

IRS e-file Signature Authorization

Department of the Treasury
Internal Revenue Service

▶ Do not send to the IRS. This is not a tax return.

▶ Keep this form for your records.

▶ Information about Form 8879 and its instructions is at www.irs.gov/form8879.

2013

Submission Identification
Number (SID)

▶ 00200752000043

Taxpayer's name
PAULA T ROBERTS

Social security number
741-02-0752

Spouse's name

Spouse's social security number

Part I Tax Return Information-Tax Year Ending December 31, 2013 (Whole Dollars Only)

1	Adjusted gross income (Form 1040, line 38; Form 1040A, line 22; Form 1040EZ, line 4)	1	54,510.
2	Total tax (Form 1040, line 61; Form 1040A, line 35; Form 1040EZ, line 10)	2	3,754.
3	Federal income tax withheld (Form 1040, line 62; Form 1040A, line 36; Form 1040EZ, line 7)	3	2,750.
4	Refund (Form 1040, line 74a; Form 1040A, line 43a; Form 1040EZ, line 11a; Form 1040-SS, Part I, line 12a)	4	
5	Amount you owe (Form 1040, line 76; Form 1040A, line 45; Form 1040EZ, line 12)	5	1,004.

Part II Taxpayer Declaration and Signature Authorization (Be sure you get and keep a copy of your return)

Under penalties of perjury, I declare that I have examined a copy of my electronic individual income tax return and accompanying schedules and statements for the tax year ending December 31, 2013, and to the best of my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above are the amounts from my electronic income tax return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send my return to the IRS and to receive from the IRS (a) an acknowledgment of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution to debit the entry to this account. This authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate the authorization. To revoke (cancel) a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation requests must be received no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I further acknowledge that the personal identification number (PIN) below is my signature for my electronic income tax return and, if applicable my Electronic Funds Withdrawal Consent.

Taxpayer's PIN: check one box only

I authorize KINNELON PUBLIC LIBRARY to enter or generate my PIN 12345
ERO firm name Enter five numbers, but do not enter all zeros
as my signature on my tax year 2013 electronically filed income tax return.

I will enter my PIN as my signature on my tax year 2013 electronically filed income tax return. Check this box **only** if you are entering your own PIN **and** your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Your signature ▶ _____ Date ▶ 01/24/2014

Spouse's PIN: check one box only

I authorize _____ to enter or generate my PIN
ERO firm name Enter five numbers, but do not enter all zeros
as my signature on my tax year 2013 electronically filed income tax return.

I will enter my PIN as my signature on my tax year 2013 electronically filed income tax return. Check this box **only** if you are entering your own PIN **and** your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Spouse's signature ▶ _____ Date ▶ _____

Practitioner PIN Method Returns Only-continue below

Part III Certification and Authentication-Practitioner PIN Method Only

ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN. 20075298765
Do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature for the tax year 2013 electronically filed income tax return for the taxpayer(s) indicated above. I confirm that I am submitting this return in accordance with the requirements of the Practitioner PIN method and **Publication 1345**, Handbook for Authorized IRS e-file Providers of Individual Income Tax Returns.

ERO's signature ▶ S24051405 KINNELON PUBLIC LIBRAR Date ▶ 01/24/2014

ERO Must Retain This Form - See Instructions
Do Not Submit This Form to the IRS Unless Requested To Do So

What Is Form 1040-V

It is a statement you send with your check or money order for any balance due on the "Amount you owe" line of your 2013 Form 1040, Form 1040A, or Form 1040EZ.

TIP You can also pay your taxes online or by phone either by a direct transfer from your bank account or by credit or debit card. Paying online or by phone is convenient and secure and helps make sure we get your payments on time. For more information, go to www.irs.gov/e-pay.

How To Fill In Form 1040-V

Line 1. Enter your social security number (SSN). If you are filing a joint return, enter the SSN shown first on your return.

Line 2. If you are filing a joint return, enter the SSN shown second on your return.

Line 3. Enter the amount you are paying by check or money order.

Line 4. Enter your name(s) and address exactly as shown on your return. Please print clearly.

How To Prepare Your Payment

- Make your check or money order payable to **"United States Treasury."** Do not send cash.
- Make sure your name and address appear on your check or money order.
- Enter your daytime phone number and your SSN on your check or money order. If you are filing a joint return, enter the SSN shown first on your return. Also enter "2013 Form 1040," "2013 Form 1040A," or "2013 Form 1040EZ," whichever is appropriate.
- To help us process your payment, enter the amount on the right side of your check like this: \$ XXX.XX. Do not use dashes or lines (for example, do not enter "\$ XXX-" or "\$ XXX xx/100").

How To Send In Your 2013 Tax Return, Payment, and Form 1040-V

- Detach Form 1040-V along the dotted line.
- Do not staple or otherwise attach your payment or Form 1040-V to your return or to each other. Instead, just put them loose in the envelope.
- Mail your 2013 tax return, payment, and Form 1040-V to the address shown on page 2 that applies to you.

BCA

Form **1040-V** (2013)

▼ Detach Here and Mail With Your Payment and Return ▼

Department of the Treasury
Internal Revenue Service

2013

Form 1040-V Payment Voucher

- Use this voucher when making a payment with Form 1040
 - Do not staple this voucher or your payment to Form 1040
 - Make your check or money order payable to the "United States Treasury"
 - Write your Social Security Number (SSN) on your check or money order
- 741-02-0752

Amount you are paying by check or money order	Dollars	Cents
		1,004.

1045

PAULA T ROBERTS
123 MAPLE
PLUCKEMIN NJ 07978-

P0 Box 931000
Louisville KY 40293-1000

741020752 ZK ROBE 30 0 201312 610

For the year Jan. 1-Dec. 31, 2013, or other tax year beginning _____, 2013, ending _____, 20 _____ See separate instructions.

Your first name and initial **PAULA T** Last name **ROBERTS** Your social security number **741-02-0752**

If a joint return, spouse's first name and initial _____ Last name _____ Spouse's social security number _____

Home address (number and street). If you have a P.O. box, see instructions. **123 MAPLE** Apt. no. _____ **▲** Make sure the SSN(s) above and on line 6c are correct.

