not apply to you, leave it blank. See separate instructions.
► Attach to Form 1040, 1040-SR, 1040-NR, 1040-PR, or 1040-SS.
► Go to www.irs.gov/Form8959 for instructions and the latest information.

Name(s) shown on return

KAYCE L DUTTON

Your social security number

XXX-XX-1234

Part I Additional Medicare Tax on Medicare Wages

1 Medicare wages and tips from Form W-2, box 5. If you have more than one Form W-2, enter the total of the amounts from box 5	1	216,995		
2 Unreported tips from Form 4137, line 6	2			
3 Wages from Form 8919, line 6	3			
4 Add lines 1 through 3	4	216,995		
5 Enter the following amount for your filing status: Married filing jointly \$250,000 Married filing separately \$125,000 Single, Head of household, or Qualifying widow(er) \$200,000	5	250,000		
6 Subtract line 5 from line 4. If zero or less, enter -0-			6	
7 Additional Medicare Tax on Medicare wages. Multiply line 6 by 0.9% (0.009). Enter here and go to Part II			7	

Part II Additional Medicare Tax on Self-Employment Income

8 Self-employment income from Schedule SE (Form 1040), Part I, line 6. If you had a loss, enter -0- (Form 1040-PR or 1040-SS filers, see instructions.)	8			
9 Enter the following amount for your filing status: Married filing jointly \$250,000 Married filing separately \$125,000 Single, Head of household, or Qualifying widow(er) \$200,000	9	250,000		
10 Enter the amount from line 4	10	216,995		
11 Subtract line 10 from line 9. If zero or less, enter -0-	11	33,005		
12 Subtract line 11 from line 8. If zero or less, enter -0-			12	
13 Additional Medicare Tax on self-employment income. Multiply line 12 by 0.9% (0.009). Enter here and go to Part III			13	

Part III Additional Medicare Tax on Railroad Retirement Tax Act (RRTA) Compensation

14 Railroad retirement (RRTA) compensation and tips from Form(s) W-2, box 14 (see instructions)	14			
15 Enter the following amount for your filing status: Married filing jointly \$250,000 Married filing separately \$125,000 Single, Head of household, or Qualifying widow(er) \$200,000	15	250,000		
16 Subtract line 15 from line 14. If zero or less, enter -0-			16	
17 Additional Medicare Tax on railroad retirement (RRTA) compensation. Multiply line 16 by 0.9% (0.009). Enter here and go to Part IV			17	

Part IV Total Additional Medicare Tax

18 Add lines 7, 13, and 17. Also include this amount on Schedule 2 (Form 1040), line 11 (Form 1040-PR or 1040-SS filers, see instructions), and go to Part V			18	
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Part V Withholding Reconciliation

19 Medicare tax withheld from Form W-2, box 6. If you have more than one Form W-2, enter the total of the amounts from box 6	19	3,147		
20 Enter the amount from line 1	20	216,995		
21 Multiply line 20 by 1.45% (0.0145). This is your regular Medicare tax withholding on Medicare wages	21	3,146		
22 Subtract line 21 from line 19. If zero or less, enter -0-. This is your Additional Medicare Tax withholding on Medicare wages			22	1
23 Additional Medicare Tax withholding on railroad retirement (RRTA) compensation from Form W-2, box 14 (see instructions)			23	
24 Total Additional Medicare Tax withholding. Add lines 22 and 23. Also include this amount with federal income tax withholding on Form 1040, 1040-SR, or 1040-NR, line 25c (Form 1040-PR or 1040-SS filers, see instructions)			24	1

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

Cat. No. 59475X

Form **8959** (2021)

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

Part I-C Filers Who Do Not Check a Box on Line 13**Caution:** If you checked a box on line 13, do not complete Part I-C.

15a	Enter the amount from the Credit Limit Worksheet A	15a	
b	Enter the smaller of line 12 or line 15a	15b	
Additional child tax credit. Complete Parts II-A through II-C if you meet each of the following items.			
1. You are not filing Form 2555.			
2. Line 4a is more than zero.			
3. Line 12 is more than line 15a.			
c	If you completed Parts II-A through II-C, enter the amount from line 27; otherwise, enter -0-	15c	
d	Add lines 15b and 15c	15d	
e	Enter the aggregate amount of advance child tax credit payments you (and your spouse if filing jointly) received for 2021. See your Letter(s) 6419 for the amounts to include on this line. If you are missing Letter 6419, see the instructions before entering an amount on this line. If you didn't receive any advance child tax credit payments for 2021, enter -0-	15e	
Caution: If the amount on this line doesn't match the aggregate amounts reported to you (and your spouse if filing jointly) on your Letter(s) 6419, the processing of your return will be delayed.			
f	Subtract line 15e from line 15d. If zero or less, enter -0- on lines 15f through 15h and go to Part III	15f	
g	Enter the smaller of line 15b or line 15f. This is your nonrefundable child tax credit and credit for other dependents. Enter this amount on line 19 of your Form 1040, 1040-SR, or 1040-NR.	15g	
h	Subtract line 15g from line 15f. This is your additional child tax credit. Enter this amount on line 28 of your Form 1040, 1040-SR, or 1040-NR.	15h	

Part II-A Additional Child Tax Credit (use only if completing Part I-C)**Caution:** If you file Form 2555, do not complete Parts II-A through II-C; you cannot claim the additional child tax credit.**Caution:** If you checked a box on line 13, do not complete Parts II-A through II-C; you cannot claim the additional child tax credit.

