**Intake Sheet, page 1, Shaded Area**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| 1: No | 2: No | 3: Yes | 4: Yes | 5: Yes |

E-file created: Yes

AGI: 35,338

Refund/(Amount owed): 2,691

Diagnostic:

Errors

None

Warnings

There is a refund on the tax return and no direct deposit information has been filled in. Is this correct? (W49)

Overridden Entries:

Overridden Entry 'ADDR-C' on 'Rent and Royalty Income or Loss'

Overridden Entry 'TYPE-C' on 'Rent and Royalty Income or Loss'

Overridden Entry 'LINE-19A' on 'Rent and Royalty Income or Loss'

Overridden Entry 'LINE-19B' on 'Rent and Royalty Income or Loss'

Overridden Entry 'LINE-19C' on 'Rent and Royalty Income or Loss'

Estimated Entries:

Dependent on Template used to create return

|  |  |  |
| --- | --- | --- |
| **Form** | **Payee/Name/Line** | **Comment/Reference** |
| Main Info | Names & SSNs | Spouse: Last name blank |
| Taxpayer Information | Check if blind / Spouse: Check Yes |
| Presidential Election Campaign | Spouse checked |
| Filing Status | 2 Married filing jointly |
| Wanda Winters Qualifying Child | Code = 1; Check EIC Box |
| Prep Use Form |  | Line 11: None  Line 12: Yes  Line 13: Preparer’s Initials  Line 14: Field Red |
| Cap Gn Wkt | ACME Financial | The three Type E transactions are to be entered on three separate lines  The D (reported entries can be consolidated to one line. Column f = MW, Column g =21  See the Learning Guide for values of each column for each transaction |
|  | ACME Partners K-1 | NOT included on Cap Gn Wkt – goes on Sch D, Pg 1, line 12 = 218 |
| 1040 Wkt1 | Medicare Parts B, C | Best Practice: enter Part B & D using a scratch pad for both TP and SP |
| 1040 ACA Wkt |  | All three on the return are checked FULL |
| 1040 Page 1 | Line 10 | Check NO |
| 1040 Page 2 | Line 61 | Full year coverage checked |
| Interest Stmt | ACME Partners and ACME Financial K-1 | Best Practice: multiple lines  1ST Line ACME Partnership K-1 Box 1 or 3 = 343  2nd line ACME Financial: Box 1 or 3 amount =125  3rd line ACME Financial: SB Box 1 or 3 amount =506; State adjust = – 506 (optional Best Practice– add “SB” to Payer to indicate Savings Bond)  4th Line ACME Financial NJ BD : NAEOB with E and 149 – Tax exempt Fed and NJ  5th Line ACME Financial OT BD : NAEOB with E and 189, State Adj + 189 – Tax exempt Fed, Taxable in NJ |
| Dividend Stmt | ACME Financial | Best Practice: multiple lines  1st Line ACME Partnership K-I: Ord Div = 474, Qual Div = 101  2nd line ACME Financial: Ord Div = 232, Qual Div = 125, Cap Gns = 69  3rd line ACME Financial US : State Adj = + 140, Exp Int Div = 200  4th line ACME Financial NJ Qual: State Adj = +14, Exp Int Div = 200 |
| Sch D Pg 1 | Line 6 | Line should not be red |
|  | Line 12 | Scratch pad attached to this line with $218 Long Term Capital gains from Acme Partners K-1. |
|  | Line 14 | 15,454 Long term capital loss carryover |
| Sch E Pg 1 | Line A | No box checked |
|  | 1A (or C) | Address: Address of Payee should be here  Type: 6  Fair rental days 0; Personal use days: 0 |
|  | 4A (or C) | 976 (via Scratch Pad with description of payer) |
| F/S Tax Pd | NJ estimated | Credit: 0  04/15: 60;  06/15: 60;  09/15: 60;  01/15: 70 (\* box checked) |
|  | NJ state and/or local balance due… | 245 (use Scratch Pad to document last year (203) and 3 year ago amount (42)). Box should not be red. |
|  | NJ last state estimate payment for 2013 paid  In 2014 | 50 |
| 1099R | Acme Retirement | Taxable Amount Not Determined box checked  Line 2: Blank  Simplified Method  Line 1: 5,864  line 2: 71 or older (optional – has no effect)  line 2: annuity starting after 12/31/1997 and combined age 121-130  line 5 = 681 (because started receiving in Jan 2011)  line 6 = 227 (calculated)  Line 7 = 4,956 |
| 1099R | Acme Pensions | No boxes should be red  Line 4: 1,179 |
| 1116 | Foreign Tax Credit | 44  (Use Form 1116 instead of direct entry on 1040, page 2 line 47)  Remainder of form 1116 untouched |
| All | TSJ boxes | Blank or correct use of T, S, J |
| All | Scratch Pads | Description has explanation of worksheet and line linked from |

**New Jersey**

|  |  |  |
| --- | --- | --- |
| **Form** | **Payee/Name/Line** | **Comment/Reference** |
| NJ 1040 Pg1 | County/Municipality code | 1801 |
|  | Box next to “Check if your address has changed” | Checked |
| NJ 1040 Pg 2 | Gubernatorial Fund | Taxpayer: No; Spouse: Yes |
|  | Line 15a taxable | 657 |
|  | Line 15b tax exempt | 901 |
|  | Line 19a | 30,191 |
|  | Line 19b | 227 |
|  | Line 28 [NJ Gross Income] | 22,938 |
|  | Line 30 [Medical Expenses] | 3,931 |
| NJ 1040 Pg 3 | Line 37a [Total Property Taxes Paid] | 2,268 [From Worksheet F] |
|  | **Line 38 [NJ Taxable Income]** | **13,507** |
|  | Line 45 [Use Tax Due] | 44 (from Use Tax table with scratch pad) |
|  | Line 48 [Total NJ Income Tax Withheld] | 0 |
|  | Line 49 [Property tax credit] | 50 [From Worksheet F] |
|  | **Line 66 [Refund]** | **67** |
|  | Worksheet F, Line 1, Rent you paid . . . | 12,600 Best Practice: scratch pad with 6 months at $1,000 and 6 months at $1,100 |
| NJ DD Wkt | Direct Deposit and Direct Debit Information | Check here to have a refund check mailed to you |
| NJ ES Wkt | Line 21 [Estimate desired] | 200 |