

Electronic Filing Instructions for your 2012 Federal Tax Return

Important: Your taxes are not finished until all required steps are completed.



Joshua P Schrader
800 W Marietta St NW, Apt. 301B
Atlanta, GA 30318

Balance Due/Refund	Your federal tax return (Form 1040) shows a refund due to you in the amount of \$240.00. Your tax refund will be direct deposited into your account. The account information you entered - Account Number: 1010241154733 Routing Transit Number: 061000227.		
When Will You Get Your Refund?	The IRS issued more than 9 out of 10 refunds to taxpayers in less than 21 days last year. The same results are expected in 2013. To get your estimated refund date from TurboTax, log into My TurboTax at www.turbotax.com . If you do not receive your refund within 21 days, or the amount you get is not what you expected, contact the Internal Revenue Service directly at 1-800-829-4477. You can also check www.irs.gov and select the "Where's my refund?" link.		
What You Need to Keep	Your Electronic Filing Instructions (this form) Printed copy of your federal return		
2012 Federal Tax Return Summary	Adjusted Gross Income	\$	11,304.00
	Taxable Income	\$	5,354.00
	Total Tax	\$	538.00
	Total Payments/Credits	\$	778.00
	Amount to be Refunded	\$	240.00
	Effective Tax Rate		4.76%



Hi Joshua,

We just want to thank you for using TurboTax this year! It's our goal to make your taxes easy and accurate, year after year.

With TurboTax Federal Free Edition:

- Your filed return has 100% guaranteed accurate calculations*
- You received a printed copy of your return with supporting documents for your records

Many happy returns from TurboTax.

For the year Jan. 1–Dec. 31, 2012, or other tax year beginning

, 2012, ending

, 20

See separate instructions.

Your first name and initial

Joshua P

Last name

Schrader

Your social security number

257-81-5152

If a joint return, spouse's first name and initial

Last name

Spouse's social security number

Home address (number and street). If you have a P.O. box, see instructions.

800 W Marietta St NW

Apt. no.

301B

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

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

Atlanta GA 30318

Presidential Election CampaignCheck here if you, or your spouse if filing jointly, want \$3 to go to this fund. Checking a box below will not change your tax or refund.
☐ You ☐ Spouse

Foreign country name

Foreign province/state/county

Foreign postal code

Filing Status1 ☒ Single2 ☐ 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.

Exemptions6a ☐ Yourself. If someone can claim you as a dependent, do not check box 6ab ☐ Spouse

c Dependents:

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

7 Wages, salaries, tips, etc. Attach Form(s) W-2

8a **Taxable** interest. Attach Schedule B if requiredb **Tax-exempt** interest. Do not include on line 8a 8b

9a Ordinary dividends. Attach Schedule B if required

b Qualified dividends 9b

10 Taxable refunds, credits, or offsets of state and local income taxes

11 Alimony received

12 Business income or (loss). Attach Schedule C or C-EZ

13 Capital gain or (loss). Attach Schedule D if required. If not required, check here ▶ ☐

14 Other gains or (losses). Attach Form 4797

15a IRA distributions 15a b Taxable amount 15b

16a Pensions and annuities 16a b Taxable amount 16b

17 Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E

18 Farm income or (loss). Attach Schedule F

19 Unemployment compensation

20a Social security benefits 20a b Taxable amount 20b

21 Other income. List type and amount Sporadic Income from 1099-Misc22 Combine the amounts in the far right column for lines 7 through 21. This is your **total income** ▶

7 10,604.

8a

9a

10

11

12

13

14

15b

16b

17

18

19

20b

21 700.

22 11,304.

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

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

Enclose, but do not attach, any payment. Also, please use Form 1040-V.

Adjusted Gross Income

23 Educator expenses

24 Certain business expenses of reservists, performing artists, and fee-basis government officials. Attach Form 2106 or 2106-EZ

25 Health savings account deduction. Attach Form 8889

26 Moving expenses. Attach Form 3903

27 Deductible part of self-employment tax. Attach Schedule SE

28 Self-employed SEP, SIMPLE, and qualified plans

29 Self-employed health insurance deduction

30 Penalty on early withdrawal of savings

31a Alimony paid b Recipient's SSN ▶

32 IRA deduction

33 Student loan interest deduction

34 Tuition and fees. Attach Form 8917

35 Domestic production activities deduction. Attach Form 8903

36 Add lines 23 through 35

37 Subtract line 36 from line 22. This is your **adjusted gross income** ▶

23

24

25

26

27

28

29

30

31a

32

33

34

35

36

37

11,304.

Tax and Credits**Standard Deduction for—**

• People who check any box on line 39a or 39b or who can be claimed as a dependent, see instructions.

• All others:
Single or Married filing separately, \$5,950
Married filing jointly or Qualifying widow(er), \$11,900
Head of household, \$8,700

38	Amount from line 37 (adjusted gross income)	38	11,304.
39a	Check <input type="checkbox"/> You were born before January 2, 1948, <input type="checkbox"/> Blind. Total boxes checked <input type="checkbox"/> 39a		
	if: <input type="checkbox"/> Spouse was born before January 2, 1948, <input type="checkbox"/> Blind.		
b	If your spouse itemizes on a separate return or you were a dual-status alien, check here <input type="checkbox"/> 39b		
40	Itemized deductions (from Schedule A) or your standard deduction (see left margin)	40	5,950.
41	Subtract line 40 from line 38	41	5,354.
42	Exemptions. Multiply \$3,800 by the number on line 6d.	42	0.
43	Taxable income. Subtract line 42 from line 41. If line 42 is more than line 41, enter -0-	43	5,354.
44	Tax (see instructions). Check if any from: a <input type="checkbox"/> Form(s) 8814 b <input type="checkbox"/> Form 4972 c <input type="checkbox"/> 962 election	44	538.
45	Alternative minimum tax (see instructions). Attach Form 6251	45	
46	Add lines 44 and 45	46	538.
47	Foreign tax credit. Attach Form 1116 if required	47	
48	Credit for child and dependent care expenses. Attach Form 2441	48	
49	Education credits from Form 8863, line 19	49	
50	Retirement savings contributions credit. Attach Form 8880	50	
51	Child tax credit. Attach Schedule 8812, if required	51	
52	Residential energy credits. Attach Form 5695	52	
53	Other credits from Form: a <input type="checkbox"/> 3800 b <input type="checkbox"/> 8801 c <input type="checkbox"/>	53	
54	Add lines 47 through 53. These are your total credits	54	
55	Subtract line 54 from line 46. If line 54 is more than line 46, enter -0-	55	538.
56	Self-employment tax. Attach Schedule SE	56	
57	Unreported social security and Medicare tax from Form: a <input type="checkbox"/> 4137 b <input type="checkbox"/> 8919	57	
58	Additional tax on IRAs, other qualified retirement plans, etc. Attach Form 5329 if required	58	
59a	Household employment taxes from Schedule H	59a	
b	First-time homebuyer credit repayment. Attach Form 5405 if required	59b	
60	Other taxes. Enter code(s) from instructions	60	
61	Add lines 55 through 60. This is your total tax	61	538.
62	Federal income tax withheld from Forms W-2 and 1099	62	778.
63	2012 estimated tax payments and amount applied from 2011 return	63	
64a	Earned income credit (EIC)	64a	
b	Nontaxable combat pay election 64b		
65	Additional child tax credit. Attach Schedule 8812	65	
66	American opportunity credit from Form 8863, line 8	66	
67	Reserved	67	
68	Amount paid with request for extension to file	68	
69	Excess social security and tier 1 RRTA tax withheld	69	
70	Credit for federal tax on fuels. Attach Form 4136	70	
71	Credits from Form: a <input type="checkbox"/> 2439 b <input type="checkbox"/> Reserved c <input type="checkbox"/> 8801 d <input type="checkbox"/> 8885	71	
72	Add lines 62, 63, 64a, and 65 through 71. These are your total payments	72	778.
73	If line 72 is more than line 61, subtract line 61 from line 72. This is the amount you overpaid	73	240.
74a	Amount of line 73 you want refunded to you . If Form 8888 is attached, check here <input type="checkbox"/>	74a	240.
b	Routing number 0 6 1 0 0 0 2 2 7 c Type: <input checked="" type="checkbox"/> Checking <input type="checkbox"/> Savings		
d	Account number 1 0 1 0 2 4 1 1 5 4 7 3 3		
75	Amount of line 73 you want applied to your 2013 estimated tax	75	
76	Amount you owe. Subtract line 72 from line 61. For details on how to pay, see instructions	76	
77	Estimated tax penalty (see instructions)	77	

Payments

If you have a qualifying child, attach Schedule EIC.

Refund

Direct deposit? See instructions.

Amount You Owe**Third Party Designee**

Do you want to allow another person to discuss this return with the IRS (see instructions)? ☐ **Yes.** Complete below. ☒ **No**

Designee's name

Phone no.

Personal identification number (PIN)

Sign Here

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.

Joint return? See instructions. Keep a copy for your records.

Your signature

Date

Your occupation

Daytime phone number

Technical Support

(678) 438-3057

Spouse's signature. If a joint return, **both** must sign.

Date

Spouse's occupation

If the IRS sent you an Identity Protection PIN, enter it here (see inst.)

Paid Preparer Use Only

Print/Type preparer's name

Preparer's signature

Date

Check ☐ if self-employed

PTIN

Firm's name **SELF PREPARED**

Firm's EIN

Firm's address

Phone no.

Federal Information Worksheet

► Keep for your records

2012

Part I – Personal Information

Information in Part I is **completely calculated** from entries on Personal Information Worksheets.

Taxpayer:

First name Joshua
Middle initial P Suffix
Last name Schrader
Social security no. 257-81-5152
Occupation Technical Support
Date of birth 11/15/1991 (mm/dd/yyyy)
Age as of 1-1-2013 21
Daytime phone (678) 438-3057 Ext
Legally blind ☐
Date of death

Dependent of Someone Else:

Can taxpayer be claimed as dependent of another person (such as parent)? . . . ☒ Yes ☐ No
If yes, **was** taxpayer claimed as dependent on that person's return? ☒ Yes ☐ No

Credit for the Elderly or Disabled (Schedule R):

Is the taxpayer retired on total and permanent disability? . . . ☐ Yes ☐ No

Presidential Election Campaign Fund:

Does the taxpayer want \$3 to go to the Presidential Election Campaign Fund? . . . ☐ Yes ☐ No

Spouse:

First name
Middle initial Suffix
Last name
Social security no.
Occupation
Date of birth (mm/dd/yyyy)
Age as of 1-1-2013
Daytime phone Ext
Legally blind ☐
Date of death

Dependent of Someone Else:

Can spouse be claimed as dependent of another person (such as parent)? . . . ☐ Yes ☐ No
If yes, **was** spouse claimed as dependent on that person's return? ☐ Yes ☐ No

Credit for the Elderly or Disabled (Schedule R):

Is the spouse retired on total and permanent disability? . . . ☐ Yes ☐ No

Presidential Election Campaign Fund:

Does the spouse want \$3 to go to the Presidential Election Campaign Fund? . . . ☐ Yes ☐ No

Part II – Address and Federal Filing Status (enter information in this section)

Address 800 W Marietta St NW Apt no. . . 301B
City Atlanta State . . . GA ZIP code . . . 30318
Foreign province/county Foreign postal code
Foreign code . . . Foreign country . . .

