PRO-P4 Sterling Scenario

Form **13614-C** (Rev. 10-2012) | Department of the Treasury – Internal Revenue Service | OMB # 1545-1964

Intake/Interview & Quality Review Sheet

Section A. Complete Pages 1-3

You are responsible for the information on your return so please provide complete and accurate information to the IRS certified volunteer preparer. If you have any questions please ask your preparer.

You will need your:
- Tax information such as Forms W-2, 1099, 1098.
- Social security cards or ITIN letters for you and all persons on your tax return.
- Picture ID (such as a valid driver's license or other government issued ID for you and your spouse, if applicable).

Part I. Your Personal Information

1. Your First Name: Steven | M. I.: A | Last Name: Sterling | Are you a U.S. Citizen? ☒ Yes ☐ No

2. Your Spouse's First Name: Page | M. I.: S | Last Name: Sterling | Is your spouse a U.S. Citizen? ☒ Yes ☐ No

3. Mailing Address: 3717 Misty Meadow | Apt#: | City: Wharton | State: NJ | Zip Code: 07885

4. Contact Information
Phone: 973-555-1212 | Cell Phone: | E-mail:

5. Your Date of Birth: 09-21-1934 | 6. Your Job Title: Retired | Are you: 7. Legally Blind ☐ Yes ☒ No; 8. Totally and Permanently Disabled ☐ Yes ☒ No

9. Your Spouse's Date of Birth: 02-11-1952 | 10. Your Spouse's Job Title: Housewife | Is Your Spouse: 11. Legally Blind ☒ Yes ☐ No; 12. Totally and Permanently Disabled ☐ Yes ☒ No

13. Can anyone claim you or your spouse on their tax return? ☐ Yes ☒ No ☐ Unsure

Part II. Marital Status and Household Information

1. As of December 31, 2012, were you?
   - ☐ Single
   - ☒ Married: Did you live with your spouse during any part of the last six months of 2012? ☒ Yes ☐ No
   - ☐ Divorced or Legally Separated: Date of final decree or separate maintenance agreement: ________
   - ☐ Widowed: Year of spouse's death: ________

2. List names below of **everyone** who lived in your home in 2012 (other than you or spouse). Also list anyone who lived outside of your home that you supported during 2012. If additional space is needed please check here ☐ and list on page 3.

Name (first, last) Do not enter your name or spouse's name below. (a)	Date of Birth (mm/dd/yy) (b)	Relationship to you (e.g. daughter, son, mother, sister, none) (c)	Number of months lived in your home in 2012 (d)	US Citizen or resident of US, Canada or Mexico in 2012 (yes/no) (e)	Marital Status as of 12/31/12 (S/M) (f)	Full-time Student in 2012 (yes/no) (g)	Received less than $3800 income in 2012 (yes/no) (h)
Samantha Summers	01-13-41	Sister	12	Yes	S	No	Yes

To check the status of your REFUND visit "Where's My Refund?" on www.irs.gov or call 1-800-829-1954 for assistance.

Volunteers assisting with preparing your return are trained to provide high quality service and uphold the highest ethical standards.
To report unethical behavior to IRS, email us at wi.voltax@irs.gov or call toll free 1-877-330-1205.

PRO-P4 Sterling Scenario

Section A. Please complete – check Yes, No or Unsure to all questions below. Please ask if you need help.

Part III. Income – In 2012, did you (or your spouse) receive:

Yes	No	Unsure	
☐	☒	☐	1. Wages or Salary? (Form W-2) If yes, how many jobs did you have in 2012? _____
☐	☒	☐	2. Tip Income?
☐	☒	☐	3. Scholarships? (Forms W-2, 1098-T)
☒	☐	☐	4. Interest/Dividends from: checking/savings accounts, bonds, CDs, brokerage? (Forms 1099-INT, 1099-DIV)
☐	☒	☐	5. Refund of state/local income taxes? (Form 1099-G)
☐	☒	☐	6. Alimony Income?
☐	☒	☐	7. Self-Employment Income? (Form 1099-MISC)
☐	☒	☐	8. Cash/check payments for any work performed not reported on Forms W-2 or 1099?
☒	☐	☐	9. Income (or loss) from the sale of Stocks, Bonds or Real Estate (including your home)? (Forms 1099-S, 1099-B)
☐	☒	☐	10. Disability Income (such as payments from insurance, or workers compensation)? (Forms 1099-R, W-2)
☒	☐	☐	11. Distributions from Pensions, Annuities, and/or IRA? (Form 1099-R)
☐	☒	☐	12. Unemployment Compensation? (Form 1099-G)
☒	☐	☐	13. Social Security or Railroad Retirement Benefits? (Forms SSA-1099, RRB-1099)
☐	☒	☐	14. Income (or loss) from Rental Property?
☐	☒	☐	15. Other Income: (gambling, lottery, prizes, awards, jury duty, etc.)? (Forms W-2 G, 1099-MISC) Specify: ________________

Part IV. Expenses – In 2012 Did you (or your spouse) pay:

Yes	No	Unsure	
☐	☒	☐	1. Alimony: If yes, do you have the recipient's SSN? ☐ Yes ☐ No
☐	☒	☐	2. Contributions to a retirement account? ☐ IRA ☐ Roth IRA ☐ 401K ☐ Other
☐	☒	☐	3. Educational expenses for yourself, spouse or dependents, such as tuitions, books, fees, etc.? (Form 1098-T)
☐	☒	☐	4. Unreimbursed employee business expenses (such as uniforms or mileage)?
☒	☐	☐	5. Medical expenses (including health insurance premiums)?
☐	☒	☐	6. Home mortgage interest? (Form 1098)
☐	☒	☐	7. Real estate taxes for your home or personal property taxes for your vehicle? (Form 1098)
☐	☒	☐	8. Charitable contributions?
☐	☒	☐	9. Child or dependent care expenses such as day-care?
☐	☒	☐	10. For supplies used as an eligible educator such as a teacher, teacher's aide, counselor, etc.?

Part V. Life Events – In 2012 Did you (or your spouse):

Yes	No	Unsure	
☐	☒	☐	1. Have a Health Savings Account? (Forms 5498-SA, 1099-SA, W-2 with code W in Box 12)
☐	☒	☐	2. Have debt from a mortgage or credit card canceled/forgiven by a commercial lender? (Forms 1099-C, 1099A)
☐	☒	☐	3. Buy, sell or have a foreclosure of your home? (Form 1099-A)
☐	☒	☐	4. Have Earned Income Credit (EIC) disallowed in a prior year? If yes, for which tax year? _______
☐	☒	☐	5. Purchase and install energy-efficient home items? (such as windows, furnace, insulation, etc.)
☐	☒	☐	6. Live in an area that was affected by a natural disaster? If yes, where? ____________
☐	☒	☐	7. Receive the First Time Homebuyers Credit in 2008?
☐	☒	☐	8. Pay any student loan interest? (Form 1098-E)
☐	☒	☐	9. Make estimated tax payments or apply last year's refund to your 2012 tax? If so how much? ________
☐	☒	☐	10. Attend school as a full time student? (Form 1098-T)
☐	☒	☐	11. Adopt a child?
☐	☒	☐	12. File a 2011 federal tax return containing a "capital loss carryover" on Form 1040 Schedule D?
☐	☒	☐	13. Become a victim of identity theft?

Presidential Election Campaign Fund: (If you check a box, your tax or refund will not change.)
Check here if you, or your spouse if filing jointly, want $3 to go to this fund ☐ You ☐ Spouse

Catalog Number 52121E

Form **13614-C** (Rev. 10-2012) 2

Additional Information and Questions related to the preparation of your return

Many free tax preparation sites operate by receiving grant money. The data from the following questions may be used by this site to apply for these grants. Your answers will be used only for statistical purposes.

