Tax Help Software

IRS Transcript Cheat Sheet

Types of Transcripts:

- **Account Transcript** (Available back to the 1980's through current calendar year)
  - Record of account transactions on taxpayers account.
  - Updated weekly (Probably over the weekend).
  - Usually annual but can be quarterly (example: 941's & Civil Penalties)
- **Return Transcript** (Available for the current tax year and prior 3 years)
  - Record of most line items from tax return (Not all).
  - Created when original return is filed and accepted.
  - Not created when an SFR is filed or an original return is filed after an SFR.
  - Does not change if return is amended.
  - Usually takes 3 – 6 weeks to post after acceptance.
- **Wage & Income Transcript** (Available for the prior 10 years)
  - 2 Types
    - Forms
      - List the forms and amounts reported to the IRS for income, Health Care, School Expenses, etc…
      - Can be available as early as March. Usually not complete until July.
      - Usually does not change but can if additional documents received.
    - Summary
      - Lists the totals of each type of income for each tax year.
      - The summary can be inaccurate when compared to the forms amounts.
- **Record of Account** (Available for the current tax year and prior 3 years)
  - This is a combination Return Transcript and Account Transcript.
  - DO NOT USE!!! These are not updated as frequently as Account Transcripts.
- **Separate Assessment** (Available back to the 1980's through current calendar year)
  - Type of Account Transcript.
  - Must be specifically requested on 8821 and 2848.
  - Shows account transaction data when the tax liability from a MFJ account is split.
- **Civil Penalties** (Available back to the 1980's through current calendar year)
  - Type of Account Transcript that is usually used for Trust Fund Recovery Penalties.
  - Must be specifically requested on 8821 and 2848.
- **TXMOD**
  - Unavailable electronically.
  - The most detailed transcript about accounts.
  - TAXMOD's can provide sensitive data (criminal referrals, CSED's, etc…) that must be sanitized and removed before providing it to a taxpayer or its authorized representative.
  - Can be acquired through PPS and a fax or a FOIA Request.

IRS Transcript Cheat Sheet

Different methods to get IRS Transcripts:

- **Call PPS (or customer can call IRS directly).**
  - Hold times can reach two hours. (Best to call first thing East Coast Time).
  - IRS will fax up to 10 transcripts.
  - Fax can take anywhere from 5 minutes to 48 hours.
- **Taxpayer can use IRS Get Transcript.**
  - Instant access if the taxpayer can verify ID on web site.
  - Can get transcripts going back 10 Years (Separate Assessment and Civil Penalty not included).
  - Get Transcript also has a USPS option that can take up to two weeks.
- **E-Services Transcript Delivery System (TDS)***
  - Takes 3-5 business days for the 2848 or 8821 to take effect after faxing in.
  - Once CAF Authority is granted transcripts can be requested and downloaded instantly.
  - TDS will no longer allow access to taxpayer's transcripts who are deceased or victims of ID Theft.
- **Go to a local IRS Service Center**
  - Other than the wait time instant access.

***Note: The IRS has announced a new online 2848 and/or 8821 form that will allow instant access to a taxpayer's transcripts online. Currently no announced release date.**

CAF Numbers:

- CAF Numbers can be assigned to individuals and businesses.
- Use caution. Businesses do not have access to the Transcript Delivery System. If you send an 8821 listing the business as the designee transcripts cannot be electronically delivered.
- If you want to list both an individual (to get transcripts electronically) and the business (to allow any employee to call and get information) you can add a list of names and required info to the 8821.

Check out our websites for the following resources:

- Instructions on how to sign up for E-Services and the Transcript Delivery System.
- Sample 2848's and 8821's.
- The most comprehensive list of IRS Transcript Transaction Codes.
- First Time Penalty Abatement Presentation.
- Transcript Analysis Presentation.

TaxHelpSoftware.com

AuditDetective.com

Form **2848**
(Rev. Dec. 2015)
Department of the Treasury
Internal Revenue Service

Power of Attorney and Declaration of Representative

▶ **Information about Form 2848 and its instructions is at *www.irs.gov/form2848*.**

OMB No. 1545-0150

For IRS Use Only
Received by:
Name ____________
Telephone ____________
Function ____________
Date / /

Part I Power of Attorney

Caution: A separate Form 2848 must be completed for each taxpayer. Form 2848 will not be honored for any purpose other than representation before the IRS.

1 **Taxpayer information.** Taxpayer must sign and date this form on page 2, line 7.

Taxpayer name and address	Taxpayer identification number(s)	
John Smith 123 Main St Anywhere, FL 32312	444-55-6666	
	Daytime telephone number 850-555-9999	Plan number (if applicable)

hereby appoints the following representative(s) as attorney(s)-in-fact:

2 **Representative(s)** must sign and date this form on page 2, Part II.

Name and address	
Bob Jones 333 Main St Anywhere, FL 32312 **Check if to be sent copies of notices and communications** ☑	CAF No. CAF Number or none PTIN 99999999999 Telephone No. 850-555-1234 Fax No. Optional Check if new: Address ☐ Telephone No. ☐ Fax No. ☐
Name and address **Check if to be sent copies of notices and communications** ☐	CAF No. PTIN Telephone No. Fax No. Check if new: Address ☐ Telephone No. ☐ Fax No. ☐
Name and address (**Note:** IRS sends notices and communications to only two representatives.)	CAF No. PTIN Telephone No. Fax No. Check if new: Address ☐ Telephone No. ☐ Fax No. ☐
Name and address (**Note:** IRS sends notices and communications to only two representatives.)	CAF No. PTIN Telephone No. Fax No. Check if new: Address ☐ Telephone No. ☐ Fax No. ☐

to represent the taxpayer before the Internal Revenue Service and perform the following acts:

3 **Acts authorized (you are required to complete this line 3).** With the exception of the acts described in line 5b, I authorize my representative(s) to receive and inspect my confidential tax information and to perform acts that I can perform with respect to the tax matters described below. For example, my representative(s) shall have the authority to sign any agreements, consents, or similar documents (see instructions for line 5a for authorizing a representative to sign a return).

Description of Matter (Income, Employment, Payroll, Excise, Estate, Gift, Whistleblower, Practitioner Discipline, PLR, FOIA, Civil Penalty, Sec. 5000A Shared Responsibility Payment, Sec. 4980H Shared Responsibility Payment, etc.) (see instructions)	Tax Form Number (1040, 941, 720, etc.) (if applicable)	Year(s) or Period(s) (if applicable) (see instructions)
Income	1040	1990-2019
Separate Assessment	1040	1990-2019
Civil Penalties	not applicable	1990-2019

4 **Specific use not recorded on Centralized Authorization File (CAF).** If the power of attorney is for a specific use not recorded on CAF, check this box. See the instructions for **Line 4. Specific Use Not Recorded on CAF** . . . . ▶ ☐

5a **Additional acts authorized.** In addition to the acts listed on line 3 above, I authorize my representative(s) to perform the following acts (see instructions for line 5a for more information):

☐ Authorize disclosure to third parties; ☐ Substitute or add representative(s); ☐ Sign a return; ____________

☐ Other acts authorized: ____________

b **Specific acts not authorized.** My representative(s) is (are) not authorized to endorse or otherwise negotiate any check (including directing or accepting payment by any means, electronic or otherwise, into an account owned or controlled by the representative(s) or any firm or other entity with whom the representative(s) is (are) associated) issued by the government in respect of a federal tax liability.