APO/FPO/DPO address, check if appropriate APO ☐ FPO ☐ DPO ☐

Home phone . . .
Check to print phone number on Form 1040 . . . ☐ Home ☒ Taxpayer daytime ☐ Spouse daytime

Federal filing status:

- ☒ 1 Single
☐ 2 Married filing jointly
☐ 3 Married filing separately
Check this box if you **did not** live with your spouse at any time during the year ☐
Check this box if you are eligible to claim your spouse's exemption (see Help) ☐
☐ 4 Head of household
If the 'qualifying person' is your child but **not** your dependent:
Child's First name MI Last Name Suff
Child's social security number . . .
☐ 5 Qualifying widow(er)
Check the appropriate box for the year your spouse died 2010 ☐
2011 ☐

Part III – Dependent/Earned Income Credit/Child and Dependent Care Credit Information

Information in Part III is completely calculated from entries on Dependent/Nondependent Info Worksheets.

First name Last name	MI Suff	Social security number Relationship	Date of birth (mm/dd/yyyy)			Qualified child/dep care exps incurred and paid 2012	E I C	Lived with taxpyr in U.S.	Educ Tuitn and Fees	* D e p
			Age	C o d e	Not qual for child tax cr					

* "Yes" - qualifies as dependent, "No" - does not qualify as dependent

Part IV – Earned Income Credit Information (you must answer these questions to calculate EIC)

Is the taxpayer or spouse a qualifying child for EIC for another person? ☐ Yes ☐ No

Was the taxpayer's (and spouse's if married filing jointly) home in the United States
for more than half of 2012? ☐ Yes ☐ No

If the SSN of the taxpayer, or spouse if married filing jointly, was obtained to
get a federally funded benefit, such as Medicaid, and the Social Security card
contains the legend **Not Valid for Employment**, check this box (see Help) ☐

Check if you are filing head of household **and** your spouse is a nonresident alien
and you lived with your spouse during the last six months of 2012 ☐

Was EIC disallowed or reduced in a previous year and are you required to file
Form 8862 this year? ☐ Yes ☐ No

Check if you were notified by the IRS that EIC cannot be claimed in 2012 ☐

Part V – Direct Deposit or Direct Debit Information (not applicable for Form 9465)

Do you want to elect **direct deposit** of any federal tax refund? ☒ Yes ☐ No

Do you want to elect **direct debit** of federal balance due (Electronic filing only)? . . . ☐ Yes ☐ No

If you selected either of the options above, fill out the information below:

Name of Financial Institution (optional) Wells Fargo

Check the appropriate box ☒ Checking ☐ Savings

Routing number 061000227 Account number 1010241154733

Enter the following information only if you are requesting direct debit of balance due:

Enter the payment date to withdraw from the account above ▶ _____
Balance-due amount from this return ▶ _____

Part VI – Additional Information for Your Federal Return

Standard Deduction/Itemized Deductions:

Check this box if you are itemizing for state tax or other purposes even though your itemized deductions are less than your standard deduction ☐

Check this box if you are married filing separately and your spouse itemized deductions ☐

Check this box to take the standard deduction even if less than itemized deductions ☐

Main Form Selection:

Check this box to calculate Form 1040 even if you qualify to use Form 1040A or 1040EZ. ☐

Real Estate Professionals:

Do you or your spouse qualify for the special passive activity rules for taxpayers in real property business? (see Help) ☐ Yes ☐ No

Credit for Qualified Retirement Savings Contributions (Form 8880):

Is the taxpayer a full-time student? ☐ Yes ☐ No

Is the spouse a full-time student? ☐ Yes ☐ No

Foreign Tax Credit (Form 1116):

Check this box to file Form 1116 even if you're not required to file Form 1116 ☐

Resident country

Excludable Income from Am. Samoa, Guam, Commonwealth of the N. Mariana Islands, or Puerto Rico:

Excludable income of bona fide residents of American Samoa, Guam, or the Commonwealth of the Northern Mariana Islands	
Excludable income from Puerto Rico	

Dual Status Alien Return:

Check this box if you are a dual-status alien ☐

Third Party Designee:

Caution: Review transferred information for accuracy.

Do you want to allow another person to discuss this return with the IRS? ☐ Yes ☐ No

If Yes, complete the following:

Third party designee name ►

Third party designee phone number . . . ▶

Personal Identification number (enter any 5 numbers) . . ▶

If you are entitled to a filing extension or other disaster relief provision as declared by the IRS, enter the appropriate information (see Help) ►

Part VII – State Filing Information**Taxpayer:**Enter the taxpayer's state of residence as of December 31, 2012 ▶ GA

Check the appropriate box:

Taxpayer is a resident of the state above for the entire year ▶ ☒Taxpayer is a resident of the state above for only part of year ▶ ☐

Date the taxpayer established residence in state above ▶ _____

In which state (or foreign country) did the taxpayer reside before this change? ▶ _____

Spouse:

Enter the spouse's state of residence as of December 31, 2012 ▶ _____

Check the appropriate box:

Spouse is a resident of the state above for the entire year ▶ ☐Spouse is a resident of the state above for only part of year ▶ ☐

Date the spouse established residence in state above ▶ _____

In which state (or foreign country) did the spouse reside before this change? ▶ _____

Nonresident states:

Nonresident State(s)	Taxpayer/Spouse/Joint
_____	_____
_____	_____
_____	_____
_____	_____

Check this box if you are in a Registered Domestic Partnership, a civil union, or same-sex marriage . . . ▶ ☐

If you checked the box on the line above, also check the appropriate box below:

Check if this is your individual federal return you are filing with the IRS ▶ ☐Check if this is the joint return created to file joint state tax return (see Help) ▶ ☐

**Personal Information Worksheet
For the Taxpayer**

2012

► Keep for your records

QuickZoom to another copy of Personal Information Worksheet ►
QuickZoom to Federal Information Worksheet ►

Part I – Taxpayer's Personal Information

First name . . . Joshua Middle initial . P Last name . . Schrader
Suffix

Social security no. . . 257-81-5152 Member of U.S. Armed Forces in 2012? . . ☐ Yes ☒ No

Date of birth 11/15/1991 (mm/dd/yyyy) age as of 1-1-2013 21

Occupation . . . Technical Support Daytime phone . . . (678) 438-3057 Ext _____

Marital status . . . Single

If widowed, check the appropriate box for the year your spouse died:

After 2012 ► ☐ 2012 ► ☐ 2011 ► ☐ 2010 ► ☐ Before 2010 ► ☐

Are you retired on total and permanent disability? (for Schedule R, see Help) ► ☐ Yes ☐ No

Check if this person is legally blind ► ☐

If deceased, enter the date of death ► (mm/dd/yyyy) _____

Were you under the age of 16 as of 1-1-2013 and this is the first year you
are filing a tax return? ► ☐ Yes ☐ No

Do you want \$3 to go to Presidential Election Campaign Fund? ► ☐ Yes ☐ No

Part II – Questions for Individuals Who Could Be Or Are Dependents of Another Taxpayer

1 Can someone (such as your parent) claim you as a dependent? ► ☒ Yes ☐ No

2 If you answered 'Yes' to question 1, are you actually claimed as a dependent
on that person's tax return? ► ☒ Yes ☐ No

*Questions 3 through 5 are only required for individuals who claim the
American Opportunity Credit.*

3 Were you a full-time student during any part of five months during 2012? ► ☒ Yes ☐ No

4 Did your earned income exceed one-half of your support? ► ☐ Yes ☒ No

5 Was at least one of your parents alive on December 31, 2012? ► ☒ Yes ☐ No

Part III – Taxpayer's State Residency Information

Enter this person's state of residence as of December 31, 2012 GA

Check the appropriate box:

This person is a resident of the state above for the entire year ☒

This person is a resident of the state above for only part of year ☐

Date this person established residence in state above ► _____

In which state (or foreign country) did this person reside before this change? ► _____

Part IV – Dependent Care Expenses

Qualified dependent care expenses incurred and paid for this person in 2012 _____

Student Information Worksheet

2012

► Keep for your records

Name of Student Joshua P Schrader	Social Security Number 257-81-5152
--------------------------------------	---------------------------------------

Part I – Student Status

- Was this person a student during 2012? ☒ Yes ☐ No
- What kind of school did the student attend during 2012? (Check all that apply.)

a <input type="checkbox"/> Elementary	c <input checked="" type="checkbox"/> College (postsecondary)	e <input type="checkbox"/> Military academy
b <input type="checkbox"/> High school (secondary)	d <input type="checkbox"/> Vocational school	f <input type="checkbox"/> Not applicable
- Did the student receive scholarships or other education assistance? ☒ Yes ☐ No