City, town or post office, state, and ZIP code. If you have a foreign address, also complete spaces below (see instructions). **PLUCKEMIN NJ 07978-** Presidential Election Campaign

Foreign country name _____ Foreign province/county _____ Foreign postal code _____ Check here if you, or your spouse if filing jointly, want \$3 to go to this fund. Checking a box below will not change your tax or refund. You Spouse

Filing Status
 1 Single
 2 Married filing jointly (even if only one had income)
 3 Married filing separately. Enter spouse's SSN above and full name here. **4** Head of household (with qualifying person). (See instructions.) If the qualifying person is a child but not your dependent, enter this child's name here. **5** Qualifying widow(er) with dependent child

Exemptions
 6a Yourself. If someone can claim you as a dependent, do not check box 6a
 b Spouse
 c Dependents:
 (1) First name Last name (2) Dependent's social security number (3) Dependent's relationship to you (4) If child under age 17 qualifying for child tax credit (see instr.)
 LISA ROBERTS 745-02-0752 DAUGHTER
 MONICA ROBERTS 744-02-0752 DAUGHTER
 JAMES ROBERTS 743-02-0752 SON
 d Total number of exemptions claimed **4**

Income	7	Wages, salaries, tips, etc. Attach Form(s) W-2	7	30,000.	
	8a	Taxable interest. Attach Schedule B if required	8a	200.	
	b	Tax-exempt interest. Do not include on line 8a	8b	200.	
	Attach Forms(s) W-2 here. Also attach Forms W-2G and 1099-R if tax was withheld.	9a	Ordinary dividends. Attach Schedule B if required	9a	600.
		b	Qualified dividends	9b	122.
	10	Taxable refunds, credits, or offsets of state and local income taxes	10		
	11	Alimony received	11		
	12	Business income or (loss). Attach Schedule C or C-EZ	12	400.	
	13	Capital gain or (loss). Attach Schedule D if required. If not required, check here <input type="checkbox"/>	13	367.	
	14	Other gains or (losses). Attach Form 4797	14		
	If you did not get a W-2, see instructions.	15a	IRA distributions 2,000.	15b	Taxable amount
		16a	Pensions and annuities 23,000.	16b	Taxable amount 22,404.
	17	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E	17		
	18	Farm income or (loss). Attach Schedule F	18		
19	Unemployment compensation	19			
20a	Social security benefits	20b	Taxable amount		
21	Other income. List type and amount Recovery of itemized	21	550.		
22	Combine the amounts in the far right col for lines 7 through 21. This is your total income	22	54,521.		

Adjusted Gross Income	23	Educator expenses	23	
	24	Certain business expenses of reservists, performing artists, and fee-basis gov. officials. Attach Form 2106 or 2106-EZ	24	
	25	Health savings account deduction. Attach Form 8889	25	
	26	Moving expenses. Attach Form 3903	26	
	27	Deductible part of self-employment tax. Attach Schedule SE	27	
	28	Self-employed SEP, SIMPLE, and qualified plans	28	
	29	Self-employed health insurance deduction	29	
	30	Penalty on early withdrawal of savings	30	11.
	31a	Alimony paid b Recipient's SSN	31a	
	32	IRA deduction	32	
	33	Student loan interest deduction	33	
	34	Tuition and fees. Attach Form 8917	34	
	35	Domestic production activities deduction. Attach Form 8903	35	
	36	Add lines 23 through 35	36	11.
37	Subtract line 36 from line 22. This is your adjusted gross income	37	54,510.	

Tax and Credits	38	Amount from line 37 (adjusted gross income)	38	54,510.
	39a	Check <input type="checkbox"/> You were born before Jan. 2, 1949, <input type="checkbox"/> Blind. <input type="checkbox"/> Total boxes checked ▶ 39a <input type="checkbox"/> if: <input type="checkbox"/> Spouse was born before Jan. 2, 1949, <input type="checkbox"/> Blind. <input type="checkbox"/> ▶ 39b <input type="checkbox"/>		
Standard Deduction for- • People who check any box on line 39a or 39b or who can be claimed as a dependent, see instructions. • All others: Single or Married filing separately, \$6,100 Married filing jointly or Qualifying widow(er), \$12,200 Head of household, \$8,950	40	Itemized deductions (from Schedule A) or your standard deduction (see left margin)	40	9,147.
	41	Subtract line 40 from line 38	41	45,363.
	42	Exemptions. If line 38 is \$150,000 or less, multiply \$3,900 by the number on line 6d. Otherwise, see instructions	42	15,600.
	43	Taxable income. Subtract line 42 from line 41. If line 42 is more than line 41, enter -0-	43	29,763.
	44	Tax (see instructions). Check if any from: a <input type="checkbox"/> Form(s) 8814 b <input type="checkbox"/> Form 4972 c <input type="checkbox"/>	44	3,754.
	45	Alternative minimum tax (see instructions). Attach Form 6251	45	
	46	Add lines 44 and 45	46	3,754.
	47	Foreign tax credit. Attach Form 1116 if required	47	
	48	Credit for child and dependent care expenses. Attach Form 2441	48	
	49	Education credits from Form 8863, line 19	49	
	50	Retirement savings contributions credit. Attach Form 8880	50	
	51	Child tax credit. Attach Schedule 8812, if required	51	
	52	Residential energy credits. Attach Form 5695	52	
	53	Other credits from Form: a <input type="checkbox"/> 3800 b <input type="checkbox"/> 8801 c <input type="checkbox"/>	53	
	54	Add lines 47 through 53. These are your total credits	54	
55	Subtract line 54 from line 46. If line 54 is more than line 46, enter -0-	55	3,754.	
Other Taxes	56	Self-employment tax. Attach Schedule SE	56	
	57	Unreported social security and Medicare tax from Form: a <input type="checkbox"/> 4137 b <input type="checkbox"/> 8919	57	
	58	Additional tax on IRAs, other qualified retirement plans, etc. Attach Form 5329 if required	58	
	59a	Household employment taxes from Schedule H	59a	
	59b	First-time homebuyer credit repayment. Attach Form 5405 if required	59b	
	60	Taxes from: a <input type="checkbox"/> Form 8959 b <input type="checkbox"/> Form 8960 c <input type="checkbox"/> Instructions; enter code(s)	60	
61	Add lines 55 through 60. This is your total tax	61	3,754.	
Payments	62	Federal income tax withheld from Forms W-2 and 1099	62	2,750.
	63	2013 estimated tax payments and amount applied from 2012 return	63	
	64a	Earned income credit (EIC) NO	64a	
	64b	Nontaxable combat pay election 64b		
	65	Additional child tax credit. Attach Form 8812	65	
	66	American opportunity credit from Form 8863, line 8	66	
	67	Reserved	67	
	68	Amount paid with request for extension to file	68	
	69	Excess social security and tier 1 RRTA tax withheld	69	
	70	Credit for federal tax on fuels. Attach Form 4136	70	
71	Credits from Form: a <input type="checkbox"/> 2439 b <input type="checkbox"/> Re-served c <input type="checkbox"/> 8885 d <input type="checkbox"/>	71		
72	Add lines 62, 63, 64a, and 65 through 71. These are your total payments	72	2,750.	
Refund	73	If line 72 is more than line 61, subtract line 61 from line 72. This is the amount you overpaid	73	
	74a	Amount of line 73 you want refunded to you . If Form 8888 is attached, check here <input type="checkbox"/>	74a	
	b	Routing number <input type="checkbox"/> c Type: <input type="checkbox"/> Checking <input type="checkbox"/> Savings		
Direct deposit? <input type="checkbox"/> See instructions <input type="checkbox"/>	d	Account number		
75	Amount of line 73 you want applied to your 2014 estimated tax	75		
Amount You Owe	76	Amount you owe. Subtract line 72 from line 61. For details on how to pay, see instructions	76	1,004.
	77	Estimated tax penalty (see instructions)	77	

Third Party Designee Do you want to allow another person to discuss this return with the IRS (see instructions)? Yes. Complete below. No

Designee's name _____ Phone no. _____ Personal identification number (PIN) _____

Sign Here Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Joint return? <input type="checkbox"/> See instructions <input type="checkbox"/> Keep a copy for your records.	Your signature	Date	Your occupation GLAZING CONTRACTOR	Daytime phone number 973-555-1111
	Spouse's signature. If a joint return, both must sign.	Date	Spouse's occupation	If the IRS sent you an Identity Protection PIN, enter it here (see inst.)