16a	Subtract line 15b from line 12. If zero, skip Parts II-A and II-B and enter -0- on line 27	16a	
b	Number of qualifying children under 18 with the required social security number: _____ x \$1,400. Enter the result. If zero, skip Parts II-A and II-B and enter -0- on line 27	16b	
TIP: The number of children you use for this line is the same as the number of children you used for line 4a.			
17	Enter the smaller of line 16a or line 16b	17	
18a	Earned income (see instructions)	18a	
b	Nontaxable combat pay (see instructions)	18b	
19	Is the amount on line 18a more than \$2,500? <input type="checkbox"/> No. Leave line 19 blank and enter -0- on line 20. <input type="checkbox"/> Yes. Subtract \$2,500 from the amount on line 18a. Enter the result	19	
20	Multiply the amount on line 19 by 15% (0.15) and enter the result Next. On line 16b, is the amount \$4,200 or more? <input type="checkbox"/> No. If line 20 is zero, enter -0- on line 15c. Otherwise, skip Part II-B and enter the smaller of line 17 or line 20 on line 27. <input type="checkbox"/> Yes. If line 20 is equal to or more than line 17, skip Part II-B and enter the amount from line 17 on line 27. Otherwise, go to line 21.	20	

Part II-B Certain Filers Who Have Three or More Qualifying Children

21	Withheld social security, Medicare, and Additional Medicare taxes from Form(s) W-2, boxes 4 and 6. If married filing jointly, include your spouse's amounts with yours. If your employer withheld or you paid Additional Medicare Tax or tier 1 RRTA taxes, see instructions	21	
22	Enter the total of the amounts from Schedule 1 (Form 1040), line 15; Schedule 2 (Form 1040), line 5; Schedule 2 (Form 1040), line 6; and Schedule 2 (Form 1040), line 13	22	
23	Add lines 21 and 22	23	
24	1040 and 1040-SR filers: Enter the total of the amounts from Form 1040 or 1040-SR, line 27a, and Schedule 3 (Form 1040), line 11. 1040-NR filers: Enter the amount from Schedule 3 (Form 1040), line 11. }	24	
25	Subtract line 24 from line 23. If zero or less, enter -0-	25	
26	Enter the larger of line 20 or line 25 Next, enter the smaller of line 17 or line 26 on line 27.	26	

Part II-C Additional Child Tax Credit

27	Enter this amount on line 15c	27	
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Sample Tax Return Transcript – Kayce and Monica Dutton



Internal Revenue Service

United States Department of the Treasury

This Product Contains Sensitive Taxpayer Data

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

Tax Return Transcript

SSN Provided: XXX-XX-1234

Tax Period Ending: Dec. 31, 2021

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

SSN: XXX-XX-1234

SPOUSE SSN: XXX-XX-5678

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

ADDRESS: 4230 D

1040: P1 FILING STATUS: Married Filed Joint

FORM NUMBER: 1040

CYCLE POSTED: 20221405

RECEIVED DATE: Apr.15, 2022

REMITTANCE: \$0.00

EXEMPTION NUMBER: 04

1040: P1 DEPENDENT 1 NAME CTRL: DUTT

DEPENDENT 1 SSN: XXX-XX-9101

DEPENDENT 2 NAME CTRL: DUTT

DEPENDENT 2 SSN: XXX-XX-1121

DEPENDENT 3 NAME CTRL:

DEPENDENT 3 SSN:

DEPENDENT 4 NAME CTRL:

DEPENDENT 4 SSN:

PTIN:

PREPARER EIN:

Income

1040: 1 * WAGES, SALARIES, TIPS, ETC:.....\$202,095.00

TAXABLE INTEREST INCOME: SCH B:.....\$747.00

1040: 2a TAX-EXEMPT INTEREST:.....\$0.00

ORDINARY DIVIDEND INCOME: SCH B:.....\$0.00

QUALIFIED DIVIDENDS:.....\$0.00

REFUNDS OF STATE/LOCAL TAXES:.....\$0.00

ALIMONY RECEIVED:.....\$0.00

BUSINESS INCOME OR LOSS (Schedule C):.....\$0.00

Sch 1: 3 * BUSINESS INCOME OR LOSS: SCH C PER COMPUTER:.....\$0.00

CAPITAL GAIN OR LOSS: (Schedule D):.....\$0.00

CAPITAL GAINS OR LOSS: SCH D PER COMPUTER:.....\$0.00

OTHER GAINS OR LOSSES (Form 4797):.....\$0.00

1040: 4a TOTAL IRA DISTRIBUTIONS:.....\$0.00

1040: 4b TAXABLE IRA DISTRIBUTIONS:.....\$0.00

1040: 5a TOTAL PENSIONS AND ANNUITIES:.....\$0.00

1040: 5b TAXABLE PENSION/ANNUITY AMOUNT:.....\$0.00

ADDITIONAL INCOME:.....\$0.00

ADDITIONAL INCOME PER COMPUTER:.....\$0.00

REFUNDABLE CREDITS PER COMPUTER:.....\$2,092.00

REFUNDABLE EDUCATION CREDIT PER COMPUTER:.....\$0.00

QUALIFIED BUSINESS INCOME DEDUCTION:.....\$0.00

RENT/ROYALTY/PARTNERSHIP/ESTATE (Schedule E):.....\$0.00

RENT/ROYALTY/PARTNERSHIP/ESTATE (Schedule E) PER COMPUTER:.....\$0.00

*Income earned from work: IRS Form 1040 Line 1 + Schedule 1, Line 3 + Schedule 1, Line 6 + Schedule K-1 (IRS Form 1065)-Box 14 (Code A).