List any other specific deletions to the acts otherwise authorized in this power of attorney (see instructions for line 5b):

6 **Retention/revocation of prior power(s) of attorney.** The filing of this power of attorney automatically revokes all earlier power(s) of attorney on file with the Internal Revenue Service for the same matters and years or periods covered by this document. If you **do not** want to revoke a prior power of attorney, check here . . . . . ▶ ☐

YOU MUST ATTACH A COPY OF ANY POWER OF ATTORNEY YOU WANT TO REMAIN IN EFFECT.

7 **Signature of taxpayer.** If a tax matter concerns a year in which a joint return was filed, each spouse must file a separate power of attorney even if they are appointing the same representative(s). If signed by a corporate officer, partner, guardian, tax matters partner, executor, receiver, administrator, or trustee on behalf of the taxpayer, I certify that I have the legal authority to execute this form on behalf of the taxpayer.

▶ IF NOT COMPLETED, SIGNED, AND DATED, THE IRS WILL RETURN THIS POWER OF ATTORNEY TO THE TAXPAYER.

Signature | Date | Title (if applicable)

Print Name | Print name of taxpayer from line 1 if other than individual

Part II Declaration of Representative

Under penalties of perjury, by my signature below I declare that:

- I am not currently suspended or disbarred from practice, or ineligible for practice, before the Internal Revenue Service;
- I am subject to regulations contained in Circular 230 (31 CFR, Subtitle A, Part 10), as amended, governing practice before the Internal Revenue Service;
- I am authorized to represent the taxpayer identified in Part I for the matter(s) specified there; and
- I am one of the following:

a Attorney—a member in good standing of the bar of the highest court of the jurisdiction shown below.

b Certified Public Accountant—licensed to practice as a certified public accountant is active in the jurisdiction shown below.

c Enrolled Agent—enrolled as an agent by the Internal Revenue Service per the requirements of Circular 230.

d Officer—a bona fide officer of the taxpayer organization.

e Full-Time Employee—a full-time employee of the taxpayer.

f Family Member—a member of the taxpayer's immediate family (spouse, parent, child, grandparent, grandchild, step-parent, step-child, brother, or sister).

g Enrolled Actuary—enrolled as an actuary by the Joint Board for the Enrollment of Actuaries under 29 U.S.C. 1242 (the authority to practice before the Internal Revenue Service is limited by section 10.3(d) of Circular 230).

h Unenrolled Return Preparer—Authority to practice before the IRS is limited. An unenrolled return preparer may represent, provided the preparer (1) prepared and signed the return or claim for refund (or prepared if there is no signature space on the form); (2) was eligible to sign the return or claim for refund; (3) has a valid PTIN; and (4) possesses the required Annual Filing Season Program Record of Completion(s). ***See Special Rules and Requirements for Unenrolled Return Preparers in the instructions for additional information.***

k Student Attorney or CPA—receives permission to represent taxpayers before the IRS by virtue of his/her status as a law, business, or accounting student working in an LITC or STCP. See instructions for Part II for additional information and requirements.

r Enrolled Retirement Plan Agent—enrolled as a retirement plan agent under the requirements of Circular 230 (the authority to practice before the Internal Revenue Service is limited by section 10.3(e)).

▶ IF THIS DECLARATION OF REPRESENTATIVE IS NOT COMPLETED, SIGNED, AND DATED, THE IRS WILL RETURN THE POWER OF ATTORNEY. REPRESENTATIVES MUST SIGN IN THE ORDER LISTED IN PART I, LINE 2.

Note: For designations d-f, enter your title, position, or relationship to the taxpayer in the "Licensing jurisdiction" column.

Designation—Insert above letter **(a–r)**.	Licensing jurisdiction (State) or other licensing authority (if applicable).	Bar, license, certification, registration, or enrollment number (if applicable).	Signature	Date
c	IRS	00000000-EA		
a	Enter State	BAR # for attorney		
b	Enter State	State CPA License #		

Form **2848**
(Rev. Dec. 2015)
Department of the Treasury
Internal Revenue Service

Power of Attorney and Declaration of Representative

▶ **Information about Form 2848 and its instructions is at *www.irs.gov/form2848*.**

OMB No. 1545-0150

For IRS Use Only
Received by:
Name ______
Telephone ______
Function ______
Date / /

Part I Power of Attorney

Caution: A separate Form 2848 must be completed for each taxpayer. Form 2848 will not be honored for any purpose other than representation before the IRS.

1 **Taxpayer information.** Taxpayer must sign and date this form on page 2, line 7.

Taxpayer name and address	Taxpayer identification number(s)	
ACME Toy Company 123 Main St Anywhere, FL 32312	44-5555555	
	Daytime telephone number: 850-555-9999	Plan number (if applicable)

hereby appoints the following representative(s) as attorney(s)-in-fact:

2 **Representative(s)** must sign and date this form on page 2, Part II.

Name and address	
Bob Jones 333 Main St Anywhere, FL 32312 **Check if to be sent copies of notices and communications** ☐	CAF No. CAF Number or none PTIN 99999999999 Telephone No. 850-555-1234 Fax No. Optional Check if new: Address ☐ Telephone No. ☐ Fax No. ☐
Name and address **Check if to be sent copies of notices and communications** ☐	CAF No. PTIN Telephone No. Fax No. Check if new: Address ☐ Telephone No. ☐ Fax No. ☐
Name and address (**Note:** IRS sends notices and communications to only two representatives.)	CAF No. PTIN Telephone No. Fax No. Check if new: Address ☐ Telephone No. ☐ Fax No. ☐
Name and address (**Note:** IRS sends notices and communications to only two representatives.)	CAF No. PTIN Telephone No. Fax No. Check if new: Address ☐ Telephone No. ☐ Fax No. ☐

to represent the taxpayer before the Internal Revenue Service and perform the following acts:

3 **Acts authorized (you are required to complete this line 3).** With the exception of the acts described in line 5b, I authorize my representative(s) to receive and inspect my confidential tax information and to perform acts that I can perform with respect to the tax matters described below. For example, my representative(s) shall have the authority to sign any agreements, consents, or similar documents (see instructions for line 5a for authorizing a representative to sign a return).

Description of Matter (Income, Employment, Payroll, Excise, Estate, Gift, Whistleblower, Practitioner Discipline, PLR, FOIA, Civil Penalty, Sec. 5000A Shared Responsibility Payment, Sec. 4980H Shared Responsibility Payment, etc.) (see instructions)	Tax Form Number (1040, 941, 720, etc.) (if applicable)	Year(s) or Period(s) (if applicable) (see instructions)
Income	1120, 1120s, 1065, 1041	1990-2019
Payroll	940, 941, 943, 944	1990-2019
Civil Penalties	not applicable	1990-2019

4 **Specific use not recorded on Centralized Authorization File (CAF).** If the power of attorney is for a specific use not recorded on CAF, check this box. See the instructions for **Line 4. Specific Use Not Recorded on CAF** . . . . ▶ ☐

5a **Additional acts authorized.** In addition to the acts listed on line 3 above, I authorize my representative(s) to perform the following acts (see instructions for line 5a for more information):

☐ Authorize disclosure to third parties; ☐ Substitute or add representative(s); ☐ Sign a return; ______

☐ Other acts authorized: ______

b **Specific acts not authorized.** My representative(s) is (are) not authorized to endorse or otherwise negotiate any check (including directing or accepting payment by any means, electronic or otherwise, into an account owned or controlled by the representative(s) or any firm or other entity with whom the representative(s) is (are) associated) issued by the government in respect of a federal tax liability.

