



2021 IRS 1040 FORM SAMPLE

Highlighted fields represent items we are required to verify for you (and your spouse, if married) and/or parents (if you are a dependent student) if you are required to submit income documents to the Financial Aid Office.

1ST PAGE

Form 1040 Department of the Treasury—Internal Revenue Service (99) **2021** U.S. Individual Income Tax Return OMB No. 1545-0074 IRS Use Only—Do not write or staple in this space.

Filing Status ☐ Single ☐ Married filing jointly ☐ Married filing separately (MFS) ☐ Head of household (HOH) ☐ 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 Last name Your social security number
If joint return, spouse's first name and middle initial Last name Spouse's social security number

Home address (number and street). If you have a P.O. box, see instructions. Apt. no. Presidential Election Campaign
City, town, or post office. If you have a foreign address, also complete spaces below. State ZIP code 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.
Foreign country name Foreign province/state/county Foreign postal code ☐ You ☐ Spouse

At any time during 2021, did you receive, sell, exchange, or otherwise dispose of any financial interest in any virtual currency? ☐ Yes ☐ No

Standard Deduction **Someone can claim:** ☐ You as a dependent ☐ Your spouse as a dependent
☐ Spouse itemizes on a separate return or you were a dual-status alien

Age/Blindness You: ☐ Were born before January 2, 1957 ☐ Are blind **Spouse:** ☐ Was born before January 2, 1957 ☐ Is blind

Dependents (see instructions):
If more than four dependents, see instructions and check here ▶ ☐

(1) First name	Last name	(2) Social security number	(3) Relationship to you	(4) <input checked="" type="checkbox"/> if qualifies for (see instructions): Child tax credit	Credit for other dependents
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

1	Wages, salaries, tips, etc. Attach Form(s) W-2	1	
2a	Tax-exempt interest	2a	
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	7	<input type="checkbox"/>
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	
10	Adjustments to income from Schedule 1, line 26	10	
11	Subtract line 10 from line 9. This is your adjusted gross income	11	
12a	Standard deduction or itemized deductions (from Schedule A)	12a	
b	Charitable contributions if you take the standard deduction (see instructions)	12b	
c	Add lines 12a and 12b	12c	
13	Qualified business income deduction from Form 8995 or Form 8995-A	13	
14	Add lines 12c and 13	14	
15	Taxable income. Subtract line 14 from line 11. If zero or less, enter -0-	15	

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 Standard Deduction, see instructions.

Attach Sch. B if required.

For Disclosure, Privacy Act, and Paperwork Reduction Act Notice, see separate instructions. Cat. No. 11320B Form 1040 (2021)

Filing Status

Note: last 4 digits of social security number need to be visible

Wages

IRA Distributions

Pension & Annuities

Adjusted Gross Income

2ND PAGE

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		
17	Amount from Schedule 2, line 3 17		
18	Add lines 16 and 17 18		
19	Nonrefundable child tax credit or credit for other dependents from Schedule 8812 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		
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		
25	Federal income tax withheld from:		
a	Form(s) W-2 25a		
b	Form(s) 1099 25b		
c	Other forms (see instructions) 25c		
d	Add lines 25a through 25c 25d		
26	2021 estimated tax payments and amount applied from 2020 return 26		
27a	Earned income credit (EIC) 27a		
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"/>			
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		
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		
33	Add lines 25d, 26, and 32. These are your total payments 33		
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 35a		
b	Routing number 35b		
c	Type: <input type="checkbox"/> Checking <input type="checkbox"/> Savings		
d	Account number 35d		
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		
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 38a	Phone no. 38b	Personal identification number (PIN) 38c
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 39a	Date 39b	Your occupation 39c
	Spouse's signature. If a joint return, both must sign. 39d	Date 39e	Spouse's occupation 39f
	Phone no. 39g	Email address 39h	
Paid Preparer Use Only	Preparer's name 40a	Preparer's signature 40b	Date 40c
	Firm's name 40d	Firm's address 40e	Phone no. 40f
	Firm's EIN 40g		

Go to www.irs.gov/Form1040 for instructions and the latest information. Form **1040** (2021)

Income Tax Paid

Line 22

Minus

Schedule 2, Line 2

Signatures

Taxes need to be signed if "self prepared" or include, name, address and EIN/PTIN if prepared by a firm or an accountant.