Part II – College Student Information

- Did the student complete the first 4 years of postsecondary education as of 1/1/2012? ☐ Yes ☒ No ☐ NA
- Was this student enrolled at an eligible education institution during 2012? ☒ Yes ☐ No ☐ NA
- Was this student enrolled in a program that leads to a degree, certificate, or credential? ☒ Yes ☐ No ☐ NA
- Was this student taking courses as part of a postsecondary degree program or to acquire or improve job skills? ☐ Yes ☒ No ☐ NA
- Did this student take at least one-half the normal full-time workload for one academic period? ☒ Yes ☐ No ☐ NA
- Has this student been convicted of a felony for possessing or distributing a controlled substance? ☐ Yes ☒ No ☐ NA
- Is this student an eligible dependent of the taxpayer? ☐ Yes ☐ No ☒ NA
- In how many prior years has an American Opportunity Credit been claimed for this student? ☐ 0 ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6 ☐ 7 ☐ 8 ☐ 9 ☐ 10 ☐ 11 ☐ 12 ☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17 ☐ 18 ☐ 19 ☐ 20 ☐ 21 ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26 ☐ 27 ☐ 28 ☐ 29 ☐ 30 ☐ 31 ☐ 32 ☐ 33 ☐ 34 ☐ 35 ☐ 36 ☐ 37 ☐ 38 ☐ 39 ☐ 40 ☐ 41 ☐ 42 ☐ 43 ☐ 44 ☐ 45 ☐ 46 ☐ 47 ☐ 48 ☐ 49 ☐ 50 ☐ 51 ☐ 52 ☐ 53 ☐ 54 ☐ 55 ☐ 56 ☐ 57 ☐ 58 ☐ 59 ☐ 60 ☐ 61 ☐ 62 ☐ 63 ☐ 64 ☐ 65 ☐ 66 ☐ 67 ☐ 68 ☐ 69 ☐ 70 ☐ 71 ☐ 72 ☐ 73 ☐ 74 ☐ 75 ☐ 76 ☐ 77 ☐ 78 ☐ 79 ☐ 80 ☐ 81 ☐ 82 ☐ 83 ☐ 84 ☐ 85 ☐ 86 ☐ 87 ☐ 88 ☐ 89 ☐ 90 ☐ 91 ☐ 92 ☐ 93 ☐ 94 ☐ 95 ☐ 96 ☐ 97 ☐ 98 ☐ 99 ☐ 100 ☐ 101 ☐ 102 ☐ 103 ☐ 104 ☐ 105 ☐ 106 ☐ 107 ☐ 108 ☐ 109 ☐ 110 ☐ 111 ☐ 112 ☐ 113 ☐ 114 ☐ 115 ☐ 116 ☐ 117 ☐ 118 ☐ 119 ☐ 120 ☐ 121 ☐ 122 ☐ 123 ☐ 124 ☐ 125 ☐ 126 ☐ 127 ☐ 128 ☐ 129 ☐ 130 ☐ 131 ☐ 132 ☐ 133 ☐ 134 ☐ 135 ☐ 136 ☐ 137 ☐ 138 ☐ 139 ☐ 140 ☐ 141 ☐ 142 ☐ 143 ☐ 144 ☐ 145 ☐ 146 ☐ 147 ☐ 148 ☐ 149 ☐ 150 ☐ 151 ☐ 152 ☐ 153 ☐ 154 ☐ 155 ☐ 156 ☐ 157 ☐ 158 ☐ 159 ☐ 160 ☐ 161 ☐ 162 ☐ 163 ☐ 164 ☐ 165 ☐ 166 ☐ 167 ☐ 168 ☐ 169 ☐ 170 ☐ 171 ☐ 172 ☐ 173 ☐ 174 ☐ 175 ☐ 176 ☐ 177 ☐ 178 ☐ 179 ☐ 180 ☐ 181 ☐ 182 ☐ 183 ☐ 184 ☐ 185 ☐ 186 ☐ 187 ☐ 188 ☐ 189 ☐ 190 ☐ 191 ☐ 192 ☐ 193 ☐ 194 ☐ 195 ☐ 196 ☐ 197 ☐ 198 ☐ 199 ☐ 200 ☐ 201 ☐ 202 ☐ 203 ☐ 204 ☐ 205 ☐ 206 ☐ 207 ☐ 208 ☐ 209 ☐ 210 ☐ 211 ☐ 212 ☐ 213 ☐ 214 ☐ 215 ☐ 216 ☐ 217 ☐ 218 ☐ 219 ☐ 220 ☐ 221 ☐ 222 ☐ 223 ☐ 224 ☐ 225 ☐ 226 ☐ 227 ☐ 228 ☐ 229 ☐ 230 ☐ 231 ☐ 232 ☐ 233 ☐ 234 ☐ 235 ☐ 236 ☐ 237 ☐ 238 ☐ 239 ☐ 240 ☐ 241 ☐ 242 ☐ 243 ☐ 244 ☐ 245 ☐ 246 ☐ 247 ☐ 248 ☐ 249 ☐ 250 ☐ 251 ☐ 252 ☐ 253 ☐ 254 ☐ 255 ☐ 256 ☐ 257 ☐ 258 ☐ 259 ☐ 260 ☐ 261 ☐ 262 ☐ 263 ☐ 264 ☐ 265 ☐ 266 ☐ 267 ☐ 268 ☐ 269 ☐ 270 ☐ 271 ☐ 272 ☐ 273 ☐ 274 ☐ 275 ☐ 276 ☐ 277 ☐ 278 ☐ 279 ☐ 280 ☐ 281 ☐ 282 ☐ 283 ☐ 284 ☐ 285 ☐ 286 ☐ 287 ☐ 288 ☐ 289 ☐ 290 ☐ 291 ☐ 292 ☐ 293 ☐ 294 ☐ 295 ☐ 296 ☐ 297 ☐ 298 ☐ 299 ☐ 300 ☐ 301 ☐ 302 ☐ 303 ☐ 304 ☐ 305 ☐ 306 ☐ 307 ☐ 308 ☐ 309 ☐ 310 ☐ 311 ☐ 312 ☐ 313 ☐ 314 ☐ 315 ☐ 316 ☐ 317 ☐ 318 ☐ 319 ☐ 320 ☐ 321 ☐ 322 ☐ 323 ☐ 324 ☐ 325 ☐ 326 ☐ 327 ☐ 328 ☐ 329 ☐ 330 ☐ 331 ☐ 332 ☐ 333 ☐ 334 ☐ 335 ☐ 336 ☐ 337 ☐ 338 ☐ 339 ☐ 340 ☐ 341 ☐ 342 ☐ 343 ☐ 344 ☐ 345 ☐ 346 ☐ 347 ☐ 348 ☐ 349 ☐ 350 ☐ 351 ☐ 352 ☐ 353 ☐ 354 ☐ 355 ☐ 356 ☐ 357 ☐ 358 ☐ 359 ☐ 360 ☐ 361 ☐ 362 ☐ 363 ☐ 364 ☐ 365 ☐ 366 ☐ 367 ☐ 368 ☐ 369 ☐ 370 ☐ 371 ☐ 372 ☐ 373 ☐ 374 ☐ 375 ☐ 376 ☐ 377 ☐ 378 ☐ 379 ☐ 380 ☐ 381 ☐ 382 ☐ 383 ☐ 384 ☐ 385 ☐ 386 ☐ 387 ☐ 388 ☐ 389 ☐ 390 ☐ 391 ☐ 392 ☐ 393 ☐ 394 ☐ 395 ☐ 396 ☐ 397 ☐ 398 ☐ 399 ☐ 400 ☐ 401 ☐ 402 ☐ 403 ☐ 404 ☐ 405 ☐ 406 ☐ 407 ☐ 408 ☐ 409 ☐ 410 ☐ 411 ☐ 412 ☐ 413 ☐ 414 ☐ 415 ☐ 416 ☐ 417 ☐ 418 ☐ 419 ☐ 420 ☐ 421 ☐ 422 ☐ 423 ☐ 424 ☐ 425 ☐ 426 ☐ 427 ☐ 428 ☐ 429 ☐ 430 ☐ 431 ☐ 432 ☐ 433 ☐ 434 ☐ 435 ☐ 436 ☐ 437 ☐ 438 ☐ 439 ☐ 440 ☐ 441 ☐ 442 ☐ 443 ☐ 444 ☐ 445 ☐ 446 ☐ 447 ☐ 448 ☐ 449 ☐ 450 ☐ 451 ☐ 452 ☐ 453 ☐ 454 ☐ 455 ☐ 456 ☐ 457 ☐ 458 ☐ 459 ☐ 460 ☐ 461 ☐ 462 ☐ 463 ☐ 464 ☐ 465 ☐ 466 ☐ 467 ☐ 468 ☐ 469 ☐ 470 ☐ 471 ☐ 472 ☐ 473 ☐ 474 ☐ 475 ☐ 476 ☐ 477 ☐ 478 ☐ 479 ☐ 480 ☐ 481 ☐ 482 ☐ 483 ☐ 484 ☐ 485 ☐ 486 ☐ 487 ☐ 488 ☐ 489 ☐ 490 ☐ 491 ☐ 492 ☐ 493 ☐ 494 ☐ 495 ☐ 496 ☐ 497 ☐ 498 ☐ 499 ☐ 500 ☐ 501 ☐ 502 ☐ 503 ☐ 504 ☐ 505 ☐ 506 ☐ 507 ☐ 508 ☐ 509 ☐ 510 ☐ 511 ☐ 512 ☐ 513 ☐ 514 ☐ 515 ☐ 516 ☐ 517 ☐ 518 ☐ 519 ☐ 520 ☐ 521 ☐ 522 ☐ 523 ☐ 524 ☐ 525 ☐ 526 ☐ 527 ☐ 528 ☐ 529 ☐ 530 ☐ 531 ☐ 532 ☐ 533 ☐ 534 ☐ 535 ☐ 536 ☐ 537 ☐ 538 ☐ 539 ☐ 540 ☐ 541 ☐ 542 ☐ 543 ☐ 544 ☐ 545 ☐ 546 ☐ 547 ☐ 548 ☐ 549 ☐ 550 ☐ 551 ☐ 552 ☐ 553 ☐ 554 ☐ 555 ☐ 556 ☐ 557 ☐ 558 ☐ 559 ☐ 560 ☐ 561 ☐ 562 ☐ 563 ☐ 564 ☐ 565 ☐ 566 ☐ 567 ☐ 568 ☐ 569 ☐ 570 ☐ 571 ☐ 572 ☐ 573 ☐ 574 ☐ 575 ☐ 576 ☐ 577 ☐ 578 ☐ 579 ☐ 580 ☐ 581 ☐ 582 ☐ 583 ☐ 584 ☐ 585 ☐ 586 ☐ 587 ☐ 588 ☐ 589 ☐ 590 ☐ 591 ☐ 592 ☐ 593 ☐ 594 ☐ 595 ☐ 596 ☐ 597 ☐ 598 ☐ 599 ☐ 600 ☐ 601 ☐ 602 ☐ 603 ☐ 604 ☐ 605 ☐ 606 ☐ 607 ☐ 608 ☐ 609 ☐ 610 ☐ 611 ☐ 612 ☐ 613 ☐ 614 ☐ 615 ☐ 616 ☐ 617 ☐ 618 ☐ 619 ☐ 620 ☐ 621 ☐ 622 ☐ 623 ☐ 624 ☐ 625 ☐ 626 ☐ 627 ☐ 628 ☐ 629 ☐ 630 ☐ 631 ☐ 632 ☐ 633 ☐ 634 ☐ 635 ☐ 636 ☐ 637 ☐ 638 ☐ 639 ☐ 640 ☐ 641 ☐ 642 ☐ 643 ☐ 644 ☐ 645 ☐ 646 ☐ 647 ☐ 648 ☐ 649 ☐ 650 ☐ 651 ☐ 652 ☐ 653 ☐ 654 ☐ 655 ☐ 656 ☐ 657 ☐ 658 ☐ 659 ☐ 660 ☐ 661 ☐ 662 ☐ 663 ☐ 664 ☐ 665 ☐ 666 ☐ 667 ☐ 668 ☐ 669 ☐ 670 ☐ 671 ☐ 672 ☐ 673 ☐ 674 ☐ 675 ☐ 676 ☐ 677 ☐ 678 ☐ 679 ☐ 680 ☐ 681 ☐ 682 ☐ 683 ☐ 684 ☐ 685 ☐ 686 ☐ 687 ☐ 688 ☐ 689 ☐ 690 ☐ 691 ☐ 692 ☐ 693 ☐ 694 ☐ 695 ☐ 696 ☐ 697 ☐ 698 ☐ 699 ☐ 700 ☐ 701 ☐ 702 ☐ 703 ☐ 704 ☐ 705 ☐ 706 ☐ 707 ☐ 708 ☐ 709 ☐ 710 ☐ 711 ☐ 712 ☐ 713 ☐ 714 ☐ 715 ☐ 716 ☐ 717 ☐ 718 ☐ 719 ☐ 720 ☐ 721 ☐ 722 ☐ 723 ☐ 724 ☐ 725 ☐ 726 ☐ 727 ☐ 728 ☐ 729 ☐ 730 ☐ 731 ☐ 732 ☐ 733 ☐ 734 ☐ 735 ☐ 736 ☐ 737 ☐ 738 ☐ 739 ☐ 740 ☐ 741 ☐ 742 ☐ 743 ☐ 744 ☐ 745 ☐ 746 ☐ 747 ☐ 748 ☐ 749 ☐ 750 ☐ 751 ☐ 752 ☐ 753 ☐ 754 ☐ 755 ☐ 756 ☐ 757 ☐ 758 ☐ 759 ☐ 760 ☐ 761 ☐ 762 ☐ 763 ☐ 764 ☐ 765 ☐ 766 ☐ 767 ☐ 768 ☐ 769 ☐ 770 ☐ 771 ☐ 772 ☐ 773 ☐ 774 ☐ 775 ☐ 776 ☐ 777 ☐ 778 ☐ 779 ☐ 780 ☐ 781 ☐ 782 ☐ 783 ☐ 784 ☐ 785 ☐ 786 ☐ 787 ☐ 788 ☐ 789 ☐ 790 ☐ 791 ☐ 792 ☐ 793 ☐ 794 ☐ 795 ☐ 796 ☐ 797 ☐ 798 ☐ 799 ☐ 800 ☐ 801 ☐ 802 ☐ 803 ☐ 804 ☐ 805 ☐ 806 ☐ 807 ☐ 808 ☐ 809 ☐ 810 ☐ 811 ☐ 812 ☐ 813 ☐ 814 ☐ 815 ☐ 816 ☐ 817 ☐ 818 ☐ 819 ☐ 820 ☐ 821 ☐ 822 ☐ 823 ☐ 824 ☐ 825 ☐ 826 ☐ 827 ☐ 828 ☐ 829 ☐ 830 ☐ 831 ☐ 832 ☐ 833 ☐ 834 ☐ 835 ☐ 836 ☐ 837 ☐ 838 ☐ 839 ☐ 840 ☐ 841 ☐ 842 ☐ 843 ☐ 844 ☐ 845 ☐ 846 ☐ 847 ☐ 848 ☐ 849 ☐ 850 ☐ 851 ☐ 852 ☐ 853 ☐ 854 ☐ 855 ☐ 856 ☐ 857 ☐ 858 ☐ 859 ☐ 860 ☐ 861 ☐ 862 ☐ 863 ☐ 864 ☐ 865 ☐ 866 ☐ 867 ☐ 868 ☐ 869 ☐ 870 ☐ 871 ☐ 872 ☐ 873 ☐ 874 ☐ 875 ☐ 876 ☐ 877 ☐ 878 ☐ 879 ☐ 880 ☐ 881 ☐ 882 ☐ 883 ☐ 884 ☐ 885 ☐ 886 ☐ 887 ☐ 888 ☐ 889 ☐ 890 ☐ 891 ☐ 892 ☐ 893 ☐ 894 ☐ 895 ☐ 896 ☐ 897 ☐ 898 ☐ 899 ☐ 900 ☐ 901 ☐ 902 ☐ 903 ☐ 904 ☐ 905 ☐ 906 ☐ 907 ☐ 908 ☐ 909 ☐ 910 ☐ 911 ☐ 912 ☐ 913 ☐ 914 ☐ 915 ☐ 916 ☐ 917 ☐ 918 ☐ 919 ☐ 920 ☐ 921 ☐ 922 ☐ 923 ☐ 924 ☐ 925 ☐ 926 ☐ 927 ☐ 928 ☐ 929 ☐ 930 ☐ 931 ☐ 932 ☐ 933 ☐ 934 ☐ 935 ☐ 936 ☐ 937 ☐ 938 ☐ 939 ☐ 940 ☐ 941 ☐ 942 ☐ 943 ☐ 944 ☐ 945 ☐ 946 ☐ 947 ☐ 948 ☐ 949 ☐ 950 ☐ 951 ☐ 952 ☐ 953 ☐ 954 ☐ 955 ☐ 956 ☐ 957 ☐ 958 ☐ 959 ☐ 960 ☐ 961 ☐ 962 ☐ 963 ☐ 964 ☐ 965 ☐ 966 ☐ 967 ☐ 968 ☐ 969 ☐ 970 ☐ 971 ☐ 972 ☐ 973 ☐ 974 ☐ 975 ☐ 976 ☐ 977 ☐ 978 ☐ 979 ☐ 980 ☐ 981 ☐ 982 ☐ 983 ☐ 984 ☐ 985 ☐ 986 ☐ 987 ☐ 988 ☐ 989 ☐ 990 ☐ 991 ☐ 992 ☐ 993 ☐ 994 ☐ 995 ☐ 996 ☐ 997 ☐ 998 ☐ 999 ☐ 1000 ☐ 1001 ☐ 1002 ☐ 1003 ☐ 1004 ☐ 1005 ☐ 1006 ☐ 1007 ☐ 1008 ☐ 1009 ☐ 1010 ☐ 1011 ☐ 1012 ☐ 1013 ☐ 1014 ☐ 1015 ☐ 1016 ☐ 1017 ☐ 1018 ☐ 1019 ☐ 1020 ☐ 1021 ☐ 1022 ☐ 1023 ☐ 1024 ☐ 1025 ☐ 1026 ☐ 1027 ☐ 1028 ☐ 1029 ☐ 1030 ☐ 1031 ☐ 1032 ☐ 1033 ☐ 1034 ☐ 1035 ☐ 1036 ☐ 1037 ☐ 1038 ☐ 1039 ☐ 1040 ☐ 1041 ☐ 1042 ☐ 1043 ☐ 1044 ☐ 1045 ☐ 1046 ☐ 1047 ☐ 1048 ☐ 1049 ☐ 1050 ☐ 1051 ☐ 1052 ☐ 1053 ☐ 1054 ☐ 1055 ☐ 1056 ☐ 1057 ☐ 1058 ☐ 1059 ☐ 1060 ☐ 1061 ☐ 1062 ☐ 1063 ☐ 1064 ☐ 1065 ☐ 1066 ☐ 1067 ☐ 1068 ☐ 1069 ☐ 1070 ☐ 1071 ☐ 1072 ☐ 1073 ☐ 1074 ☐ 1075 ☐ 1076 ☐ 1077 ☐ 1078 ☐ 1079 ☐ 1080 ☐ 1081 ☐ 1082 ☐ 1083 ☐ 1084 ☐ 1085 ☐ 1086 ☐ 1087 ☐ 1088 ☐ 1089 ☐ 1090 ☐ 1091 ☐ 1092 ☐ 1093 ☐ 1094 ☐ 1095 ☐ 1096 ☐ 1097 ☐ 1098 ☐ 1099 ☐ 1100 ☐ 1101 ☐ 1102 ☐ 1103 ☐ 1104 ☐ 1105 ☐ 1106 ☐ 1107 ☐ 1108 ☐ 1109 ☐ 1110 ☐ 1111 ☐ 1112 ☐ 1113 ☐ 1114 ☐ 1115 ☐ 1116 ☐ 1117 ☐ 1118 ☐ 1119 ☐ 1120 ☐ 1121 ☐ 1122 ☐ 1123 ☐ 1124 ☐ 1125 ☐ 1126 ☐ 1127 ☐ 1128 ☐ 1129 ☐ 1130 ☐ 1131 ☐ 1132 ☐ 1133 ☐ 1134 ☐ 1135 ☐ 1136 ☐ 1137 ☐ 1138 ☐ 1139 ☐ 1140 ☐ 1141 ☐