Other than English what language is spoken in the home? None

Are you or a member of your household considered disabled? ☒ **Yes** ☐ **No**

If you are due a refund or have a balance due:

- Ask your preparer about Direct Deposit. It is the fastest, safest way to receive your tax refund. When you combine e-file and direct deposit, the IRS will likely issue your refund in as few as 10 days.
- Ask your preparer about purchasing Series I U.S. Savings Bonds with part or all of your tax refund. Savings bonds are a safe and secure way to invest in the future. Purchase I Bonds for yourself or others in multiples of $50 and earn interest for up to 30 years.

If you are due a refund, would you like a direct deposit?	☒ Yes	☐ No
If you are due a refund, would you like information on how to purchase U.S. Savings Bonds?	☐ Yes	☒ No
If you are due a refund, would you like information on how to split your refund between accounts?	☐ Yes	☒ No
If you have a balance due, would you like to make a payment directly from your bank account?	☒ Yes	☐ No

Additional comments:

Under no circumstances will the Internal Revenue Service tolerate discriminatory treatment of taxpayers by its employees, or individuals who volunteer or work at Volunteer Income Tax Assistance (VITA) and Tax Counseling for the Elderly (TCE) sites. No taxpayer shall be subject to discrimination on the basis of sex, race, color, national origin, reprisal, disability or age in educational programs or activities supported by the Department of the Treasury – Internal Revenue Service.

Taxpayers with a disability may require a reasonable accommodation in order to participate or receive the benefits of a program or activity supported by the Department of the Treasury – Internal Revenue Service. Site Coordinators and Managers are responsible for ensuring that requests for reasonable accommodation are granted when the request is made by a qualified individual with a disability.

If a qualified taxpayer believes that he or she has been discriminated against based on sex, race, color, national origin, disability, reprisal or age, they can file a complaint with the Department of the Treasury – Internal Revenue Service. All written complaints should be sent to:

Director, Civil Rights Division
Internal Revenue Service
1111 Constitution Avenue, NW, Rm. 2413
Washington, DC 20224

For all inquiries concerning taxpayer civil rights, contact us at the address referenced above, or e-mail us at eeo.external.civil.rights@irs.gov.

STOP HERE!

Thank you for completing this form.

Paperwork Reduction Act Notice

The Paperwork Reduction Act requires that the IRS display an OMB control number on all public information requests. The OMB Control Number for this study is 1545-1964. Also, if you have any comments regarding the time estimates associated with this study or suggestion on making this process simpler, please write to the Internal Revenue Service, Tax Products Coordinating Committee, SE:W:CAR:MP:T:T:SP, 1111 Constitution Ave. NW, Washington, DC 20224

Section B. For Certified Volunteer Preparer Completion

Remember: You are the link between the taxpayer's information and a correct tax return! Verify the taxpayer's information on pages 1, 2 & 3 is complete. All questions must be discussed with the taxpayer and all "Unsure" responses should be changed to "Yes" or "No".

Must be completed by Certified Volunteer only if persons are listed in Part II Question 2

Check if persons are listed in Part II Question 2 ☐

☐ Yes ☐ No 1. Can anyone else claim any of the persons listed in Part II, question 2, as a dependent on their return? **If yes, which ones:**

____

____

____

☐ Yes ☐ No 2. Were any of the persons listed in Part II, question 2, totally and permanently disabled? **If yes, which ones:**

____

____

____

☐ Yes ☐ No 3. Did any of the persons listed in Part II, question 2 provide more than 50% of their own support? **If yes, which ones:**

____

____

____

☐ Yes ☐ No ☐ N/A 4. Did the taxpayer provide more than half the support for any of the persons listed in Part II, question 2? **If yes, which ones:**

____

____

____

☐ Yes ☐ No ☐ N/A 5. Did the taxpayer pay over half the cost of maintaining a home for any of the persons in Part II, question 2? **If yes, which ones:**

____

____

____

Reminders

Use Publication 4012, *Volunteer Resource Guide* and Publication 17, *Your Federal Income Tax* in making tax law determinations.