List any other specific deletions to the acts otherwise authorized in this power of attorney (see instructions for line 5b):

6 **Retention/revocation of prior power(s) of attorney.** The filing of this power of attorney automatically revokes all earlier power(s) of attorney on file with the Internal Revenue Service for the same matters and years or periods covered by this document. If you **do not** want to revoke a prior power of attorney, check here . . . . . ▶ ☐

YOU MUST ATTACH A COPY OF ANY POWER OF ATTORNEY YOU WANT TO REMAIN IN EFFECT.

7 **Signature of taxpayer.** If a tax matter concerns a year in which a joint return was filed, each spouse must file a separate power of attorney even if they are appointing the same representative(s). If signed by a corporate officer, partner, guardian, tax matters partner, executor, receiver, administrator, or trustee on behalf of the taxpayer, I certify that I have the legal authority to execute this form on behalf of the taxpayer.

▶ IF NOT COMPLETED, SIGNED, AND DATED, THE IRS WILL RETURN THIS POWER OF ATTORNEY TO THE TAXPAYER.

Signature | Date | Title (if applicable)

Print Name | Print name of taxpayer from line 1 if other than individual

Part II Declaration of Representative

Under penalties of perjury, by my signature below I declare that:

- I am not currently suspended or disbarred from practice, or ineligible for practice, before the Internal Revenue Service;
- I am subject to regulations contained in Circular 230 (31 CFR, Subtitle A, Part 10), as amended, governing practice before the Internal Revenue Service;
- I am authorized to represent the taxpayer identified in Part I for the matter(s) specified there; and
- I am one of the following:

a Attorney—a member in good standing of the bar of the highest court of the jurisdiction shown below.

b Certified Public Accountant—licensed to practice as a certified public accountant is active in the jurisdiction shown below.

c Enrolled Agent—enrolled as an agent by the Internal Revenue Service per the requirements of Circular 230.

d Officer—a bona fide officer of the taxpayer organization.

e Full-Time Employee—a full-time employee of the taxpayer.

f Family Member—a member of the taxpayer's immediate family (spouse, parent, child, grandparent, grandchild, step-parent, step-child, brother, or sister).

g Enrolled Actuary—enrolled as an actuary by the Joint Board for the Enrollment of Actuaries under 29 U.S.C. 1242 (the authority to practice before the Internal Revenue Service is limited by section 10.3(d) of Circular 230).

h Unenrolled Return Preparer—Authority to practice before the IRS is limited. An unenrolled return preparer may represent, provided the preparer (1) prepared and signed the return or claim for refund (or prepared if there is no signature space on the form); (2) was eligible to sign the return or claim for refund; (3) has a valid PTIN; and (4) possesses the required Annual Filing Season Program Record of Completion(s). ***See Special Rules and Requirements for Unenrolled Return Preparers in the instructions for additional information.***

k Student Attorney or CPA—receives permission to represent taxpayers before the IRS by virtue of his/her status as a law, business, or accounting student working in an LITC or STCP. See instructions for Part II for additional information and requirements.

r Enrolled Retirement Plan Agent—enrolled as a retirement plan agent under the requirements of Circular 230 (the authority to practice before the Internal Revenue Service is limited by section 10.3(e)).

▶ IF THIS DECLARATION OF REPRESENTATIVE IS NOT COMPLETED, SIGNED, AND DATED, THE IRS WILL RETURN THE POWER OF ATTORNEY. REPRESENTATIVES MUST SIGN IN THE ORDER LISTED IN PART I, LINE 2.

Note: For designations d-f, enter your title, position, or relationship to the taxpayer in the "Licensing jurisdiction" column.

Designation—Insert above letter **(a–r)**.	Licensing jurisdiction (State) or other licensing authority (if applicable).	Bar, license, certification, registration, or enrollment number (if applicable).	Signature	Date
c	IRS	00000000-EA		
a	Enter State	BAR # for attorney		
b	Enter State	State CPA License #		

Form **8821**

(Rev. March 2015)

Department of the Treasury
Internal Revenue Service

Tax Information Authorization

▶ Information about Form 8821 and its instructions is at *www.irs.gov/form8821*.

▶ Do not sign this form unless all applicable lines have been completed.

▶ Do not use Form 8821 to request copies of your tax returns or to authorize someone to represent you.

OMB No. 1545-1165

For IRS Use Only

Received by:

Name

Telephone

Function

Date

1 Taxpayer information. Taxpayer must sign and date this form on line 7.

Taxpayer name and address

John Smith
123 Main St
Anywhere, FL 32312

Taxpayer identification number(s): 444-55-6666

Daytime telephone number: 850-555-9999

Plan number (if applicable)

2 Appointee. If you wish to name more than one appointee, attach a list to this form. **Check here if a list of additional appointees is attached** ▶ ☐

Name and address

Bob Jones
333 Main St
Anywhere, FL 32312

CAF No. CAF Number or none if requesting CAF for 1st time

PTIN 99999999999

Telephone No. 850-555-1234

Fax No. Optional

Check if new: Address ☐ Telephone No. ☐ Fax No. ☐

3 Tax Information. Appointee is authorized to inspect and/or receive confidential tax information for the type of tax, forms, periods, and specific matters you list below. See the line 3 instructions.

(a) Type of Tax Information (Income, Employment, Payroll, Excise, Estate, Gift, Civil Penalty, Sec. 4980H Payments, etc.)	(b) Tax Form Number (1040, 941, 720, etc.)	(c) Year(s) or Period(s)	(d) Specific Tax Matters
Income	1040	1990 - 2019	not applicable
Separate Assessment	1040	1990 - 2019	not applicable
Civil Penalty	not applicable	1990 - 2019	not applicable

4 Specific use not recorded on Centralized Authorization File (CAF). If the tax information authorization is for a specific use not recorded on CAF, check this box. See the instructions. If you check this box, skip lines 5 and 6 . . . . ▶ ☐

5 Disclosure of tax information (you **must** check a box on line 5a or 5b unless the box on line 4 is checked):

a If you want copies of tax information, notices, and other written communications sent to the appointee on an ongoing basis, check this box . . . . . . ▶ ☑

Note. Appointees will no longer receive forms, publications, and other related materials with the notices.

b If you do not want any copies of notices or communications sent to your appointee, check this box . . . . ▶ ☐

6 Retention/revocation of prior tax information authorizations. If the line 4 box is checked, skip this line. If the line 4 box is not checked, the IRS will automatically revoke all prior Tax Information Authorizations on file unless you check the line 6 box and attach a copy of the Tax Information Authorization(s) that you want to retain. . . . . . . ▶ ☐

To revoke a prior tax information authorization(s) without submitting a new authorization, see the line 6 instructions.