If any individual earning item is negative, do not include that amount in your calculation.

Sch 1: 6 *

RENT/ROYALTY INCOME/LOSS PER COMPUTER:.....	\$0.00
ESTATE/TRUST INCOME/LOSS PER COMPUTER:.....	\$0.00
PARTNERSHIP/S-CORP INCOME/LOSS PER COMPUTER:.....	\$0.00
FARM INCOME OR LOSS (Schedule F):.....	\$0.00
FARM INCOME OR LOSS (Schedule F) PER COMPUTER:.....	\$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
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
EXCESS ADV CHILD TAX CREDIT PER COMPUTER:.....	\$0.00
PRIMARY ECONOMIC PAYMENT 2:.....	\$0.00
SECONDARY ECONOMIC PAYMENT 2:.....	\$0.00
PRIMARY ADVANCED CTC PAYMENTS:.....	\$819.50
SECONDARY ADVANCED CTC PAYMENTS:.....	\$1,638.50
ADDITIONAL CTC EARNED INCOME:.....	\$0.00
EIC PRIOR YEAR EARNED INCOME:.....	\$0.00
CTC PRIOR YEAR EARNED INCOME:.....	\$0.00
QUALIFIED BUSINESS INCOME DEDUCTION:.....	\$0.00
F8995 QUALIFIED BUSINESS INCOME DEDUCTION COMPUTER:.....	\$0.00
PRIMARY ECONOMIC IMPACT PAYMENT:.....	\$2,800.00
SECONDARY ECONOMIC IMPACT PAYMENT:.....	\$2,800.00
SCHOLARSHIP FELLOWSHIP GRANT:.....	\$0.00
TOTAL INCOME:.....	\$202,842.00
TOTAL INCOME PER COMPUTER:.....	\$202,842.00

Adjustments to Income

Sch 1: 13

EDUCATOR EXPENSES:.....	\$0.00
EDUCATOR EXPENSES PER COMPUTER:.....	\$0.00
RESERVIST AND OTHER BUSINESS EXPENSE:.....	\$0.00
HEALTH SAVINGS ACCT DEDUCTION:.....	\$0.00
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

Sch 1: 16

KEOGH/SEP CONTRIBUTION DEDUCTION:.....	\$0.00
SELF-EMP HEALTH INS DEDUCTION:.....	\$0.00
EARLY WITHDRAWAL OF SAVINGS PENALTY:.....	\$0.00
ALIMONY PAID SSN:.....	\$0.00
ALIMONY PAID:.....	\$0.00
SCHOLARSHIP FELLOWSHIP EXCLUDED:.....	\$0.00
IRA DEDUCTION:.....	\$0.00

Sch 1: 20

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
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:.....	\$202,842.00
ADJUSTED GROSS INCOME PER COMPUTER:.....	\$202,842.00

1040: 11

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:.....	\$167,957.00

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

Sch 2: 2**

Sch 3: 3

EXEMPTION AMOUNT PER COMPUTER:.....	\$0.00
TAXABLE INCOME:.....	\$167,957.00
TAXABLE INCOME PER COMPUTER:.....	\$167,957.00
TOTAL POSITIVE INCOME PER COMPUTER:.....	\$202,842.00
TENTATIVE TAX:.....	\$28,448.00
TENTATIVE TAX PER COMPUTER:.....	\$28,448.00
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
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 AND OTHER DEPENDENT CREDIT:.....	\$0.00
CHILD AND OTHER DEPENDENT 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
TOTAL OTHER NON REFUNDABLE CREDIT:.....	\$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
SICK FAMILY LEAVE CREDIT:.....	\$0.00
NON ITEMIZED CHARITABLE CONTRIBUTION DEDUCTION:.....	\$0.00
NON ITEMIZED CHARITABLE CONTRIBUTION PER COMPUTER:.....	\$0.00
REFUNDABLE CHILD CARE CREDIT:.....	\$0.00
SICK FAMILY LEAVE CREDIT AFTER 3-31-21:.....	\$0.00
REFUNDABLE CHILD CARE CREDIT VERIFIED:.....	\$0.00
RECOVERY REBATE CREDIT:.....	\$0.00
RECOVERY REBATE CREDIT PER COMPUTER:.....	\$0.00
RECOVERY REBATE CREDIT VERIFIED:.....	\$0.00
OTHER CREDITS:.....	\$0.00
TOTAL CREDITS:.....	\$0.00
TOTAL CREDITS PER COMPUTER:.....	\$0.00
*** INCOME TAX AFTER CREDITS PER COMPUTER:.....	\$28,448.00

1040: 22
Sch 2: 2

"Income Tax After Credits Per Computer"	\$28,448.00 ***
- "Excess Advance Premium Tax Credit Repayment Amount"	- \$0.00 **
= Income Tax Paid	= \$28,448.00 ***