Section C. Certified Volunteer Quality Reviewer Section

Review the tax return to ensure the following actions have been taken.

1. The **certification levels** of this tax return and volunteer preparer were verified.
2. All **unsure** boxes were discussed with the taxpayer and correctly marked yes or no.
3. The **information** on pages one and two was correctly addressed and transferred to the return.
4. Taxpayer's **identity** has been verified and **address** and **phone numbers** are correct.
5. Names, **SSNs, ITINs,** and **EINs**, were verified and correctly transferred to the return.
6. **Filing status** was verified and correct.
7. **Personal** and **Dependency Exemptions** are entered correctly on the return.
8. All **Income** (including income with or without source documents) checked "yes" in section A, part III was correctly transferred to the tax return.
9. **Adjustments** to Income are correctly reported.
10. **Standard, Additional** or **Itemized deductions** are correct.
11. All **credits** are correctly reported.
12. **Withholding** shown on Forms W-2, 1099 and **Estimated Tax Payments** are correctly reported.
13. **Direct Deposit/Debit** and checking/ saving account numbers are correct.
14. The correct **SIDN** is shown on the return.
15. The taxpayer(s) was advised that they are **responsible** for the information on their return.

Additional Tax Preparer Notes:

____

____

____

____

____

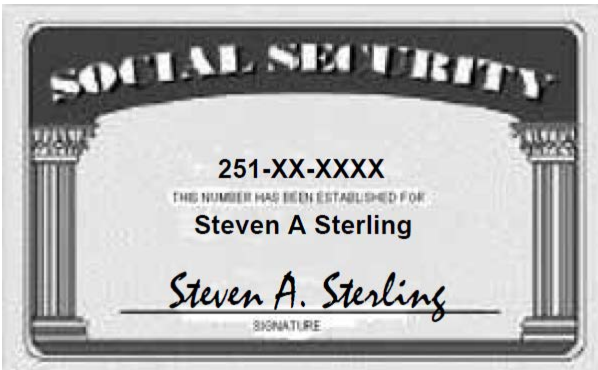
____

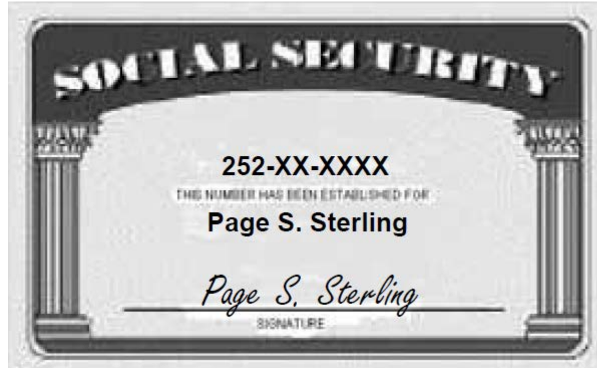
____

____

____

PRO-P4 Sterling Scenario





PRO-P4 Sterling Scenario

Interview Notes - Sterling

1. Steven retired from the International Brotherhood of Electrical Workers on January 1, 2009. Page, who is a housewife, is covered by the plan. He recovered a total of $681 of his cost in previous years.
2. Steven's sister, Samantha Summers, lived with them all year. She is an invalid and relies upon her brother for her support. She receives $250 per month in social security benefits.
3. Page has less than 20/200 vision in both eyes. She provided a doctor's statement.
4. Steven purchased 100 shares of Chapman stock in 1984 for $12,000. He sold the stock on March 23, 2012. He received $23,789 net of commissions on the sale. He did not receive a 1099-B for this transaction.
5. Their prior year return (not prepared at your site) shows a long term capital loss carryover of $23,654.
6. Steven got a K-1 from Frackem & Howe Gas Ltd. (123 Main, Pluckemin, NJ 07978). There were no payments requiring filing of form 1099. The K-1 had only the following amounts:
   - $343.00 Interest
   - $474.00 Ordinary Dividends
   - $218.00 Short-Term Capital Gains
   - $976.00 Royalties
7. Although they received a federal refund on last year's return, they owed $203 to NJ (which they paid on time). The also owed $42 from their NJ return from three years ago, which they paid on 06-15-2012.
8. They made the following NJ estimated payments:

Tax Year	TY2011	TY2012	TY2012	TY2012	TY2012
Date	01-03-2012	04-14-2012	06-15-2012	09-11-2012	12-28-2012
Amount	$40.00	$50.00	$50.00	$50.00	$60.00

9. They ask you to prepare TY2013 NJ estimated payment vouchers for $50 each quarter.
10. Steven and Page want their contribution to the Gubernatorial Election Campaign Fund to be handled the same as their contribution to the Presidential Election Campaign Fund.
11. They lived in Dover (Morris County) for the first half of the year (through June 30) and in Wharton (Morris County) for the second half of the year. They paid $1,000 per month in rent for the Dover apartment and $1,100 per month rent for the new Wharton apartment. They paid rent on both apartments in June and July.
12. The Sterlings had no connection to any foreign financial activity.
13. Steven and Page discovered last year that they could buy things online and not pay NJ sales taxes so they did some Christmas shopping and purchased various other items online last year. When the NJ Use Tax rules were explained to them, they decided they better follow the NJ guidelines for reporting Use Tax on their NJ return because they had no easy way to calculate an exact total of purchases. None of the items cost more than $300.
14. They would like any NJ refund / amount due to be handled the same as on their federal return. If they have an amount due, they would like the transfer to occur today. They show you a personal check from a non-foreign bank with routing number 123456789 and account number 87654321

PRO-P4 Sterling Scenario

☐ CORRECTED (if checked)

PAYER'S name, street address, city, state, ZIP code, and telephone no. Chapman Federal S & L Association 1413 5th Street Cincinnati, OH 45202	Payer's RTN (optional) 1 Interest income $ 124.73 2 Early withdrawal penalty $	OMB No. 1545-0112 **2012** Form **1099-INT**	**Interest Income**
PAYER'S federal identification number 24-5XXXXXX	RECIPIENT'S identification number 251-XX-XXXX	3 Interest on U.S. Savings Bonds and Treas. obligations $ 505.00	**Copy B For Recipient** This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.
RECIPIENT'S name Steven A. Sterling		4 Federal income tax withheld $	5 Investment expenses $
Street address (including apt. no.) 3717 Misty Meadow		6 Foreign tax paid $	7 Foreign country or U.S. possession
City, state, and ZIP code Wharton, NJ 07885		8 Tax-exempt interest $	9 Specified private activity bond interest $
Account number (see instructions)		10 Tax-exempt bond CUSIP no. (see instructions)	

Form **1099-INT** (keep for your records) Department of the Treasury - Internal Revenue Service

☐ CORRECTED (if checked)

PAYER'S name, street address, city, state, ZIP code, and telephone no. New City Bank 1 Riverview Ft. Thomas, KY 41075	Payer's RTN (optional) 1 Interest income $ 1,864.78 2 Early withdrawal penalty $	OMB No. 1545-0112 **2012** Form **1099-INT**	**Interest Income**
PAYER'S federal identification number 24-6XXXXXX	RECIPIENT'S identification number 251-XX-XXXX	3 Interest on U.S. Savings Bonds and Treas. obligations $	**Copy B For Recipient** This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.
RECIPIENT'S name Steven A. Sterling		4 Federal income tax withheld $	5 Investment expenses $
Street address (including apt. no.) 3717 Misty Meadow		6 Foreign tax paid $	7 Foreign country or U.S. possession
City, state, and ZIP code Wharton, NJ 07885		8 Tax-exempt interest $ 202.00	9 Specified private activity bond interest $
Account number (see instructions)		10 Tax-exempt bond CUSIP no. (see instructions)	

Form **1099-INT** (keep for your records) Department of the Treasury - Internal Revenue Service

The tax-exempt interest from New City Bank is for a Florida Municipal Bond fund.