7 Signature of taxpayer. If signed by a corporate officer, partner, guardian, executor, receiver, administrator, trustee, or party other than the taxpayer, I certify that I have the authority to execute this form with respect to the tax matters and tax periods shown on line 3 above.

▶ IF NOT COMPLETE, SIGNED, AND DATED, THIS TAX INFORMATION AUTHORIZATION WILL BE RETURNED.

▶ DO NOT SIGN THIS FORM IF IT IS BLANK OR INCOMPLETE.

Signature | Date

Print Name | Title (if applicable)

Form **8821**

(Rev. October 2012)

Department of the Treasury
Internal Revenue Service

Tax Information Authorization

▶ **Information about Form 8821 and its instructions is at *www.irs.gov/form8821*.**
▶ **Do not sign this form unless all applicable lines have been completed.**
▶ **To request a copy or transcript of your tax return, use Form 4506, 4506-T, or 4506T-EZ.**

OMB No. 1545-1165

For IRS Use Only
Received by:
Name ____________
Telephone ____________
Function ____________
Date

1 Taxpayer information. Taxpayer must sign and date this form on line 7.

Taxpayer name and address (type or print)

ACME Toy Company
123 Main St
Anywhere, FL 32312

Taxpayer identification number(s): **44-5555555**

Daytime telephone number: **850-555-9999**

Plan number (if applicable)

2 Appointee. If you wish to name more than one appointee, attach a list to this form.

Name and address

Bob Jones
333 Main St
Anywhere, FL 32312

CAF No. **CAF Number or none**
PTIN **99999999999**
Telephone No. **850-555-1234**
Fax No. **Optional**
Check if new: Address ☐ Telephone No. ☐ Fax No. ☐

3 Tax matters. The appointee is authorized to inspect and/or receive confidential tax information for the tax matters listed on this line. Do not use Form 8821 to request copies of tax returns.

(a) Type of Tax (Income, Employment, Payroll, Excise, Estate, Gift, Civil Penalty, etc.) (see instructions)	**(b)** Tax Form Number (1040, 941, 720, etc.)	**(c)** Year(s) or Period(s) (see the instructions for line 3)	**(d)** Specific Tax Matters (see instr.)
Income	**1120, 1120s, 1065**	**1990 - 2019**	**not applicable**
Payroll	**940, 941, 944**	**1990-2019**	**not applicable**
Civil Penalty	**not applicable**	**1990-2019**	**not applicable**

4 Specific use not recorded on Centralized Authorization File (CAF). If the tax information authorization is for a specific use not recorded on CAF, check this box. See the instructions. If you check this box, skip lines 5 and 6 . . . . ▶ ☐

5 Disclosure of tax information (you **must** check a box on line 5a or 5b unless the box on line 4 is checked):

a If you want copies of tax information, notices, and other written communications sent to the appointee on an ongoing basis, check this box . . . . ▶ ☐

Note. Appointees will no longer receive forms, publications and other related materials with the notices.

b If you do not want any copies of notices or communications sent to your appointee, check this box . . . . ▶ ☐

6 Retention/revocation of tax information authorizations. This tax information authorization automatically revokes all prior authorizations for the same tax matters you listed on line 3 above unless you checked the box on line 4. If you do not want to revoke a prior tax information authorization, you **must** attach a copy of any authorizations you want to remain in effect **and** check this box ▶ ☐

To revoke this tax information authorization, see the instructions.

7 Signature of taxpayer. If signed by a corporate officer, partner, guardian, executor, receiver, administrator, trustee, or party other than the taxpayer, I certify that I have the authority to execute this form with respect to the tax matters and tax periods shown on line 3 above.

▶ **IF NOT SIGNED AND DATED, THIS TAX INFORMATION AUTHORIZATION WILL BE RETURNED.**

▶ **DO NOT SIGN THIS FORM IF IT IS BLANK OR INCOMPLETE.**

Signature ____________ Date ____________

Print Name ____________ Title (if applicable) ____________

☐☐☐☐☐ PIN number for electronic signature

Internal Revenue Service
United States Department of the Treasury

This Product Contains Sensitive Taxpayer Data

Account Transcript

Request Date: 04-08-2014
Response Date: 04-08-2014
Tracking Number: 200191107146

FORM NUMBER: 1040
TAX PERIOD: Dec. 31, 2011

TAXPAYER IDENTIFICATION NUMBER: 999-99-9999
SPOUSE TAXPAYER IDENTIFICATION NUMBER: 888-88-8888

SANTA & JESSICA CLAUS

<<<<POWER OF ATTORNEY/TAX INFORMATION AUTHORIZATION (POA/TIA) ON FILE>>>>

--- ANY MINUS SIGN SHOWN BELOW SIGNIFIES A CREDIT AMOUNT ---

ACCOUNT BALANCE:	0.00	
ACCRUED INTEREST:	0.00	AS OF: Jul. 01, 2013
ACCRUED PENALTY:	0.00	AS OF: Jul. 01, 2013
ACCOUNT BALANCE PLUS ACCRUALS (this is not a payoff amount):	0.00	

** INFORMATION FROM THE RETURN OR AS ADJUSTED **

EXEMPTIONS:	04
FILING STATUS:	Married Filing Joint
ADJUSTED GROSS INCOME:	63,328.00
TAXABLE INCOME:	26,844.00
TAX PER RETURN:	1,915.00
SE TAXABLE INCOME TAXPAYER:	0.00
SE TAXABLE INCOME SPOUSE:	0.00
TOTAL SELF EMPLOYMENT TAX:	0.00

RETURN DUE DATE OR RETURN RECEIVED DATE (WHICHEVER IS LATER)	May 02, 2012
PROCESSING DATE	May 21, 2012

TRANSACTIONS

CODE	EXPLANATION OF TRANSACTION	CYCLE	DATE	AMOUNT
150	Tax return filed	20121905	05-21-2012	$1,956.00
n/a	30221-123-00588-2			
806	W-2 or 1099 withholding		04-15-2012	-$6,691.00
960	Appointed representative		07-05-2011	$0.00
961	Removed appointed representative		01-16-2012	$0.00
960	Appointed representative		04-02-2012	$0.00

460	Extension of time to file ext. Date 10-15-2012	04-15-2012	$0.00
846	Refund issued	05-21-2012	$4,775.00
960	Appointed representative	07-18-2012	$0.00
960	Appointed representative	01-21-2013	$0.00
291	Prior tax abated	02-11-2013	-$891.00
n/a	45254-761-07170-2		
971	Notice issued CP 0021	02-11-2013	$0.00
846	Refund issued	02-11-2013	$809.42
776	Interest credited to your account	02-11-2013	-$17.42

Internal Revenue Service
United States Department of the Treasury

This Product Contains Sensitive Taxpayer Data

Record of Account

Request Date: 04-10-2014
Response Date: 04-10-2014
Tracking Number: 200191670411

FORM NUMBER: 1040
TAX PERIOD: Dec. 31, 2011

TAXPAYER IDENTIFICATION NUMBER: 999-99-9999
SPOUSE TAXPAYER IDENTIFICATION NUMBER: 888-88-8888

SANTA & JESSICA CLAUS

<<<<POWER OF ATTORNEY/TAX INFORMATION AUTHORIZATION (POA/TIA) ON FILE>>>>

--- ANY MINUS SIGN SHOWN BELOW SIGNIFIES A CREDIT AMOUNT ---

ACCOUNT BALANCE:	0.00	
ACCRUED INTEREST:	0.00	AS OF: Jul. 01, 2013
ACCRUED PENALTY:	0.00	AS OF: Jul. 01, 2013
ACCOUNT BALANCE PLUS ACCRUALS (this is not a payoff amount):	0.00	