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

***If Income Tax Paid is negative, enter zero.

IRAF TAX PER COMPUTER:.....	\$0.00
TP TAX FIGURES (REDUCED BY IRAF) PER COMPUTER:.....	\$28,448.00
IMF TOTAL TAX (REDUCED BY IRAF) PER COMPUTER:.....	\$28,448.00
TOTAL OTHER TAXES PER COMPUTER:.....	\$0.00
UNPAID FICA ON REPORTED TIPS:.....	\$0.00
INTEREST ON DEFERRED TAX:.....	\$0.00
TOTAL OTHER TAXES:.....	\$0.00
RECAPTURE TAX: F8611:.....	\$0.00
HOUSEHOLD EMPLOYMENT TAXES:.....	\$0.00
HOUSEHOLD EMPLOYMENT TAXES PER COMPUTER:.....	\$0.00
INTEREST DUE ON INSTALLMENT:.....	\$0.00
SCH 8812 ADDITIONAL TAX COMPUTER:.....	\$0.00
REFUNDABLE CHILD CARE COMPUTER:.....	\$0.00
HEALTH COVERAGE RECAPTURE: F8885:.....	\$0.00
DEFERRED TAX SCH H SE:.....	\$0.00
MAX DEFERRED TAX PER COMPUTER:.....	\$0.00
TOTAL ADDITIONAL TAXES:.....	\$0.00
TOTAL ASSESSMENT PER COMPUTER:.....	\$28,448.00
TOTAL TAX LIABILITY TP FIGURES:.....	\$28,448.00
TOTAL TAX LIABILITY TP FIGURES PER COMPUTER:.....	\$28,448.00

Payments

FEDERAL INCOME TAX WITHHELD:.....	\$17,730.00
SCH 8812 ADDITIONAL TAX:.....	\$0.00
ESTIMATED TAX PAYMENTS:.....	\$0.00
OTHER PAYMENT CREDIT:.....	\$0.00
REFUNDABLE EDUCATION CREDIT:.....	\$0.00
REFUNDABLE EDUCATION CREDIT PER COMPUTER:.....	\$0.00
REFUNDABLE EDUCATION CREDIT VERIFIED:.....	\$0.00
REFUNDABLE CREDITS:.....	\$2,092.00
EARNED INCOME CREDIT:.....	\$0.00
EARNED INCOME CREDIT PER COMPUTER:.....	\$0.00
EARNED INCOME CREDIT NONTAXABLE COMBAT PAY:.....	\$0.00
SCHEDULE 8812 NONTAXABLE COMBAT PAY:.....	\$0.00
EXCESS SOCIAL SECURITY & RRTA TAX WITHHELD:.....	\$0.00
SCHEDULE 8812 TOT SS/MEDICARE WITHHELD:.....	\$0.00
SCHEDULE 8812 ADDITIONAL CHILD TAX CREDIT:.....	\$2,092.00
SCHEDULE 8812 ADDITIONAL CHILD TAX CREDIT PER COMPUTER:.....	\$2,092.00
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
SEC 965 TAX INSTALLMENT:.....	\$0.00
SEC 965 TAX LIABILITY:.....	\$0.00
PREMIUM TAX CREDIT AMOUNT:.....	\$0.00
PREMIUM TAX CREDIT VERIFIED AMOUNT:.....	\$0.00
PRIMARY NAP FIRST TIME HOME BUYER INSTALLMENT AMT:.....	\$0.00
SECONDARY NAP FIRST TIME HOME BUYER INSTALLMENT AMT:.....	\$0.00
FIRST TIME HOMEBUYER CREDIT REPAYMENT AMOUNT:.....	\$0.00
FORM 5405 TOTAL HOMEBUYERS CREDIT REPAYMENT PER COMPUTER:.....	\$0.00
SMALL EMPLOYER HEALTH INSURANCE PER COMPUTER:.....	\$0.00
SMALL EMPLOYER HEALTH INSURANCE PER COMPUTER (2):.....	\$0.00
TOTAL OTHER PAYMENTS REFUNDABLE:.....	\$0.00
TOTAL PAYMENTS:.....	\$19,822.00
TOTAL PAYMENTS PER COMPUTER:.....	\$19,822.00

Refund or Amount Owed

AMOUNT YOU OWE:.....	\$8,626.00
APPLIED TO NEXT YEAR'S ESTIMATED TAX:.....	\$0.00
ESTIMATED TAX PENALTY:.....	\$0.00
TAX ON INCOME LESS STATE REFUND PER COMPUTER:.....	\$0.00
BAL DUE/OVER PYMT USING TP FIG PER COMPUTER:.....	\$8,626.00
BAL DUE/OVER PYMT USING COMPUTER FIGURES:.....	\$8,626.00
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:.....\$15,213.00
ADJUSTED GROSS INCOME PERCENTAGE PER COMPUTER 10 PERCENT:.....\$0.00
ADJUSTED GROSS INCOME PERCENTAGE PER COMPUTER 7.5 PERCENT:.....\$15,213.00
NET MEDICAL DEDUCTION:.....\$0.00
NET MEDICAL DEDUCTION PER COMPUTER:.....\$0.00

TAXES PAID

STATE AND LOCAL INCOME OR SALES TAXES:.....\$12,902.00
REAL ESTATE TAXES:.....\$15,122.00
PERSONAL PROPERTY TAXES:.....\$0.00
OTHER TAXES AMOUNT:.....\$0.00
SCH A TAX DEDUCTIONS:.....\$10,000.00
SCH A TAX PER COMPUTER:.....\$10,000.00