Paid Preparer Use Only

Print/Type preparer's name AARP FOUNDATION TAX-AIDE	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN S24051405
Firm's name ▶ KINNELON PUBLIC LIBRARY	Firm's EIN ▶		Phone no.	
Firm's address ▶				

Name: PAULA T ROBERTS

SSN: 741-02-0752

	TSJ	Amount
1 Gambling winnings from Form W-2G		
2 Form 1099-MISC, lines 3, 7, and 8		
3 Taxable distributions from education savings accounts (ESAs) and QTPs		
4 Recovery of itemized deductions		390.
5 Foreign income exclusion from Form 2555, line 45		
6 Foreign income exclusion from Form 2555-EZ, line 18		
7 Income addition from Form 6478, line 2		
8 Income addition from Form 8814, line 12		
9 Taxable Archer MSA distributions from Form 8853, line 8		
10 Taxable Medicare Advantage MSA distributions from Form 8853, line 12		
11 Taxable long-term care insurance contract payments from Form 8853, line 26		
12 Taxable HSA distributions from Form 8889, line 16		
13 Income for failure to maintain HDHP coverage from Form 8889, line 20		
14 Jury duty pay	<input checked="" type="checkbox"/>	10.
15 NOL carried forward - enter as a negative amount	<input type="checkbox"/>	
16 Describe - <u>Homestead Benefit</u>	<input checked="" type="checkbox"/>	150.
17 Describe -	<input type="checkbox"/>	
18 Describe -	<input type="checkbox"/>	
19 Describe -	<input type="checkbox"/>	
20 Describe -	<input type="checkbox"/>	
21 Describe -	<input type="checkbox"/>	
22 Describe -	<input type="checkbox"/>	
23 Describe -	<input type="checkbox"/>	
24 Describe -	<input type="checkbox"/>	
25 Describe -	<input type="checkbox"/>	
26 Describe -	<input type="checkbox"/>	
27 Describe -	<input type="checkbox"/>	
28 Describe -	<input type="checkbox"/>	
29 Describe -	<input type="checkbox"/>	
30 Describe -	<input type="checkbox"/>	
31 Total other income		550.

Name(s) shown on return. (Name and SSN or taxpayer identification no. not required if shown on other side.)

Social security number or taxpayer identification number

PAULA T ROBERTS

741-02-0752

Most brokers issue their own substitute statement instead of using Form 1099-B. They also may provide basis information (usually your cost) to you on the statement even if it is not reported to the IRS. Before you check Box D, E, or F below, determine whether you received any statement(s) and, if so, the transactions for which basis was reported to the IRS. Brokers are required to report basis to the IRS for most stock you bought in 2011 or later.

Part II Long-Term. Transactions involving capital assets you held one year or less are long term. For short-term transactions, see page 1.

Note: You may aggregate all long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the total directly on Schedule D, line 8a; you are not required to report these transactions on Form 8949 (see instructions).

You must check Box D, E, or F below. Check only one box. If more than one box applies for your long-term transactions, complete a separate Form 8949, page 1, for each applicable box. If you have more long-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

- (D) Long-term transactions reported on Form(s) 1099-B showing basis **was** reported to the IRS (see **Note** above)
- (E) Long-term transactions reported on Form(s) 1099-B showing basis was **not** reported to the IRS
- (F) Long-term transactions not reported to you on Form 1099-B

1	(a) Description of property (Example: 100 sh. XYZ Co.)	(b) Date acquired (Mo., day, yr.)	(c) Date sold or disposed (Mo., day, yr.)	(d) Proceeds (sales price) (see instructions)	(e) Cost or other basis See the Note below and see <i>Column (e)</i> in the separate instructions	Adjustment, if any, to gain or loss. If you enter an amount in column (g), enter a code in column (f). See the separate instructions.		(h) Gain or (loss). Subtract column (e) from column (d) and combine the result with column (g)
						(f) Code(s) from instr.	(g) Amount of adjustment	
2	AAPL	12/30/2002	12/30/2013	1000.	25.			975.
17	BBRY	12/30/2004	01/02/2013	200.	1415.	W	607.	-608.
2 Totals.	Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts). Enter each total here and include on your Schedule D, line 8b (if Box D above is checked), line 9 (if Box E above is checked), or line 10 (if Box F above is checked) ▶			1200.	1440.		607.	367.

Note. If you checked Box D above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See *Column (g)* in the separate instructions for how to figure the amount of the adjustment.

US Schedule A

Itemized Deduction Detail Worksheet

2013

Name: PAULA T ROBERTS

SSN: 741-02-0752

Medical Expenses		Medical miles:	42	Deduction:	10.
Insurance premiums paid (not pre-tax)		Medicare from 1040 worksheet			
Taxpayer		Remainder from worksheets			
Spouse		Taxpayer			
Qualified long term care contracts		Spouse			
Taxpayer		Self-employed health insurance			
Spouse		Taxpayer			
Other medical expenses		Spouse			
Unreimbursed Medical		30.			
		Amount from additional worksheets			
		Total		40.	

Cash Contributions		Other Charitable miles:	X .14 =
50% Limit Organizations			
		From Schedules K-1	
		Amount from additional worksheets	
		Total	

30% Limit Organizations		Charitable miles:	X .14 =
		Schedules K-1	
		Amount from additional worksheets	
		Total	

Other Than Cash Contributions		50% Limit Organizations	
		From Forms 8283	
		Amount from additional worksheets	
From Schedules K-1		Total	

30% Limit Capital gain property donated to 50% limit organizations.		From Forms 8283	
		Total	

30% Limit Not capital gain property donated to 30% limit organizations.		From Forms 8283	
		Total	

20% Limit Organization Capital gain property donated to 30% limit organizations.		From Forms 8283	
		Total	

Contribution Carryovers				To 2014 tax year				
	From years 2006 through 2012		Capital gain property		Cash and other property		Capital gain property	
	Cash and other property 50%	30%	30%	20%	50%	30%	30%	20%
2008								
2009								
2010								
2011								
2012								
2013								

Contributions allowed this year		
50% of adjusted gross income	27,255.	
This year's 50% organization cash contributions allowed		
30% of adjusted gross income	16,353.	
This year's capital gain contributions to 50% organizations limited to 30%		
50% cash carryover allowed		
50% capital gain carryover limited to 30%		
This year's 30% organization cash and other property contributions allowed		
30% organizations cash and other property carryover		
20% of adjusted gross income	10,902.	
This year's capital gain contributions to 30% organizations limited to 20%		
30% capital gain carryover limited to 20% AGI		
Total contributions allowed this year		

US Schedule D

Capital Gain or Loss Transactions Worksheet

2013

* Check if 28% rate gain or (loss)

(a) Description of property	1 0 9 9	T S J	*	(b) Date acquired	(c) Date sold	(d) Sales price	(e) Cost or other basis	(f) Code	(g) Adjustments to Gain or Loss	(h) Gain or loss	S / L
2 AAPL	B	T		12/30/2002	12/30/2013	1,000.	25.			975.	L
17 BBRY	B	T		12/30/2004	01/02/2013	200. 1,200.	1,415. 1,440.	W	607. 607.	(608.) 367.	L L

US Estimated Tax Payments Made for the Current Tax Year 2013

Name: PAULA T ROBERTS

SSN: 741-02-0752

Federal Estimated Tax Payments

See note below	Date of payment	Amount of payment	Towards 04/15/2013 payment	Towards 06/15/2013 payment	Towards 09/15/2013 payment	Towards 01/15/2014 payment
From last year						
D 04/15 1	04/15/2013					
U 06/15 2	06/15/2013					
E 09/15 3	09/15/2013					
01/15 4	01/15/2014					
* Pay date	04/15/2014					
Totals						

* Fill in the pay date on Form 2210, page 1.

