

LATEST #4

FORMS REQUIRED: FORM 1040A, EIC, FORM 8812, FORM 8867, LA IT540, LA REFUNDABLE CHILD CARE WORKSHEET

INFORMATION RETURNS ATTACHED: FORMW-2 (1)

TAXPAYER:

NAME: JENNIFER BROWN

SSN: 400-00-4306

DOB: 06/12/79

OCCUPATION: ASSISTANT MANAGER

DISABLED: NO

PRES ELEC FUND: YES

DAYTIME PHONE: NOT GIVEN

BLIND: NO

ADDRESS: 13540 LORD BALTIMORE PL APT 21

BATON ROUGE LA 70807

FILING STATUS: HEAD OF HOUSEHOLD

LINE 6D: 2

DEPENDENT INFORMATION:

NAME	DOB	AGE	SSN	RELATIONSHIP	#MO	CHILD CREDIT
JOHN BROWN JR	051403	7	400-00-2006	SON	12	X

LA & IRS DIRECT DEPOSIT:

NAME OF INSTITUTION:

BANK OF AMERICA (PLEASE INPUT RTN & ACCOUNT NUMBER THAT WILL WORK FOR YOU)

RTN: 006500090

ACCOUNT NUMBER: 216589470

CHECKING

UNEMPLOYMENT COMPENSATION

2325

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SCHEDULE EIC:

(CHILD 1)

LINE 1: JOHN BROWN JR

LINE 2: 400-00-2006

LINE 3: 2003

LINE 5: SON

LINE 6: 12

LA

CHANGE OF ADDRESS

EDUCATION CREDIT

LA 2441 CHILDCARE WORKSHEET

PROVIDER NAME

KINDERCARE

ADDRESS

12350 FLORIDA ST

BATON ROUGE LA 70809

ID NUMBER

72-1234567

STAR RATING

4

START CONTRIBUTION

420

CONSUMER USE TAX PURCHASE

350

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SCHEDULE 2

PART I

LINE 1A:	KINDERCARE
LINE 1B:	12350 FLORIDA ST
	BATON ROUGE LA 70809
LINE 1C:	72-1234567
LINE 1D:	3000

PART II

LINE 2A:	JOHN BROWN JR
LINE 2B:	400-00-2006
LINE 2C:	3000
LINE 3:	3000
LINE 4:	20850
LINE 5:	20850
LINE 6:	3000
LINE 7:	23175
LINE 8:	.30
LINE 9:	900
LINE 10:	818
LINE 12:	818
LINE 13:	818

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CHILD TAX CREDIT WORKSHEET-LINE 51

LINE 1: NUMBER OF QUALIFYING CHILD 1	1000
LINE 2: AMOUNT FROM 1040 LINE 46	818
LINE 3: LINE 47	818
LINE 50	818

FORM 8812

NAME	JOHN BROWN JR
SOCIAL SECURITY NUMBER	400-00-4306
LINE 1:	1000
LINE 3: SUBTRACT	1000
LINE 4A: TOTAL EARNED INCOME	20850
LINE 5: YES X	8800
LINE 6: NO X	1320

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FORM W-2:

BOX B: EMPLOYER IDENTIFICATION NUMBER	72-6784767
BOX C: EMPLOYER'S NAME ADDRESS & ZIP	PIZZA HUT 123 OCEANSIDE STREET BATON ROUGE LA 70806
BOX D: EMPLOYEE'S SOCIAL SECURITY NUMBER	400-00-4306
BOX E: EMPLOYEE'S FIRST NAME INITIAL & LAST NAME	JENNIFER BROWN
BOX F: EMPLOYEE'S ADDRESS & ZIP	13540 LORD BALTIMORE PL APT 21 BATON ROUGE LA 70807
BOX 1: WAGES TIPS OTHER COMPENSATION	20850
BOX2: FEDERAL INCOME TAX WITHHELD	785
BOX 3: SOCIAL SECURITY WAGES	20850
BOX4: SOCIAL SECURITY TAX WITHHELD	1293
BOX 5: MEDICARE WAGES AND TIPS	20850
BOX 6: MEDICARE TAX WITHHELD	302
BOX 9: ADVANCE EIC PAYMENT	0
BOX 15: EMPLOYER'S STATE ID NUMBER	2345678001
BOX 16: STATE WAGES TIPS ETC	20850
BOX 17: STATE INCOME TAX	130

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FORMS INCLUDED: FORM 1040A, FORM W-2

FORM 1040A:

TAXPAYER'S FIRST NAME INITIAL LAST NAME	JENNIFER BROWN
TAXPAYER'S SOCIAL SECURITY NUMBER	400-00-4306
HOME ADDRESS (NUMBER AND STREET)	13450 LORD BALTIMORE PLACE APT 21
CITY STATE & ZIP	BATON ROUGE LA 70807
TAXPAYER'S PRESIDENTIAL ELECTION CAMPAIGN FUND	YES
FILING STATUS	HEAD OF HOUSHOLD
LINE 6A: YOURSELF (EXEMPTION)	X
NUMBER OF BOXES CHECKED ON 6A AND 6B	1
LINE 6C: DEPENDENT	
NAME:	JOHN BROWN JR
SOCIAL SECURITY NUMBER	400-00-2006
RELATIONSHIP	SON
QUALIFYING CHILD	X
NUMBER OF CHILD WHO LIVED WITH YOU	1
LINE 6D: TOTAL NUMBER OF EXEMPTIONS CLAIMED	2
LINE 7: WAGES SALARIES AND TIPS	20850
LINE 13: UNEMPLOYMENT COMPENSATION	2325
LINE 15: TOTAL INCOME	23175
LINE 21: ADJUSTED GROSS INCOME	23175
LINE 22: ADJUSTED GROSS INCOME	23175
LINE 24: STANDARD DEDUCTION	8000
LINE 25: SUBTRACT	15175
LINE 26:	7000
LINE 27: TAXABLE INCOME	8175
LINE 28: TAX	818

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LINE 29: CREDIT FOR DEPENDENT CARE	818
LINE 34: TOTAL CREDITS	818
LINE 38: FEDERAL INCOME TAX WITHHELD	785
LINE 40A: EARNED INCOME CREDIT	1729
LINE 41: ADDITIONAL TAX CREDIT	1000
LINE 43: TOTAL PAYMENTS	3514
LINE 44: OVERPAID	3514
LINE 45A: REFUND	3514