

Advanced Course Scenarios and Test Questions

Directions

The first six scenarios do not require you to prepare a tax return. **Read the interview notes for each scenario carefully and use your training and resource materials to answer the questions after the scenarios.**

For fill in the blank questions: Round to the nearest whole number, do not use special characters: dollar sign (\$), comma (,), or period(.

Advanced Scenario 1: Sharon Smith

Interview Notes

- Sharon's husband, Daniel, moved out of their home in February of 2022. Sharon has had no contact with Daniel since he moved out. Sharon and Daniel are not legally separated.
- Sharon has one child, Lea, age 10. She will claim Lea as a dependent on her 2024 tax return.
- Sharon is 31 years old.
- Sharon earned \$44,500 in wages and received \$50 of interest. Sharon had lottery winnings of \$2,000 reported on Form W-2G.
- Sharon paid all the costs of keeping up her home. She provided over half of the support for Lea.
- They all are U.S. citizens and have valid Social Security numbers. They lived in the U.S. all year.

Advanced Scenario 1: Test Questions

1. Sharon qualifies for Head of Household filing status.
 - a. True
 - b. False
2. Who qualifies to claim the Earned Income Credit (EIC) also known as Earned Income Tax Credit (EITC) for Lea?
 - a. Sharon
 - b. Daniel
 - c. Both Sharon and Daniel
 - d. Neither Sharon nor Daniel
3. Sharon is required to report her lottery winnings as income on her federal tax return.
 - a. True
 - b. False

Advanced Scenario 2: Jeff and Jane Spring

Interview Notes

- Jeff and Jane are married and want to file a joint return.
- Jeff is a U.S. citizen and has a valid Social Security number. Jane is a resident alien and has an ITIN. They resided in the United States all year with their children.
- Jeff and Jane have two children, Joan, age 7, and Jim, age 15. Joan and Jim are U.S. citizens and have valid Social Security numbers.
- Jeff earned \$23,000 in wages.
- Jane earned \$21,000 in wages.
- In order to work, the Springs paid \$2,000 to their son, Jim, to care for Joan after school.
- Jeff and Jane provided all of the support for their two children.

Advanced Scenario 2: Test Questions

4. What is the maximum amount Jeff and Jane are eligible to claim for the Child Tax Credit (CTC)
 - a. \$6,000
 - b. \$4,000
 - c. \$3,000
 - d. \$2,000
5. The Springs qualify for the Child and Dependent Care Credit
 - a. True
 - b. False

Advanced Scenario 3: Mary Wood

Interview Notes

- Mary Wood, age 58, is single.
- Mary earned wages of \$51,000 and was enrolled the entire year in a high deductible health plan (HDHP) with self-only coverage.
- During the year, Mary contributed \$2,000 to her Health Savings Account (HSA) and her mother also contributed \$1,000 to Mary's HSA.
- Mary's Form W-2 shows \$1,150 in Box 12 with code W. She has Form 5498-SA showing \$4,150 in Box 2.
- Mary has Form 1099-SA showing her HSA distributions. She used her distributions to pay the following unreimbursed expenses:
 - \$500 for nine visits to a physical therapist after her knee surgery
 - \$1,000 unreimbursed doctor bills
 - \$280 prescription medicine
 - \$1,500 replacement of a crown
 - \$300 deep cleaning for teeth
 - \$40 over the counter medication
 - \$260 gym membership (for her general health and fitness)
- Mary is a U.S. citizen with a valid Social Security number.

Advanced Scenario 3: Test Questions

6. Mary is eligible to contribute an additional \$_____ to her HSA because she is age 55 or older.
- a. \$0
 - b. \$850
 - c. \$1,000
 - d. \$2,000
7. Form 8889, Part I is used to report HSA contributions made by _____.
- a. Mary
 - b. Mary's employer
 - c. Mary's mother
 - d. All of the above
8. What is the total unreimbursed qualified medical expenses reported on Form 8889, Part II?
- a. \$3,860
 - b. \$3,620
 - c. \$3,580
 - d. \$3,320

Advanced Scenario 4: Cheryl Brown

Interview Notes

- Cheryl, age 62, is single. She owns her home and provided all the costs of keeping up her home for the entire year. Her only income for 2024 was \$48,700 in W-2 wages.
- Cindy, age 24, and her daughter Cary, age 5, have lived with Cindy's mother, Cheryl, since Cindy separated from her spouse in April of 2023. Cindy's only income for 2024 was \$24,000 in wages. Cindy provided over half of her own support. Cary did not provide more than half of her own support.
- Cindy will not file a joint return with her spouse.
- All individuals in the household are U.S. citizens with valid Social Security numbers. No one has a disability. They lived in the United States all year.

Advanced Scenario 4: Test Questions

9. For the purpose of determining dependency, Cary could be the qualifying child of _____.
- a. Only Cheryl
 - b. Only Cindy
 - c. Either Cheryl or Cindy
 - d. Neither Cheryl nor Cindy
10. Which of the following statements is true?
- a. Cindy is **not** eligible to claim Cary for the EIC because her filing status is married filing separate.
 - b. Cindy is **not** eligible to claim the EIC for Cary because she is under age 25.
 - c. Cindy is **not** eligible to claim Cary for the EIC because her income is too high.
 - d. None of the above statements is true.

Advanced Scenario 5: Elizabeth Greene

Interview Notes

- Elizabeth is 54 years old and files as single.
- Her 2024 adjusted gross income (AGI) is \$52,000, which includes gambling winnings of \$2,000.
- Elizabeth would like to itemize her deductions on Form 1040 Schedule A this year.
- Elizabeth brings documents for the following items:
 - \$9,500 hospital and doctor bills
 - \$600 contributions to Health Savings Account (HSA)
 - \$3,600 state withholding (higher than Elizabeth's calculated state sales tax deduction)
 - \$300 personal property taxes based on the value of the vehicle
 - \$600 friend's personal GoFundMe campaign
 - \$350 cash contributions to the Red Cross
 - \$200 fair market value of clothing (in good used condition) donated to the Salvation Army (Elizabeth purchased the clothing for \$900)
 - \$7,300 mortgage interest
 - \$2,300 real estate tax
 - \$1,500 homeowners association fees
 - \$4,000 gambling losses

Advanced Scenario 5: Test Questions

11. Elizabeth can claim the \$1,500 homeowners association fees as a deduction on her Form 1040, Schedule A.
 - a. True
 - b. False
12. What amount of gambling losses is Elizabeth eligible to claim as a deduction on her Form 1040, Schedule A?
 - a. \$0
 - b. \$1,000
 - c. \$2,000
 - d. \$4,000

Advanced Scenario 6: David Stone

Interview Notes

- David Stone is 28 years old and single. He provides all of his own support.
- David works at a gas station and earned \$18,500 in wages.
- David took two management courses at a community college to improve his job skills. He was less than a half time student. He wants to know if that qualifies for any educational tax benefit.
- David took an early distribution from his IRA of \$2,000 for tuition and \$500 for emergency repairs of his air conditioning system. This is the first time he has taken a distribution from his IRA.
- David is a U.S. citizen and lived in the U.S. for the entire year. He has a valid Social Security number.

Advanced Scenario 6: Test Questions

13. David is eligible to claim the American Opportunity Credit on his 2024 tax return.
- a. True
 - b. False
14. For which of the following IRA distributions will David owe an additional tax of 10%?
- a. \$2,000 for tuition
 - b. \$500 for emergency repairs
 - c. Both a and b
 - d. Neither a nor b

Advanced Scenario 7: Vincent and Faith Hunter

Directions

Using the tax software, complete the tax return, including Form 1040 and all appropriate forms, schedules, or worksheets. Answer the questions following the scenario.