Part V – Education Assistance (Scholarships, Fellowships, Grants, etc.)

	Total	Taxable	Tax-free
1 Educational assistance that is always tax-free:			
a Veteran or employer assistance from Form 1098-T Worksheets . . .	_____		
b Other veteran assistance	_____		
c Other tax-free employer-provided assistance	_____		
d Other	_____		
e Total	_____		_____
2 Scholarships, fellowships, and grants not reported on Form W-2:			
a Scholarships and grants from Part IV above	4,750.		
b Other scholarships and grants	_____		
c Other fellowships	_____		
d Other	_____		
e Total	4,750.		
3 Amount representing payment for teaching, research, or other services		_____	
4 Amount required to be used for other than qualified education expenses		_____	
5 Subtract lines 3 and 4 from line 2e	4,750.		
6 Total qualified education expenses from Part VI below	16,536.		
7 If student is a candidate for a degree, enter the amount used for qualified education expenses, otherwise, enter -0-			4,750.
8 Subtract line 7 from line 5		0.	
9 Taxable part. Add lines 3, 4, and 8.		0.	
10 Tax-free educational assistance. Add lines 1e and 7			4,750.

Part VI – Education Expenses

[illegible]

Part VII – Education Credit or Deduction Election

1	Elect credit or deduction which results in best tax outcome.	<input checked="" type="checkbox"/>
2	Elect the American Opportunity Credit	<input type="checkbox"/>
3	Elect the Lifetime Learning Credit	<input type="checkbox"/>
4	Elect the tuition and fees deduction	<input type="checkbox"/>
5	Not applicable	<input type="checkbox"/>

Part VIII – Qualified Tuition Program (Section 529 Plan)

	For Purposes of Regular Tax	For Purposes of 10% Additional Tax
1	Total Qualified Tuition Plan (QTP) distributions from Form 1099-Q	
2	Adjusted Qualified Higher Education Expenses	
3	Qualified Higher Education Expenses applied to QTP distributions	
4	Excess distributions. Subtract line 3 from line 1. If line 4 is greater than zero, complete lines 5 through 8.	
5	Total distributed earnings from Form 1099-Q box 2	
6	Fraction. Divide line 3 by line 1.	
7	Multiply line 5 by line 6.	
8	Earnings taxable to recipient. Subtract line 7 from line 5.	

Part IX – Education Savings Account (ESA)

	For Purposes of Regular Tax	For Purposes of 10% Additional Tax
1	Total Education Savings Account (ESA) distributions from Form 1099-Q. . .	
2	Qualified Elementary and Secondary Education Expenses	
3	Qualified Elementary and Secondary Education Expenses applied	
4	Subtract line 3 from line 1.	
5	Adjusted Qualified Higher Education Expenses	
6	Qualified Higher Education Expenses applied to ESA distributions	
7	Excess distributions. Subtract line 6 from line 4.	
8	Distributions taxable to recipient	

Part X – Series EE and I U.S. Savings Bonds Issued After 1989

1	Total proceeds from U.S. Savings Bonds cashed during 2012 for this student.	_____
2	Adjusted Qualified Higher Education Expenses.	_____
3	Qualified Higher Education Expenses applied to exclusion of U.S. bond interest	_____
4	Interest included in line 1	_____
5	Name and address of eligible educational institution(s) attended:	
	Institution Name	Institution Name
	Street address	Street address
	City	City
	State	State
	Zip Code	Zip Code

► Keep for your records

Name(s) Shown on Return
Joshua P Schrader

Social Security Number
257-81-5152

Form W-2 Summary


Box No.	Description	Taxpayer	Spouse	Total
1	Total wages, tips and compensation:			
	Non-statutory & statutory wages not on Sch C . . .	10,604.		10,604.
	Statutory wages reported on Schedule C			
	Foreign wages included in total wages.			
	Unreported tips.			
2	Total federal tax withheld	778.		778.
3 & 7	Total social security wages/tips	10,604.		10,604.
4	Total social security tax withheld	445.		445.
5	Total Medicare wages and tips	10,604.		10,604.
6	Total Medicare tax withheld	154.		154.
8	Total allocated tips			
9	Not used			
10	Total dependent care benefits			
11	Total distributions from nonqualified plans . . .			
12 a	Total from Box 12			
b	Elective deferrals to qualified plans			
c	Roth contributions to 401(k) & 403(b) plans . .			
d	Deferrals to government 457 plans			
e	Deferrals to non-government 457 plans			
f	Deferrals 409A nonqual deferred comp plan . .			
g	Income 409A nonqual deferred comp plan . .			
h	Uncollected Medicare tax			
i	Uncollected social security and RRTA tier 1 . .			
j	Uncollected RRTA tier 2			
k	Income from nonstatutory stock options			
l	Non-taxable combat pay			
m	Total other items from box 12			
14 a	Total deductible mandatory state tax			
b	Total deductible charitable contributions			
c	This line does not apply to TurboTax			
d	Total RR Tier 1 wages			
e	Total RR Tier 1 tax			
f	Total RR Tier 2 tax			
g	Total RRTA tips.			
h	Total other items from box 14			
16	Total state wages and tips	10,604.		10,604.
17	Total state tax withheld	165.		165.
19	Total local tax withheld.			