SCHEDULE 1

SCHEDULE 1 (Form 1040)

Department of the Treasury
Internal Revenue Service

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

2021
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

Business Income or (loss)

Note: We must collect the Schedule C if business income (or loss) was reported on this line.

Farm Income or (loss)

Note: We must collect the Schedule F if farm income (or loss) was reported on this line.

IRS Deductions & Payments

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

SCHEDULE 2

SCHEDULE 2 (Form 1040)

Department of the Treasury
Internal Revenue Service

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

2021
Attachment
Sequence No. 02

Name(s) shown on Form 1040, 1040-SR, or 1040-NR

Your social security number

Part I Tax

1	Alternative minimum tax. Attach Form 6251	1	
2	Excess advance premium tax credit repayment. Attach Form 8962	2	
3	Add lines 1 and 2. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 17	3	

Part II Other Taxes

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

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

Excess Advance Premium Tax

Note: we must collect schedule 2 if an amount was reported on this line.

SCHEDULE 3

SCHEDULE 3 (Form 1040)

Department of the Treasury
Internal Revenue Service

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

2021
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)

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

Cat. No. 71480G

Schedule 3 (Form 1040) 2021

Education Credit

Note: we must collect schedule 3 if an amount was reported on this line.

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 C

SCHEDULE C
(Form 1040)

Profit or Loss From Business
(Sole Proprietorship)

OMB No. 1545-0074
2021
Attachment Sequence No. **09**

Department of the Treasury
Internal Revenue Service (99)

Go to www.irs.gov/ScheduleC for instructions and the latest information.
▶ Attach to Form 1040, 1040-SR, 1040-NR, or 1041; partnerships must generally file Form 1065.

Name of proprietor Social security number (SSN)

A Principal business or profession, including product or service (see instructions)

B Enter code from instructions

C Business name. If no separate business name, leave blank.

D Employer ID number (EIN) (see instructions)

E Business address (including suite or room no.)
City, town or post office, state, and ZIP code

F Accounting method: (1) ☐ Cash (2) ☐ Accrual (3) ☐ Other (specify) ▶

G Did you "materially participate" in the operation of this business during 2021? If "No," see instructions for limit on losses ☐ Yes ☐ No

H If you started or acquired this business during 2021, check here ☐ Yes ☐ No

I Did you make any payments in 2021 that would require you to file Form(s) 1099? See instructions ☐ Yes ☐ No

J If "Yes," did you or will you file required Form(s) 1099? ☐ Yes ☐ No

Part I Income

1 Gross receipts or sales. See instructions for line 1 and check the box if this income was reported to you on Form W-2 and the "Statutory employee" box on that form was checked ☐ 1

2 Returns and allowances ☐ 2

3 Subtract line 2 from line 1 ☐ 3

4 Cost of goods sold (from line 42) ☐ 4

5 Gross profit. Subtract line 4 from line 3 ☐ 5

6 Other income, including federal and state gasoline or fuel tax credit or refund (see instructions) ☐ 6

7 Gross income. Add lines 5 and 6 ☐ 7

Part II Expenses. Enter expenses for business use of your home only on line 30.

8 Advertising ☐ 8

9 Car and truck expenses (see instructions) ☐ 9

10 Commissions and fees ☐ 10

11 Contract labor (see instructions) ☐ 11

12 Depreciation and section 179 expense deduction (not included in Part III) (see instructions) ☐ 12

13 ☐ 13

14 Employee benefit programs (other than on line 19) ☐ 14

15 Insurance (other than health) ☐ 15

16 Interest (see instructions):
a Mortgage paid to banks, etc. ☐ 16a

b Other ☐ 16b

17 Legal and professional services ☐ 17

18 Office expense (see instructions) ☐ 18

19 Pension and profit-sharing plans ☐ 19

20 Rent or lease (see instructions):
a Vehicles, machinery, and equipment ☐ 20a

b Other business property ☐ 20b

21 Repairs and maintenance ☐ 21

22 Supplies (not included in Part III) ☐ 22

23 Taxes and licenses ☐ 23

24 Travel and meals:
a Travel ☐ 24a

b Deductible meals (see instructions) ☐ 24b

25 Utilities ☐ 25

26 Wages (less employment credits) ☐ 26

27a Other expenses (from line 48) ☐ 27a

b Reserved for future use ☐ 27b

28 Total expenses before expenses for business use of home. Add lines 8 through 27a ☐ 28

29 Tentative profit or (loss). Subtract line 28 from line 7 ☐ 29

30 Expenses for business use of your home. Do not report these expenses elsewhere. Attach Form 8829 unless using the simplified method. See instructions.
Simplified method filers only: Enter the total square footage of (a) your home: ☐ 30

