

TAX YEAR: 2016

PROCESS DATE: 12/03/2017

CLIENT : 851-00-2016 WALTER WINSTON
SPOUSE : 852-00-2016 WENDY WINSTON

BIRTH DATE : 01/02/1948
BIRTH DATE : 02/03/1958

ADDRESS : 123 ELM
: PLUCKEMIN NJ 07978

PREPARER : 995

Home : (888) 555-1111
Work : -
Cell : -
STATUS : 2
FED TYPE: Electronic Mail
ST TYPE : Regular Tax
E-MAIL : NONE@TAXSLAYERPRO.COM

PREPARER FEE:
ELECTRONIC :
TOTAL FEES :

LISTING OF FORMS FOR THIS RETURN

FORM 1040
FORM W-2
FORM W-2G
FORM SSA-1099 (SOCIAL SECURITY BENEFITS)
FORM 1099-R (RETIREMENT DISTRIBUTIONS)
SCHEDULE B (INTEREST/DIVIDEND INCOME)
SCHEDULE C (BUSINESS INCOME)
SCHEDULE D (CAPITAL GAINS/LOSSES)
SCHEDULE SE (SELF EMPLOYMENT TAX)
FORM 8879 (E-FILE SIGNATURE AUTHORIZATION)
NJ STATE RESIDENT RETURN

* QUICK SUMMARY *

SUMMARY	FEDERAL	NJ RESIDENT
FILING STATUS	2	2
TOTAL INCOME	62340	51071
TOTAL ADJUSTMENTS	90	0
ADJUSTED GROSS INCOME	62250	31071
DEDUCTIONS	13850	0
EXEMPTIONS	8100	3000
TAXABLE INCOME	40300	28071
TAX	5091	421
CREDITS	0	0
PAYMENTS	6655	500
OTHER TAXES	80	0
EARNED INCOME CREDIT	0	0
REFUND	1484	79
AMOUNT DUE	0	0

CLIENT : WALTER WINSTON
SPOUSE : WENDY WINSTON

851-00-2016
852-00-2016

PREPARER : 995 DATE : 12/03/2017

LISTING OF FORMS FOR THIS RETURN

* W-2 INCOME FORMS SUMMARY *

	<u>T/S</u>	<u>EMPLOYER</u>	<u>WAGES</u>	<u>FED WITH</u>	<u>FICA</u>	<u>MED TAX</u>	<u>STATE WITH ST</u>
1.	S	ACME SCHOOL	15876	1588	984	230	500 NJ
		TOTALS.....	15876	1588	984	230	500

* W-2G INCOME FORMS SUMMARY *

	<u>[T/S]</u>	<u>PAYER</u>	<u>GROSS WINNING</u>	<u>FED WITH</u>	<u>STATE WITH ST</u>
1.	T	ACME CASINO	4000	400	0
2.	S	NEW JERSEY LOTTERY	1500	150	0
		TOTALS.....	5500	550	0

* 1099-R INCOME FORMS SUMMARY *

	<u>[T/S]</u>	<u>PAYER</u>	<u>GROSS DIST</u>	<u>TAXABLE AMT</u>	<u>FED WITH</u>	<u>STATE WITH</u>
1.	T	DEFENSE FINANCE &	1200	1200	120	0
2.	T	ACME IRAS	3000	0	0	0
3.	T	ACME TRUST	2424	0	0	0
4.	T	ACME PENSIONS	28000	26766	2677	0
		TOTALS.....	34624	27966	2797	0

* FORM SSA-1099 INCOME FORMS SUMMARY *

	<u>[T/S]</u>	<u>PAYER</u>	<u>SSA BENEFITS</u>	<u>FED WITH</u>
1.	T	U.S.	13682	1368
		TOTALS.....	13682	1368

For the year Jan. 1–Dec. 31, 2016, or other tax year beginning _____, 2016, ending _____, 20

See separate instructions.

Your first name and initial WALTER	Last name WINSTON	Your social security number 851-00-2016
If a joint return, spouse's first name and initial WENDY	Last name WINSTON	Spouse's social security number 852-00-2016
Home address (number and street). If you have a P.O. box, see instructions. 123 ELM		Apt. no.
City, town or post office, state, and ZIP code. If you have a foreign address, also complete spaces below (see instructions). PLUCKEMIN, NJ 07978		Presidential Election Campaign Check here if you, or your spouse if filing jointly, want \$3 to go to this fund. Checking a box below will not change your tax or refund. <input type="checkbox"/> You <input type="checkbox"/> Spouse
Foreign country name	Foreign province/state/county	

Filing Status

1 Single

2 Married filing jointly (even if only one had income)

3 Married filing separately. Enter spouse's SSN above and full name here. ▶

4 Head of household (with qualifying person). (See instructions.) If the qualifying person is a child but not your dependent, enter this child's name here. ▶

5 Qualifying widow(er) with dependent child

Check only one box.