- Keep for your records

Name	Social Security Number
Joshua P Schrader	257-81-5152

	Spouse's W-2
	Do not transfer this W-2 to next year

Military: Complete **Part VI** on Page 2 below

<p>a Employee's social security No . <u>257-81-5152</u></p> <p>b Employer's ID number <u>58-1987807</u></p> <p>c Employer's name, address, and ZIP code <u>Casey Gilson PC</u></p> <p>Street <u>Six Concourse Pkwy #2200</u></p> <p>City <u>Atlanta</u></p> <p>State <u>GA</u> ZIP Code <u>30328</u></p> <p>Foreign Country _____</p>	<p>1 Wages, tips, other compensation <u>10,604.31</u></p> <p>3 Social security wages <u>10,604.31</u></p> <p>5 Medicare wages and tips <u>10,604.31</u></p> <p>7 Social security tips <u> </u></p> <p>9 </p> <p>11 Nonqualified plans <u> </u></p> <p>12 Enter box 12 below <u> </u></p>	<p>2 Federal income tax withheld <u>778.21</u></p> <p>4 Social security tax withheld <u>445.38</u></p> <p>6 Medicare tax withheld <u>153.76</u></p> <p>8 Allocated tips <u> </u></p> <p>10 Dependent care benefits <u> </u></p> <p>Distributions from sect. 457 and nonqualified plans <i>(Important, see Help)</i> <u> </u></p>
<p>d Control number . _____</p>	<p>13 <input type="checkbox"/> Statutory employee <input checked="" type="checkbox"/> Retirement plan <input type="checkbox"/> Third-party sick pay</p>	
<p><input checked="" type="checkbox"/> Transfer employee information from the Federal Information Worksheet</p> <p>e Employee's name First <u>Joshua</u> M.I. <u>P</u> Last <u>Schrader</u> Suff. _____</p> <p>f Employee's address and ZIP code Street <u>800 W Marietta St NW, Apt. 301B</u> City <u>Atlanta</u> State <u>GA</u> ZIP Code <u>30318</u> Foreign Country _____</p>	<p>14 Enter box 14 below after entering boxes 18, 19, and 20. NOTE: Enter box 15 before entering box 14.</p>	

Box 12	Box 12							
Code	Amount	If Box 12 code is:						
		A:	Enter amount attributable to RRTA Tier 2 tax					
		M:	Enter amount attributable to RRTA Tier 2 tax					
		P:	Double click to link to Form 3903, line 4.	. . .				
		R:	Enter MSA contribution for	Taxpayer . . .				
				Spouse				
		W:	Enter HSA contribution for	Taxpayer . . .				
				Spouse				
		G:	<input type="checkbox"/> Employer is not a state or local government					
Box 15			Box 16		Box 17			
State	Employer's state I.D. no.		State wages, tips, etc.		State income tax			
GA	0421310-XQ		10 , 604 . 31		165 . 49			
Box 20		Box 18	Box 19		Associated			
Locality name		Local wages, tips, etc.	Local income tax		State			

Box 14 Description or Code on Actual Form W-2	Amount	TurboTax Identification of Description or Code (Identify this item by selecting the identification from the drop down list. If not on the list, select Other).

1098-T

Worksheet

Tuition Statement

► Keep for your records

2012Taxpayer's name
Joshua P SchraderSocial Security No.
257-81-5152**1098-T Information (Required):****A** A Form 1098-T was received from this institution Yes ☒ No ☐**B** A Form 1098-T was received from this institution in **2011** with Box 2 filled in and
Box 7 checked Yes ☒ No ☐**Identify Student (Required):****A** If student is Joshua**Double-click** to link this 1098-T to the applicable **Taxpayer or Spouse****Student Information Worksheet** ► Joshua**B** If student is _____**Double-click** to link this 1098-T to the applicable **Dependent Student****Information Worksheet** ► _____

Filer's name <u>Georgia Institute of Technology</u> Street address <u>North Avenue</u> City State Zip Code <u>Atlanta GA 30332</u> Foreign province/county _____ Foreign postal code Foreign country _____		1 Payments received for qualified tuition and related expenses \$ _____	
		2 Amounts billed for qualified tuition and related expenses \$ <u>15,536.</u>	
		3 If this box is checked, your educational institution has changed its reporting method for 2012 <input type="checkbox"/>	
Filer's Federal identification number <u>58-6002023</u>	Student's Social Security Number. <u>257-81-5152</u>	4 Adjustments made for a prior year \$ _____	5 Scholarships or grants \$ <u>4,750.</u>
Student's name <u>Joshua</u> Street address Apt. No. <u>800 W Marietta St NW 301B</u> City State Zip Code <u>Atlanta GA 30318</u>		6 Adjustments to scholarships or grants for a prior year \$ _____	7 Checked if the amount in box 1 or 2 includes amounts for an academic period beginning January - March 2013 ► <input checked="" type="checkbox"/>
Service Provider/ Acct No _____	8 Check if at least half-time student ► <input checked="" type="checkbox"/>	9 Checked if a graduate student . . ► <input type="checkbox"/>	10 Ins. contract reimb./refund \$ _____

Reconciliation of Box 1, Payments Received for Qualified Tuition and Related Expenses**A** Enter box 1 amount **not** paid during 2012 _____**B** Enter box 1 amount actually paid during 2012 _____**Reconciliation of Box 2, Amounts Billed for Qualified Tuition and Related Expenses****A** Enter box 2 amount **not** paid during 2012 0.**B** Enter box 2 amount actually paid during 2012 15,536.**Reconciliation of Box 5, Veteran- or Employer-Provided Assistance Included in Box 5****A** Enter portion of box 5 amount from veteran- or tax free employer-provided assistance _____**B** Enter portion of box 5 amount from employer-provided assistance included in income _____**C** Portion of box 5 amount from scholarships or grants 4,750.**D** Box 5 amount includes veteran- or employer-provided educational assistance ☐

Form 1099-MISC Summary

2012

► Keep for your records

Name(s) Shown on Return
Joshua P Schrader

Social Security Number
257-81-5152

Form 1099-MISC Summary

Box	Description	Taxpayer	Spouse	Total
1	Total Rents			
	► Schedule C			
	► Schedule E			
	► Form 4835			
	► Other Income			
2	Total Royalties			
	► Schedule C			
	► Schedule E			
3	Total Other income			
	► Schedule C			
	► Schedule F			
	► Form 4835			
	For Form 1040:			
	► Winnings (Prizes, etc.)			
	► Tribal Gaming			
	► Alaska Permanent Fund			
	► Other Income			
4	Federal tax withheld			
5	Fishing boat proceeds			
6	Medical and health care payments			
7	Total Nonemployee compensation	700.		700.
	► Schedule C			
	► Schedule F			
	► Wages			
	► Other Income	700.		700.
8	Substitute payments			
10	Total Crop insurance proceeds			
	► Schedule F			
	► Form 4835			
13	Excess golden parachute payments			
14	Gross proceeds paid to an attorney			
	► Taxable amount			
15a	Section 409A deferrals			
15b	Section 409A income			
16	State tax withheld - total			

► Keep for your records

Name Joshua P Schrader	Social Security Number 257-81-5152
---------------------------	---------------------------------------

Payer's Name Cornerstone Village Condominium
Payer's Identification No. EIN . 58-2592047 or SSN .
Account number (for your records only)

☐ Spouse's 1099-MISC ☐ Do not transfer this 1099-MISC to next year

For each type of 1099-MISC income, select the appropriate form or schedule in your return on which to report this income. Double-click in the field next to the form's name and when the window appears, either "select or create" the copy on which you want to report the 1099-MISC income. See Help.

Box 1	Rents. Required: double-click to select the form on which to report this income: <div style="display: flex; justify-content: space-between;"> <div> Schedule C Schedule E </div> <div> Form 4835 <input type="checkbox"/> Other Income </div> </div>
Box 2	Royalties. Required: double-click to select the form on which to report this income: <div style="display: flex; justify-content: space-between;"> <div> Schedule C Schedule E </div> </div>
Box 3	Other income Required: double-click to select the form on which to report this income: <div style="display: flex; justify-content: space-between;"> <div> Schedule C Schedule F <input type="checkbox"/> Winnings (Prizes, etc.) <input type="checkbox"/> Tribal Member Gaming Payments <input type="checkbox"/> From Alaska Permanent Fund <input type="checkbox"/> Other Income </div> <div> Form 4835 </div> </div>
Box 4	Federal income tax withheld
Box 5	Fishing boat proceeds Required: double-click to select the Schedule C on which to report this income: Schedule C
Box 6	Medical and health care payments Required: double-click to select the Schedule C on which to report this income: Schedule C
Box 7	Nonemployee compensation. 700.00 Required: double-click to select the form on which to report this income: <div style="display: flex; justify-content: space-between;"> <div> Schedule C Schedule F <input type="checkbox"/> Wages subject to Social Security & Medicare tax If checked, enter Reason Code for Form 8919 (see Help) . . . If Reason Code A or C, enter determination date <input checked="" type="checkbox"/> Other Income </div> </div>
Box 8	Substitute payments in lieu of dividends or interest
Box 10	Crop insurance proceeds. Required: double-click to select the form on which to report this income: <div style="display: flex; justify-content: space-between;"> <div> Schedule F Form 4835 </div> </div>
Box 13	Excess golden parachute payments. Report 20% excise tax on Form 1040
Box 14	Gross proceeds paid to an attorney Taxable amount from box 14 to Schedule C Required: double-click to select the Schedule C on which to report this income: Schedule C
Boxes 15a & b	Section 409A deferrals Section 409A income
Boxes 16-18	State tax withheld - 1st state State name (two letters) - 1st state State ID number - 1st state State income - 1st state State tax withheld - 2nd state State name (two letters) - 2nd state State ID number - 2nd state State income - 2nd state

2012

Name(s) Shown on Return
Joshua P Schrader

Social Security Number
257-81-5152

	Federal		State			Local		
	Date	Amount	Date	Amount	ID	Date	Amount	ID
1	04/17/12		04/17/12			04/17/12		
2	06/15/12		06/15/12			06/15/12		
3	09/17/12		09/17/12			09/17/12		
4	01/15/13		01/15/13			01/15/13		
5								
Tot Estimated Payments . . .								

ID

6	Overpayments applied to 2012
7	Credited by estates and trusts
8	Totals Lines 1 through 7
9	2012 extensions

Local

10	Forms W-2				
11	Forms W-2G				
12	Forms 1099-R				
13	Forms 1099-MISC and 1099-G				
14	Schedules K-1				
15	Forms 1099-INT, DIV and OID				
16	Social Security and Railroad Benefits				
17	Form 1099-B	St	<input type="text"/>	Loc	<input type="text"/>
18 a	Other withholding	St	<input type="text"/>	Loc	<input type="text"/>
b	Other withholding	St	<input type="text"/>	Loc	<input type="text"/>
c	Other withholding	St	<input type="text"/>	Loc	<input type="text"/>
d	Positive Adjustment	St	<input type="text"/>	Loc	<input type="text"/>
e	Negative Adjustment	St	<input type="text"/>	Loc	<input type="text"/>
19	Total Withholding Lines 10 through 18e				

19 Total Withholding Lines 10 through 18e

165.