and (b) the part of your home used for business: ☐ Use the Simplified Method Worksheet in the instructions to figure the amount to enter on line 30 ☐ 30

31 Net profit or (loss). Subtract line 30 from line 29 ☐ 31

• If a profit, enter on both Schedule 1 (Form 1040), line 3, and on Schedule SE, line 2. (If you checked the box on line 1, see instructions). Estates and trusts, enter on Form 1041, line 3.

• If a loss, you must go to line 32.

32 If you have a loss, check the box that describes your investment in this activity. See instructions.
• If you checked 32a, enter the loss on both Schedule 1 (Form 1040), line 3, and on Schedule SE, line 2. (If you checked the box on line 1, see the line 31 instructions). Estates and trusts, enter on Form 1041, line 3.

• If you checked 32b, you must attach Form 6198. Your loss may be limited.

32a ☐ All investment is at risk.

32b ☐ Some investment is not at risk.

For Paperwork Reduction Act Notice, see the separate instructions. Cat. No. 11334P Schedule C (Form 1040) 2021

Note: We must collect the **Schedule C** if business income (or loss) was reported.

SCHEDULE E

SCHEDULE E
(Form 1040)

Supplemental Income and Loss
(From rental real estate, royalties, partnerships, S corporations, estates, trusts, REMICs, etc.)

OMB No. 1545-0074
2021
Attachment Sequence No. **13**

Department of the Treasury
Internal Revenue Service (99)

Go to www.irs.gov/ScheduleE for instructions and the latest information.
▶ Attach to Form 1040, 1040-SR, 1040-NR, or 1041.

Name(s) shown on return Your social security number

Part I Income or Loss From Rental Real Estate and Royalties Note: If you are in the business of renting personal property, use Schedule C. See instructions. If you are an individual, report farm rental income or loss from Form 4835 on page 2, line 40.

A Did you make any payments in 2021 that would require you to file Form(s) 1099? See instructions ☐ Yes ☐ No

B If "Yes," did you or will you file required Form(s) 1099? ☐ Yes ☐ No

1a Physical address of each property (street, city, state, ZIP code)

A ☐

B ☐

C ☐

1b Type of Property (from list below)

2 For each rental real estate property listed above, report the number of fair rental and personal use days. Check the **QJV** box only if you meet the requirements to file as a qualified joint venture. See instructions.

Fair Rental Days **Personal Use Days** **QJV**

A ☐ ☐ ☐

B ☐ ☐ ☐

C ☐ ☐ ☐

Type of Property:
1 Single Family Residence 3 Vacation/Short-Term Rental 5 Land 7 Self-Rental
2 Multi-Family Residence 4 Commercial 6 Royalties 8 Other (describe)

Income:

3 Rents received ☐ 3

4 Royalties received ☐ 4

Expenses:

5 Advertising ☐ 5

6 Auto and travel (see instructions) ☐ 6

7 Cleaning and maintenance ☐ 7

8 Commissions ☐ 8

9 Insurance ☐ 9

10 Legal and other professional fees ☐ 10

11 Management fees ☐ 11

12 Mortgage interest paid to banks, etc. (see instructions) ☐ 12

13 Other interest ☐ 13

14 Repairs ☐ 14

15 Supplies ☐ 15

16 Taxes ☐ 16

17 Utilities ☐ 17

18 Depreciation expense or depletion ☐ 18

19 Other (list) ☐ 19

20 Total expenses. Add lines 5 through 19 ☐ 20

21 Subtract line 20 from line 3 (rents) and/or 4 (royalties). If result is a (loss), see instructions to find out if you must file Form 6198 ☐ 21