INTEREST PAID

MORTGAGE INTEREST (FINANCIAL):.....\$24,370.00
MORTGAGE INTEREST (INDIVIDUAL):.....\$0.00
DEDUCTIBLE POINTS:.....\$0.00
QUALIFIED MORTGAGE INSURANCE PREMIUMS:.....\$0.00
DEDUCTIBLE INVESTMENT INTEREST:.....\$0.00
TOTAL INTEREST DEDUCTION:.....\$24,370.00
TOTAL INTEREST DEDUCTION PER COMPUTER:.....\$24,370.00

CHARITABLE CONTRIBUTIONS

CASH CONTRIBUTIONS:.....\$215.00
OTHER THAN CASH: Form 8283:.....\$300.00
CARRYOVER FROM PRIOR YEAR:.....\$0.00
SCH A TOTAL CONTRIBUTIONS:.....\$515.00
SCH A TOTAL CONTRIBUTIONS PER COMPUTER:.....\$515.00

CASUALTY AND THEFT LOSS

CASUALTY OR THEFT LOSS:.....\$0.00

JOBS AND MISCELLANEOUS

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

OTHER MISCELLANEOUS

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

TOTAL ITEMIZED DEDUCTIONS

TOTAL ITEMIZED DEDUCTIONS:.....\$34,885.00
TOTAL ITEMIZED DEDUCTIONS PER COMPUTER:.....\$34,885.00
RECOMPUTED TOTAL ITEMIZED DEDUCTIONS PER COMPUTER:.....\$0.00
ELECT ITEMIZED DEDUCTION INDICATOR:.....
SCH A ITEMIZED PERCENTAGE PER COMPUTER:.....\$0.00

Interest and Dividends

GROSS SCHEDULE B INTEREST:.....	\$747.00
TAXABLE INTEREST INCOME:.....	\$747.00
EXCLUDABLE SAVINGS FROM BOND INT:.....	\$0.00
GROSS SCHEDULE B DIVIDENDS:.....	\$0.00
DIVIDEND INCOME:.....	\$0.00
FOREIGN ACCOUNTS IND:.....	None
REQUIRED TO FILE FINCEN FORM 114:.....	None

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

Form 8959 Additional Medicare Tax

MEDICAL WAGES:.....	\$216,995.00
UNREPORTED TIPS:.....	\$0.00
WAGES FROM FORM 8919:.....	\$0.00
ADDITIONAL MEDICARE TAX ON MEDICARE WAGES:.....	\$0.00
ADDITIONAL MEDICARE TAX ON MEDICARE WAGES PER COMPUTER:.....	\$0.00
SELF EMPLOYMENT INCOME:.....	\$0.00
ADDITIONAL MEDICARE TAX ON SELF-EMPLOYMENT INCOME:.....	\$0.00
ADDITIONAL MEDICARE TAX ON SELF-EMPLOYMENT INCOME PER COMPUTER:.....	\$0.00
RAILROAD RETIREMENT COMPENSATION:.....	\$0.00
TIER I EMPLOYEE ADDITIONAL MEDICARE TAX ON RAILROAD COMPENSATION:.....	\$0.00
TIER I EMPLOYEE ADDITIONAL MEDICARE TAX ON RAILROAD COMPENSATION PER COMPUTER:.....	\$0.00
MEDICARE TAX WITHHELD W-2 BOX 6:.....	\$3,147.00
ADDITIONAL MEDICARE TAX WITHHELD W-2 BOX 14:.....	\$0.00
TOTAL ADDITIONAL MEDICARE TAX:.....	\$0.00
TOTAL ADDITIONAL MEDICARE TAX WITHHOLDING:.....	\$1.00
TOTAL ADDITIONAL MEDICARE TAX WITHHOLDING VERIFIED:.....	\$0.00
TOTAL ADDITIONAL MEDICARE TAX WITHHOLDING PER COMPUTER:.....	\$1.00

This Product Contains Sensitive Taxpayer Data

Appendices

Appendix A

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

Appendix B

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

Appendix C

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

Appendix D

2021 IRS Form 1040 Schedules Required for Federal Verification

Appendix E

Current Year Transcript Availability

Appendix F

References, Resources and Websites – Tax Returns and Transcripts

Appendix A

Sample 2021 W-2 Form

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

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

22222		a Employee's social security number		OMB No. 1545-0008	
b Employer identification number (EIN)		1 Wages, tips, other compensation 71,281.42		2 Federal income tax withheld 6,975.02	
c Employer's name, address, and ZIP code		3 Social security wages 79,431.34		4 Social security tax withheld 4,924.76	
		5 Medicare wages and tips 79,431.34		6 Medicare tax withheld 1,151.77	
		7 Social security tips		8 Allocated tips	
d Control number		9		10 Dependent care benefits	
e Employee's first name and initial		Last name		Suff.	
f Employee's address and ZIP code		11 Nonqualified plans		12a E 3,491.28	
		13 Statutory employee <input type="checkbox"/> Retirement plan <input checked="" type="checkbox"/> Third-party sick pay <input type="checkbox"/>		12b DD 12,582.60	
		14 Other		12c	
				12d	
15 State	Employer's state ID number	16 State wages, tips, etc. 71,281.42	17 State income tax 1,970.41	18 Local wages, tips, etc.	19 Local income tax
				20 Locality name	
<div> <div>Form W-2 Wage and Tax Statement</div> <div>2021</div> <div>Department of the Treasury—Internal Revenue Service</div> </div>					