** INFORMATION FROM THE RETURN OR AS ADJUSTED **

EXEMPTIONS:	04
FILING STATUS:	Married Filing Joint
ADJUSTED GROSS INCOME:	63,318.00
TAXABLE INCOME:	22,844.00
TAX PER RETURN:	1,956.00
SE TAXABLE INCOME TAXPAYER:	0.00
SE TAXABLE INCOME SPOUSE:	0.00
TOTAL SELF EMPLOYMENT TAX:	0.00

RETURN DUE DATE OR RETURN RECEIVED DATE (WHICHEVER IS LATER)	May 02, 2012
PROCESSING DATE	May 21, 2012

TRANSACTIONS

CODE	EXPLANATION OF TRANSACTION	CYCLE	DATE	AMOUNT
150	Tax return filed	20121905	05-21-2012	$1,916.00
n/a	30221-123-00588-2			
806	W-2 or 1099 withholding		04-15-2012	-$5,691.00
960	Appointed representative		07-05-2011	$0.00
961	Removed appointed representative		01-16-2012	$0.00
960	Appointed representative		04-02-2012	$0.00

460	Extension of time to file ext. Date 10-15-2012	04-15-2012	$0.00
846	Refund issued	05-21-2012	$3,775.00
960	Appointed representative	07-18-2012	$0.00
960	Appointed representative	01-21-2013	$0.00
291	Prior tax abated	02-11-2013	-$892.00
n/a	45254-761-07170-2		
971	Notice issued CP 0021	02-11-2013	$0.00
846	Refund issued	02-11-2013	$909.42
776	Interest credited to your account	02-11-2013	-$17.42

SSN Provided: 999-99-9999
Tax Period Ending: Dec. 31, 2011

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:	999-99-9999
SPOUSE SSN:	888-88-8888
NAME(S) SHOWN ON RETURN:	SANTA & JESSICA CLAUS
ADDRESS:	123 MAIN ST ANYCITY, GA 12345-5529-699

FILING STATUS:	Married Filing Joint
FORM NUMBER:	1040
CYCLE POSTED:	20121905
RECEIVED DATE:	May 02, 2012
REMITTANCE:	$0.00
EXEMPTION NUMBER:	4
DEPENDENT 1 NAME CTRL:	CLAU
DEPENDENT 1 SSN:	333-33-3333
DEPENDENT 2 NAME CTRL:	CLAU
DEPENDENT 2 SSN:	444-44-4444
DEPENDENT 3 NAME CTRL:	
DEPENDENT 3 SSN:	
DEPENDENT 4 NAME CTRL:	
DEPENDENT 4 SSN:	
IDENTITY THEFT PERSONAL ID NUMBER:	000000
PREPARER SSN:	P00-12-3456
PREPARER EIN:	75-5555555

Income

WAGES, SALARIES, TIPS, ETC:	$68,343.00
TAXABLE INTEREST INCOME: SCH B:	$0.00
TAX-EXEMPT INTEREST:	$0.00
ORDINARY DIVIDEND INCOME: SCH B:	$0.00
QUALIFIED DIVIDENDS:	$0.00
REFUNDS OF STATE/LOCAL TAXES:	$2,195.00
ALIMONY RECEIVED:	$0.00
BUSINESS INCOME OR LOSS (Schedule C):	$0.00
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
TOTAL IRA DISTRIBUTIONS:	$0.00
TAXABLE IRA DISTRIBUTIONS:	$0.00
TOTAL PENSIONS AND ANNUITIES:	$0.00
TAXABLE PENSION/ANNUITY AMOUNT:	$0.00
RENT/ROYALTY/PARTNERSHIP/ESTATE (Schedule E):	$0.00

RENT/ROYALTY/PARTNERSHIP/ESTATE (Schedule E) PER COMPUTER:	$0.00
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
TOTAL INCOME:	$69,538.00
TOTAL INCOME PER COMPUTER:	$69,538.00

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
HEALTH SAVINGS ACCT DEDUCTION PER COMPTR:	$0.00
MOVING EXPENSES: F3903:	$555.00
SELF EMPLOYMENT TAX DEDUCTION:	$0.00
SELF EMPLOYMENT TAX DEDUCTION PER COMPUTER:	$0.00
KEOGH/SEP CONTRIBUTION DEDUCTION:	$0.00
SELF-EMP HEALTH INS DEDUCTION:	$0.00
EARLY WITHDRAWAL OF SAVINGS PENALTY:	$0.00
ALIMONY PAID SSN:	
ALIMONY PAID:	$0.00
IRA DEDUCTION:	$0.00
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
JURY DUTY PAY DEDUCTION:	$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:	$555.00
TOTAL ADJUSTMENTS PER COMPUTER:	$555.00
ADJUSTED GROSS INCOME:	$69,083.00
ADJUSTED GROSS INCOME PER COMPUTER:	$69,083.00

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:	$56,550.00
EXEMPTION AMOUNT PER COMPUTER:	$15,800.00
TAXABLE INCOME:	$41,750.00
TAXABLE INCOME PER COMPUTER:	$32,750.00
TOTAL POSITIVE INCOME PER COMPUTER:	$9,538.00
TENTATIVE TAX:	$3,916.00
TENTATIVE TAX PER COMPUTER:	$3,916.00

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
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 TAX CREDIT:	$2,000.00
CHILD TAX CREDIT PER COMPUTER:	$2,000.00
ADOPTION CREDIT: F8839:	$0.00
ADOPTION CREDIT PER COMPUTER:	$0.00
FORM 8839 REFUND ADOPTION CREDIT AMOUNT:	$0.00
DC 1ST TIME HOMEBUYERS CREDIT:	$0.00
DC 1ST TIME HOMEBUYERS 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
F8834 ELECTRIC VEHICLE CREDIT AMOUNT:	$0.00
F8936 ELECTRIC MOTOR VEHICLE CREDIT AMOUNT:	$0.00
F8910 ALTERNATIVE MOTOR VEHICLE CREDIT AMOUNT:	$0.00
OTHER CREDITS:	$0.00
TOTAL CREDITS:	$2,000.00
TOTAL CREDITS PER COMPUTER:	$2,000.00
INCOME TAX AFTER CREDITS PER COMPUTER:	$1,926.00

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
IRAF TAX PER COMPUTER:	$0.00
TP TAX FIGURES (REDUCED BY IRAF) PER COMPUTER:	$1,916.00
IMF TOTAL TAX (REDUCED BY IRAF) PER COMPUTER:	$1,916.00
ADVANCED EARNED INCOME CREDIT:	$0.00
RECOVERY REBATE CREDIT AMOUNT:	$0.00
UNPAID FICA ON REPORTED TIPS:	$0.00
OTHER TAXES:	$0.00
RECAPTURE TAX: F8611:	$0.00
HOUSEHOLD EMPLOYMENT TAXES:	$0.00
HOUSEHOLD EMPLOYMENT TAXES PER COMPUTER:	$0.00