State Estimated Tax Payments

**The day listed in the date of payment section is the due date for most state estimated tax payments. If your state has different due dates, disregard the date suggested. If payment 1 was paid on or before the date due for payment 1, enter it in payment 1, etc.

* Check the * column if payment 4 was paid before 01/01/2013.

Taxpayer, Joint, or Combined State Return

** Date of Payment

State	Credit from last year	04/15/2013 Amount 1	06/15/2013 Amount 2	09/15/2013 Amount 3	01/15/2014 Amount 4	*	Total
NJ							
NJ	State and/or local balance due from previous years' returns paid in 2013. Include amounts paid with a 2012 extension paid in 2013						55.
	State and/or local balance due from previous years' returns paid in 2013. Include amounts paid with a 2012 extension paid in 2013						
NJ	Last state estimate payment for 2012 paid in 2013 (due January 15, 2013).....						
	Last state estimate payment for 2012 paid in 2013 (due January 15, 2013).....						

Spouse Filing Married Separate State Tax Return or Second Full Year Resident State

** Date of Payment

State	Credit from last year	04/15/2013 Amount 1	06/15/2013 Amount 2	09/15/2013 Amount 3	01/15/2014 Amount 4	*	Total

US Schedule A

Sales Tax Worksheet

2013

Name: PAULA T ROBERTS

SSN: 741-02-0752

1	Federal AGI.....		54,510.	
2	Nontaxable income listed on tax return			
a	Nontaxable interest	200.		
b	Social security			
c	Combat pay			
d	Income on Forms 4970 and 4972			
e	Nontaxable part of IRA, pension, or annuity distributions, not including rollovers.....	2,596.	2,796.	
3	Other nontaxable income			
a			
b			
c			
d			
e			
4	Income for sales tax chart		57,306.	
1	Enter the taxpayer's state of residency for 2013			NJ
	If the taxpayer was a part-year resident, enter the dates resided in this state _____ to _____			
	State sales tax from the applicable table			767.
2	Did you live Alaska, Arizona, Arkansas, California (Los Angeles County only), Colorado, Georgia, Illinois, Louisiana, Missouri, New York State, North Carolina, South Carolina, Tennessee, Utah or Virginia in 2013? <input checked="" type="checkbox"/> No. Line 2 should be -0-. <input type="checkbox"/> Yes. Enter the letter (A - D) for the optional local sales tax table you want to use			
	Local sales tax from the applicable table			
3	Did your locality impose a local general sales tax in 2013? Residents of California and Nevada, see the Schedule A instructions. <input checked="" type="checkbox"/> No. Go to line 7. <input type="checkbox"/> Yes. Enter the local general sales tax rate. If the rate is 2.5%, enter 2.5			
4	Did you enter -0- on line 2 above? <input type="checkbox"/> No. Skip to line 6. <input type="checkbox"/> Yes. Enter the state general sales tax rate from the table headed by the state in the Schedule A instructions. Enter 6.5% as 6.5			
5	Divide line 3 by line 4			
6	Did you enter -0- on line 2 above? <input type="checkbox"/> No. Multiply line 2 by line 3. <input type="checkbox"/> Yes. Multiply line 1 by line 5			
7	Total of lines 1 and 6 - prorated for part-year residents			767.
8	General sales tax paid on specified items. Motor vehicles - If the tax rate is higher than the general sales tax rate, only include the amount of tax at the general sales tax rate. Aircraft, boats, homes, including mobile and prefabricated, or home building materials - Only deductible if the sales tax charged is at the federal sales tax rate			
9	Total sales tax using the sales tax chart			767.
10	Sales tax using actual receipts			
11	Sales tax deduction for Schedule A, line 5			767.

**SCHEDULE A
(Form 1040)**

Department of the Treasury
Internal Revenue Service (99)

Itemized Deductions

▶ Information about Schedule A and its separate instructions is at www.irs.gov/form1040.
▶ Attach to Form 1040.

OMB No. 1545-0074

2013
Attachment
Sequence No. **07**

Name(s) shown on Form 1040 PAULA T ROBERTS		Your social security number 741-02-0752		
Medical and Dental Expenses	Caution. Do not include expenses reimbursed or paid by others.			
	1 Medical and dental expenses (see instructions)	1	40.	
	2 Enter amount from Form 1040, line 38 2 <u>54,510.</u>			
	3 Multiply line 2 by 10% (.10). But if either you or your spouse was born before Jan. 2, 1949, multiply line 2 by 7.5% (.075) instead	3	5,451.	
4 Subtract line 3 from line 1. If line 3 is more than line 1, enter -0-			4	
Taxes You Paid	5 State and local (check only one box):			
	a <input type="checkbox"/> Income taxes, or	5	767.	
	b <input checked="" type="checkbox"/> General sales taxes			
	6 Real estate taxes (see instructions)	6	7,300.	
	7 Personal property taxes	7		
	8 Other taxes. List type and amount ▶ _____	8		
	9 Add lines 5 through 8	9	8,067.	
	Interest You Paid	10 Home mortgage interest and points reported to you on Form 1098	10	
		11 Home mortgage interest not reported to you on Form 1098. If paid to the person from whom you bought the home, see inst. and show that person's name, identifying no., and address ▶ <u>123 Catalpa Pluckemin NJ 07978</u>		
Note. Your mortgage interest deduction may be limited (see instructions). <u>Harmon Killebrew 745020752</u>		11	1,080.	
12 Points not reported to you on Form 1098. See instructions for special rules		12		
13 Mortgage insurance premiums (see instructions)		13		
14 Investment interest. Attach Form 4952 if required. (See instructions.)		14		
15 Add lines 10 through 14	15	1,080.		
Gifts to Charity	16 Gifts by cash or check. If you made any gift of \$250 or more, see instructions	16		
	17 Other than by cash or check. If any gift of \$250 or more, see instructions. You must attach Form 8283 if over \$500	17		
	18 Carryover from prior year	18		
	19 Add lines 16 through 18	19		
Casualty and Theft Losses	20 Casualty or theft loss(es). Attach Form 4684. (See instructions.)	20		
Job Expenses and Certain Miscellaneous Deductions	21 Unreimbursed employee expenses - job travel, union dues, job education, etc. Attach Form 2106 or 2106-EZ if required. (See instructions.) ▶ _____	21		
	22 Tax preparation fees	22		
	23 Other expenses - investment, safe deposit box, etc. List type and amount ▶ _____	23		
	24 Add lines 21 through 23	24		
	25 Enter amount from Form 1040, line 38 25 <u>_____</u>			
	26 Multiply line 25 by 2% (.02)	26		
	27 Subtract line 26 from line 24. If line 26 is more than line 24, enter -0-	27		
Other Miscellaneous Deductions	28 Other - from list in the inst. List type and amount ▶ _____	28		
Total Itemized Deductions	29 Is Form 1040, line 38, over \$150,000? <input checked="" type="checkbox"/> No. Your deduction is not limited. Add the amounts in the far right column for lines 4 through 28. Also, enter this amount on Form 1040, line 40. <input type="checkbox"/> Yes. Your deduction may be limited. See the Itemized Deductions Worksheet in the instructions to figure the amount to enter.	29	9,147.	
	30 If you elect to itemize deductions even though they are less than your standard deduction, check here ▶ <input type="checkbox"/>			