ID

(If multiple states or localities, see Tax Help)

21	Tax paid with 2011 extensions	
22	2011 estimated tax paid after 12/31/11	
23	Balance due paid with 2011 return	
24	Other (amended returns, installment payments, etc)	

Form 1040
Line 40

Standard Deduction Worksheet for Dependents

2012

► Keep for your records

Name(s) Shown on Return
Joshua P Schrader

Social Security Number
257-81-5152

Use this worksheet only if someone can claim you, or your spouse if filing jointly, as a dependent.

<p>1 Is your earned income* more than \$650?</p> <p><input checked="" type="checkbox"/> Yes. Add \$300 to your earned income. Enter the total</p> <p><input type="checkbox"/> No. Enter \$950</p>	<p>_____ ► . . .</p> <p>_____ ► . . .</p>	<p>1</p> <p>2</p>	<p>10,904.</p> <p>5,950.</p>
<p>2 Enter the amount shown below for your filing status.</p> <ul style="list-style-type: none"> • Single or married filing separately — \$5,950 • Married filing jointly or Qualifying widow(er) — \$11,900 • Head of household — \$8,700 			
<p>3 Standard deduction.</p>			
<p>3 a Enter the smaller of line 1 or line 2. If born after January 1, 1948, and not blind, stop here and enter this amount on Form 1040, line 40. Otherwise go to line 3b</p>		<p>3 a</p>	<p>5,950.</p>
<p>3 b If born before January 2, 1948, or blind, multiply the number on Form 1040, line 39a, by \$1,150 (\$1,450 if single or head of household)</p>		<p>3 b</p>	<p></p>
<p>3 c Add lines 3a and 3b. Enter the total here and on Form 1040, line 40</p>		<p>3 c</p>	<p>5,950.</p>

***Earned income** includes wages, salaries, tips, professional fees, and other compensation received for personal services you performed. It also includes any amount received as a scholarship that you must include in your income. Generally, your earned income is the total of the amount(s) you reported on Form 1040, lines 7, 12, and 18, minus the amount, if any, on line 27; or on Form 1040A, line 7.

Earned Income Worksheet

2012

► Keep for your records

Name(s) Shown on Return Joshua P Schrader	Social Security Number 257-81-5152
--	---------------------------------------

Part I – Earned Income Credit Wks Computation	Taxpayer	Spouse	Total
1 If filing Schedule SE:			
a Net self-employment income			
b Optional Method and Church Employee income			
c Add lines 1a and 1b			
d One-half of self-employment tax			
e Subtract line 1d from line 1c			
2 If not required to file Schedule SE:			
a Net farm profit or (loss)			
b Net nonfarm profit or (loss)			
c Add lines 2a and 2b			
3 If filing Schedule C or C-EZ as a statutory employee, enter the amount from line 1 of that Schedule C or C-EZ			
4 Add lines 1e, 2c and 3. To EIC Wks, line 5			

Part II – Form 2441 and Standard Deduction Worksheet Computations

5 Net self-employment earnings (line 4 above)			
6 Wages, salaries, and tips less distributions from nonqualified or section 457 plans, etc	10,604.		10,604.
7 Taxable employer-provided adoption benefits.			
8 Add lines 5 through 7. To Form 2441, lines 19 and 20	10,604.		10,604.
9 a Taxable dependent care benefits.			
b Nontaxable combat pay			
10 Add lines 8, 9a and 9b. To Form 2441, lines 4 and 5	10,604.		10,604.
11 Scholarship or fellowship income not on W-2	0.		0.
12 SE exempt earnings less nontaxable income			
13 Distributions from nonqualified/Sec. 457 plans			
14 Add lines 8, 9a and 11 through 13. To Standard Deduction Worksheet	10,604.		10,604.

Part III – IRA Deduction Worksheet Computation

15 Net self-employment income or (loss)			
16 Wages, salaries, tips, etc	10,604.		10,604.
17 Net self-employment loss			
18 Alimony received.			
19 Nontaxable combat pay			
20 Foreign earned income exclusion			
21 Keogh, SEP or SIMPLE deduction			
22 Combine lines 15 through 21. To IRA Wks, ln 2.	10,604.		10,604.

Part IV – Schedule 8812 and Child Tax Credit Line 11 Worksheet Computations

23 Self-employed, church and statutory employees			
24 Wages, salaries, tips, etc	10,604.		10,604.
25 Nontaxable combat pay			
26 Foreign earned income exclusion			
27 Combine lines 23 through 26. To Schedule 8812, line 4a & Line 11 Wks, line 2.	10,604.		10,604.

Federal Carryover Worksheet

2012

► Keep for your records

Name(s) Shown on Return Joshua P Schrader	Social Security Number 257-81-5152
--	---------------------------------------

2011 State and Local Income Tax Information (See Tax Help)

(a) State or Local ID	(b) Paid With Extension	(c) Estimates Pd After 12/31	(d) Total With- held/Pmts	(e) Paid With Return	(f) Total Over- payment	(g) Applied Amount
Totals . .						

Other Tax and Income Information

			2011	2012
1	Filing status	1		1 Single
2	Number of exemptions for blind or over 65 (0 - 4)	2		
3	Itemized deductions	3		165.
4	Check box if required to itemize deductions	4	<input type="checkbox"/>	<input type="checkbox"/>
5	Adjusted gross income	5		11,304.
6	Tax liability for Form 2210 or Form 2210-F	6		538.
7	Alternative minimum tax	7		
8	Federal overpayment applied to next year estimated tax	8		

QuickZoom to the IRA Information Worksheet for IRA information ►

Excess Contributions

			2011	2012
9 a	Taxpayer's excess Archer MSA contributions as of 12/31	9 a		
b	Spouse's excess Archer MSA contributions as of 12/31	b		
10 a	Taxpayer's excess Coverdell ESA contributions as of 12/31	10 a		
b	Spouse's excess Coverdell ESA contributions as of 12/31	b		
11 a	Taxpayer's excess HSA contributions as of 12/31	11 a		
b	Spouse's excess HSA contributions as of 12/31	b		

Loss and Expense Carryovers

Note: Enter all entries as a positive amount

			2011	2012
12 a	Short-term capital loss	12 a		
b	AMT Short-term capital loss	b		
13 a	Long-term capital loss	13 a		
b	AMT Long-term capital loss	b		
14 a	Net operating loss available to carry forward	14 a		
b	AMT Net operating loss available to carry forward	b		
15 a	Investment interest expense disallowed	15 a		
b	AMT Investment interest expense disallowed	b		
16	Nonrecaptured net Section 1231 losses from:	16 a		
	a 2012	a		
	b 2011	b		
	c 2010	c		
	d 2009	d		
	e 2008	e		
	f 2007	f		

Tax History Report

► Keep for your records

2012

Name(s) Shown on Return

Joshua P Schrader

	Five Year Tax History:				
	2008	2009	2010	2011	2012
Filing status					Single
Total income					11,304.
Adjustments to income					
Adjusted gross income					11,304.
Tax expense					165.
Interest expense . . .					
Contributions					
Miscellaneous deductions.					
Other Itemized Deductions					
Total itemized/standard deduction . .					5,950.
Exemption amount . .					0.
Taxable income					5,354.
Tax.					538.
Alternative min tax . .					
Total credits					
Other taxes					
Payments					778.
Form 2210 penalty . .					
Amount owed					
Applied to next year's estimated tax .					
Refund.					240.
Effective tax rate % . .					4.76
**Tax bracket % . . .					10

**Tax bracket % is based on Taxable income.

Tax Summary
► Keep for your records

2012

Name (s)
Joshua P Schrader

Total income	11,304.
Adjustments to income	
Adjusted gross income	11,304.
Itemized/standard deduction	5,950.
Exemption amount	0.
Taxable income	5,354.
Tentative tax	538.
Additional taxes	
Alternative minimum tax	
Total credits	
Other taxes	
Total tax	538.
Total payments	778.
Estimated tax penalty	
Amount Overpaid	240.
Refund	240.
Amount Applied to Estimate	
Balance due	0.

Which Form 1040 to file?

You must use Form 1040 because
you had miscellaneous taxable income(loss).

Compare to U. S. Averages

► Keep for your records

2012

Name(s) Shown on Return Joshua P Schrader	Social Security No 257-81-5152
--	-----------------------------------

Your 2012 adjusted gross income (AGI) 11,304.
National adjusted gross income range used below from 0. to 14,999.

Note: National average amounts have been adjusted for inflation. See Help for details.

Selected Income, Deductions, and Credits	Actual Per Return	National Average
Salaries and wages	10,604.	8,772.
Taxable interest		1,480.
Tax-exempt interest		5,836.
Dividends		1,920.
Business net income		7,878.
Business net loss		20,030.
Net capital gain		16,468.
Net capital loss		2,478.
Taxable IRA		5,372.
Taxable pensions and annuities		7,028.
Rent and royalty net income		7,915.
Rent and royalty net loss		18,011.
Partnership and S corporation net income		16,585.
Partnership and S corporation net loss		97,471.
Taxable social security benefits		3,876.
Medical and dental expenses deduction		9,545.
Taxes paid deduction	165.	3,283.
Interest paid deduction		8,314.
Charitable contributions deduction		1,547.
Total itemized deductions	165.	16,554.
Child care credit		125.
Education tax credits		261.
Child tax credit		119.
Retirement savings contributions credit		165.
Earned income credit		1,949.
Other Information	Actual Per Return	National Average
Adjusted gross income	11,304.	3,555.
Taxable income	5,354.	2,915.
Income tax	538.	310.
Alternative minimum tax		22,984.
Total tax liability	538.	447.

ELECTRONIC POSTMARK - CERTIFICATION OF ELECTRONIC FILING

Taxpayer: Joshua P Schrader

Primary SSN: 257-81-5152

Federal Return Submitted: March 21, 2013 02:36 PM PDT

Federal Return Acceptance Date: _____

Your return was electronically transmitted on 03/21/2013

The Intuit Electronic Postmark shows the date and time Intuit received your federal tax return. The Intuit Electronic Postmark documents the filing date of your income tax return, and the electronic postmark information should be kept on file with your tax return and other tax-related documentation.

There are two important aspects of the Intuit Electronic Postmark:

1. THE INTUIT ELECTRONIC POSTMARK.

The electronic postmark shows the date and time Intuit received the federal return, and is deemed the filing date if the date of the electronic postmark is on or before the date prescribed for filing of the federal individual income tax return.

TIMELY FILING:

For your federal return to be considered filed on time, your return must be postmarked on or before midnight April 15, 2013. Intuit's electronic postmark is issued in the Pacific Time (PT) zone. If you are not filing in the PT zone, you will need to add or subtract hours from the Intuit Electronic Postmark time to determine your local postmark time. For example, if you are filing in the Eastern Time (ET) zone and you electronically file your return at 9 AM on April 15, 2013, your Intuit electronic postmark will indicate April 15, 2013, 6 AM. If your federal tax return is rejected, the IRS still considers it filed on time if the electronic postmark is on or before April 15, 2013, and a corrected return is submitted and accepted before April 20, 2013. If your return is submitted after April 20, 2013, a new time stamp is issued to reflect that your return was submitted after the IRS deadline and, consequently, is no longer considered to have been filed on time.

If you request an automatic six-month extension, your return must be electronically postmarked by midnight October 15, 2013. If your federal tax return is rejected, the IRS will still consider it filed on time if the electronic postmark is on or before October 15, 2013, and the corrected return is submitted and accepted by October 20, 2013.