PRO-P4 Sterling Scenario

☐ CORRECTED (if checked)

Form 1099-DIV — 2012 — Dividends and Distributions (OMB No. 1545-0110) — Copy B For Recipient

PAYER'S name, street address, city, state, ZIP code, and telephone no.	Bridgeport Fund P.O. Box 5250 Hebron, KY 41048
PAYER'S federal identification number	24-7XXXXXX
RECIPIENT'S identification number	251-XX-XXXX
RECIPIENT'S name	Steven A. Sterling
Street address (including apt. no.)	3717 Misty Meadow
City, state, and ZIP code	Wharton, NJ 07885
Account number (see instructions)	
1a Total ordinary dividends	$ 162.99
1b Qualified dividends	$ 106.00
2a Total capital gain distr.	$ 68.75
2b Unrecap. Sec. 1250 gain	$
2c Section 1202 gain	$
2d Collectibles (28%) gain	$
3 Nondividend distributions	$
4 Federal income tax withheld	$
5 Investment expenses	$
6 Foreign tax paid	$ 13.15
7 Foreign country or U.S. possession	
8 Cash liquidation distributions	$
9 Noncash liquidation distributions	$

This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.

Form **1099-DIV** (keep for your records) Department of the Treasury - Internal Revenue Service

☐ CORRECTED (if checked)

Form 1099-R — 2012 — Distributions From Pensions, Annuities, Retirement or Profit-Sharing Plans, IRAs, Insurance Contracts, etc. (OMB No. 1545-0119)

Copy B Report this income on your federal tax return. If this form shows federal income tax withheld in box 4, attach this copy to your return.

This information is being furnished to the Internal Revenue Service.

PAYER'S name, street address, city, state, and ZIP code	Averell Pension Fund 36964 Doane Road Louisville, KY 40202
PAYER'S federal identification number	24-8XXXXXX
RECIPIENT'S identification number	251-XX-XXXX
RECIPIENT'S name	Steven A Sterling
Street address (including apt. no.)	3717 Misty Meadow
City, state, and ZIP code	Wharton, NJ 07885
10 Amount allocable to IRR within 5 years	$
11 1st year of desig. Roth contrib.	
Account number (see instructions)	
1 Gross distribution	$ 18,625.00
2a Taxable amount	$
2b Taxable amount not determined	☒
Total distribution	☐
3 Capital gain (included in box 2a)	$
4 Federal income tax withheld	$ 1,715.00
5 Employee contributions /Designated Roth contributions or insurance premiums	$
6 Net unrealized appreciation in employer's securities	$
7 Distribution code(s)	7
IRA/ SEP/ SIMPLE	☐
8 Other	$ %
9a Your percentage of total distribution	%
9b Total employee contributions	$ 5,864.00
12 State tax withheld	$ $
13 State/Payer's state no.	
14 State distribution	$ $
15 Local tax withheld	$ $
16 Name of locality	
17 Local distribution	$ $