**Schedule C
(Form 1040)**

Department of the Treasury
Internal Revenue Service (99)

Profit or Loss From Business
(Sole Proprietorship)

► For information on Schedule C and its instructions, go to www.irs.gov/schedulec.
► Attach to Form 1040, 1040NR, or 1041; partnerships generally must file Form 1065.

OMB No. 1545-0074

2013

Attachment
Sequence No. **09**

Name of proprietor PAULA T ROBERTS		Social security number (SSN) 741-02-0752
A Principal business or profession, including product or service (see instructions) GLAZING CONTRACTOR		B Enter code from instructions ► 238150
C Business name. If no separate business name, leave blank.		D Employer ID no. (EIN), (see instr.)
E Business address (including suite or room no.) ► _____ City, town or post office, state, and ZIP code		
F Accounting method: (1) <input checked="" type="checkbox"/> Cash (2) <input type="checkbox"/> Accrual (3) <input type="checkbox"/> Other (specify) ► _____		
G Did you "materially participate" in the operation of this business during 2013? If "No," see instructions for limit on losses.		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
H If you started or acquired this business during 2013, check here		
I Did you make any payments in 2013 that would require you to file Form(s) 1099? (see instructions).		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
J If "Yes," did you or will you file required Forms 1099?		<input type="checkbox"/> Yes <input type="checkbox"/> No

Part I Income

1 Gross receipts or sales. See instructions for line 1 and check the box if this income was reported to you on Form W-2 and the "Statutory employee" box on that form was checked	1	400.
2 Returns and allowances (see instructions)	2	
3 Subtract line 2 from line 1	3	400.
4 Cost of goods sold (from line 42)	4	
5 Gross profit. Subtract line 4 from line 3	5	400.
6 Other income, including federal and state gasoline or fuel tax credit or refund (see instructions).	6	
7 Gross profit. Add lines 5 and 6	7	400.

Part II Expenses Enter expenses for business use of your home only on line 30.

8 Advertising	8		18	18 Office expense (see instructions)	18	
9 Car and truck expenses (see instructions)	9		19	19 Pension and profit-sharing plans	19	
10 Commissions and fees	10		20a	20 Rent or lease (see instructions):	20a	
11 Contract labor (see instructions)	11		20b	a Vehicles, machinery, and equipment	20b	
12 Depletion	12		21	b Other business property	21	
13 Depreciation and section 179 expense deduction (not included in Part III) (see instructions)	13		22	21 Repairs and maintenance	22	
14 Employee benefit programs (other than on line 19)	14		23	22 Supplies (not included in Part III)	23	
15 Insurance (other than health)	15		24a	23 Taxes and licenses	24a	
16 Interest:			24b	24 Travel, meals, and entertainment:	24b	
a Mortgage (paid to banks, etc.)	16a		25	a Travel	25	
b Other	16b		26	b Deductible meals and entertainment (see instructions)	26	
17 Legal and professional services	17		27a	25 Utilities	27a	
			27b	26 Wages (less employment credits)	27b	
				27a Other expenses (from line 48)		
				b Reserved for future use		
28 Total expenses before expenses for business use of home. Add lines 8 through 27a			28		28	
29 Tentative profit or (loss). Subtract line 28 from line 7			29		29	400.
30 Expenses for business use of your home. Do not report these expenses elsewhere. Attach Form 8829 unless using the simplified method (see instructions). Simplified method filers only: enter the total square footage of: (a) your home: _____ and (b) the part of your home used for business: _____. Use the Simplified Method Worksheet in the instructions to figure the amount to enter on line 30			30		30	
31 Net profit or (loss). Subtract line 30 from line 29. • If a profit, enter on both Form 1040, line 12 (or Form 1040NR, line 13) and on Schedule SE, line 2 . (If you checked the box on line 1, see instructions). Estates and trusts, enter on Form 1041, line 3 . • If a loss, you must go to line 32.			31		31	400.
32 If you have a loss, check the box that describes your investment in this activity (see instructions). • If you checked 32a, enter the loss on both Form 1040, line 12 (or Form 1040NR, line 13) and on Schedule SE, line 2 . (If you checked the box on line 1, see the instructions). Estates and trusts, enter on Form 1041, line 3 . • If you checked 32b, you must attach Form 6198 . Your loss may be limited.				32a <input type="checkbox"/> All investment is at risk. 32b <input type="checkbox"/> Some investment is not at risk.		

For Paperwork Reduction Act Notice, see your tax return instructions.

Schedule C (Form 1040) 2013

**SCHEDULE D
(Form 1040)**

Capital Gains and Losses

OMB No. 1545-0074

▶ Attach to Form 1040 or Form 1040NR.

2013

Department of the Treasury
Internal Revenue Service (99)

▶ Information about Schedule D and its separate instructions is at www.irs.gov/form1040.

Attachment
Sequence No. **12**

▶ Use Form 8949 to list your transactions for lines 1b, 2, 3, 8b, 9, and 10.

Name(s) shown on return
PAULA T ROBERTS

Your social security number
741-02-0752

Part I Short-Term Capital Gains and Losses - Assets Held One Year or Less

See instructions for how to figure the amounts to enter on the lines below. This form may be easier to complete if you round off cents to whole dollars.	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to gain or loss from Form(s) 8949, Part I, line 2, column (g)	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
1a Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b				
1b Totals for all transactions reported on Form(s) 8949 with Box A checked				
2 Totals for all transactions reported on Form(s) 8949 with Box B checked				
3 Totals for all transactions reported on Form(s) 8949 with Box C checked				
4 Short-term gain from Form 6252 and short-term gain or (loss) from Forms 4684, 6781, and 8824				4
5 Net short-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1				5
6 Short-term capital loss carryover. Enter the amount, if any, from line 8 of your Capital Loss Carryover Worksheet in the instructions				6 ()
7 Net short-term capital gain or (loss). Combine lines 1a through 6 in column (h). If you have any long-term capital gains or losses, go to Part II below. Otherwise, go to Part III on the back				7

Part II Long-Term Capital Gains and Losses - Assets Held More Than One Year

See instructions for how to figure the amounts to enter on the lines below. This form may be easier to complete if you round off cents to whole dollars.	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to gain or loss from Form(s) 8949, Part II, line 2, column (g)	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
8a Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b				
8b Totals for all transactions reported on Form(s) 8949 with Box D checked				
9 Totals for all transactions reported on Form(s) 8949 with Box E checked	1200.	1440.	607.	367.
10 Totals for all transactions reported on Form(s) 8949 with Box F checked				
11 Gain from Form 4797, Part I; long-term gain from Forms 2439 and 6252; and long-term gain or (loss) from Forms 4684, 6781, and 8824				11
12 Net long-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1				12
13 Capital gain distributions. See the instructions				13
14 Long-term capital loss carryover. Enter the amount, if any, from line 13 of your Capital Loss Carryover Worksheet in the instructions				14 ()
15 Net long-term capital gain or (loss). Combine lines 8a through 14 in column (h). Then go to Part III on the back				15 367.