22 Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions) ☐ 22

23a Total of all amounts reported on line 3 for all rental properties ☐ 23a

b Total of all amounts reported on line 4 for all royalty properties ☐ 23b

c Total of all amounts reported on line 12 for all properties ☐ 23c

d Total of all amounts reported on line 18 for all properties ☐ 23d

e Total of all amounts reported on line 20 for all properties ☐ 23e

24 Income. Add positive amounts shown on line 21. Do not include any losses ☐ 24

25 Losses. Add royalty losses from line 21 and rental real estate losses from line 22. Enter total losses here ☐ 25

26 Total rental real estate and royalty income or (loss). Combine lines 24 and 25. Enter the result here. If Parts I, III, IV, and line 40 on page 2 do not apply to you, also enter this amount on Schedule 1 (Form 1040), line 5. Otherwise, include this amount in the total on line 41 on page 2 ☐ 26

For Paperwork Reduction Act Notice, see the separate instructions. Cat. No. 11344L Schedule E (Form 1040) 2021

Note: We must collect the **Schedule E** if assets were reported.

SCHEDULE D

SCHEDULE D
(Form 1040)

Capital Gains and Losses

OMB No. 1545-0074
2021
Attachment Sequence No. **12**

Department of the Treasury
Internal Revenue Service (99)

Go to www.irs.gov/ScheduleD for instructions and the latest information.
▶ Attach to Form 1040, 1040-SR, or 1040-NR.
▶ Use Form 8949 to list your transactions for lines 1b, 2, 3, 6b, 9, and 10.

Name(s) shown on return Your social security number

Did you dispose of any investment(s) in a qualified opportunity fund during the tax year? ☐ Yes ☐ No
If "Yes," attach Form 8949 and see its instructions for additional requirements for reporting your gain or loss.

Part I Short-Term Capital Gains and Losses—Generally Assets Held One Year or Less (see instructions)

See instructions for how to figure the amounts to enter on the lines below.
This form may be easier to complete if you round off cents to whole dollars.

1a Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b ☐ 1a

1b Totals for all transactions reported on Form(s) 8949 with **Box A** checked ☐ 1b

2 Totals for all transactions reported on Form(s) 8949 with **Box B** checked ☐ 2

3 Totals for all transactions reported on Form(s) 8949 with **Box C** checked ☐ 3

4 Short-term gain from Form 6252 and short-term gain or (loss) from Forms 4684, 6781, and 8824 ☐ 4

5 Net short-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1 ☐ 5

6 Short-term capital loss carryover. Enter the amount, if any, from line 8 of your **Capital Loss Carryover Worksheet** in the instructions ☐ 6

7 Net short-term capital gain or (loss). Combine lines 1a through 6 in column (b). If you have any long-term capital gains or losses, go to Part II below. Otherwise, go to Part III on the back ☐ 7

Part II Long-Term Capital Gains and Losses—Generally Assets Held More Than One Year (see instructions)

See instructions for how to figure the amounts to enter on the lines below.
This form may be easier to complete if you round off cents to whole dollars.

8a Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b ☐ 8a

8b Totals for all transactions reported on Form(s) 8949 with **Box D** checked ☐ 8b

9 Totals for all transactions reported on Form(s) 8949 with **Box E** checked ☐ 9

10 Totals for all transactions reported on Form(s) 8949 with **Box F** checked ☐ 10

11 Gain from Form 4797, Part I; long-term gain from Forms 2439 and 6252; and long-term gain or (loss) from Forms 4684, 6781, and 8824 ☐ 11

12 Net long-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1 ☐ 12

13 Capital gain distributions. See the instructions ☐ 13

14 Long-term capital loss carryover. Enter the amount, if any, from line 13 of your **Capital Loss Carryover Worksheet** in the instructions ☐ 14

15 Net long-term capital gain or (loss). Combine lines 8a through 14 in column (b). Then, go to Part III on the back ☐ 15

For Paperwork Reduction Act Notice, see the separate instructions. Cat. No. 11338H Schedule D (Form 1040) 2021

Note: We must collect the **Schedule D** if capital gains and losses were reported.



2021 IRS TAX RETURN TRANSCRIPT SAMPLE

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: XXXXXXXXXX

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 Filing 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.