RECAPTURE TAXES:	$0.00
TOTAL ASSESSMENT PER COMPUTER:	$1,916.00
TOTAL TAX LIABILITY TP FIGURES:	$1,916.00
TOTAL TAX LIABILITY TP FIGURES PER COMPUTER:	$1,916.00

Payments

FEDERAL INCOME TAX WITHHELD:	$5,591.00
COBRA PREMIUM SUBSIDY:	$0.00
ESTIMATED TAX PAYMENTS:	$0.00
MAKING WORK PAY AND GOV'T RET CREDIT:	$0.00
MAKING WORK PAY AND GOV'T RET CREDIT PER COMPUTER:	$0.00
MAKING WORK PAY AND GOV'T RET CREDIT VERIFIED:	$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 M NONTAXABLE COMBAT PAY:	$0.00
FORM 8812 NONTAXABLE COMBAT PAY:	$0.00
EXCESS SOCIAL SECURITY & RRTA TAX WITHHELD:	$0.00
TOT SS/MEDICARE WITHHELD: F8812:	$0.00
FORM 8812 ADDITIONAL CHILD TAX CREDIT:	$0.00
FORM 8812 ADDITIONAL CHILD TAX CREDIT PER COMPUTER:	$0.00
FORM 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
FORM 8801 REFUNDABLE CREDIT FOR PRIOR YEAR MIN. TAX:	$0.00
FIRST TIME HOME BUYER CREDIT PER COMPUTER:	$0.00
FIRST TIME HOME BUYER CREDIT:	$0.00
FIRST TIME HOME BUYER CREDIT VERIFIED:	$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 2555 COMBINED EARNED INCOME AMOUNT PER COMPUTER:	$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, 8801, and OTHER CREDIT TOTAL AMT:	$0.00
TOTAL PAYMENTS:	$5,691.00
TOTAL PAYMENTS PER COMPUTER:	$5,691.00

Refund or Amount Owed

REFUND AMOUNT:	$-4,775.00
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:	$-4,775.00
BAL DUE/OVER PYMT USING COMPUTER FIGURES:	$-4,775.00
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:	$4,151.00
AGI PERCENTAGE LIMITATION PER COMPUTER::	$4,431.00
NET MEDICAL DEDUCTION:	$0.00
NET MEDICAL DEDUCTION PER COMPUTER:	$0.00

TAXES PAID

STATE AND LOCAL INCOME TAXES:	$1,771.00
INCOME TAX OR GENERAL SALES TAX:	Income Taxes
REAL ESTATE TAXES:	$2,498.00
PERSONAL PROPERTY TAXES:	$56.00
NEW MOTOR VEHICLE TAXES:	$0.00
OTHER TAXES AMOUNT:	$0.00
SCH A TAX DEDUCTIONS:	$4,325.00
SCH A TAX PER COMPUTER:	$4,325.00

INTEREST PAID

MORTGAGE INTEREST (FINANCIAL):	$7,588.00
MORTGAGE INTEREST (INDIVIDUAL):	$0.00
DEDUCTIBLE POINTS:	$0.00
QUALIFIED MORTGAGE INSURANCE PREMIUMS:	$0.00
DEDUCTIBLE INVESTMENT INTEREST:	$0.00
TOTAL INTEREST DEDUCTION:	$7,588.00
TOTAL INTEREST DEDUCTION PER COMPUTER:	$7,588.00

CHARITABLE CONTRIBUTIONS

CASH CONTRIBUTIONS:	$144.00
OTHER THAN CASH: Form 8283:	$476.00
CARRYOVER FROM PRIOR YEAR:	$0.00
SCH A TOTAL CONTRIBUTIONS:	$620.00
SCH A TOTAL CONTRIBUTIONS PER COMPUTER:	$620.00

CASUALTY AND THEFT LOSS

CASUALTY OR THEFT LOSS:	$0.00

JOBS AND MISCELLANEOUS

UNREIMBURSED EMPLOYEE EXPENSE AMOUNT:	$851.00
TOTAL LIMITED MISC EXPENSES:	$851.00
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:	$12,533.00
TOTAL ITEMIZED DEDUCTIONS PER COMPUTER:	$12,533.00
ELECT ITEMIZED DEDUCTION INDICATOR:	
SCH A ITEMIZED PERCENTAGE PER COMPUTER:	$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

Internal Revenue Service
United States Department of the Treasury

This Product Contains Sensitive Taxpayer Data

Tax Return Transcript

Request Date:	04-08-2014
Response Date:	04-08-2014
Tracking Number:	200191107146

SSN Provided: 999-99-9999
Tax Period Ending: Dec. 31, 2011

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:	999-99-9999
SPOUSE SSN:	888-88-8888
NAME(S) SHOWN ON RETURN:	SANTA & JESSICA CLAUS
ADDRESS:	123 MAIN ST ANYWHERE, FL 12345-5529-699

FILING STATUS:	Married Filing Joint
FORM NUMBER:	1040
CYCLE POSTED:	20121905
RECEIVED DATE:	May 02, 2012
REMITTANCE:	$0.00
EXEMPTION NUMBER:	4
DEPENDENT 1 NAME CTRL:	CLAU
DEPENDENT 1 SSN:	333-33-3333
DEPENDENT 2 NAME CTRL:	CLAU
DEPENDENT 2 SSN:	444-44-4444
DEPENDENT 3 NAME CTRL:	
DEPENDENT 3 SSN:	
DEPENDENT 4 NAME CTRL:	
DEPENDENT 4 SSN:	
IDENTITY THEFT PERSONAL ID NUMBER:	000000
PREPARER SSN:	P00-12-345
PREPARER EIN:	75-5555555

Income

WAGES, SALARIES, TIPS, ETC:	$68,343.00
TAXABLE INTEREST INCOME: SCH B:	$0.00
TAX-EXEMPT INTEREST:	$0.00
ORDINARY DIVIDEND INCOME: SCH B:	$0.00
QUALIFIED DIVIDENDS:	$0.00
REFUNDS OF STATE/LOCAL TAXES:	$1,295.00
ALIMONY RECEIVED:	$0.00
BUSINESS INCOME OR LOSS (Schedule C):	$0.00
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
TOTAL IRA DISTRIBUTIONS:	$0.00
TAXABLE IRA DISTRIBUTIONS:	$0.00

TOTAL PENSIONS AND ANNUITIES:	$0.00
TAXABLE PENSION/ANNUITY AMOUNT:	$0.00
RENT/ROYALTY/PARTNERSHIP/ESTATE (Schedule E):	$0.00
RENT/ROYALTY/PARTNERSHIP/ESTATE (Schedule E) PER COMPUTER:	$0.00
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
TOTAL INCOME:	$69,538.00
TOTAL INCOME PER COMPUTER:	$69,538.00