When entering Social Security numbers (SSNs) or Employer Identification Numbers (EINs), replace the Xs as directed, or with any four digits of your choice.

Interview Notes

- Vincent is a 5th grade teacher at a public school. Vincent and Faith are married and choose to file Married Filing Jointly on their 2024 tax return.
- Vincent worked a total of 1,800 hours in 2024. During the school year, he spent \$844 on unreimbursed classroom expenses.
- Faith retired in 2021 and began receiving her pension on November 1st of that year. She explains that this is a joint and survivor annuity. She has already recovered \$1,259 of the cost of the plan.
- Vincent settled with his credit card company on an outstanding bill and brought the Form 1099-C to the site. They aren't sure how it will impact their tax return for tax year 2024. The Hunters determined that they were solvent as of the date of the canceled debt.
- Faith received \$280 from Jury duty.
- Their daughter, Hope, is in her second year of college pursuing a bachelor's degree in Physics at a qualified educational institution. She received a scholarship, and the terms require that it be used to pay tuition. The Hunters provided Form 1098-T and an account statement from the college that included additional expenses. On Form 1098-T for the previous tax year, Box 7 was not checked. The Hunters paid \$1,500 for books and equipment required for Hope's courses. This information is also included on the college statement of account. The Hunters claimed the American Opportunity Credit last year for the first time.
- Hope does not have a felony drug conviction.
- They are all U.S. citizens with valid Social Security numbers.



Form **13614-C**
(October 2024)

Department of the Treasury - Internal Revenue Service
Intake/Interview and Quality Review Sheet

OMB Number
1545-1964

Note: Do not complete this form if you (or your spouse) are not a U.S. citizen or green card holder.

You will need:

- Tax Information such as Forms W-2, 1099, 1098, 1095.
- Social Security cards or ITIN letters for all persons on your tax return
- Picture ID (such as valid driver's license) for you and your spouse

Volunteers are trained to provide high quality service and uphold the highest ethical standards. To report unethical behavior to the IRS, email us at wi.voltax@irs.gov

Your first name (pronouns, optional) VINCENT	M.I. HUNTER	Last name HUNTER	Your date of birth 05/01/1964	Your job TEACHER
Spouse's first name (pronouns, optional) FAITH	M.I. HUNTER	Last name HUNTER	Spouse's date of birth 10/08/1955	Spouse's job RETIRED
Mailing address 1234 CHARITY AVENUE	Apt #	City YOUR CITY	State YS	ZIP code YOUR ZIP
Telephone number YOUR PHONE NUMBER	Email address	Did you live or work in two or more states in 2024 ☐ Yes ☒ No		

Check if you or your spouse were in 2024:
A U.S. citizen ☒ You ☒ Spouse ☐ Legally blind ☐ You ☐ Spouse ☒ No ☐ No
In the U.S. on a visa ☐ You ☐ Spouse Issued an identity protection PIN ☐ You ☐ Spouse ☐ No ☐ No
A full-time student ☐ You ☐ Spouse Do you own or hold any digital assets ☐ You ☐ Spouse ☐ No ☐ No

If due a refund, would you like your refund
☒ Direct deposit ☐ Check by mail If you have a balance due, would you like to make a payment directly from
☐ Split refund between accounts ☐ Other ☐ Bank account ☐ Direct debit
☐ Would you like to receive written communications from the IRS in a language other than English ☐ Set up installment agreement ☒ Mail payment to IRS

As of December 31, 2024, what was your marital status
☐ Never Married ☒ Married If married, were you married for all of 2024 ☒ Yes ☐ No
☐ Divorced Did you live with your spouse during any part of the last six months of 2024 ☒ Yes ☐ No
☐ Widowed ☐ Legally Separated Would you like information on how to vote and/or how to register to vote ☐ Yes ☒ No Election Campaign Fund ☒ Yes ☐ No
Date of final decree Date of separate maintenance decree Year of spouse's death

Can anyone else claim the taxpayer or spouse on their tax return (to be completed by certified volunteer)
☐ Yes ☐ No

To be completed by certified volunteer (Refer to Pub 4012 Tab C)											
Name (first, last)	Date of birth (mm/dd/yy)	Relationship to you (son, daughter, parent, none, etc.)	Number of months lived in your home in 2024	Single or Married as of 12/31/2024 (S/M)	A U.S. Citizen	Resident of U.S., Canada or Mexico	Full-time student	Totally and permanently disabled	Qualifying child relative dependent	Provides tax benefits (HOH, EITC, CTC, etc.)	
HOPE HUNTER	07/05/2005	DAUGHTER	12	S	YES	YES	YES	NO	Y	N	Y

Catalog Number 52121E www.irs.gov Form **13614-C** (Rev. 10-2024)

Answer the following questions on this page and the next page about you and your spouse's tax situation

Received money from any of the following in 2024:

☒ (B) Wages as a part-time or full-time employee
How many jobs 1

☐ (B/A) Tips

☒ (B/A) Retirement account, pension or annuity proceeds

☐ (B) Disability benefits

☒ (B) Social Security or Railroad Retirement Benefits

☐ (B) Unemployment benefits

☐ (B) Refund of state or local income tax

☐ (B) Interest or dividends (bank account, bonds, etc.)

☐ (A) Sale of stocks, bonds or real estate

Did you report a loss on last year's return ☐ Yes ☐ No

☐ (B) Alimony

☐ (M) Income from renting out your house or a room in your house
If yes, did you use the dwelling unit as a personal residence and rent it for few than 15 days ☐ Yes ☐ No

☐ Income from renting personal property such as a vehicle

☐ Farm activity

☐ Gambling winnings, including lottery

☐ Payments for contract or self-employment work

Did you report a loss on last year's return ☐ Yes ☐ No

☐ Any other money received during the year (example: cash payments, jury duty, awards, virtual currency, royalties, union strike benefits)

Income to be included (To be completed by certified volunteer)

☐ (B) W-2s Number of forms

☐ (B/A) Tips (basic when reported on W2)

☐ (B/A) 1099-R (basic when taxable amount is reported)

Number of forms

☐ (B) SSA-1099, RRB-1099

☐ (B) 1099-G Number of forms

☐ Did you receive a refund of state or local taxes ☐ Yes ☐ No

☐ Did you itemize last year ☐ Yes ☐ No

☐ (B) 1099-INT/DIV Number of forms

☐ (A) 1099-B Number of forms (include

brokerage statement) ☐ Capital Loss carryover

☐ (B) Alimony Amount \$

Excluded from income ☐ Yes ☐ No

☐ (M) Rental income

☐ Farm income (out of scope)

☐ (B) W-2G or other gambling winnings (list losses below if taxpayer can itemize deductions)

☐ (A) Schedule C

☐ 1099-MISC Number

☐ 1099-K Number

☐ Other income reported elsewhere

☐ Schedule C expenses

☐ Other income (see Pub 4012 for guidance on other income, i.e., scope of service chart)