For Paperwork Reduction Act Notice, see your tax return instructions.

Schedule D (Form 1040) 2013

Part III Summary

16 Combine lines 7 and 15 and enter the result	16	367.
<ul style="list-style-type: none"> • If line 16 is a gain, enter the amount from line 16 on Form 1040, line 13, or Form 1040NR, line 14. Then go to line 17 below. • If line 16 is a loss, skip lines 17 through 20 below. Then go to line 21. Also be sure to complete line 22. • If line 16 is zero, skip lines 17 through 21 below and enter -0- on Form 1040, line 13, or Form 1040NR, line 14. Then go to line 22. 		
17 Are lines 15 and 16 both gains?		
<input checked="" type="checkbox"/> Yes. Go to line 18. <input type="checkbox"/> No. Skip lines 18 through 21, and go to line 22.		
18 Enter the amount, if any, from line 7 of the 28% Rate Gain Worksheet in the instructions ▶	18	
19 Enter the amount, if any, from line 18 of the Unrecaptured Section 1250 Gain Worksheet in the instructions ▶	19	
20 Are lines 18 and 19 both zero or blank?		
<input checked="" type="checkbox"/> Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 44 (or in the instructions for Form 1040NR, line 42). Do not complete lines 21 and 22 below. <input type="checkbox"/> No. Complete the Schedule D Tax Worksheet in the instructions. Do not complete lines 21 and 22 below.		
21 If line 16 is a loss, enter here and on Form 1040, line 13, or Form 1040NR, line 14, the smaller of:		
<ul style="list-style-type: none"> • The loss on line 16 or <input type="text"/> • (\$3,000), or if married filing separately, (\$1,500) <input type="text"/> 	21	()
Note. When figuring which amount is smaller, treat both amounts as positive numbers.		
22 Do you have qualified dividends on Form 1040, line 9b, or Form 1040NR, line 10b?		
<input type="checkbox"/> Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 44 (or in the instructions for Form 1040NR, line 42). <input type="checkbox"/> No. Complete the rest of Form 1040 or Form 1040NR.		

Name: PAULA T ROBERTS

SSN: 741-02-0752

1	Taxable income from Form 1040, line 43, Form 1040NR, line 41, Form 1040A, line 27, or from the Foreign Earned Income Tax Worksheet			29,763.
2	Qualified dividends from Form 1040, line 9b, Form 1040A, line 9b, or Form 1040NR, line 10b	122.		
3	Line 4g of Form 4952			
4	Line 4e of Form 4952			
5	Subtract line 4 from line 3			
6	Subtract line 5 from line 2. If -0- or less, enter -0-		122.	
7	Smaller of line 15 or line 16 of Schedule D	367.		
8	Smaller of line 3 or line 4			
9	Subtract line 8 from line 7. If -0- or less, enter -0-		367.	
10	Add lines 6 and 9			489.
11	Add lines 18 and 19 of Schedule D			
12	Smaller of line 9 or line 11			
13	Subtract line 12 from line 10. If -0- or less, -0-			489.
14	Subtract line 13 from line 1. If -0- or less, -0-			29,274.
15	Smaller of line 1 or \$72,500 if married filing jointly or qualifying widow(er); \$36,250, if single or married filing separately; \$48,600 if head of household	29,763.		
16	Smaller of line 1 or line 15			29,763.
17	Smaller of line 14 or line 16			29,274.
18	Subtract line 10 from line 1. If -0- or less, -0-	29,274.		
19	Larger of line 17 or line 18			29,274.
20	Subtract line 17 from line 16. This line is taxed at 0%			489.

If lines 1 and 16 are the same, skip lines 21 through 41 and go to line 42.
Otherwise, go to line 21.

21	Smaller of line 1 or line 13			
22	Amount from line 20			
23	Subtract line 22 from line 21			
24	\$400,000 if single; \$225,000 if married filing separately; \$450,000 if married filing jointly or qualifying widow(er); or \$425,000 if head of household			
25	Smaller of line 1 or line 24			
26	Add lines 19 and 20			
27	Subtract line 26 from line 25			
28	Smaller of line 23 or line 27			
29	Multiply line 28 by 15%			
30	Add lines 22 and 28			

If lines 1 and 30 are the same, skip lines 31 through 41 and go to line 42.
Otherwise, go to line 31.

31	Subtract line 30 from line 21			
32	Multiply line 31 by 20%			

If Schedule D, line 19, is zero, skip lines 33 through 38 and go to line 39.
Otherwise, go to line 33.

33	Smaller of line 9 above or Schedule D, line 19			
34	Add lines 10 and 19			
35	Amount from line 1			
36	Subtract line 35 from line 34. If -0- or less, -0-			
37	Subtract line 36 from line 33. If -0- or less, -0-			
38	Multiply line 37 by 25%			

If Schedule D, line 18, is zero, skip lines 39 through 41 and go to line 42.
Otherwise, go to line 39.

39	Add lines 19, 20, 28, 31 and 37			
40	Subtract line 39 from line 1			
41	Multiply line 40 by 28%			
42	Tax on line 19 amount			3,754.
43	Add lines 29, 32, 38, 41, and 42			3,754.
44	Tax on line 1 amount			3,829.
45	Tax on all taxable income. Smaller of lines 43 or 44			3,754.

Detail Sheet

2013

Name: PAULA T ROBERTS

ID: 741-02-0752

Description: Sch A Property Tax 4th box

	Type	Amount
Minus Homestead Benefit		
Minus PTR		
Total		

Detail Sheet

2013

Name: PAULA T ROBERTS

ID: 741-02-0752

Description: NJ Other Inc adjustments

	Type	Amount
Minus Homestead Benefit		(150.)
Minus PTR		(390.)
Total		(540.)