Form **1099-R** Department of the Treasury - Internal Revenue Service

PRO-P4 Sterling Scenario

CORRECTED (if checked) ☐

PAYER'S name, street address, city, state, and ZIP code Scripps Investment Partners 101 Main Street Cincinnati, OH 45202	1 Gross distribution $ 11,793.00 2a Taxable amount $ 11,793.00	OMB No. 1545-0119 2012 Form 1099-R	**Distributions From Pensions, Annuities, Retirement or Profit-Sharing Plans, IRAs, Insurance Contracts, etc.**
	2b Taxable amount not determined ☐	Total distribution ☐	**Copy B** **Report this income on your federal tax return. If this form shows federal income tax withheld in box 4, attach this copy to your return.**
PAYER'S federal identification number: 24-9XXXXXX RECIPIENT'S identification number: 251-XX-XXXX	3 Capital gain (included in box 2a) $	4 Federal income tax withheld $ 1,179.00	
RECIPIENT'S name Steven A Sterling	5 Employee contributions /Designated Roth contributions or insurance premiums $	6 Net unrealized appreciation in employer's securities $	
Street address (including apt. no.) 3717 Misty Meadow	7 Distribution code(s): 7 IRA/ SEP/ SIMPLE ☐	8 Other $ %	This information is being furnished to the Internal Revenue Service.
City, state, and ZIP code Wharton, NJ 07885	9a Your percentage of total distribution %	9b Total employee contributions $	
10 Amount allocable to IRR within 5 years $ 11 1st year of desig. Roth contrib.	12 State tax withheld $ $	13 State/Payer's state no. NJ/24-9XXXXXX	14 State distribution $ $
Account number (see instructions)	15 Local tax withheld $ $	16 Name of locality	17 Local distribution $ $

Form 1099-R Department of the Treasury - Internal Revenue Service

FORM SSA-1099 – SOCIAL SECURITY BENEFIT STATEMENT

2012
- PART OF YOUR SOCIAL SECURITY BENEFITS SHOWN IN BOX 5 MAY BE TAXABLE INCOME.
- SEE THE REVERSE FOR MORE INFORMATION.

Box 1. Name PAGE S. STERLING		Box 2. Beneficiary's Social Security Number 252-XX-XXXX
Box 3. Benefits Paid in 2011 $8,820.00	Box 4. Benefits Repaid to SSA in 2011 $0.00	Box 5. Net Benefits for 2011 *(Box 3 minus Box 4)* $8,820.00

DESCRIPTION OF AMOUNT IN BOX 3

Paid by check or direct deposit:

$6,625.20

Medicare Part B premiums deducted from your benefits: $1,384.80

Medicare Prescription Drug premiums (Part D) deducted from your benefits: $810.00

Total Additions: $8,820.00

Benefits for 2012 : $8,820.00

DESCRIPTION OF AMOUNT IN BOX 4

Box 6. Voluntary Federal Income Tax Withholding

Box 7. Address

PAGE S. STERLING
3717 MISTY MEADOW
Wharton, NJ 07885

Box 8. Claim Number *(Use this number if you need to contact SSA.)*

Form SSA-1099-SM (1-2011) DO NOT RETURN THIS FORM TO SSA OR IRS

PRO-P4 Sterling Scenario

FORM SSA-1099 – SOCIAL SECURITY BENEFIT STATEMENT

2011
- PART OF YOUR SOCIAL SECURITY BENEFITS SHOWN IN BOX 5 MAY BE TAXABLE INCOME.
- SEE THE REVERSE FOR MORE INFORMATION.

Box 1. Name	Box 2. Beneficiary's Social Security Number
STEVEN A. STERLING	251-XX-XXXX

Box 3. Benefits Paid in 2011	Box 4. Benefits Repaid to SSA in 2011	Box 5. Net Benefits for 2011 *(Box 3 minus Box 4)*
$15,972.00	$0.00	$15,972.00

DESCRIPTION OF AMOUNT IN BOX 3

Paid by check or direct deposit:

$13,227.20

Medicare Part B premiums deducted from your benefits: $1,384.80

Medicare Prescription Drug premiums (Part D) deducted from your benefits: $810.00

Total Additions:$15,972.00

Benefits for 2012 :$15,972.00

[illegible]

DESCRIPTION OF AMOUNT IN BOX 4

Box 6. Voluntary Federal Income Tax Withholding

$550.00

Box 7. Address

STEVEN A STERLING
3717 MISTY MEADOW
Wharton, NJ 07885

Box 8. Claim Number *(Use this number if you need to contact SSA.)*

Form **SSA-1099-SM** (1-2011)

DO NOT RETURN THIS FORM TO SSA OR IRS