Paid any of the following expenses in 2024:		Standard or Itemized Deductions (To be completed by certified volunteer)	Notes/Comments
☐ (A) Mortgage Interest		☐ (B) Taxable state/local income taxes	
☐ (A) Taxes: state, local, real estate, sales, etc.			
☐ (A) Medical, Dental, Prescription Expenses		☐ (B) Standard deduction ☐ (A) Itemized deduction	
☐ (B) Charitable contributions			
Paid any of these expenses in 2024:		Expenses to report (To be completed by certified volunteer)	Notes/Comments
☐ (B) Student loan interest		☐ (B) 1098-E	
☐ (B) Child and dependent care		☐ (B) Child and dependent care credit	
☒ (B/A) Contributions to a retirement account		☐ (A) IRA, 401(k), etc. deduction	
☐ Repayments to a qualified retirement plan		☐ (B) Saver's credit	
☒ (B) School supplies by a teacher, teacher's aide or other educator		☐ (B) Educator expenses deduction	
☐ (B) Alimony payments (do not include child support)		☐ (B) Alimony payments with spouse's SSN \$ _____	
		Adjustment to income ☐ Yes ☐ No	
Did any of the following happen during 2024:		Information to report (To be completed by certified volunteer)	Notes/Comments
☒ (B) You or someone in your family took educational classes (technical school, college, job related, etc.)		☐ (B) Taxable scholarship income	
		☐ (B) 1098-T (itemized statement from school, invoice, etc.)	
		☐ (B) Education credit or tuition and fees deduction	
☐ (A) Sell a home		☐ (A) Sale of home (1099-S)	
☐ (A) Have a health savings account (HSA)		☐ HSA contributions ☐ HSA distributions	
☐ (A) Purchase health insurance through the Marketplace (Exchange)		☐ (A) 1095-A	
☐ (A) Purchase and install energy-efficient home items (example: windows, furnace, insulation, etc.)		☐ (B) Energy efficient home improvement credit	
☒ (A) Have credit card, mortgage, or other debt cancelled/forgiven by a lender		☐ (A) 1099-C	
☐ Have a loss related to a declared federal disaster area		☐ (A) 1099-A	
		☐ Disaster relief impacts return	
☐ (B) Have a tax credit disallowed (example: earned income credit, child tax credit, or American opportunity credit)		☐ (B) EITC, CTC, AOTC or HOH disallowed in a previous year	
		Year disallowed Reason	
☐ Receive any letter or bill from the IRS		☐ Eligible for Low Income Taxpayer Clinic referral	
☐ (B) Make estimated tax payments or apply last year's refund to 2024 taxes		☐ Estimated tax payments	
		☐ Last year's refund applied to this year	
		☐ Last year's return available	
☐ Additional information you think we should know		☐ Additional information for accurate tax preparation	

The following information is for statistical purposes. These questions are optional.

1. Would you say you can carry on a conversation in English ☒ Very well ☐ Well ☐ Not well ☐ Not at all ☐ Prefer not to answer
2. Would you say you read a newspaper in English ☒ Very well ☐ Well ☐ Not well ☐ Not at all ☐ Prefer not to answer
3. Do you or any member of your household have a disability ☐ Yes ☒ No ☐ Prefer not to answer
4. Are you or your spouse a Veteran from the U.S. Armed Forces ☐ Yes ☒ No ☐ Prefer not to answer

5. What is your race and/or ethnicity (select all that apply and enter additional details in the spaces below)

☐ **American Indian or Alaska Native** (enter, for example, Navajo Nation, Blackfeet Tribe of the Blackfeet Indian Reservation of Montana, Native Village of Barrow Inupiat Traditional Government, Nome Eskimo Community, Aztec, Maya, etc.)

☐ **Asian** (provide details below)

☐ Chinese ☐ Asian Indian ☐ Filipino

☐ Vietnamese ☐ Korean ☐ Japanese

Enter, for example, Pakistani, Hmong, Afghan, etc.

☐ **Black or African American** (provide details below)

☐ African American ☐ Jamaican ☐ Haitian

☐ Nigerian ☐ Ethiopian ☐ Somali

Enter, for example, Trinidadian and Tobagonian, Ghanaian, Congolese, etc.

☐ **Hispanic or Latino** (provide details below)

☐ Mexican ☐ Puerto Rican ☐ Salvadoran

☐ Cuban ☐ Dominican ☐ Guatemalan

Enter, for example, Colombian, Honduran, Spaniard, etc.

☐ **Middle Eastern or North African** (provide details below)

☐ Lebanese ☐ Iranian ☐ Egyptian

☐ Syrian ☐ Iraqi ☐ Israeli

Enter, for example, Moroccan, Yemeni, Kurdish, etc.

☐ **Native Hawaiian or Pacific Islander** (provide details below)

☐ Native Hawaiian ☐ Samoan ☐ Chamorro

☐ Tongan ☐ Fijian ☐ Marshallese

Enter, for example, Chuukese, Palauan, Tahitian, etc.

☐ **White** (provide details below)

☐ English ☐ German ☐ Irish

☐ Italian ☐ Polish ☐ Scottish

Enter, for example, French, Swedish, Norwegian, etc.

6. What is your spouse's race and/or ethnicity (select all that apply and enter additional details in the spaces below)

☐ **American Indian or Alaska Native** (enter, for example, Navajo Nation, Blackfeet Tribe of the Blackfeet Indian Reservation of Montana, Native Village of Barrow Inupiat Traditional Government, Nome Eskimo Community, Aztec, Maya, etc.)

☐ **Asian** (provide details below)

☐ Chinese ☐ Asian Indian ☐ Filipino

☐ Vietnamese ☐ Korean ☐ Japanese

Enter, for example, Pakistani, Hmong, Afghan, etc.

☐ **Black or African American** (provide details below)

☐ African American ☐ Jamaican ☐ Haitian

☐ Nigerian ☐ Ethiopian ☐ Somali

Enter, for example, Trinidadian and Tobagonian, Ghanaian, Congolese, etc.

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☐ Cuban ☐ Dominican ☐ Guatemalan

Enter, for example, Colombian, Honduran, Spaniard, etc.

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☐ Lebanese ☐ Iranian ☐ Egyptian

☐ Syrian ☐ Iraqi ☐ Israeli

Enter, for example, Moroccan, Yemeni, Kurdish, etc.

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☐ Native Hawaiian ☐ Samoan ☐ Chamorro

☐ Tongan ☐ Fijian ☐ Marshallese

Enter, for example, Chuukese, Palauan, Tahitian, etc.

☐ **White** (provide details below)

☐ English ☐ German ☐ Irish

☐ Italian ☐ Polish ☐ Scottish

Enter, for example, French, Swedish, Norwegian, etc.

Additional comments

Privacy Act and Paperwork Reduction Act Notice

We are asking for this information so you may participate in the IRS Volunteer Income Tax Assistance (VITA) and Tax Counseling for the Elderly (TCE) program which provides IRS-certified volunteer income tax preparers to assist with basic income tax return preparation for qualified individuals. The IRS authority to collect this information is 5 USC 301 and 26 USC 7801. The information you provide may be disclosed to others who coordinate VITA/TCE staffing, outreach, and other VITA/TCE related activities. The IRS may only disclose your return and return information as provided by 26 U.S.C. 6103. All other records may be disclosed only for purposes the IRS deems are compatible with the purpose for which IRS collected the records, and consistent with any routine use disclosures described in the System of Record Notice (SORN) Treasury/IRS 24.030, Customer Account Data Engine Individual Master File. You may view Treasury/IRS SORNs on the Treasury SORN website at [Treasury.gov/System of Records Notices \(SORNs\)](https://www.treasury.gov/system-of-records/Notices/SORNs). Providing this information is voluntary however, if you do not provide the requested information the IRS volunteers may not be able to assist you with preparing and filing your tax return. 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.