Exemptions

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

b Spouse

c Dependents:		(2) Dependent's social security number	(3) Dependent's relationship to you	(4) <input checked="" type="checkbox"/> if child under age 17 qualifying for child tax credit (see instructions)
(1) First name	Last name			
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

If more than four dependents, see instructions and check here

d Total number of exemptions claimed

Boxes checked on 6a and 6b 2

No. of children on 6c who:

- lived with you 0
- did not live with you due to divorce or separation (see instructions) 0

Dependents on 6c not entered above 0

Add numbers on lines above 2

Income

7	Wages, salaries, tips, etc. Attach Form(s) W-2	7	15876
8a	Taxable interest. Attach Schedule B if required	8a	3569
b	Tax-exempt interest. Do not include on line 8a	8b	338
9a	Ordinary dividends. Attach Schedule B if required	9a	232
b	Qualified dividends	9b	199
10	Taxable refunds, credits, or offsets of state and local income taxes	10	
11	Alimony received	11	
12	Business income or (loss). Attach Schedule C or C-EZ	12	567
13	Capital gain or (loss). Attach Schedule D if required. If not required, check here <input type="checkbox"/>	13	-3000
14	Other gains or (losses). Attach Form 4797	14	
15a	IRA distributions	15a	5424
b	Taxable amount ROLLOVER	15b	
16a	Pensions and annuities	16a	29200
b	Taxable amount	16b	27966
17	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E	17	
18	Farm income or (loss). Attach Schedule F	18	
19	Unemployment compensation	19	
20a	Social security benefits	20a	13682
b	Taxable amount	20b	11630
21	Other income. List type and amount <u>GAMBLING WINNINGS</u>	21	5500
22	Combine the amounts in the far right column for lines 7 through 21. This is your total income ▶	22	62340

Adjusted Gross Income

23	Educator expenses	23	
24	Certain business expenses of reservists, performing artists, and fee-basis government officials. Attach Form 2106 or 2106-EZ	24	
25	Health savings account deduction. Attach Form 8889	25	
26	Moving expenses. Attach Form 3903	26	
27	Deductible part of self-employment tax. Attach Schedule SE	27	40
28	Self-employed SEP, SIMPLE, and qualified plans	28	
29	Self-employed health insurance deduction	29	
30	Penalty on early withdrawal of savings	30	50
31a	Alimony paid b Recipient's SSN ▶	31a	
32	IRA deduction	32	
33	Student loan interest deduction	33	
34	Tuition and fees. Attach Form 8917	34	
35	Domestic production activities deduction. Attach Form 8903	35	
36	Add lines 23 through 35	36	90
37	Subtract line 36 from line 22. This is your adjusted gross income ▶	37	62250



WINSTON WALTER & WENDY

851002016

1038

Residency Status IF YOU WERE A NEW JERSEY RESIDENT FOR ONLY PART OF THE TAXABLE YEAR GIVE THE PERIOD OF NEW JERSEY RESIDENCY FROM TO

FILING STATUS

- 1. SINGLE
2. MARRIED/CU COUPLE FILING JOINT RETURN X
3. MARRIED/CU COUPLE FILING SEPARATE RETURN
4. HEAD OF HOUSEHOLD
5. QUALIFYING WIDOW(ER)/SURVIVING CU PARTNER

EXEMPTIONS

- 6. REGULAR 2
7. AGE 65 OR OVER 1
8. BLIND OR DISABLED
9. NUMBER OF QUALIFIED DEPENDENT CHILDREN
10. NUMBER OF OTHER DEPENDENTS
11. DEPENDENTS ATTENDING COLLEGE
12A. TOTAL (LINE 12A - ADD LINES 6, 7, 8, AND 11) 3
12B. TOTAL (LINE 12B - ADD LINES 9 AND 10)

CHECKBOXES FOR EXEMPTIONS

- REGULAR SPOUSE/CU PARTNER X DOMESTIC PARTNER
AGE 65 OR OLDER YOURSELF X SPOUSE/CU PARTNER
BLIND OR DISABLED YOURSELF SPOUSE/CU PARTNER

DEPENDENT'S INFORMATION FROM LINES 9 AND 10 (ATTACH RIDER IF MORE THAN FOUR)

Table with 4 columns: LAST NAME, FIRST NAME, MIDDLE INITIAL, SOCIAL SECURITY NUMBER, BIRTH YEAR, HEALTH INS IND. Rows A, B, C, D.

GUBERNATORIAL ELECTIONS FUND

DO YOU WISH TO DESIGNATE \$1 OF YOUR TAXES FOR THIS FUND? YES NO X
IF JOINT RETURN. DOES YOUR SPOUSE/CU PARTNER WISH TO DESIGNATE \$1? YES NO X

Main tax schedule table with 36 rows. Columns include line number, description, and amount. Total taxable income is 28071.