

Name	Date

## Completing Tax Forms

Go to the internet site: http://www.irs.gov/app/understandingTaxes/student/simulations.jsp Complete the two modules by clicking on the <u>Sim 2</u> and <u>Sim 7a</u> words. When you are working through the simulations, if you need to go back to the previous page, use the back arrow. Many of the pages have buttons at the bottom to show you the W-2 form or the Tax Form.

Cio	cely King – Simulation 2							
1.	Which tax form did you use?							
2.	Your W-2 states that you earned	_ from your job.						
3.	The amount of tax withheld was							
4.	Based on your tax return, the amount of your tax for the year is	·						
5.	Do you get a refund or do you owe money? How much	า?						
Мо	onica Lindo – Simulation 7-A							
1.	Which tax form did you use?							
2.	Your W-2 states that you earned	_ from your job.						
3.	You file your taxes as and you	_ be claimed as a						
	dependent on someone else's taxes.							
4.	4 is the amount of Federal taxes that were withheld.							
5.	How many exemptions did you claim?							
6.	What is your standard deduction?							
7.	My total tax was?							
8.	Do you get a refund or do you owe money? How much	า?						
Us	e Monica Lindo's information and complete the Utah State Tax form.							

For the year Jan. 1-Dec	p. 31, 2014	, or other tax year beginning				, 2014, e	nding		,	20	See	separate	instructlo	ns.
Your first name and		<u> </u>	Last nam	ne	,						You	r social sec	curity num	ber
If a joint return, spou	ıse's first	name and initial	Last nam	ne							Spor	ıse's social I	security nu	mber
Home address (num	ber and s	street), if you have a P.O. b	ox, see ins	structions	S.				<del></del>	Apt. no.	<b>A</b>	Make sure f	the SSN(s)	above
			•									and on line	e 6c are co	rrect.
City, town or post offic	e, state, a	nd ZIP code. If you have a fo	reign addres	ss, also co	omplete spaces	below (s	ee instruction	15).				esidential El here if you, or		
Foreign country nam	ne .	<u> </u>		For	eign province	/state/ci	ountv		Foreign	postal code	Jointly,	want \$3 to go below will not	to this fund.	Checking
rotolgit obultary time.							•		l		refund			Spouse
Filing Status	1	Single		······································	, , , , , , , , , , , , , , , , , , ,					d (with qual				
<del>-</del>	2	Married filing jointly								son is a child	d but no	ot your dep	endent, ent	er this
Check only one	3	Married filing separ		er spou	se's SSN ab	oove		hild's na Vuolifula		. ► v(er) with d	opond	loot obild		
box.		and full name here.							<del></del>		ahaug	Boxes ch	ecked	,
Exemptions	6a	Yourself. If some			u as a depe	nident,	go not en	SUK DOX	ν οα ,		. }	on 6a and	d 6b	
	b	☐ Spouse	<del></del>		ependent's	(3)	Dependent's			under age 1		No. of ch on 6c wh	o:	
	(1) First	,	e	٠.	curity number		tionship to you	ı qual		child tax cred tructions)	it	<ul> <li>lived wi</li> <li>did not l</li> </ul>		
	(1) 1101	114114								j	_	you due to or separa	o divorce	
If more than four	-										_	(see instri	uctions)	
dependents, see instructions and												Depender not entere		
check here ▶□		Total number of even	antions of	lalmad		<u> </u>			Į.,	]	<del></del>	Add num		
	- d 7	Total number of exer Wages, salaries, tips	···		(a) \\/. Q				<u> </u>	<del>`                                    </del>	7	Illes and	, , , , , , , , , , , , , , , , , , ,	1
Income	8a	Taxable interest. Atta					, , ,				8a			<del>                                     </del>
	b	Tax-exempt interest					86			·   ·				
Attach Form(s)	9a	Ordinary dividends.						. ,	, ,	, ,	9a			
W∼2 here. Also attach Forms	b	Qualifled dividends			, , , ,		9b							
W-2G and	10	Taxable refunds, credits, or offsets of state and local income taxes							, ,	10				
1099-R if tax	11	Alimony received							. , [	11				
was withheld.	12	Business income or (loss). Attach Schedule C or C-EZ						· <u>.</u> [	12			1		
	13	- Capital gain or (loss):	Attach S	chedule	D if require	d. If no	t required,	check i	here 🕨		13			<del> </del>
If you did not get a W-2,	14	Other gains or (losse	s). Attach	Form 4	797			, .			14		,	<u></u>
see instructions.	15a	IRA distributions	15a	·	······································		<b>b</b> Taxabl			· .:	15b			<b>-</b>
	16a	Pensions and annultie		L		<u> </u>	<b>b</b> Taxabl				16b		<del></del>	<b> </b>
	17	Rental real estate, ro								dule E	17			<del> </del>
	18	Farm income or (loss	•								18			<del> </del>
	19	Unemployment comp		ı		' i				1	19			
	20a	Social security benefit	. —			<b>_</b>	<b>b</b> Taxab			1	20b		· · · · · · · · · · · · · · · · · · ·	-
•	21	Other income. List ty Combine the amounts	pe and ar	mount	mn for lings 7	through	of Thin in	vour tot	tal ingo	mo <b>b</b>	21	···		<del> </del>
	22							your to	tai incoi	ne 🗡	22			+
Adjusted	23	Educator expenses			, , , ,									
Gross	24	Certain business expen												
Income		fee-basis government o					24							1
moome	25	Health savings accor												
•	26	Moving expenses. A												
	27	Deductible part of self- Self-employed SEP,												
	28 29	Self-employed SEP,												
	30	Penalty on early with												
	JU	Alimony polid in Rec		_	· , , , , , , , , , , , , , , , , , , ,		<del></del>							1

Tuition and fees. Attach Form 8917. . .