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Tax Year

Filing Status

Wages, Business and Farm Income

Untaxed Portion of IRS, Pension and Annuities

IRA Deductions and Payments

KEOGH/SEP Contribution Deductions
Plus
IRS Deduction Per Computer

Adjusted Gross Income
(AGI)

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
F995 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

EDUCATOR EXPENSES: \$0.00
EDUCATOR EXPENSES PER COMPUTER: \$0.00
RESERVIST AND OTHER BUSINESS EXPENSE: \$0.00
HEALTH SAVINGS ACCT DEDUCTION: \$0.00
Sch 1: 13 HEALTH SAVINGS ACCT DEDUCTION PER COMPT: \$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
1040: 11 ADJUSTED GROSS INCOME PER COMPUTER: \$202,842.00

Tax and Credits

65-OR-OVER: \$0.00
BLIND: \$0.00
SPOUSE 65-OR-OVER: \$0.00
SPOUSE BLIND: \$0.00
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.

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	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
Sch 2: 2**	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
Sch 3: 3	EDUCATION CREDIT PER COMPUTER:.....	\$0.00
	GROSS EDUCATION CREDIT PER COMPUTER:.....	\$0.00
	RETIREMENT SAVINGS CONTRB CREDIT:.....	\$0.00
	RETIREMENT SAVINGS CONTRB CREDIT PER COMPUTER:.....	\$0.00
	PRIM RET SAV CONTRB: F8880 LMG6:.....	\$0.00
	SEC RET SAV CONTRB: F8880 LMG8:.....	\$0.00
	TOTAL RETIREMENT SAVINGS CONTRIBUTION: F8880 CMPT:.....	\$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	"Income Tax After Credits Per Computer".....	\$28,448.00 ***
Sch 2: 2	- "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.	

Educational Credit

Taxes Paid

Income Tax After per Computer
minus

Excess Advance Premium Tax Credit Payment Amount

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
TAX 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
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 PMT USING P FIG PER COMPUTER:.....	\$8,626.00
BAL DUE/OVER PMT 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 923:.....\$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 9919:.....\$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

Last page of the IRS Tax Return Transcript



2021 IRS 1040X SAMPLE

Students or parents who amend their tax returns must provide the Financial Aid Office with additional documentation for the Verification process. We would need the following to verify the income of the student or the parent if an amended return was filed:

- A signed copy of the original 2021 U.S. Income Tax Return & a signed copy of a completed and submitted 2021 IRS 1040X **or**
- A 2021 IRS Tax Return Transcript & a 2021 Tax Account Transcript . To access these records visit <https://www.irs.gov/individuals/get-transcript>

Form **1040-X** Department of the Treasury—Internal Revenue Service
Amended U.S. Individual Income Tax Return
► Use this revision to amend 2019 or later tax returns.
► Go to www.irs.gov/Form1040X for instructions and the latest information.

OMB No. 1545-0074

(Rev. July 2021)

This return is for calendar year (enter year) or fiscal year (enter month and year ended)

Your first name and middle initial Last name Your social security number

If joint return, spouse's first name and middle initial Last name Spouse's social security number

Current home address (number and street). If you have a P.O. box, see instructions. Apt. no. Your phone number

City, town or post office, state, and ZIP code. If you have a foreign address, also complete spaces below. See instructions.

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

Amended return filing status. You must check one box even if you are not changing your filing status. **Caution:** In general, you can't change your filing status from married filing jointly to married filing separately after the return due date.

☐ Single ☐ Married filing jointly ☐ Married filing separately (MFS) ☐ Head of household (HOH) ☐ Qualifying widow(er) (QW)

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 ►

Enter on lines 1 through 23, columns A through C, the amounts for the return year entered above.
Use Part III on page 2 to explain any changes.