22222		a Employee's social security number 416-00-XXXX		OMB No. 1545-0008	
b Employer identification number (EIN) 35-700XXXX			1 Wages, tips, other compensation \$37,353.00		2 Federal income tax withheld \$3,200.00
c Employer's name, address, and ZIP code CLEAR CREEK SCHOOL DISTRICT 244 HARVARD STREET YOUR CITY, YOUR STATE, ZIP			3 Social security wages \$38,353.00		4 Social security tax withheld \$2,377.89
			5 Medicare wages and tips \$38,353.00		6 Medicare tax withheld \$556.12
			8 Allocated tips		
d Control number			9		10 Dependent care benefits
e Employee's first name and initial Last name Suff. VINCENT HUNTER 1234 CHARITY AVENUE YOUR CITY, YOUR STATE, ZIP			11 Nonqualified plans		12a \$1,000.00
			12 Statutory Retirement plan This is a 12b ☐ ☒ ☐		12c
			14 Other		12d
f Employee's address and ZIP code					
15 State	Employer's state ID number	16 State wages, tips, etc.	17 State income tax	18 Local income tax	19 Local income tax
YS	57-200XXXX	\$37,353.00	\$500.00		
20 Locality name					

Form **W-2** Wage and Tax Statement 2024
Copy 1 — For State, City, or Local Tax Department

Department of the Treasury—Internal Revenue Service

☐ VOID ☐ CORRECTED PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no. LIBERTY ENTERPRISES 225 ONEIDA AVENUE YOUR CITY, YOUR STATE, ZIP		1 Gross distribution \$ 20,100.00 2a Taxable amount \$ 2b Taxable amount not determined ☒ Total distribution ☐		OMB No. 1545-0119 2024 Form 1099-R		Distributions From Pensions, Annuities, Retirement or Profit-Sharing Plans, IRAs, Insurance Contracts, etc. Copy 1 For State, City, or Local Tax Department
PAYER'S TIN 41-200XXXX	RECIPIENT'S TIN 417-00-XXXX	3 Capital gain (included in box 2a) \$	4 Federal income tax withheld \$ 2,010.00			
RECIPIENT'S name FAITH HUNTER Street address (including apt. no.) 1234 CHARITY AVENUE City or town, state or province, country, and ZIP or foreign postal code YOUR CITY, YOUR STATE, ZIP		5 Employee contributions/ Designated Roth contributions or insurance premiums \$ 7 Distribution code(s) 7 9a Your percentage of total distribution %	6 Net unrealized appreciation in employer's securities \$ 8 Other \$ % 9b Total employee contributions \$ 15,000.00			
10 Amount allocable to IRR within 5 years \$	11 1st year of desig. Roth contrib.	12 FATCA filing requirement ☐	14 State tax withheld \$	15 State/Payer's state no.	16 State distribution \$	
Account number (see instructions)		13 Date of payment	17 Local tax withheld \$	18 Name of locality	19 Local distribution \$	

Form **1099-R** www.irs.gov/Form1099R Department of the Treasury - Internal Revenue Service

FORM SSA-1099 - SOCIAL SECURITY BENEFIT STATEMENT

2024

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

Box 1. Name

FAITH HUNTER

Box 2. Beneficiary's Social Security Number

417-00-XXXX

Box 3. Benefits Paid in 2024

\$23,899

Box 4. Benefits Repaid to SSA in 2024

Box 5. Net Benefits for 2022 (Box 3 minus Box 4)

DESCRIPTION OF AMOUNT IN BOX 3

Paid by check or direct deposit: \$19,412.60

**Medicare Part B premiums deducted from
your benefits \$2,096.40**

Total additions:

Benefits for 2024: \$23,899

DESCRIPTION OF AMOUNT IN BOX 4

Box 6. Voluntary Federal Income Tax Withholding

\$2,390

Box 7. Address

**1234 CHARITY AVENUE
YOUR CITY, YOUR STATE, ZIP**

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

Form SSA-1099-SM (6/2020)

DO NOT RETURN THIS FORM TO SSA OR IRS

☐ CORRECTED (if checked)

CREDITOR'S name, street address, city or town, state or province, country,
ZIP or foreign postal code, and telephone no.

**NEW BANK
1254 ORANGE AVENUE
YOUR CITY, YOUR STATE, ZIP**

1 Date of identifiable event

09/25/2024

OMB No. 1545-2281

2 Amount of debt discharged

\$ 850.00

Form **1099-C**

(Rev. January 2022)

3 Interest, if included in box 2

\$

For calendar year

20 **24**

**Cancellation
of Debt**

CREDITOR'S TIN

31-700XXXX

DEBTOR'S TIN

416-00-XXXX

4 Debt description

CREDIT CARD

**Copy B
For Debtor**

DEBTOR'S name

VINCENT HUNTER

Street address (including apt. no.)

1234 CHARITY AVENUE

City or town, state or province, country, and ZIP or foreign postal code

YOUR CITY, YOUR STATE, ZIP

5 If checked, the debtor was personally liable for
repayment of the debt



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

Account number (see instructions)

6 Identifiable event code

7 Fair market value of property

\$

Form **1099-C** (Rev. 1-2022)

(keep for your records)

www.irs.gov/Form1099C

Department of the Treasury - Internal Revenue Service

☐ CORRECTED

FILER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone number CLARK COMMUNITY COLLEGE 10 COLLEGE AVENUE YOUR CITY, YOUR STATE, ZIP		1 Payments received for qualified tuition and related expenses \$ 5,722.00	OMB No. 1545-1574 2024 Form 1098-T	Tuition Statement Copy B For Student This is important tax information and is being furnished to the IRS. This form must be used to complete Form 8863 to claim education credits. Give it to the tax preparer or use it to prepare the tax return.
FILER'S employer identification no. 22-8888XXX	STUDENT'S TIN 608-80-XXXX	2	3	
STUDENT'S name HOPE HUNTER	4 Adjustments made for a prior year \$	5 Scholarships or grants \$ 3,202.00		
Street address (including apt. no.) 1234 CHARITY AVENUE	6 Adjustments to scholarships or grants for a prior year \$	7 Checked if the amount in box 1 includes amounts for an academic period beginning January–March 2025 ☐		
City or town, state or province, country, and ZIP or foreign postal code YOUR CITY, YOUR STATE, ZIP	8 Checked if at least half-time student ☒	9 Checked if a graduate student ☐	10 Ins. contract reimb./refund \$	
Form 1098-T (keep for your records)		www.irs.gov/Form1098T		Department of the Treasury - Internal Revenue Service

ONLY DRAFT

September 28, 2023

DO NOT FILE



Clark Community College

Statement of Account

December 31, 2024

HOPE HUNTER

STUDENT ID: 608-00-XXXX

Date	Transaction	Amount Billed	Amount Paid
08/30/2024	Tuition – Fall Semester 2024	+\$5,722.00	
08/30/2024	Scholarship		-\$3,202.00
09/03/2024	Parking pass	+\$400.00	
09/04/2024	Campus Bookstore charge to student account for course-related books	+\$1,500.00	
09/05/2024	Payment – check #4321		-\$4,420.00

12/31/2024 Account Balance.....\$0.00

Vincent and Faith Hunter
1234 Charity Avenue
YOU CITY, YOUR STATE, ZIP

1234

PAY TO THE
ORDER OF

20

\$

DOLLARS

New Bank and Trust
Anytown, State 00000

For

: 111000025 : 123456789

1234

VOID

Advanced Scenario 7: Test Questions

15. What is the taxable portion of Faith's pension from Liberty Enterprises using the simplified method?
- a. \$0
 - b. \$18,841.00
 - c. \$19,519.00
 - d. \$20,100.00
16. The Hunters are eligible to claim the credit for other dependents on their tax return.
- a. True
 - b. False
17. What is the total amount of other income reported on the Hunters' Form 1040 Schedule 1?
- a. \$0
 - b. \$280
 - c. \$850
 - d. \$1,130
18. Vincent is eligible to deduct qualified educator expenses in the amount of \$_____ (Note: whole number only, do not use special characters.)
19. What is the Hunters' standard deduction on their 2024 tax return?
- a. \$21,900
 - b. \$23,450
 - c. \$29,200
 - d. \$30,750
20. Which of the following expenses qualify for the American Opportunity Credit?
- a. Required course related books and equipment
 - b. Tuition
 - c. Parking pass
 - d. Both a and b
21. The taxable amount of Faith's Social Security income as reported on their Form 1040 is:
- a. \$ 0
 - b. \$19,413
 - c. \$20,314
 - d. \$23,899
22. What is the Hunters' total federal income tax withholding?
- a. \$4,400
 - b. \$5,210
 - c. \$5,590
 - d. \$7,600

Advanced Scenario 8: Stephanie Winter

Directions

Using the tax software, complete the tax return, including Form 1040 and all appropriate forms, schedules, or worksheets. Answer the questions following the scenario.