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	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 (including deferrals under a SIMPLE 401(k) arrangement)	N	Uncollected Medicare tax on taxable cost of group-term life insurance over \$50,000 (former employees only)	Z	Income under a nonqualified deferred compensation plan that fails to satisfy section 409A
E	Elective deferrals under a section 403(b) salary reduction agreement	P	Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces	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	FF	Permitted benefits under a qualified small employer health reimbursement arrangement

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

Sample 2021 Wage and Income Statement



Internal Revenue Service

United States Department of the Treasury

This Product Contains Sensitive Taxpayer Data

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

Wage and Income Transcript

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

Form W-2 Wage and Tax Statement

Employer:
Employer Identification Number (EIN):

Employee:
Employee's Social Security Number: XXX-XX-1234
KAYC JOHN DUTT
4230 D

Submission Type:.....Original document

Wages, Tips and Other Compensation:.....	\$71,281.00	- - - - -> Box 1
Federal Income Tax Withheld:.....	\$6,975.00	- -> Box 2
Social Security Wages:.....	\$79,431.00	- - - - -> Box 3
Social Security Tax Withheld:.....	\$4,924.00	- -> Box 4
Medicare Wages and Tips:.....	\$79,431.00	- - - - -> Box 5
Medicare Tax Withheld:.....	\$1,151.00	- -> Box 6
Social Security Tips:.....	\$0.00	- - - - -> Box 7
Allocated Tips:.....	\$0.00	- -> Box 8
Dependent Care Benefits:.....	\$0.00	- - - - -> Box 10
Deferred Compensation:.....	\$3,491.00	- -> Box 12a-d (D, E, F, G, H)
Code "Q" Nontaxable Combat Pay:.....	\$0.00	
Code "W" Employer Contributions to a Health Savings Account:.....	\$0.00	
Code "Y" Deferrals under a section 409A nonqualified Deferred Compensation plan:.....	\$0.00	
Code "Z" Income under section 409A on a nonqualified Deferred Compensation plan:.....	\$0.00	
Code "R" Employer's Contribution to MSA:.....	\$0.00	
Code "S" Employer's Contribution to Simple Account:.....	\$0.00	- - - - -> Box 12a-d (S)
Code "T" Expenses Incurred for Qualified Adoptions:.....	\$0.00	
Code "V" Income from exercise of non-statutory stock options:.....	\$0.00	
Code "AA" Designated Roth Contributions under a Section 401(k) Plan:.....	\$0.00	
Code "BB" Designated Roth Contributions under a Section 403(b) Plan:.....	\$0.00	
Code "DD" Cost of Employer-Sponsored Health Coverage:.....	\$12,582.00	
Code "EE" Designated ROTH Contributions Under a Governmental Section 457(b) Plan:.....	\$0.00	
Code "FF" Permitted benefits under a qualified small employer health reimbursement arrangement:.....	\$0.00	

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

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

Appendix B

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

Schedule K-1 (Form 1065)		2021	<input type="checkbox"/> Final K-1 <input type="checkbox"/> Amended K-1 OMB No. 1545-0123												
Department of the Treasury Internal Revenue Service		For calendar year 2021, or tax year													
beginning / / 2021 ending / /															
Partner's Share of Income, Deductions, Credits, etc. ▶ See back of form and separate instructions.															
Part I Information About the Partnership		Part III Partner's Share of Current Year Income, Deductions, Credits, and Other Items													
A Partnership's employer identification number		1 Ordinary business income (loss)	14 Self-employment earnings (loss)												
B Partnership's name, address, city, state, and ZIP code		2 Net rental real estate income (loss)													
C IRS center where partnership filed return ▶		3 Other net rental income (loss)	15 Credits												
D <input type="checkbox"/> Check if this is a publicly traded partnership (PTP)		4a Guaranteed payments for services													
		4b Guaranteed payments for capital	16 Schedule K-3 is attached if checked ▶ <input type="checkbox"/>												
		4c Total guaranteed payments	17 Alternative minimum tax (AMT) items												
		5 Interest income													
Part II Information About the Partner		6a Ordinary dividends													
E Partner's SSN or TIN (Do not use TIN of a disregarded entity. See instructions.)		6b Qualified dividends	18 Tax-exempt income and nondeductible expenses												
F Name, address, city, state, and ZIP code for partner entered in E. See instructions.		6c Dividend equivalents													
		7 Royalties													
		8 Net short-term capital gain (loss)													
G <input type="checkbox"/> General partner or LLC member-manager <input type="checkbox"/> Limited partner or other LLC member		9a Net long-term capital gain (loss)	19 Distributions												
H1 <input type="checkbox"/> Domestic partner <input type="checkbox"/> Foreign partner		9b Collectibles (28%) gain (loss)													
H2 <input type="checkbox"/> If the partner is a disregarded entity (DE), enter the partner's: TIN _____ Name _____		9c Unrecaptured section 1250 gain	20 Other information												
I1 What type of entity is this partner? _____		10 Net section 1231 gain (loss)													
I2 If this partner is a retirement plan (IRA/SEP/Keogh/etc.), check here ▶ <input type="checkbox"/>		11 Other income (loss)													
J Partner's share of profit, loss, and capital (see instructions): <div style="display: flex; justify-content: space-between;"> <div>Beginning</div> <div>Ending</div> </div> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 30%;">Profit</td> <td style="width: 10%; text-align: center;">%</td> <td style="width: 30%;"></td> <td style="width: 10%; text-align: center;">%</td> </tr> <tr> <td>Loss</td> <td style="text-align: center;">%</td> <td></td> <td style="text-align: center;">%</td> </tr> <tr> <td>Capital</td> <td style="text-align: center;">%</td> <td></td> <td style="text-align: center;">%</td> </tr> </table> Check if decrease is due to sale or exchange of partnership interest . ▶ <input type="checkbox"/>		Profit	%		%	Loss	%		%	Capital	%		%	12 Section 179 deduction	21 Foreign taxes paid or accrued
Profit	%		%												
Loss	%		%												
Capital	%		%												
K Partner's share of liabilities: <div style="display: flex; justify-content: space-between;"> <div>Beginning</div> <div>Ending</div> </div> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 30%;">Nonrecourse . . . \$</td> <td style="width: 10%;"></td> <td style="width: 30%;"></td> <td style="width: 10%; text-align: right;">\$</td> </tr> <tr> <td>Qualified nonrecourse financing . . . \$</td> <td></td> <td></td> <td style="text-align: right;">\$</td> </tr> <tr> <td>Recourse . . . \$</td> <td></td> <td></td> <td style="text-align: right;">\$</td> </tr> </table> Check this box if Item K includes liability amounts from lower tier partnerships ▶ <input type="checkbox"/>		Nonrecourse . . . \$			\$	Qualified nonrecourse financing . . . \$			\$	Recourse . . . \$			\$	13 Other deductions	
Nonrecourse . . . \$			\$												
Qualified nonrecourse financing . . . \$			\$												
Recourse . . . \$			\$												
L Partner's Capital Account Analysis															
Beginning capital account . . . \$		22 <input type="checkbox"/> More than one activity for at-risk purposes*													
Capital contributed during the year . . . \$		23 <input type="checkbox"/> More than one activity for passive activity purposes*													
Current year net income (loss) . . . \$		*See attached statement for additional information.													
Other increase (decrease) (attach explanation) \$		Only													
Withdrawals and distributions . . . \$ ()															
Ending capital account . . . \$															