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
HEALTH SAVINGS ACCT DEDUCTION PER COMPTR:	$0.00
MOVING EXPENSES: F3903:	$555.00
SELF EMPLOYMENT TAX DEDUCTION:	$0.00
SELF EMPLOYMENT TAX DEDUCTION PER COMPUTER:	$0.00
KEOGH/SEP CONTRIBUTION DEDUCTION:	$0.00
SELF-EMP HEALTH INS DEDUCTION:	$0.00
EARLY WITHDRAWAL OF SAVINGS PENALTY:	$0.00
ALIMONY PAID SSN:	
ALIMONY PAID:	$0.00
IRA DEDUCTION:	$0.00
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
JURY DUTY PAY DEDUCTION:	$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:	$555.00
TOTAL ADJUSTMENTS PER COMPUTER:	$555.00
ADJUSTED GROSS INCOME:	$69,083.00
ADJUSTED GROSS INCOME PER COMPUTER:	$69,083.00

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:	$45,550.00
EXEMPTION AMOUNT PER COMPUTER:	$14,800.00
TAXABLE INCOME:	$41,750.00
TAXABLE INCOME PER COMPUTER:	$41,750.00

TOTAL POSITIVE INCOME PER COMPUTER:	$69,538.00
TENTATIVE TAX:	$3,916.00
TENTATIVE TAX PER COMPUTER:	$3,916.00
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
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 TAX CREDIT:	$2,000.00
CHILD TAX CREDIT PER COMPUTER:	$2,000.00
ADOPTION CREDIT: F8839:	$0.00
ADOPTION CREDIT PER COMPUTER:	$0.00
FORM 8839 REFUND ADOPTION CREDIT AMOUNT:	$0.00
DC 1ST TIME HOMEBUYERS CREDIT:	$0.00
DC 1ST TIME HOMEBUYERS 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
F8834 ELECTRIC VEHICLE CREDIT AMOUNT:	$0.00
F8936 ELECTRIC MOTOR VEHICLE CREDIT AMOUNT:	$0.00
F8910 ALTERNATIVE MOTOR VEHICLE CREDIT AMOUNT:	$0.00
OTHER CREDITS:	$0.00
TOTAL CREDITS:	$2,000.00
TOTAL CREDITS PER COMPUTER:	$2,000.00
INCOME TAX AFTER CREDITS PER COMPUTER:	$1,816.00

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
IRAF TAX PER COMPUTER:	$0.00
TP TAX FIGURES (REDUCED BY IRAF) PER COMPUTER:	$1,916.00
IMF TOTAL TAX (REDUCED BY IRAF) PER COMPUTER:	$1,916.00
ADVANCED EARNED INCOME CREDIT:	$0.00
RECOVERY REBATE CREDIT AMOUNT:	$0.00
UNPAID FICA ON REPORTED TIPS:	$0.00
OTHER TAXES:	$0.00

RECAPTURE TAX: F8611:	$0.00
HOUSEHOLD EMPLOYMENT TAXES:	$0.00
HOUSEHOLD EMPLOYMENT TAXES PER COMPUTER:	$0.00
RECAPTURE TAXES:	$0.00
TOTAL ASSESSMENT PER COMPUTER:	$1,916.00
TOTAL TAX LIABILITY TP FIGURES:	$1,916.00
TOTAL TAX LIABILITY TP FIGURES PER COMPUTER:	$1,916.00

Payments

FEDERAL INCOME TAX WITHHELD:	$5,691.00
COBRA PREMIUM SUBSIDY:	$0.00
ESTIMATED TAX PAYMENTS:	$0.00
MAKING WORK PAY AND GOV'T RET CREDIT:	$0.00
MAKING WORK PAY AND GOV'T RET CREDIT PER COMPUTER:	$0.00
MAKING WORK PAY AND GOV'T RET CREDIT VERIFIED:	$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 M NONTAXABLE COMBAT PAY:	$0.00
FORM 8812 NONTAXABLE COMBAT PAY:	$0.00
EXCESS SOCIAL SECURITY & RRTA TAX WITHHELD:	$0.00
TOT SS/MEDICARE WITHHELD: F8812:	$0.00
FORM 8812 ADDITIONAL CHILD TAX CREDIT:	$0.00
FORM 8812 ADDITIONAL CHILD TAX CREDIT PER COMPUTER:	$0.00
FORM 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
FORM 8801 REFUNDABLE CREDIT FOR PRIOR YEAR MIN. TAX:	$0.00
FIRST TIME HOME BUYER CREDIT PER COMPUTER:	$0.00
FIRST TIME HOME BUYER CREDIT:	$0.00
FIRST TIME HOME BUYER CREDIT VERIFIED:	$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 2555 COMBINED EARNED INCOME AMOUNT PER COMPUTER:	$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, 8801, and OTHER CREDIT TOTAL AMT:	$0.00
TOTAL PAYMENTS:	$5,691.00
TOTAL PAYMENTS PER COMPUTER:	$5,691.00

Refund or Amount Owed

REFUND AMOUNT:	$-3,775.00
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:	$-3,775.00
BAL DUE/OVER PYMT USING COMPUTER FIGURES:	$-3,775.00
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:	$4,151.00
AGI PERCENTAGE LIMITATION PER COMPUTER::	$4,431.00
NET MEDICAL DEDUCTION:	$0.00
NET MEDICAL DEDUCTION PER COMPUTER:	$0.00

TAXES PAID

STATE AND LOCAL INCOME TAXES:	$1,771.00
INCOME TAX OR GENERAL SALES TAX:	Income Taxes
REAL ESTATE TAXES:	$2,498.00
PERSONAL PROPERTY TAXES:	$56.00
NEW MOTOR VEHICLE TAXES:	$0.00
OTHER TAXES AMOUNT:	$0.00
SCH A TAX DEDUCTIONS:	$4,325.00
SCH A TAX PER COMPUTER:	$4,325.00

INTEREST PAID

MORTGAGE INTEREST (FINANCIAL):	$7,588.00
MORTGAGE INTEREST (INDIVIDUAL):	$0.00
DEDUCTIBLE POINTS:	$0.00
QUALIFIED MORTGAGE INSURANCE PREMIUMS:	$0.00
DEDUCTIBLE INVESTMENT INTEREST:	$0.00
TOTAL INTEREST DEDUCTION:	$7,588.00
TOTAL INTEREST DEDUCTION PER COMPUTER:	$7,588.00

CHARITABLE CONTRIBUTIONS

CASH CONTRIBUTIONS:	$144.00
OTHER THAN CASH: Form 8283:	$476.00
CARRYOVER FROM PRIOR YEAR:	$0.00
SCH A TOTAL CONTRIBUTIONS:	$620.00
SCH A TOTAL CONTRIBUTIONS PER COMPUTER:	$620.00

CASUALTY AND THEFT LOSS

CASUALTY OR THEFT LOSS:	$0.00

JOBS AND MISCELLANEOUS

UNREIMBURSED EMPLOYEE EXPENSE AMOUNT:	$851.00
TOTAL LIMITED MISC EXPENSES:	$851.00
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:	$12,533.00
TOTAL ITEMIZED DEDUCTIONS PER COMPUTER:	$12,533.00
ELECT ITEMIZED DEDUCTION INDICATOR:	
SCH A ITEMIZED PERCENTAGE PER COMPUTER:	$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

Internal Revenue Service
United States Department of the Treasury

This Product Contains Sensitive Taxpayer Data

Wage and Income Transcript

Request Date:	04-08-2014
Response Date:	04-08-2014
Tracking Number:	200191107597

SSN Provided: 999-99-9999
Tax Period Requested: December, 2011

Form W-2 Wage and Tax Statement

Employer:
Employer Identification Number (EIN): 588888888
COMPANY ONE INC
123 FIRST ST
ANYCITY, GA 12345-0000