 When entering Social Security numbers (SSNs) or Employer Identification Numbers (EINs), replace the Xs as directed, or with any four digits of your choice.

Interview Notes

- Stephanie is a paralegal, age 26, and single.
- Stephanie has investment income and a consolidated broker's statement.
- Stephanie is self-employed delivering meals for Fast Eats on the weekends. She received a Form 1099-NEC and a Form 1099-K. She received additional cash payments of \$570 including tips.
- Stephanie uses the cash method of accounting. She uses business code 492000.
- Stephanie provided a statement from Fast Eats indicating the fees paid for the year. These fees are considered ordinary and necessary for the food delivery business:
 - \$150 for insulated box rental
 - \$50 for vehicle safety inspection (required by Fast Eats)
 - \$600 for Fast Eats fees
- Stephanie also kept receipts for the following out-of-pocket expenses:
 - \$80 for tolls while making deliveries
 - \$300 for speeding ticket
 - \$160 for Stephanie's lunches
- Stephanie's record keeping application shows she has driven a total of 3,000 miles during and between deliveries.
 - She placed her only vehicle, an SUV, in service on 3/15/2020. The total mileage on her SUV for tax year 2024 was 12,500 miles. Of that, 9,500 miles were personal and commuting miles. Stephanie will take the standard business mileage rate.
- Stephanie is paying on her student loan from 2019, when she completed her undergraduate degree.
- Stephanie is working towards her Juris Doctorate degree to start a new career as a lawyer.
- She took a few college courses this year at an accredited college.
- Stephanie took an early distribution of \$5,000 from her IRA in April. She used \$2,400 of the IRA distribution to pay her educational expenses for the current year. She has never made any non-deductible contributions to her IRA.
- If Stephanie has a refund, she would like it deposited into her checking account.



Form 13614-C (October 2024)		Department of the Treasury - Internal Revenue Service				OMB Number 1545-1964																																			
Intake/Interview and Quality Review Sheet																																									
Note: Do not complete this form if you (or your spouse) are not a U.S. citizen or green card holder.																																									
You will need: • Tax Information such as Forms W-2, 1099, 1098, 1095. • Social Security cards or ITIN letters for all persons on your tax return • Picture ID (such as valid driver's license) for you and your spouse Volunteers are trained to provide high quality service and uphold the highest ethical standards. To report unethical behavior to the IRS, email us at wi.voltax@irs.gov																																									
Your first name (pronouns, optional) STEPHANIE		M.I.	Last name WINTER		Your date of birth 03/08/1998		Your job PARALEGAL																																		
Spouse's first name (pronouns, optional)		M.I.	Last name		Spouse's date of birth		Spouse's job																																		
Mailing address 160 UNIVERSITY DRIVE		Apt #	City YOUR CITY		State YS		ZIP code YOUR ZIP																																		
Telephone number YOUR PHONE NUMBER		Email address				Did you live or work in two or more states in 2024 ☐ Yes ☒ No																																			
Check if you or your spouse were in 2024: <table><tr><td>A U.S. citizen</td><td>☒ You</td><td>☐ Spouse</td><td>☐ No</td><td>Legally blind</td><td>☐ You</td><td>☐ Spouse</td><td>☒ No</td></tr><tr><td>In the U.S. on a visa</td><td>☐ You</td><td>☐ Spouse</td><td>☒ No</td><td>Totally and permanently disabled</td><td>☐ You</td><td>☐ Spouse</td><td>☒ No</td></tr><tr><td>A full-time student</td><td>☐ You</td><td>☐ Spouse</td><td>☒ No</td><td>Issued an identity protection PIN</td><td>☐ You</td><td>☐ Spouse</td><td>☒ No</td></tr><tr><td></td><td></td><td></td><td></td><td>Do you own or hold any digital assets</td><td>☐ You</td><td>☐ Spouse</td><td>☒ No</td></tr></table>										A U.S. citizen	☒ You	☐ Spouse	☐ No	Legally blind	☐ You	☐ Spouse	☒ No	In the U.S. on a visa	☐ You	☐ Spouse	☒ No	Totally and permanently disabled	☐ You	☐ Spouse	☒ No	A full-time student	☐ You	☐ Spouse	☒ No	Issued an identity protection PIN	☐ You	☐ Spouse	☒ No					Do you own or hold any digital assets	☐ You	☐ Spouse	☒ No
A U.S. citizen	☒ You	☐ Spouse	☐ No	Legally blind	☐ You	☐ Spouse	☒ No																																		
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				Do you own or hold any digital assets	☐ You	☐ Spouse	☒ No																																		
If due a refund , would you like your refund <table><tr><td>☒ Direct deposit</td><td>☐ Check by mail</td></tr><tr><td>☐ Split refund between accounts</td><td>☐ Other</td></tr></table>										☒ Direct deposit	☐ Check by mail	☐ Split refund between accounts	☐ Other																												
☒ Direct deposit	☐ Check by mail																																								
☐ Split refund between accounts	☐ Other																																								
Would you like to receive written communications from the IRS in a language other than English <table><tr><td>☐ Yes</td><td>☒ No</td><td>What language</td></tr></table>										☐ Yes	☒ No	What language																													
☐ Yes	☒ No	What language																																							
As of December 31, 2024, what was your marital status <table><tr><td>☒ Never Married</td><td>☐ Married</td><td>If married, were you married for all of 2024</td><td>☐ Yes</td><td>☐ No</td></tr><tr><td>☐ Divorced</td><td>☐ Legally Separated</td><td>Did you live with your spouse during any part of the last six months of 2024</td><td>☐ Yes</td><td>☐ No</td></tr><tr><td>Date of final decree</td><td>Date of separate maintenance decree</td><td>Widowed</td><td colspan="2">Year of spouse's death</td></tr></table>										☒ Never Married	☐ Married	If married, were you married for all of 2024	☐ Yes	☐ No	☐ Divorced	☐ Legally Separated	Did you live with your spouse during any part of the last six months of 2024	☐ Yes	☐ No	Date of final decree	Date of separate maintenance decree	Widowed	Year of spouse's death																		
☒ Never Married	☐ Married	If married, were you married for all of 2024	☐ Yes	☐ No																																					
☐ Divorced	☐ Legally Separated	Did you live with your spouse during any part of the last six months of 2024	☐ Yes	☐ No																																					
Date of final decree	Date of separate maintenance decree	Widowed	Year of spouse's death																																						
Can anyone else claim the taxpayer or spouse on their tax return (to be completed by certified volunteer) <table><tr><td colspan="3">Answer: Yes or No (Y/N)</td><td>☐ Yes</td><td>☐ No</td></tr></table>										Answer: Yes or No (Y/N)			☐ Yes	☐ No																											
Answer: Yes or No (Y/N)			☐ Yes	☐ No																																					
List the names below of everyone who lived with you last year (except your spouse) AND anyone you supported but did not live with you last year.																																									
Name (first last)	Date of birth (mm/dd/yy)	Relationship to you (son, daughter, parent, none, etc.)	Number of months lived in your home in 2024	Single or Married as of 12/31/2024 (S/M)	A U.S. Citizen	Resident of U.S., Canada or Mexico	Full-time student	Totally and permanently disabled	Qualifying child dependent	Qualifying relative dependent	Provides tax benefits (HOH, EITC, CTC, etc.)																														
Catalog Number 52121E										Form 13614-C (Rev. 10-2024)																															