Name: PAULA T ROBERTS

SSN: 741-02-0752

Use the spouse column if this is a married joint return for this year and the spouse filed separately last year.	Joint or Taxpayer	Spouse	Taxable
1 <u>NJ</u> 2012 state/local income tax refund			
___ 2012 state/local income tax refund			
Total state/local income tax refund for 2012			
2 Enter the amounts from the 2012 tax return If the itemized deductions were reduced due to the AGI limitation, be sure to enter the reduced amounts			
Schedule A, line 5a, income taxes			
Schedule A, line 5b, general sales tax			
Difference - the state tax refund is only taxable to the extent the state tax deduction exceeds the sales tax deduction			
3 Net state/local income tax refund			
4 Enter the total of all other Schedule A refunds or reimbursements	407.		
5 Add lines 3 and 4	407.		
On the 2012 tax return, If itemized deductions are reduced due to income limitations, AMT is included, or there are unused credits, see Publication 525. Some or all of the state tax refund may be tax-free. Check here if the ENTIRE state tax refund is nontaxable. Stop here	<input type="checkbox"/>	<input type="checkbox"/>	
6 2012 itemized deductions	9,090.		
7 Filing status for 2012. Enter 1, 2, 3, 4, or 5. 1 = Single 4 = Head of household 2 = Married filing jointly 5 = Qualifying widow(er) 3 = Married filing separately If the 2012 filing status was married filing separately, and itemized deductions were required to be used because the spouse itemized, check here	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
8 Age 65 or blind, enter amount from the 2012 Form 1040, page 2, line 39a	<input type="checkbox"/>	<input type="checkbox"/>	
9 Standard deduction	8,700.		
10 Subtract line 9 from line 6	390.		
11 Smaller of line 5 or line 10	390.		
12 Enter the taxable income for 2012, adjusted for any NOL carryover. If less than -0-, show the amount as a negative number	20,423.		
13 Amount to include in income for 2013	390.		
14 Taxable state/local income tax refund			
15 Taxable amount of other income	390.		
			390.

1099-R DETAIL REPORT - 2013

Payer	EIN	T S	Box 7	IRA/SEP Simple	Fed. With.	State With.	Gross	1099R Taxable	Roll/ Exclude	Net	Cost	Cost Bal.
Big Bank	74-9990752	T	Q			NJ	2000		E			
Big Corp	74-8990752	T	3			NJ	3000	3000		3000		
Big Corp	74-8990752	T	7			150NJ	20000	19404		19404		
						---	-----	-----		-----		
						150	25000	22404		22404		

W-2 DETAIL REPORT - 2013

Employer	EIN	TP SP	Gross Wages	Federal With.	FICA	Medicare	St	State Wages	State With.	Locality	Local With.
Big Corp	74-8990752	X	30000	2600	1860	435	NJ	31224	29		
			-----	-----	-----	---		-----	--		
			30000	2600	1860	435		31224	29		

US 1040

Three - Year Tax Summary

2013

Name: PAULA T ROBERTS

SSN: 741-02-0752

Gross Income	2011	2012	2013
Wages and salaries		13,000.	30,000.
Interest and dividends		800.	800.
Business income		400.	400.
Sale of assets - gain or loss		(1,000.)	367.
Pension and IRA distributions		19,469.	22,404.
Rents, royalties, etc			
Unemployment and social security		11,050.	
Other income		4,615.	550.
Total gross income		48,334.	54,521.
Adjustments to Income		4,011.	11.
Adjusted gross income		44,323.	54,510.
Itemized or Standard Deductions			
Medical expense deduction			
Taxes			8,067.
Interest			1,080.
Contributions			
Miscellaneous deductions			
Other itemized deductions			
Total deductions		8,700.	9,147.
Exemptions		15,200.	15,600.
Taxable Income	0	20,423.	29,763.
Tax (2013 - 1040, line 44)	0	2,429.	3,754.
Alternative minimum tax			
Other taxes			
Credits and Payments			
Credits		2,429.	
Withholding		3,000.	2,750.
EIC and Additional Child Tax Credit		155.	
Estimated tax payments			
Other payments		2,000.	
Total credits and payments		7,584.	2,750.
Tax liability after credits			3,754.
Estimated tax penalty			
Refund or (Balance Due)		5,155.	(1,004.)
Federal marginal tax bracket	0.0 %	15.0 %	15.0 %
Tax preparation fee			
State refund or (balance due)			
1st resident state refund (balance due)		NJ 81.	NJ (560.)
2nd resident state refund (balance due)			
1st part-year state refund (balance due)			
2nd part-year state refund (balance due)			
1st nonresident state refund (balance due)			
2nd nonresident state refund (balance due)			
3rd nonresident state refund (balance due)			
4th nonresident state refund (balance due)			
5th nonresident state refund (balance due)			

NOTES FOR 2013:

ROBERTS PAULA T

741020752

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1040

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ROBERTS LISA
ROBERTS MONICA
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ROBERTS PAULA T

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ROBERTS PAULA T

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741-02-0752 ROBE
ROBERTS PAULA T
123 MAPLE
PLUCKEMIN NJ 07978-

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560.00



013027410207520000R0BE1312060000056000

Name(s) as shown on Form NJ-1040 ROBERTS PAULA T	Your Social Security Number 741-02-0752
---	--

PART I NET PROFITS FROM BUSINESS List the net profit (loss) from business(es). See instructions.

	Business Name	Social Security Number/ Federal EIN	Profit or (Loss)
1.	PAULA T ROBERTS	741-02-0752	400.
2.			
3.			
4.	Net Profit or (Loss). (Add Lines 1, 2, and 3.) (Enter here and on Line 17. If loss, make no entry on Line 17.)		4. 400.

PART II DISTRIBUTIVE SHARE OF PARTNERSHIP INCOME List the distributive share of income (loss) from partnership(s). See instructions.

	Partnership Name	Federal EIN	Share of Partnership Income or (Loss)
1.			
2.			
3.			
4.	Distributive Share of Partnership Income or (Loss). (Add Lines 1, 2, and 3.) (Enter here and on Line 20. If loss, make no entry on Line 20.)		4.

PART III NET PRO RATA SHARE OF S CORPORATION INCOME List the pro rata share of income (loss) from S Corporation(s). See instructions.

	S Corporation Name	Federal EIN	Pro Rata Share of S Corporation Income or (Loss)
1.			
2.			
3.			
4.	Net Pro Rata Share of S Corporation Income or (Loss). (Add Lines 1, 2, and 3.) (Enter here and on Line 21. If loss, make no entry on Line 21.)		4.

PART IV NET GAINS OR INCOME FROM RENTS, ROYALTIES, PATENTS, AND COPYRIGHTS List the net gains or net income, less net loss, derived from or in the form of rents, royalties, patents, and copyrights. See instructions.
 Type of Property: 1-Rental real estate 2-Royalties 3-Patents 4-Copyrights

	Source of Income or Loss. If rental real estate, enter physical address of property.	Social Security Number/ Federal EIN	Type - Enter number from list above	Income or (Loss)
1.				
2.				
3.				
4.	Net Income or (Loss). (Add Lines 1, 2, and 3.) (Enter here and on Line 22. If loss, make no entry on Line 22.)			4.