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

Appendix C

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

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

	Simplified (assets not considered)	Automatic Zero EFC
Formula A Dependent student	<ul style="list-style-type: none"> Parents had a 2021 AGI of \$49,999 or less (for tax filers), or if non-filers, income earned from work in 2021 is \$49,999 or less; and Either <ul style="list-style-type: none"> Parents filed a 2021 IRS Form 1040, but did not file a Schedule 1¹, filed a tax form from a Trust Territory², or were not required to file any income tax return or Anyone in the parents' household size (as defined on the FAFSA) received any designated means-tested federal benefits³ during 2021 or 2022, or Parent is a dislocated worker. 	<ul style="list-style-type: none"> Parents had a 2021 AGI of \$29,000 or less (for tax filers), or if non-filers, income earned from work in 2021 is \$29,000 or less; and Either <ul style="list-style-type: none"> Parents filed a 2021 IRS Form 1040, but did not file a Schedule 1¹, filed a tax form from a Trust Territory², or were not required to file any income tax return or Anyone in the parents' household size (as defined on the FAFSA) received any designated means-tested federal benefits³ during 2021 or 2022, or Parent is a dislocated worker.
Formula B Independent student without dependents (other than a spouse)	<ul style="list-style-type: none"> Student (and spouse, if any) had a 2021 AGI of \$49,999 or less (for tax filers), or if non-filers, income earned from work in 2021 is \$49,999 or less; and Either <ul style="list-style-type: none"> Student (and spouse, if any) filed a 2021 IRS Form 1040, but did not file a Schedule 1¹, filed a tax form from a Trust Territory², or were not required to file any income tax return or Anyone in the student's household size (as defined on the FAFSA) received any designated means-tested federal benefits³ during 2021 or 2022, or Student (or spouse, if any) is a dislocated worker. 	Not applicable.
Formula C Independent student with dependents (other than a spouse)	<ul style="list-style-type: none"> Student (and spouse, if any) had a 2021 AGI of \$49,999 or less (for tax filers), or if non-filers, income earned from work in 2021 is \$49,999 or less; and Either <ul style="list-style-type: none"> Student (and spouse, if any) filed a 2021 IRS Form 1040, but did not file a Schedule 1¹, filed a tax form from a Trust Territory², or were not required to file any income tax return or Anyone in the student's household size (as defined on the FAFSA) received any designated means-tested federal benefits³ during 2021 or 2022, or Student (or spouse, if any) is a dislocated worker. 	<ul style="list-style-type: none"> Student (and spouse, if any) had a 2021 AGI of \$29,000 or less (for tax filers), or if non-filers, income earned from work in 2021 is \$29,000 or less; and Either <ul style="list-style-type: none"> Student (and spouse, if any) filed a 2021 IRS Form 1040, but did not file a Schedule 1¹, filed a tax form from a Trust Territory², or were not required to file any income tax return or Anyone in the student's household size (as defined on the FAFSA) received any designated means-tested federal benefits³ during 2021 or 2022, or Student (or spouse, if any) is a dislocated worker.