Answer the following questions on this page and the next page about you and your spouse's tax situation

Received money from any of the following in 2024:		Income to be included (To be completed by certified volunteer)	Notes/Comments
☒ (B) Wages as a part-time or full-time employee	How many jobs 1 _____	☐ (B) W-2s _____ Number of forms _____	
☒ (B/A) Tips		☐ (B/A) Tips (basic when reported on W2)	
☒ (B/A) Retirement account, pension or annuity proceeds		☐ (B/A) 1099-R (basic when taxable amount is reported)	
☐ (B) Disability benefits		Number of forms _____	
☐ (B) Social Security or Railroad Retirement Benefits		☐ (B) SSA-1099, RRB-1099	
☐ (B) Unemployment benefits		☐ (B) 1099-G _____ Number of forms _____	
☐ (B) Refund of state or local income tax		☐ Did you receive a refund of state or local taxes ☐ Yes ☐ No	
		☐ Did you itemize last year ☐ Yes ☐ No	
☒ (B) Interest or dividends (bank account, bonds, etc.)		☐ (B) 1099-INT/DIV _____ Number of forms _____	
☒ (A) Sale of stocks, bonds or real estate		☐ (A) 1099-B _____ Number of forms _____ (include	
Did you report a loss on last year's return ☐ Yes ☒ No		brokerage statement) ☐ Capital Loss carryover	
☐ (B) Alimony		☐ (B) Alimony _____ Amount \$ _____	
		Excluded from income ☐ Yes ☐ No	
☐ (M) Income from renting out your house or a room in your house		☐ (M) Rental income	
If yes, did you use the dwelling unit as a personal residence and rent it for few than 15 days ☐ Yes ☐ No			
☐ Income from renting personal property such as a vehicle			
☐ Farm activity		☐ Farm income (out of scope)	
☐ Gambling winnings, including lottery		☐ (B) W-2G or other gambling winnings (list losses below if taxpayer can itemize deductions)	
☒ Payments for contract or self-employment work		☐ (A) Schedule C	
Did you report a loss on last year's return ☐ Yes ☒ No		☐ 1099-MISC _____ Number _____	
		☐ 1099-K _____ Number _____	
		☐ Other income reported elsewhere	
		☐ Schedule C expenses	
☐ Any other money received during the year (example: cash payments, jury duty, awards, virtual currency, royalties, union strike benefits)		☐ Other income (see Pub 4012 for guidance on other income, i.e., scope of service chart)	

Paid any of the following expenses in 2024:		Standard or Itemized Deductions (To be completed by certified volunteer)	Notes/Comments
☐ (A) Mortgage Interest		☐ (B) Taxable state/local income taxes	
☐ (A) Taxes: state, local, real estate, sales, etc.			
☐ (A) Medical, Dental, Prescription Expenses		☐ (B) Standard deduction ☐ (A) Itemized deduction	
☐ (B) Charitable contributions			
Paid any of these expenses in 2024:		Expenses to report (To be completed by certified volunteer)	Notes/Comments
☒ (B) Student loan interest		☐ (B) 1098-E	
☐ (B) Child and dependent care		☐ (B) Child and dependent care credit	
☒ (B/A) Contributions to a retirement account		☐ (A) IRA, 401(k), etc. deduction	
☐ Repayments to a qualified retirement plan		☐ (B) Saver's credit	
☐ (B) School supplies by a teacher, teacher's aide or other educator		☐ (B) Educator expenses deduction	
☐ (B) Alimony payments (do not include child support)		☐ (B) Alimony payments with spouse's SSN \$ ☐ Yes ☐ No	
Did any of the following happen during 2024:		Information to report (To be completed by certified volunteer)	Notes/Comments
☒ (B) You or someone in your family took educational classes (technical school, college, job related, etc.)		☐ (B) Taxable scholarship income	
		☐ (B) 1098-T (itemized statement from school, invoice, etc.)	
		☐ (B) Education credit or tuition and fees deduction	
☐ (A) Sell a home		☐ (A) Sale of home (1099-S)	
☐ (A) Have a health savings account (HSA)		☐ HSA contributions ☐ HSA distributions	
☐ (A) Purchase health insurance through the Marketplace (Exchange)		☐ (A) 1095-A	
☐ (A) Purchase and install energy-efficient home items (example: windows, furnace, insulation, etc.)		☐ (B) Energy efficient home improvement credit	
☐ (A) Have credit card, mortgage, or other debt cancelled/forgiven by a lender		☐ (A) 1099-C	
☐ Have a loss related to a declared federal disaster area		☐ (A) 1099-A	
		☐ Disaster relief impacts return	
☐ (B) Have a tax credit disallowed (example: earned income credit, child tax credit, or American opportunity credit)		☐ (B) EITC, CTC, AOTC or HOH disallowed in a previous year	
		Year disallowed Reason	
☐ Receive any letter or bill from the IRS		☐ Eligible for Low Income Taxpayer Clinic referral	
☐ (B) Make estimated tax payments or apply last year's refund to 2024 taxes		☐ Estimated tax payments	
		☐ Last year's refund applied to this year	
		☐ Last year's return available	
☐ Additional information you think we should know		☐ Additional information for accurate tax preparation	

The following information is for statistical purposes. These questions are optional.

1. Would you say you can carry on a conversation in English ☒ Very well ☐ Well ☐ Not well ☐ Not at all ☐ Prefer not to answer
2. Would you say you read a newspaper in English ☒ Very well ☐ Well ☐ Not well ☐ Not at all ☐ Prefer not to answer
3. Do you or any member of your household have a disability ☐ Yes ☒ No ☐ Prefer not to answer
4. Are you or your spouse a Veteran from the U.S. Armed Forces ☐ Yes ☒ No ☐ Prefer not to answer

5. What is your race and/or ethnicity (select all that apply and enter additional details in the spaces below)

- ☐ **American Indian or Alaska Native** (enter, for example, Navajo Nation, Blackfeet Tribe of the Blackfeet Indian Reservation of Montana, Native Village of Barrow Inupiat Traditional Government, Nome Eskimo Community, Aztec, Maya, etc.)

- ☐ **Asian** (provide details below)
- ☐ Chinese ☐ Asian Indian ☐ Filipino
- ☐ Vietnamese ☐ Korean ☐ Japanese
- Enter, for example, Pakistani, Hmong, Afghan, etc.

- ☐ **Black or African American** (provide details below)
- ☐ African American ☐ Jamaican ☐ Haitian
- ☐ Nigerian ☐ Ethiopian ☐ Somali
- Enter, for example, Trinidadian and Tobagonian, Ghanaian, Congolese, etc.

- ☐ **Hispanic or Latino** (provide details below)
- ☐ Mexican ☐ Puerto Rican ☐ Salvadoran
- ☐ Cuban ☐ Dominican ☐ Guatemalan
- Enter, for example, Colombian, Honduran, Spaniard, etc.

- ☐ **Middle Eastern or North African** (provide details below)
- ☐ Lebanese ☐ Iranian ☐ Egyptian
- ☐ Syrian ☐ Iraqi ☐ Israeli
- Enter, for example, Moroccan, Yemeni, Kurdish, etc.