Domestic production activities deduction. Attach Form 8903

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

IRA deduction . . . . . .

Student loan interest deduction . . .

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Form 1040 (2014	+)		38			
	38	Amount from line 37 (adjusted gross income)	30			
	39a	Check You were born before January 2, 1950, Blind. Total boxes				
Tax and		if: Spouse was born before January 2, 1950, ☐ Blind. J checked ▶ 39a ☐ ☐				
Credits	b	If your spouse itemizes on a separate return or you were a dual-status alien, check here▶ 39b ☐				
		Itemized deductions (from Schedule A) or your standard deduction (see left margin)	40		ļ	
Standard Deduction	40		41			
for	41	Subtract line 40 from line 38	42			
• People who	42	Exemptions. If line 38 is \$152,525 or less, multiply \$3,950 by the number on line 6d. Otherwise, see instructions	43			
check any box on line	43	Taxable income. Subtract line 42 from line 41. If line 42 is more than line 41, enter -0-	44		-	
39a or 39b <b>or</b>	44	Tax (see instructions). Check if any from: a  Form(s) 8814 b Form 4972 c			<del></del>	
who can be claimed as a	45	Alternative minimum tax (see Instructions). Attach Form 6251	45		<del> </del>	
dependent,	46	Excess advance premium tax credit repayment. Attach Form 8962	46		<del> </del>	
see Instructions.	47	Add lines 44, 45, and 46	47		<b>_</b>	
<ul> <li>All others:</li> </ul>		Foreign tax credit. Attach Form 1116 if required 48				
Single or	48	Poreign tax credit, Attach Form 2441 49				
Married filing separately,	49	Credit for child and dependent care expenses. Attach			1	
\$6,200	50	Education credits from Form coop, and Form				
Married filing	51	Retirement savings contributions credit. Attach Form 8880 51	-			
jointly or Qualifying	52	Child tax credit. Attach Schedule 8812, if required			1	
widow(er),	53	Residential energy credits. Attach Form 5695	-			
\$12,400	54	Other credits from Form: a 3800 b 8801 c 54	_		<del></del>	
Head of household,	55	Add lines 48 through 54. These are your total credits	55			
\$9,100	1 '	Subtract line 55 from line 47, If line 55 is more than line 47, enter -0-	56			
	<u> </u>	Self-employment tax. Attach Schedule SE	57			
	57	Unreported social security and Medicare tax from Form: a 4137 b 8919	58			
Other	58	United Office Social Security and Modifical States in the Social Security and Modifical Sec	59		.	
Taxes	59	Additional tax on IRAs, other qualified retirement plans, etc. Attach Form 5329 if required	60a		7	
Taxes	60a	Household employment taxes from Schedule H	60b			
	b	First-time homebuyer credit repayment. Attach Form 5405 If required	61		<del> </del>	
	61	Health care; individual responsibility (see instructions) Full-year coverage				
	62	Taxes from: a Form 8959 b Form 8960 c Instructions; enter code(s)	62		<del>                                     </del>	
	63	Add lines 56 through 62. This is your total tax	63	i i		
Daymont		Federal income tax withheld from Forms W-2 and 1099 64		Titler some Miles Miles Miles Miles Miles	1	
Payment	65	2014 estimated tax payments and amount applied from 2013 return 65			ļ	
If you have a				Pand Pand Pand Pand Pand Pand Pand Pand		
qualifying		Construction of the constr	And I		l l	
child, attach		William State of Schooling 9812				
Schedule EK	) "	Additional child tax credit. Attach oshedate constant and additional child tax credit from Form 8863, line 8		The state of the s		
	- 68	American opportunity credit Attach Form 8962	95			
	69	Net premium tax credit. Attach 1 on 1 0002		THE STATE OF THE S		
*	70	Amount paid with reduest for extension to the		Total Control		
	71	EXCess social security and delitrative text transfer			ļ	
	72	Credit for federal tax on fuels. Attach Form 4136		Company		
	73	Credits from Form: a 2439 b Reserved c Reserved d 73	74			
	74	Add lines 64, 65, 66a, and 67 through 73. These are your total payments			-	
Refund	75	If line 74 is more than line 63, subtract line 63 from line 74. This is the amount you overpaid	75	-		
.,010110	76	Amount of line 75 you want refunded to you. If Form 8888 is attached, check here .	76	a		
	_	b Routing number	With and the second	of pic and a second of the sec		
Direct depos See	16.5	d Account number	-	Among day - Try and a - Try a	Ì	
instructions.		Amount of line 75 you want applied to your 2015 estimated tax > 77		Toronto de la companya de la company		
	77	a Li Liu- 34 fram line 62 For dotalle on how to have see instructions	7	3		
Amount	78					
You Owe	79		es. C	omplete below.	□ No	
Third Par		Do you want to allow another person to diodes the Personal to	dentific		•	
Designe		Designee's number (P	IN)			
			to the b	est of my knowledge an	d belief,	
they are true; correct, and complete, Declaration of property (other start apply of						
Here		Your signature Date Your occupation	"	tymno priorio marini a		
Joint return?	See .			he IRS sent you an Identity	/ Protection	
Instructions. Keep a copy	for	Spouse's signature. If a joint return, both must sign. Date Spouse's occupation	PI	ne ins sem you air idenmy N, enter it	/ ( TOGOTION	
your records.				re (see inst.)		
-		Print/Type preparer's name Preparer's signature Date	lc	heck 🗆 if PTIN		
Paid			s	elf-employed		
Prepare			l e	rm's EIN ➤		
	•r			11110 1111 7		
Use On		Firm's name ►		hone no.	040 (201	

Page 2