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

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

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

Appendix D

2021 IRS Form 1040 Schedules Required for Federal Verification

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

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

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

IF YOU...	THEN USE...
<p>Have additional income, such as business or farm income or loss, unemployment compensation, prize or award money, or gambling winnings.</p> <p>Have any deductions to claim, such as student loan interest deduction, self-employment tax, or educator expenses.</p> <ul style="list-style-type: none"> 1040 Line 8 is not blank <u>and</u> not zero*, or 1040 Line 10 is not blank <u>and</u> not zero* 	Schedule 1
<p>2023-24 FAFSA questions #35 (S) and #82 (P) ask if Schedule 1 was (or will be) filed with a 2021 tax return. A note on p. 9 of the FAFSA reads:</p> <p><i>Answer “No” if you (and if married, your spouse) did not file a Schedule 1.</i></p> <p><i>Answer “No” if you (and if married, your spouse) did or will file a Schedule 1 to report only one or more of the following items:</i></p> <ol style="list-style-type: none"> 1. Unemployment compensation (line 7) 2. Alaska Permanent Fund dividends (line 8f – may not be a negative value) 3. Educator expenses (line 11) 4. IRA deduction (line 20) 5. Student loan interest deduction (line 21) <p><i>Answer “Yes” if you (or if married, your spouse) filed or will file a Schedule 1 and reported additional income or adjustments to income on any lines other than or in addition to the five exceptions listed above.</i></p>	
<p>Owe alternative minimum tax or need to make an excess advance premium tax credit repayment.</p> <p>Owe other taxes, such as self-employment tax, household employment taxes, additional tax on IRAs or other qualified retirement plans and tax-favored accounts.</p> <ul style="list-style-type: none"> 1040 Line 17 is not blank and not zero*, or 1040 Line 23 is not blank and not zero* 	Schedule 2
<p>Can claim a nonrefundable credit other than the child tax credit or the credit for other dependents, such as the foreign tax credit, education credits, or general business credit.</p> <p>Can claim a refundable credit other than the earned income credit, American Opportunity Credit, or additional child tax credit, such as the net premium tax credit or health coverage tax credit.</p> <p>Have other payments, such as an amount paid with a request for an extension to file or excess social security tax withheld.</p> <ul style="list-style-type: none"> 1040 Line 20 is not blank and not zero*, or 1040 Line 31 is not blank and not zero* 	Schedule 3

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

Sample 2021 IRS Form 1040 – Page 1

Attach Sch. B if required.	1	Wages, salaries, tips, etc. Attach Form(s) W-2	1	202,095
	2a	Tax-exempt interest	2b	747
	3a	Qualified dividends	3b	
	4a	IRA distributions	4b	
	5a	Pensions and annuities	5b	
Standard Deduction for— • Single or Married filing separately, \$12,550 • Married filing jointly or Qualifying widow(er), \$25,100 • Head of household, \$18,800 • If you checked any box under <i>Standard Deduction</i> , see instructions.	6a	Social security benefits	6b	
	7	Capital gain or (loss). Attach Schedule D if required. If not required, check here	7	
	8	Other income from Schedule 1, line 10	8	
	9	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income	9	202,842
	10	Adjustments to income from <u>Schedule 1</u> , line 26	10	
	11	Subtract line 10 from line 9. This is your adjusted gross income	11	202,842
	12a	Standard deduction or itemized deductions (from Schedule A)	12a	34,885
	b	Charitable contributions if you take the standard deduction (see instructions)	12b	
	c	Add lines 12a and 12b	12c	34,885
	13	Qualified business income deduction from Form 8995 or Form 8995-A	13	
14	Add lines 12c and 13	14	34,885	
15	Taxable income. Subtract line 14 from line 11. If zero or less, enter -0-	15	167,957	

Collect Schedule 1 if...

Line 10 is not blank, and not zero*

Sample 2021 IRS Form 1040 – Page 2

Collect Schedule 2 if... Line 17 is not blank, and not zero*	16	Tax (see instructions). Check if any from Form 990-E, 990-B, or 990-T	16	28,448
	17	Amount from <u>Schedule 2</u> , line 3	17	
	18	Add lines 16 and 17	18	28,448
	19	Nonrefundable child tax credit or credit	19	
	20	Amount from <u>Schedule 3</u> , line 8	20	
	21	Add lines 19 and 20	21	
	22	Subtract line 21 from line 18. If zero or less, enter -	22	28,448
	23	Other taxes, including self-employment tax, from S	23	
	24	Add lines 22 and 23. This is your total tax	24	28,448
	Collect Schedule 3 if... Line 20 is not blank, and not zero*	25	Federal income tax withheld from:	25d
a		Form(s) W-2	25a	17,729
b		Form(s) 1099	25b	
c		Other forms (see instructions)	25c	1
d		Add lines 25a through 25c	25d	17,730
26		2021 estimated tax payments and amount applied from 2020 return	26	
27a		Earned income credit (EIC)	27a	
b		Nontaxable combat pay election	27b	
c		Prior year (2019) earned income	27c	
28		Refundable child tax credit or additional child tax credit from Schedule 8812	28	2,092
29	American opportunity credit from Form 8863, line 8	29		
30	Recovery rebate credit. See instructions	30		
31	Amount from Schedule 3, line 15	31		

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

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

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

Appendix E

Current Year Transcript Availability

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

Note: If you made estimated tax payments and/or applied your overpayment from a prior year tax return to your current year tax return, you can request a [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.

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

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

Appendix F

References, Resources and Websites – Tax Returns and Transcripts

U.S. DEPARTMENT OF EDUCATION

Federal Register

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

Dear Colleague Letter

- [2023-2024 Suggested Verification Text \(GEN-22-09\)](#)

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

ENGLISH

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

SPANISH

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

2022-23 Federal Student Aid Handbook

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

Program Integrity Questions and Answers – [Verification](#)

Glossary – [Federal Student Aid Handbook Glossary](#)

INTERNAL REVENUE SERVICE

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