- ☐ **Native Hawaiian or Pacific Islander** (provide details below)
- ☐ Native Hawaiian ☐ Samoan ☐ Chamorro
- ☐ Tongan ☐ Fijian ☐ Marshallese
- Enter, for example, Chuukese, Palauan, Tahitian, etc.

- ☐ **White** (provide details below)
- ☐ English ☐ German ☐ Irish
- ☐ Italian ☐ Polish ☐ Scottish
- Enter, for example, French, Swedish, Norwegian, etc.

6. What is your spouse's race and/or ethnicity (select all that apply and enter additional details in the spaces below)

- ☐ **American Indian or Alaska Native** (enter, for example, Navajo Nation, Blackfeet Tribe of the Blackfeet Indian Reservation of Montana, Native Village of Barrow Inupiat Traditional Government, Nome Eskimo Community, Aztec, Maya, etc.)

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- ☐ **White** (provide details below)
- ☐ English ☐ German ☐ Irish
- ☐ Italian ☐ Polish ☐ Scottish
- Enter, for example, French, Swedish, Norwegian, etc.

Additional comments

Privacy Act and Paperwork Reduction Act Notice

We are asking for this information so you may participate in the IRS Volunteer Income Tax Assistance (VITA) and Tax Counseling for the Elderly (TCE) program which provides IRS-certified volunteer income tax preparers to assist with basic income tax return preparation for qualified individuals. The IRS authority to collect this information is 5 USC 301 and 26 USC 7801. The information you provide may be disclosed to others who coordinate VITA/TCE staffing, outreach, and other VITA/TCE related activities. The IRS may only disclose your return and return information as provided by 26 U.S.C. 6103. All other records may be disclosed only for purposes the IRS deems are compatible with the purpose for which IRS collected the records, and consistent with any routine use disclosures described in the System of Record Notice (SORN) Treasury/IRS 24.030, Customer Account Data Engine Individual Master File. You may view Treasury/IRS SORNs on the Treasury SORN website at [Treasury.gov/system-of-records/Notices/SORNs](https://www.treasury.gov/system-of-records/Notices/SORNs). Providing this information is voluntary however, if you do not provide the requested information the IRS volunteers may not be able to assist you with preparing and filing your tax return. 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.

Department of the Treasury—Internal Revenue Service

☐ CORRECTED (if checked)

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.

FAST EATS
123 LILAC AVENUE
YOUR CITY, YOUR STATE, ZIP

OMB No. 1545-0116

Form **1099-NEC**

(Rev. January 2024)

For calendar year
2024

**Nonemployee
Compensation**

PAYER'S TIN

63-400XXXX

RECIPIENT'S TIN

605-00-XXXX

1 Nonemployee compensation

\$ 1,000.00

RECIPIENT'S name

STEPHANIE WINTER

2 Payer made direct sales totaling \$5,000 or more of consumer products to recipient for resale ☐

3

Street address (including apt. no.)

160 UNIVERSITY DRIVE

4 Federal income tax withheld

City or town, state or province, country, and ZIP or foreign postal code

YOUR CITY, YOUR STATE, ZIP

5 State tax withheld

6 State/Payer's state no.

7 State income

Account number (see instructions)

\$

\$

Form **1099-NEC** (Rev. 1-2024)

(keep for your records)

www.irs.gov/Form1099NEC

Department of the Treasury - Internal Revenue Service

Copy B

For Recipient

This is important tax information and is being furnished to the IRS. 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.

ONLY DRAFT

September 27, 2023

☐ CORRECTED (if checked)

FILER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.

FAST EATS
123 LILAC AVENUE
YOUR CITY, YOUR STATE, ZIP

FILER'S TIN

63-400XXXX

OMB No. 1545-2205

Form **1099-K**

(Rev. March 2024)

For calendar year
2024

**Payment Card and
Third Party
Network
Transactions**

Check to indicate if FILER is a (an):

Payment settlement entity (PSE) ☐
Electronic Payment Facilitator (EPF)/Other third party ☒

Check to indicate transactions reported are:

Payment card ☐

Third party network ☒

1a Gross amount of payment card/third party network transactions

\$ 8,225.00

1b Card Not Present transactions

\$

2 Merchant category code

3 Number of payment transactions

325

4 Federal income tax withheld

\$

**Copy B
For Payee**

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

PAYEE'S name

STEPHANIE WINTER

Street address (including apt. no.)

160 UNIVERSITY DRIVE

City or town, state or province, country, and ZIP or foreign postal code

YOUR CITY, YOUR STATE, ZIP

PSE'S name and telephone number

5a January

\$ 700.00

5c March

\$ 900.00

5e May

\$ 700.00

5g July

\$ 500.00

5i September

\$ 750.00

5k November

\$ 900.00

5b February

\$ 750.00

5d April

\$ 775.00

5f June

\$ 350.00

5h August

\$ 450.00

5j October

\$ 700.00

5l December

\$ 750.00

Account number (see instructions)

6 State

7 State identification no.

8 State income tax withheld

\$

\$

Form **1099-K** (Rev. 3-2024)

(Keep for your records)

www.irs.gov/Form1099K

Department of the Treasury - Internal Revenue Service



Note: She also received \$570 in cash payments per the interview notes.

XYZ Investments

456 Pima Plaza
Your City, YS, ZIP

2024 TAX REPORTING STATEMENT

Stephanie Winter
160 University Drive
Your City, YS, ZIP
Account No. 111-222
Recipient ID No. 605-00-XXXX
Payer's Fed ID Number: 40-200XXXX

Form 1099-DIV* 2024 Dividends and Distributions

Copy B for Recipient (OMB NO. 1545-0110)

1a	Total Ordinary Dividends	300.00
1b	Qualified Dividends	225.00
2a	Total Capital Gain Distributions (Includes 2b- 2d)	350.00
2b	Capital Gains that represent Unrecaptured 1250 Gain	0.00
2c	Capital Gains that represent Section 1202 Gain	0.00
2d	Capital Gains that represent Collectibles (28%) Gain	0.00
2e	Section 897 Ordinary Dividends	0.00
2f	Section 897 Capital Gains	0.00
2	Nondividend Distributions	0.00
3	Nondividend Distributions	0.00
4	Federal Income Tax Withheld	0.00
5	Section 199A Dividends	32.00
6	Investment Expenses	0.00
7	Foreign Tax Paid	0.00
8	Foreign Country or U.S. Possession	0.00
9	Cash Liquidation Distributions	0.00
10	Noncash Liquidation Distributions	0.00
11	FATCA Filing Requirement	
12	Exempt Interest Dividends	0.00
13	Specified Private Activity Bond Interest Dividends	0.00
14	State	YS
15	State Identification No.	01-XXXXXXX
16	State Tax Withheld	0.00

Form 1099-MISC* 2024 Miscellaneous Income

Copy B for Recipient (OMB NO. 1545-0115)

2	Royalties	0.00
4	Federal Income Tax Withheld	0.00
8	Substitute Payments in Lieu of Dividends or Interest	0.00
16	State Tax Withheld	0.00
17	State/ Payer's State No.	
18	State Income	0.00

Form 1099-INT* 2024 Interest Income

Copy B for Recipient (OMB NO. 1545-0112)

1	Interest Income	50.00
2	Early Withdrawal Penalty	0.00
3	Interest on U.S. Savings Bonds and Treas. Obligations	0.00
4	Federal Income Tax Withheld	0.00
5	Investment Expenses	0.00
6	Foreign Tax Paid	0.00
7	Foreign Country or U.S. Possession	0.00
8	Tax-Exempt Interest	0.00
9	Specified Private Activity Bond Interest	0.00
14	Tax-Exempt Bond CUSIP No.	