2. THE ACCEPTANCE DATE.

Once the IRS accepts the electronically filed return, the acceptance date will be provided by the Intuit Electronic Filing Center. This date is proof that the IRS accepted the electronically filed return.

Smart Worksheets from your 2012 Federal Tax Return

SMART WORKSHEET FOR: Form 1040: Individual Tax Return

Tax Smart Worksheet	
A	Tax 538.
	Check if from:
1	Tax table <input checked="checked" type="checkbox"/>
2	Tax Computation Worksheet (see instructions) <input type="checkbox"/>
3	Schedule D Tax Worksheet <input type="checkbox"/>
4	Qualified Dividends and Capital Gain Tax Worksheet <input type="checkbox"/>
5	Schedule J <input type="checkbox"/>
6	Form 8615 <input type="checkbox"/>
7	Foreign Earned Income Tax Worksheet <input type="checkbox"/>
B	Additional tax from Form 8814
C	Additional tax from Form 4972
D	Tax from additional Form(s) 4972
E	Recapture tax from Form 8863
F	IRC Section 197(f)(9)(B)(ii) election for an additional tax
G	Tax. Add lines A through F. Enter the result here and on line 44 538.

Electronic Filing Instructions for your 2012 Georgia Tax Return

Important: Your taxes are not finished until all required steps are completed.



Joshua P Schrader
800 W Marietta St NW
Atlanta, GA 30318

Balance Due/Refund	Your Georgia state tax return (Form 500) shows a balance due of \$32.00. Your return shows you have elected to pay your balance due of \$32.00 by Direct Debit using the following information: - Amount Withdrawn: \$32.00 - Account Number: 1010241154733 - Routing Transit Number: 061000227 - Date of Withdrawal: 04/01/2013		
What You Need to Sign	Sign and date Form GA-8453 within 1 day of acceptance.		
Do Not Mail	Do not mail a paper copy of your tax return. Since you filed electronically, the Georgia Department of Revenue already has your return.		
What You Need to Keep	Your Electronic Filing Instructions (this form) - Form GA-8453 and attachment(s) Printed copy of your state and federal returns		
2012 Georgia Tax Return Summary	Taxable Income	\$	6,304.00
	Total Tax	\$	197.00
	Total Payments/Credits	\$	165.00
	Payment Due	\$	32.00



ERO MUST RETAIN THIS FORM
DO NOT SUBMIT THIS FORM TO
GEORGIA DEPARTMENT OF REVENUE
UNLESS REQUESTED TO DO SO.



GA-8453
2012

IRS DCN OR SUBMISSION ID

00 13

GEORGIA INDIVIDUAL INCOME TAX DECLARATION FOR ELECTRONIC FILING
SUMMARY OF AGREEMENT BETWEEN TAXPAYER AND ERO OR PAID PREPARER

First Name and Initial JOSHUA P	Last Name SCHRADER	Social Security Number 257-81-5152
If Joint Return, Spouse's First Name and Initial	Spouse's Last Name	Spouse's Social Security Number
Home Address (number and street) 800 W MARIETTA ST NW	Apt Number 301B	Daytime Telephone Number
City, Town or Post Office, State and Zip Code ATLANTA GA 30318		

PART I

TAX RETURN INFORMATION

1. Federal Adjusted Gross Income (Form 500, Line 8; Form 500EZ, Line 1)	1.	11304
2. Georgia Taxable Income (Form 500, Line 15; Form 500EZ, Line 3)	2.	6304
3. Net Georgia Tax (Form 500, Line 18; Form 500EZ, Line 4)	3.	197
4. Refund (Form 500, Line 36; Form 500EZ Line 20)	4.	
5. Balance Due (Form 500, Line 35; Form 500EZ, Line 19)	5.	32

PART II

DECLARATION OF TAXPAYER(S)

Under penalties of perjury, I declare that the information I have provided to my Electronic Return Originator (ERO) and/or Online Service Provider and/or transmitter and the amounts shown in Part I agree with the amounts shown on the corresponding lines of the electronic portion of my 2012 Georgia Income Tax Return. I declare that I have examined my tax return, including accompanying schedules and statements, and to the best of my knowledge and belief, my return is true, correct and complete. I consent that the electronic portion of my return may be sent by my ERO/Online Service Provider/transmitter.

SIGN

HERE

TAXPAYER'S SIGNATURE

Date

SPOUSE'S SIGNATURE (if joint return, both must sign)

Date

PRINT NAME

JSCHRADER3@GATECH.EDU

EMAIL ADDRESS

PART III DECLARATION OF ELECTRONIC RETURNS ORIGINATOR AND PAID PREPARER

I DECLARE THAT I HAVE REVIEWED THE ABOVE TAXPAYER'S RETURN AND THAT THE ENTRIES ON THE GA-8453 ARE COMPLETE AND CORRECT TO THE BEST OF MY KNOWLEDGE.

ERO's
Use
Only

ERO's Signature

Date

Firm's Name

Check if also paid preparer ☐

Address

FEIN/PTIN

SSN/TIN

IF PREPARED BY ANY PERSON OTHER THAN THE TAXPAYER, THIS DECLARATION IS BASED ON ALL INFORMATION OF WHICH THE TAXPAYER HAS ANY KNOWLEDGE.

Paid
Preparer's
Use Only

Paid Preparer's Signature SELF PREPARED

Date

Firm's Name

FID/TIN

Address

SSN/TIN

KEEP A COPY WITH YOUR RECORDS



1300411513



Georgia Form 500 (Rev. 9/12)
Individual Income Tax Return
Georgia Department of Revenue

Fiscal Year
Beginning

2012 (Approved software version)

Fiscal Year
Ending

Version 1

DEL ☐ EXT ☐

Page 1

YOUR FIRST NAME

MI YOUR SOCIAL SECURITY NUMBER

1. JOSHUA

P 257-81-5152

LAST NAME

SUFFIX

Special Program Code
See Tax Booklet on Page 9

SCHRADER

SPOUSE'S FIRST NAME

MI SPOUSE'S SOCIAL SECURITY NUMBER

LAST NAME

SUFFIX

DEPARTMENT USE ONLY

ADDRESS (NUMBER AND STREET or P.O. BOX) (Use 2nd address line for Apt, Suite or Building Number) ☒ CHECK IF ADDRESS HAS CHANGED

2. 800 W MARIETTA ST NW

APT NO 301B

CITY (Please insert a space if the city has multiple names)

STATE ZIP CODE

3. ATLANTA

GA 30318

500 UET Exception
Attached

(COUNTRY IF FOREIGN)

4. Enter your Residency Status with the appropriate number..... **4. 1**

Residency Status

1. FULL- YEAR RESIDENT 2. PART- YEAR RESIDENT

TO

3. NONRESIDENT

Part-Year Residents and Nonresidents must omit Lines 9 thru 14 and use Schedule 3 of Form 500, page 6

5. Enter Filing Status with appropriate letter (See Tax Booklet Page 11)..... **5. A**

Filing Status

A. Single B. Married filing joint C. Married filing separate (Spouse's social security number must be entered above) D. Head of Household or Qualifying Widow(er)

6. Number of exemptions (Check appropriate box(es) and enter total in 6c.) 6a. Yourself ☒ 6b. Spouse ☐ 6c. 1

7. Dependents (If you have more than 3 dependents, attach a list of additional dependents)

First Name, MI.

Last Name

Social Security Number

Relationship to You

First Name, MI.

Last Name

Social Security Number

Relationship to You

First Name, MI.

Last Name

Social Security Number

Relationship to You



1300411523

YOUR SOCIAL SECURITY NUMBER
257-81-5152

- 7a. Number of Dependents (DO NOT include yourself or your spouse).....▶ 7a.
- 7b. Add Lines 6c and 7a. Enter total.....▶ 7b. 1

If amount on line 8, 9, 10, 13 or 15 is negative, use the minus sign (-). Example -3,456.

8. Federal adjusted gross income (From Federal Form 1040, 1040A or 1040 EZ).....▶ 8. 11304
(Do not use FEDERAL TAXABLE INCOME) If the amount on Line 8 is \$40,000 or more, or your gross income is less than your W-2's you must enclose a copy of your Federal Form 1040 Pages 1 and 2.
9. Adjustments from Schedule 1 (See Tax Booklet on Page 11, Line 9).....▶ 9.
10. Georgia adjusted gross income (Net total of Line 8 and Line 9).....▶ 10. 11304
11. Standard Deduction (Do not use FEDERAL STANDARD DEDUCTION).....▶ 11a. 2300
(See Tax Booklet on Page 12 Line 11)
- b. Self: 65 or over? ☐ Blind? ☐ Spouse: 65 or over? ☐ Blind? ☐
- Total ☐ x 1,300=.....▶ 11b.
- c. Total Standard Deduction (Line 11a + Line 11b).....▶ 11c. 2300
Use EITHER Line 11c OR Line 12c (Do not write on both lines)
12. Total Itemized Deductions used in computing Federal Taxable Income. If you use itemized deductions, **you must enclose Federal Schedule A**
- a. Federal Itemized Deductions (Schedule A-Form 1040).....▶ 12a.
- b. Less adjustments: (See Tax Booklet on Page 13, Line 12).....▶ 12b.
- c. Georgia Total Itemized Deductions.....▶ 12c.
13. Subtract either Line 11c or Line 12c from Line 10; enter balance.....▶ 13. 9004
- 14a. Number on Line 6c. 1 multiplied by \$2,700.....▶ 14a. 2700
- 14b. Number on Line 7a. multiplied by \$3,000.....▶ 14b.
- 14c. Add Lines 14a. and 14b. Enter total.....▶ 14c. 2700
15. Georgia taxable income (Line 13 less Line 14c or Schedule 3, Line 14).....▶ 15. 6304
16. Tax (Use Tax Table in the Tax Booklet on Pages 20-22).....▶ 16. 197
17. Credits from Schedule 2, Page 5, Line 12 of Form 500
(Enter total but not more than the amount on Line 16).....▶ 17.
18. Balance (Line 16 less Line 17) if zero or less than zero, enter zero.....▶ 18. 197
19. **Georgia Income Tax Withheld on Wages and 1099's**.....▶ 19. 165
(Enter Tax Withheld Only and enclose W-2s and/or 1099s)
20. **Other Georgia Income Tax Withheld**.....▶ 20.
(Must enclose G2-A, G2-LP and/or G-2RP)

Georgia Form **500**
Individual Income Tax Return
Georgia Department of Revenue
2012 Version 1



1300411533

Page **3**

YOUR SOCIAL SECURITY NUMBER
257-81-5152

21. Estimated tax for 2012 and Form IT-560.....▶ 21.
22. Total prepayment credits (Add Lines 19, 20 and 21).....▶ 22. 165
23. If Line 18 exceeds Line 22 enter BALANCE DUE STATE.....▶ 23. 32
24. If Line 22 exceeds Line 18 enter OVERPAYMENT amount▶ 24.
25. Amount to be credited to 2013 ESTIMATED TAX▶ 25.
26. Georgia Wildlife Conservation Fund (No gift of less than \$1.00).....▶ 26.
27. Georgia Children and Elderly Fund (No gift of less than \$1.00).....▶ 27.
28. Georgia Cancer Research Fund (No gift of less than \$1.00)▶ 28.
29. Statewide Land Conservation Program (No gift of less than \$1.00).....▶ 29.
30. Georgia National Guard Foundation (No gift of less than \$1.00)▶ 30.
31. Dog & Cat Sterilization Fund (No gift of less than \$1.00)▶ 31.
32. Save the Cure Fund (No gift of less than \$1.00).....▶ 32.
33. Georgia Student Finance Authority Fund (No gift of less than \$1.00).....▶ 33.
34. Form 500 UET (Estimated tax penalty).....▶ 34.
(If you owe) Add Lines 23, 26 thru 34
35. MAKE CHECK PAYABLE TO GEORGIA DEPARTMENT OF REVENUE.....▶ 35. 32
36. (If you are due a refund) Subtract the sum of Lines 25 thru 34 from Line 24
THIS IS YOUR REFUND▶ 36.