	A. Original amount reported or as previously adjusted (see instructions)	B. Net change—amount of increase or (decrease)—explain in Part III	C. Correct amount
Income and Deductions			
1 Adjusted gross income. If a net operating loss (NOL) carryback is included, check here ► <input type="checkbox"/>	1		
2 Itemized deductions or standard deduction	2		
3 Subtract line 2 from line 1	3		
4a Reserved for future use	4a		
b Qualified business income deduction	4b		
5 Taxable income. Subtract line 4b from line 3. If the result is zero or less, enter -0-	5		
Tax Liability			
6 Tax. Enter method(s) used to figure tax (see instructions):	6		
7 Nonrefundable credits. If a general business credit carryback is included, check here ► <input type="checkbox"/>	7		
8 Subtract line 7 from line 6. If the result is zero or less, enter -0-	8		
9 Reserved for future use	9		
10 Other taxes	10		
11 Total tax. Add lines 8 and 10	11		
Payments			
12 Federal income tax withheld and excess social security and tier 1 RRTA tax withheld. (If changing, see instructions.)	12		
13 Estimated tax payments, including amount applied from prior year's return	13		
14 Earned income credit (EIC)	14		
15 Refundable credits from: <input type="checkbox"/> Schedule 8812 Form(s) <input type="checkbox"/> 2439 <input type="checkbox"/> 4136 <input type="checkbox"/> 8863 <input type="checkbox"/> 8885 <input type="checkbox"/> 8962 or <input type="checkbox"/> other (specify):	15		
16 Total amount paid with request for extension of time to file, tax paid with original return, and additional tax paid after return was filed	16		
17 Total payments. Add lines 12 through 15, column C, and line 16	17		
Refund or Amount You Owe			
18 Overpayment, if any, as shown on original return or as previously adjusted by the IRS	18		
19 Subtract line 18 from line 17. (If less than zero, see instructions.)	19		
20 Amount you owe. If line 11, column C, is more than line 19, enter the difference	20		
21 If line 11, column C, is less than line 19, enter the difference. This is the amount overpaid on this return	21		
22 Amount of line 21 you want refunded to you	22		
23 Amount of line 21 you want applied to your (enter year): estimated tax 23	23		

Complete and sign this form on page 2.

For Paperwork Reduction Act Notice, see separate instructions. Cat. No. 11360L Form **1040-X** (Rev. 7-2021)

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2ND PAGE

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Part I Dependents

Complete this part to change any information relating to your dependents. This would include a change in the number of dependents. Enter the information for the return year entered at the top of page 1.

		A. Original number of dependents reported or as previously adjusted	B. Net change – amount of increase or (decrease)	C. Correct number
24	Reserved for future use	24		
25	Your dependent children who lived with you	25		
26	Your dependent children who didn't live with you due to divorce or separation	26		
27	Other dependents	27		
28	Reserved for future use	28		
29	Reserved for future use	29		
30	List ALL dependents (children and others) claimed on this amended return.			

Dependents (see instructions):

If more than four dependents, see instructions and check here <input type="checkbox"/>	(a) First name Last name	(b) Social security number	(c) Relationship to you	(d) <input checked="" type="checkbox"/> if qualifies for (see instructions):	
				Child tax credit	Credit for other dependents
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

Part II Presidential Election Campaign Fund (for the return year entered at the top of page 1)

Checking below won't increase your tax or reduce your refund.

- ☐ Check here if you didn't previously want \$3 to go to the fund, but now do.
☐ Check here if this is a joint return and your spouse did not previously want \$3 to go to the fund, but now does.

Part III Explanation of Changes. In the space provided below, tell us why you are filing Form 1040-X.

▶ Attach any supporting documents and new or changed forms and schedules.

Sign Here	Remember to keep a copy of this form for your records.				
	Under penalties of perjury, I declare that I have filed an original return, and that I have examined this amended return, including accompanying schedules and statements, and to the best of my knowledge and belief, this amended return is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information about which the preparer has any knowledge.				
	▶ _____ Your signature		_____ Date		_____ Your occupation
	▶ _____ Spouse's signature. If a joint return, both must sign.		_____ Date		_____ Spouse's occupation
Paid Preparer Use Only	Print/Type preparer's name		Preparer's signature		Date
	Firm's name ▶		Firm's EIN ▶		Check <input type="checkbox"/> if self-employed PTIN
	Firm's address ▶		Phone no.		

For forms and publications, visit www.irs.gov/Forms.

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Signatures

Taxes need to be signed if "self prepared" or include, name, address and EIN/PTIN if prepared by a firm or an accountant.