

Example Tax Returns

Exercise 5

(Amended Tax Return) Forms Included: Form 1040, Form 2441, Form 8867, Form 1040X

Client's Social Security Number 257-00-4708

Filing Status Head of Household

Taxpayer's Date of Birth 03/01/1978

Taxpayer is not Blind or Deceased

Client's First Name, Initial, and Last Name

Richard D. Amendola

Street Address 415 Blue Ridge Drive Zip Code 30809 (Evans, Georgia)

Daytime Telephone 706-868-0985

Cell Phone 706-799-7325

E-mail amendola@gmail.com

Taxpayer's Occupation Construction

Dependent Information

Dependent Name Brian D. Amendola

Dependent's Date of Birth 08/04/2015

Dependent's SSN 259-00-3214

Relationship Son

Number of Months Lived in Home 12 Dependent Care Expenses \$2400

The taxpayer has not released the claim for Brian to another person.

Daycare Information

Provider's Name Sunshine House

Provider's EIN 589632100

Address 521 Fury's Ferry Road Evans, GA 30809

Amount Paid to Daycare Provider \$2400

Recovery Rebate Credit:

Client does qualify for the recovery Rebate Credit, Received 2,800 payment.

Healthcare Information:

Taxpayer had full year minimum essential coverage purchased through a private insurance company. Taxpayer did not purchase health insurance through the Exchange.

W-2 Information

Employer Identification Number 58-9632154

Employer Name/Address Barclays Construction 216 Industrial Drive Evans, GA 30809

Wages \$23651.00

Federal Withholding \$1502.00
State GA State ID Number 23-2564155
State Tax Withheld \$588.00

SECOND W-2 Information

Employer Identification Number 58-4375684
Employer Name/Address Columbia Construction 900 Augusta Road North Augusta, SC 29841
Wages \$19104.00
Federal Withholding \$2647.00
State SC State ID Number 28-3575789
State Tax Withheld \$614.00

Refund Type:

Mark for Electronic Filing Using Direct Deposit of Refund Information Below:
Client's Bank Name: Wells Fargo
Client's Bank RTN 061000052
Client's Account Number 000562781542 Type of Account: Checking

***** AMENDED RETURN INFORMATION *****

Three weeks after the original return was filed and accepted, Mr. Amendola brought you another W-2 from a part-time job that he had worked for a short time. The part-time job was early in the year, and he had forgotten about it. He apologized for the trouble, but asked if you could amend his original tax return to include this additional W-2:

ADDITIONAL W-2 Information

Employer Identification Number 58-2125410
Employer Name/Address Framing Clinic 1400 Beaver Dam Road Augusta, GA 30904
Wages \$1500.00
Federal Withholding \$200.00
State GA
State ID Number 28-9516542
State Tax Withheld \$55.00

*One the Amended Explanations: Type that the taxpayer brought in a forgotten W-2