Name(s) as shown on Form NJ-1040 ROBERTS PAULA T				Your Social Security Number 741-02-0752			
PART I INCOME (LOSS)				Column A		Column B	
				Reportable Regular Business Income		Alternative Business Income/(Loss)	
1.	Net Profits From Business	1a.	400.	1b.	400.		
2.	Distributive Share of Partnership Income	2a.		2b.			
3.	Net Pro Rata Share of S Corporation Income	3a.		3b.			
4.	Net Gain or Income From Rents, Royalties, Patents, and Copyrights	4a.		4b.			
5.	Loss Carryforward From Tax Year 2012			5b.	()
6.	Totals	6a.	400.	6b.	400.		
PART II ADJUSTMENT CALCULATION							
7.	Total Regular Business Income	7.	400.				
8.	Total Alternative Business Income/(Loss). (If loss, enter zero)	8.	400.				
9.	Business Increment (Line 7 minus Line 8)	9.					
10.	Adjustment Percentage	10.	0.20				
11.	Alternative Business Calculation Adjustment (Line 9 x 0.20)	11.					
PART III LOSS CARRYFORWARD TO TAX YEAR 2014							
12.	Loss Carryforward to Tax Year 2014			12.	()

Instructions

- Line 1a. Enter the amount from Line 17 of Form NJ-1040.
- Line 1b. Enter the amount from Part I, Line 4 of Schedule NJ-BUS-1 (Form NJ-1040).
- Line 2a. Enter the amount from Line 20 of Form NJ-1040.
- Line 2b. Enter the amount from Part II, Line 4 of Schedule NJ-BUS-1 (Form NJ-1040).
- Line 3a. Enter the amount from Line 21 of Form NJ-1040.
- Line 3b. Enter the amount from Part III, Line 4 of Schedule NJ-BUS-1 (Form NJ-1040).
- Line 4a. Enter the amount from Line 22 of Form NJ-1040.
- Line 4b. Enter the amount from Part IV, Line 4 of Schedule NJ-BUS-1 (Form NJ-1040).
- Line 5b. Enter the amount from Line 11 of your 2012 Schedule NJ-BUS-2 (Form NJ-1040).
- Line 6a. Enter the total of Lines 1a through 4a.
- Line 6b. Enter the total of Lines 1b through 5b, netting gains with losses.
- Line 7. Enter the amount from Line 6a of this schedule.
- Line 8. Enter the amount from Line 6b of this schedule. If loss, enter zero here.
- Line 9. Subtract Line 8 from Line 7. If the result is zero, enter zero on Line 11 and continue with Line 12.
- Line 10. The adjustment percentage for tax year 2013 is 20% (0.20).
- ~~Line 11.~~ Multiply the amount on Line 9 by 20% (0.20). Enter here and Line 34 of Form NJ-1040.
- Line 12. If the amount on 6b is a loss, enter the amount of the loss on this line. Otherwise, enter zero.

NJ

Dependents Information

2013

Name: PAULA T ROBERTS

SSN: 741-02-0752

First name	MI	Last name	SSN	Birth year
LISA		ROBERTS	745-02-0752	1994
MONICA		ROBERTS	744-02-0752	1994
JAMES		ROBERTS	743-02-0752	1990

NJ **Line 25: Supplementary Schedule of Other Income** **2013**

Name: ROBERTS PAULA T

SSN: 741-02-0752

Amount

A Income received as prizes and awards
 If more than two reported check this box and enter "multiple" on the first entity line and enter the total on line 1.

1 Entity _____

2 Entity _____

B Income received in respect of a decedent. If more than two reported check this box and enter "multiple" on the first entity line and enter the total on line 1.

1 a Decedent _____

b Decedent SSN _____

2 a Decedent _____

b Decedent SSN _____

C Income received from estates and trusts
 If more than one reported check this box

1 Net income from Federal K-1.....

2 Net income from Federal K-1.....

3 Net income from Federal K-1.....

4 Net income from Federal K-1.....

5 Net income from Federal K-1.....

D Income received from scholarships and fellowships. If more than two reported check this box and enter "multiple" on the first entity line and enter the total on line 1.

1 a Organization _____

b Organization ID # _____

2 a Organization _____

b Organization ID # _____

E Residential rental value or allowance paid by employer. If more than two reported check this box and enter "multiple" on the first entity line and enter the total on line 1.

1 a Company _____

b Company ID # _____

2 a Company _____

b Company ID # _____

F Other	
Company ID number	(540 .)
Other income	550 .
Total	10 .

SCHEDULES
A & B
(Form NJ-1040)

NEW JERSEY GROSS INCOME TAX

2013

Name(s) as shown on Form NJ-1040 ROBERTS PAULA T				Your Social Security Number 741-02-0752			
Schedule A CREDIT FOR INCOME OR WAGE TAXES PAID TO OTHER JURISDICTION		If you are claiming a credit for income taxes paid to more than one jurisdiction, a separate Schedule A must be enclosed for each. See instructions page 40.					
A COPY OF OTHER STATE OR POLITICAL SUBDIVISION TAX RETURN MUST BE RETAINED WITH YOUR RECORDS							
1.	Income actually taxed by other jurisdiction during tax year (indicate name _____) (DO NOT combine the same income taxed by more than one jurisdiction) (The amount on Line 1 cannot exceed the amount shown on Line 2)			1.			
2.	Income subject to tax by New Jersey (From Line 28, Form NJ-1040)			2.			
3.	Maximum Allowable Credit Percentage	1 _____		3.	%		
	(Divide Line 2 into Line 1)	2 _____					
IF YOU ARE NOT ELIGIBLE FOR A PROP. TAX BENEFIT ONLY COMPLETE COL. B.		COLUMN A		COLUMN B			
4.	Taxable Income (after Exemptions and Deductions) from Line 36, Form NJ-1040			4.			
5.	Property Tax Enter in Box 5a the amount from Worksheet and Deduction F line 1. See instructions page 33.	5a.					
	Property tax deduction. Enter the amount from Worksheet F, line 2. See instructions page 33.			5.	- 0 -		
6.	New Jersey Taxable Income (Line 4 minus Line 5)			6.			
7.	Tax on Line 6 amount (From Tax Table or Tax Rate Schedules)			7.			
8.	Allowable Credit (Line 3 times Line 7)			8.			
9.	Credit for Taxes Paid to Other Jurisdiction Enter in Box 9a the income or wage tax paid to other jurisdiction during tax year on income shown on Line 1. See instructions page 43.	9a.					
	Credit allowed. (Enter lesser of Line 8 or Box 9a). (The credit may not exceed your New Jersey tax on Line 39).			9.			
<ul style="list-style-type: none"> • If you are not eligible for a property tax benefit, enter the amount from Line 9, Column B, on Line 41, Form NJ-1040. Make no entry on Lines 37c or 49, Form NJ-1040. • If you are eligible for a property tax benefit, you must complete Worksheet I on page 43 to determine whether you receive a greater benefit by claiming a property tax deduction or taking the property tax credit. 							
Schedule B NET GAINS OR INCOME FROM DISPOSITION OF PROPERTY		List the net gains or income, less net loss, derived from the sale, exchange, or other disposition of property including real or personal whether tangible or intangible.					
1.	a. Kind of property and description	b. Date acquired (Mo., day, yr.)	c. Date sold (Mo., day, yr.)	d. Gross sales price	e. Cost or other basis as adj. (see inst.) and expense of sale	f. Gain or (loss) (d less e)	
	FED SCH D					367.	
2.	Capital Gains Distributions					2.	
3.	Other Net Gains					3.	
4.	Net Gains (Add Lines 1, 2, and 3) (Enter here and on Line 18. If loss enter ZERO here & make no entry on Line 18) ..					4.	367.

NOTE: For tax year 2012 and after, Schedule C, Net Gains or Income From Rents, Royalties, Patents, and Copyrights, has been eliminated from this page. Use Part IV of Schedule NJ-BUS-1 (Form NJ-1040) to report that income.