Employee:
Employee's Social Security Number: 999-99-9999
SANTA CLAUS
123 MAIN ST
ANYCITY, GA 12345-0000

Submission Type:	Original document
Wages, Tips and Other Compensation:	$54,260.00
Federal Income Tax Withheld:	$3,266.00
Social Security Wages:	$54,260.00
Social Security Tax Withheld:	$1,858.00
Medicare Wages and Tips:	$54,260.00
Medicare Tax Withheld:	$641.00
Social Security Tips:	$0.00
Allocated Tips:	$0.00
Dependent Care Benefits:	$0.00
Deferred Compensation:	$0.00
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
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:	$0.00
Code "EE" Designated ROTH Contributions Under a Governmental Section 457(b) Plan:	$0.00
Third Party Sick Pay Indicator:	Unanswered
Retirement Plan Indicator:	Unanswered
Statutory Employee:	

Form W-2 Wage and Tax Statement

Employer:
Employer Identification Number (EIN): 751407388
NORTH POLE TOY COMPANY
PO BOX 123
ANYCITY, GA 12345-0340

Employee:
Employee's Social Security Number: 999-99-9999
SANTA CLAUS
123 MAIN ST
ANYCITY, GA 12345-0000

Submission Type:	Original document
Wages, Tips and Other Compensation:	$15,704.00
Federal Income Tax Withheld:	$2,424.00
Social Security Wages:	$15,704.00
Social Security Tax Withheld:	$575.00
Medicare Wages and Tips:	$15,704.00
Medicare Tax Withheld:	$198.00
Social Security Tips:	$0.00
Allocated Tips:	$0.00
Dependent Care Benefits:	$0.00
Deferred Compensation:	$0.00
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
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:	$0.00
Code "EE" Designated ROTH Contributions Under a Governmental Section 457(b) Plan:	$0.00
Third Party Sick Pay Indicator:	Unanswered
Retirement Plan Indicator:	Unanswered
Statutory Employee:	Not Statutory Employee

Form 5498 Individual Retirement Arrangement Contribution Information

Trustee:
Trustee/Issuer's Federal Identification Number (FIN): 044444444
FEDERAL FINANCIAL SERVICES LLC
200 VICTORY ST 5TH FLR
ANYCITY, GA 12345-0000

Participant:
Participant's Identification Number: 999-99-9999

SANTA CLAUS
123 MAIN ST
ANYCITY, GA 12345-5529

Submission Type:	Original document
Account Number (Optional):	111111199999999
IRA Contributions:	0.00
Rollover Contributions:	0.00
Roth Conversion Amount:	0.00
Recharacterized Contributions:	0.00
Fair Market Value of Account:	$13,690.00
Life Insurance Cost Included in Box 1:	0.00
SEP Code:	Not Checked
IRA Code:	Not Checked
Simple Code:	Not Checked
Roth IRA Code:	Checked
RMD For Subsequent Year:	Not Checked
SEP Contributions:	0.00
SIMPLE Contributions:	0.00
Roth IRA Contributions:	0.00

Schedule K-1 1120S Shareholder's Share of Income, Credits, Deductions, etc.

Corporation:
Corporation's Employer Identification Number: 277777777
INSURANCE AGENCY
2ND STREET
ANYCITY, GA 12345-0000

Shareholder:
Shareholder's Identifying Number: 999-99-9999
SANTA CLAUS
123 MAIN ST
ANYCITY, GA 12345-0000

Submission Type:	Original document
Dividends:	0.00
Interest:	0.00
Royalties:	0.00
Ordinary Income K - 1:	$3,635.00
Real Estate:	0.00
Other Rental:	0.00
Section 179 Expenses:	0.00
Short-Term Capital Gain:	0.00
Long-Term Capital Gain:	0.00
Credits:	0.00
Credits Code 1:	Insignificant
Credits Code 2:	Insignificant
Shareholder's Percentage Of Stock:	100%

Schedule K-1 1120S Shareholder's Share of Income, Credits, Deductions, etc.

Corporation:
Corporation's Employer Identification Number: 273358713
TAX BUSINESS LLC

PO BOX 5555
ANYCITY, GA 12345-0000

Shareholder:
Shareholder's Identifying Number: 999-99-9999
SANTA CLAUS
123 MAIN ST
ANYCITY, GA 12345-0000

Submission Type:	Original document
Dividends:	0.00
Interest:	0.00
Royalties:	0.00
Ordinary Income K - 1:	$65,755.00
Real Estate:	0.00
Other Rental:	0.00
Section 179 Expenses:	0.00
Short-Term Capital Gain:	0.00
Long-Term Capital Gain:	0.00
Credits:	0.00
Credits Code 1:	Insignificant
Credits Code 2:	Insignificant
Shareholder's Percentage Of Stock:	60%

Form 1099-S

Filer:
Filer's Federal Identification Number (FIN): 433333333
JOHN SMITH P.C.
3RD STREET
ANYCITY, GA 12345-0000

Transferor:
Transferor's Identification Number: 999-99-9999
CLAUS, SANTA
123 MAIN STREET
ANYCITY, GA 75472-0000

Submission Type:	Original document
Account Number:	111333
Date of Closing:	10-31-2011
Gross Proceeds:	$177,500.00
Buyer's Part of the Real Estate Tax:	$222.00
Transfer Indicator:	Property or Services Not Received
Address or legal description:	123 MAIN ST/ANYCITY GA

Form 1098 Mortgage Interest Statement

Recipient/Lender:
Recipient's Federal Identification Number (FIN): 944444444
SUPER BANK N. A.
5TH STREET
ANYCITY, GA 12345-0001

Payer/Borrower:
Payer's Social Security Number: 999-99-9999
SANTA CLAUS
123 MAIN ST

ANYCITY, GA 75472-5529

Submission Type:	Original document
Account Number (Optional):	MTG0999988877
Mortgage Interest Received from Payer(s)/Borrower(s):	$17,587.00
ANYCITYs Paid on Purchase of Principal Residence:	0.00
Refund of Overpaid Interest:	0.00
Mortgage Insurance Premiums:	0.00

Form 1099-G

Payer:

Payer's Federal Identification Number (FIN): 588888888
GEORGIA DEPARTMENT OF REVENUE INDIVIDUAL
TAXPAYER SERVICES DIVISION
1800 CENTURY CENTER BLVD NE STE 7100
ATLANTA, GA 30345-3205

Recipient:

Recipient's Identification Number: 999-99-9999
CLAUS,SANTA
CLAUS JESSICA
123 MAIN ST
ANYCITY, GA 12345-3076

Submission Type:	Original document
Account Number (Optional):	3333222221114444
ATAA Payments:	0.00
Tax Withheld:	0.00
Taxable Grants:	0.00
Unemployment Compensation:	0.00
Agricultural Subsidies:	0.00
Prior Year Refund:	$4,195.00
Market gain on Commodity Credit Corporation loans repaid on or after January 1, 2007:	0.00
Year of Refund:	2010
1099G Offset:	Not Refund, Credit, or Offset for Trade or Business

This Product Contains Sensitive Taxpayer Data