Select only one option - See booklet page 13.

- 36a. Direct Deposit (For U.S. Accounts Only) Type: Checking ☐ Savings ☐ Routing Number
- 36b. Debit Card ☐ Account Number
- 36c. Paper Check ☐ Number

You can help eliminate \$1Million of processing cost by choosing Direct Deposit or Debit Card.

(PAYMENT)

PROCESSING CENTER
GEORGIA DEPARTMENT OF REVENUE
PO BOX 740399
ATLANTA, GA 30374-0399

(REFUND and NO BALANCE DUE)

PROCESSING CENTER
GEORGIA DEPARTMENT OF REVENUE
PO BOX 740380
ATLANTA, GA 30374-0380

ENCLOSE ALL ITEMS IN RETURN ENVELOPE. **DO NOT** STAPLE YOUR CHECK, W-2'S, OTHER WITHHOLDING DOCUMENTS, OR TAX RETURN Under penalty of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief is true, correct and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge. Georgia Public Code Section 48-2-31 requires that taxes shall be paid in lawful money of the United States, free of any expenses to the State of Georgia.

Taxpayer's Signature ☐ (Check box if deceased)

PHONE NUMBER

DATE

Spouse's Signature ☐ (Check box if deceased)

DATE

NAME OF PREPARER OTHER THAN TAXPAYER

NAME OF PREPARER OTHER THAN TAXPAYER

Do you want to authorize DOR to discuss this return with the named preparer. Yes ☐

REV 12/04/12 TTO

SELF PREPARED

Signature of Preparer

PREPARER'S FEIN

PREPARER'S SSN/PTIN

PHONE NUMBER

- ☒ I authorize the Georgia Department of Revenue to electronically notify me at the below e-mail address regarding any updates to my account(s).

TAXPAYER EMAIL ADDRESS jschrader3@gatech.edu



1300411563

YOUR SOCIAL SECURITY NUMBER
257-81-5152

DO NOT USE LINES 9 THRU 14 OF PAGE 2, FORM 500

SCHEDULE 3 COMPUTATION OF GEORGIA TAXABLE INCOME FOR ONLY PART-YEAR RESIDENTS AND NONRESIDENTS.

Income earned in another state as a Georgia resident is taxable but other state(s) tax credit may apply. See Tax Booklet, Page 13, Line 17 and Page 15.

FEDERAL INCOME AFTER GEORGIA ADJUSTMENT

INCOME NOT TAXABLE TO GEORGIA

GEORGIA INCOME

INCOME (COLUMN A)

INCOME (COLUMN B)

INCOME (COLUMN C)

1. WAGES, SALARIES, TIPS, etc

1. WAGES, SALARIES, TIPS, etc

1. WAGES, SALARIES, TIPS, etc

2. INTERESTS AND DIVIDENDS

2. INTERESTS AND DIVIDENDS

2. INTERESTS AND DIVIDENDS

3. BUSINESS INCOME OR (LOSS)

3. BUSINESS INCOME OR (LOSS)

3. BUSINESS INCOME OR (LOSS)

4. OTHER INCOME OR (LOSS)

4. OTHER INCOME OR (LOSS)

4. OTHER INCOME OR (LOSS)

5. TOTAL INCOME: TOTAL LINES 1 THRU 4

5. TOTAL INCOME: TOTAL LINES 1 THRU 4

5. TOTAL INCOME: TOTAL LINES 1 THRU 4

6. TOTAL ADJUSTMENTS FROM FORM 1040

6. TOTAL ADJUSTMENTS FROM FORM 1040

6. TOTAL ADJUSTMENTS FROM FORM 1040

7. TOTAL ADJUSTMENTS FROM FORM 500,
SCHEDULE 1, PAGE 4

7. TOTAL ADJUSTMENTS FROM FORM 500,
SCHEDULE 1, PAGE 4

7. TOTAL ADJUSTMENTS FROM FORM 500,
SCHEDULE 1, PAGE 4

8. ADJUSTED GROSS INCOME:
LINE 5 PLUS OR MINUS LINES 6 AND 7

8. ADJUSTED GROSS INCOME:
LINE 5 PLUS OR MINUS LINES 6 AND 7

8. ADJUSTED GROSS INCOME:
LINE 5 PLUS OR MINUS LINES 6 AND 7

9. RATIO: Divide Line 8, Column C by Line 8, Column A. Enter percentage.....▶ 9.

% Not to exceed 100%

10. Itemized ☐ or Standard Deduction ☐ (See Tax Booklet, Page 17, Line 10).....▶ 10.

11. Personal Exemption from Form 500, Page 2 (See Tax Booklet, Pg. 17, Line 11a-c)

11a. Number on Line 6c. ☐ multiplied by \$2,700.....▶ 11a.

11b. Number on Line 7a. ☐ multiplied by \$3,000.....▶ 11b.

11c. Add Lines 11a. and 11b. Enter total.....▶ 11c.

12. Total Deductions and Exemptions: Add Lines 10 and 11c.....▶ 12.

13. Multiply Line 12 by Ratio on Line 9 and enter result.....▶ 13.

14. Georgia Taxable Income: Subtract Line 13 from Line 8, Column C
Enter here and on Line 15, Page 2 of Form 500.....▶ 14.

List the state(s) in which the income in Column B was earned and/or to which it was reported.

1.

3.

2.

4.

Georgia Information Worksheet

2012

► Keep for your records

Part I – Personal Information

Taxpayer:

First Name Joshua
Middle Initial P Suffix _____
Last Name Schrader
Social Security No. 257-81-5152
Occupation Technical Support
Date of Birth 11/15/1991
Date of Death _____
Daytime Phone (678) 438-3057
Home Phone _____
Print phone number on Form 500 ☐ Home

Spouse:

First Name _____
Middle Initial _____ Suffix _____
Last Name _____
Social Security No. _____
Occupation _____
Date of Birth _____
Date of Death _____
Daytime Phone _____
☐ TP work ☐ Spouse work

Street Address 800 W Marietta St NW Apartment No. 301B
City Atlanta State GA ZIP Code 30318
Country, if foreign _____
Taxpayer email address jschrader3@gatech.edu

Part II – Main Form

- ☒ Form 500: Resident Tax Return (Long form) ► _____
☐ Form 500EZ: Resident Tax Return (EZ form) ► _____
☐ Form 500: Nonresident Tax Return ► _____
☐ Form 500: Part-Year Resident Tax Return From _____ To _____
Schedule 3: Enter Nonresident and Part-year resident allocations ► _____

Part III – Filing Status

- ☒ Single
☐ Married filing joint return
☐ Married filing separate return
☐ Head of household
☐ Qualifying widow(er)

Part IV – Other Information

- ☒ The address above is different than last year
☒ I authorize the Georgia Department of Revenue to electronically notify me by e-mail address regarding any updates to my account(s).

Form 500UET calculations (Underpayment of Estimated Tax Penalty):

- ☐ You want the GA Dept of Revenue to figure the underpayment penalty Form 500 UET
☐ At least 2/3 of your total gross income is from fishing or farming
☐ Last year's Georgia return did not cover a twelve month period or show a tax liability

Part V – Direct Deposit Information or Direct Debit Information

Yes **No**
☐ ☒ Elect direct deposit of **state** tax refund
☒ ☐ Use direct debit for state tax payments (EF Only)

If you selected either of the options above, fill out the information below:

Name of Financial Institution (optional) Wells Fargo
Account type Checking ☒ Savings ☐
Routing number 061000227
Account number 1010241154733
Payment date to withdraw from the account above . . . 04/01/2013
State balance-due amount from this return 32.

Yes **No**
☐ ☐ Elect to receive a state issued debit card instead of a paper check

International ACH Transactions

Yes **No**
☐ ☒ Will the funds for this refund (or payment) go to (or come from) an account outside the U.S.?

Note: If, for any reason, the scanning equipment at the Georgia Department of Revenue fails to read your direct deposit information (from the barcode on form 500), you will receive a paper check instead.

Part VI – Extension Status

Yes **No**
☐ ☒ Tax return due date extended?
Extended due date

QuickZoom to Form IT-303: Application for Extension of Time for Filing ►
QuickZoom to Form IT-560: Extension Payment Voucher ►

Part VII – Amended Return

☐ Filing a Georgia amended return
Enter the tax year you are amending
Previous Georgia payment(s) made
Previous Georgia refund received

QuickZoom here to Form 500X ►

QuickZoom to Form 500: Income Tax Return (Long form) ►
QuickZoom to Form 500EZ: Resident Tax Return (EZ form) ►

Income and Retirement Worksheets

2012

► Keep for your records

Name
Joshua P Schrader

Social Security Number
257-81-5152

		Georgia Amounts		Other State Amounts	
Income		Column A Taxpayer	Column B Spouse	Column C Taxpayer	Column D Spouse
1	Wages	10,604.		0.	
2	Federal Interest				
	- Georgia Adjustments to federal taxable Interest				
3	Dividends				
	- Georgia Adjustments to federal taxable Dividends				
4	Capital/other gains or (losses)				
5	Income from federal Schedules C and F				
6 a	Rental/K-1 etc. income				
b	- income above subject to FICA or S.E. tax, or S corp income in which you materially participated . . .				
7 a	Pension/Annuity and IRA/SEP distributions				
b	Lump-sum distributions				
c	RRB-1099-R				
d	Other Subtraction #2, withdrawals with GA/Fed tax difference				
e	Other Subtraction #7, income exempt from state tax				
f	Other Subtraction # 8, teachers retirement contributions already taxed by Georgia				
8	Alimony received.				
9	Social security				
10 a	State income tax refund				
b	Unemployment compensation				
11	Other income				
	- Gambling winnings				
	- Other	700.			
	Federal Form 8814 income included in other income . . .				
Adjustments					
12	IRA deductions.				
13	Educator expenses				
14	Other federal adjustments. . .				

Tax Payments Worksheet

2012

► Keep for your records

Name Joshua P Schrader	Social Security Number 257-81-5152
---------------------------	---------------------------------------

Tax Payments for the Current Year

		State	
		Date	Payment
1	First Payment		
2	Second Payment		
3	Third Payment		
4	Fourth Payment		
Additional Payments			
5	Payment		
	Payment		
	Payment		
	Payment		
	Payment		
6	Overpayment from previous year applied to current year	6	
7	Amount paid with current year extension	7	
8	Total tax payments	8	

Income Taxes Withheld for the Current Year

9	State withholding on Forms W-2	9	165.
10	State withholding on Forms W-2G	10	
11	State withholding on Forms 1099-R	11	
12 a	State withholding on Forms 1099-MISC	12 a	
b	State withholding on Forms 1099-G	b	
13	Other state tax withholding	13	
14	Total income tax withheld	14	165.
15	Date return will be filed and balance paid	15	