Summary of 2024 Proceeds From Broker and Barter Exchange Transactions

Sales Price of Stocks, Bonds, etc.	5,100.00
Federal Income Tax Withheld	0.00

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.

XYZ Investments

456 Pima Plaza
Your City, YS, ZIP

2024 TAX REPORTING STATEMENT

Stephanie Winter
160 University Drive
Your City, YS, ZIP
Account No. 111-222
Recipient ID No. 605-00-XXXX
Payer's Fed ID Number: 40-200XXXX

FORM 1099-B* 2024 Proceeds from Broker and Barter Exchange Transactions

Copy B for Recipient OMB NO. 1545-0715

Short-term transactions for which basis is reported to the IRS

Report on Form 8949 with Box A checked and/or Schedule D, Part I
(This Label is a Substitute for Boxes 1c & 6)

8 Description, **1d** Stock or Other Symbol, CUSIP (IRS Form 1099-B box numbers are shown below in bold type)

Action	1b Date Acquired	1c Date sold disposed	1a Quantity Sold	1d Proceeds	1e Cost or Other Basis	Gain / Loss (-)	1g Wash Sale Loss Disallowed	4 Federal Income Tax Withheld	14 State State	15 State Tax Withheld
Nebraska Co. Common Stock										
Sale	01/20/2024	02/29/2024	200.000	2,000.00	1,750.00	250.00				
TOTALS				2,000.00	1,750.00					

FORM 1099-B* 2024 Proceeds from Broker and Barter Exchange Transactions

Copy B for Recipient OMB NO. 1545-0715

Long-term transactions for which basis is not reported to the IRS

Report on Form 8949 with Box E checked and/or Schedule D, Part II
(This Label is a Substitute for Boxes 1c & 6)

8 Description, **1d** Stock or Other Symbol, CUSIP (IRS Form 1099-B box numbers are shown below in bold type)

Action	1b Date Acquired	1c Date sold disposed	1a Quantity Sold	1d Proceeds	1e Cost or Other Basis	Gain / Loss (-)	1g Wash Sale Loss Disallowed	4 Federal Income Tax Withheld	14 State State	15 State Tax Withheld
Iowa Co. Common Stock										
Sale	10/12/2008	10/31/2024	200.000	3,100.00	4,000.00	(900.00)				
TOTALS				3,100.00	4,000.00					

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.

Page 2 of 2

☐ CORRECTED (if checked)		OMB No. 1545-1576 2024 Form 1098-E		Student Loan Interest Statement
RECIPIENT'S/LENDER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone number FINANCIAL AID PARTNERS 305 WASHINGTON DR YOUR CITY, YOUR STATE, ZIP				
RECIPIENT'S TIN 38-800XXXX	BORROWER'S TIN 605-00-XXXX	1 Student loan interest received by lender \$ 3,750.00		Copy B For Borrower
BORROWER'S name STEPHANIE WINTER		2 If checked, box 1 does not include loan origination fees and/or capitalized interest for loans made before September 1, 2004		This is important tax information and is being furnished to the IRS. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if the IRS determines that an underpayment of tax results because you overstated a deduction for student loan interest.
Street address (including apt. no.) 160 UNIVERSITY DRIVE		City or town, state or province, country, and ZIP or foreign postal code YOUR CITY, YOUR STATE, ZIP		
Account number (see instructions)				
Form 1098-E (keep for your records)		www.irs.gov/Form1098E		Department of the Treasury - Internal Revenue Service

ONLY DRAFT

September 28, 2023

DO NOT FILE

☐ CORRECTED		OMB No. 1545-1574 2024 Form 1098-T		Tuition Statement
FILER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone number MERCURY COLLEGE 10 COLLEGE AVENUE YOUR CITY, YOUR STATE, ZIP		1 Payments received for qualified tuition and related expenses \$ 2,400.00		
FILER'S employer identification no. 37-700XXXX	STUDENT'S TIN 605-00-XXXX	2		
STUDENT'S name STEPHANIE WINTER		3		Copy B For Student
Street address (including apt. no.) 160 UNIVERSITY DRIVE		4 Adjustments made for a prior year \$		5 Scholarships or grants \$
City or town, state or province, country, and ZIP or foreign postal code YOUR CITY, YOUR STATE, ZIP		6 Adjustments to scholarships or grants for a prior year \$		7 Checked if the amount in box 1 includes amounts for an academic period beginning January-March 2025
Service Provider/Acct. No. (see instr.)	8 Checked if at least half-time student ☐	9 Checked if a graduate student ☒	10 Ins. contract reimb./refund \$	
Form 1098-T (keep for your records)		www.irs.gov/Form1098T		Department of the Treasury - Internal Revenue Service

ONLY DRAFT

September 28, 2023

DO NOT FILE

Stephanie Winter
160 University Drive
YOUR CITY, STATE, ZIP

1234

PAY TO THE
ORDER OF

20

\$

DOLLARS

New Bank and Trust
Anytown, State 00000

For

: 111000025 : 123456789

1234

VOID

Advanced Scenario 8: Test Questions

Directions

Using the tax software, complete the tax return, including Form 1040 and all appropriate forms, schedules, or worksheets. Answer the questions following the scenario.

 *When entering Social Security numbers (SSNs) or Employer Identification Numbers (EINs), replace the Xs as directed, or with any four digits of your choice.*

23. The net short-term capital gain reported on Stephanie's Schedule D is \$_____.
(Note: whole number only, do not use special characters.)
24. Which of the following can be claimed as a business expense on Stephanie's Schedule C?
- a. Tolls
 - b. Speeding Ticket
 - c. Lunches
 - d. All of the above
25. Stephanie can take a student loan interest deduction of \$3,750.
- a. True
 - b. False
26. What is the total standard mileage deduction for Stephanie's business on Schedule C?
- a. \$630
 - b. \$1,965
 - c. \$2,010
 - d. \$8,040
27. The amount of Stephanie's lifetime learning credit is \$480.
- a. True
 - b. False
28. What is Stephanie's additional 10% tax on the early withdrawal from her IRA on Form 1040 Schedule 2, Part II??
- a. \$0
 - b. \$240
 - c. \$260
 - d. \$500
29. To avoid having a balance due next year, Stephanie can use the IRS withholding estimator to calculate her tax liability and submit a new Form W-4 to increase her tax withholding.
- a. True
 - b. False

Advanced Scenario 9: Joe Lopez

Directions

Using the tax software, complete the tax return, including Form 1040 and all appropriate forms, schedules, or worksheets. Answer the questions following the scenario.

 When entering Social Security numbers (SSNs) or Employer Identification Numbers (EINs), replace the Xs as directed, or with any four digits of your choice.

Interview Notes

- Joe is age 41 and was widowed in July, 2023. He has a daughter, Josie, age 9, who lived with him the entire year.
- Joe provided the entire cost of maintaining the household and over half of the support for Josie. In order to work, he pays childcare expenses to Southside Daycare.
- Joe purchased health insurance for himself and his daughter through the Marketplace. He received a Form 1095-A.
- Joe and Josie are U.S. citizens and lived in the United States all year in 2024.



Form 13614-C (October 2024)		Department of the Treasury - Internal Revenue Service				Intake/Interview and Quality Review Sheet				OMB Number 1545-1964	
Note: Do not complete this form if you (or your spouse) are not a U.S. citizen or green card holder.											
You will need: • Tax Information such as Forms W-2, 1099, 1098, 1095. • Social Security cards or ITIN letters for all persons on your tax return • Picture ID (such as valid driver's license) for you and your spouse Volunteers are trained to provide high quality service and uphold the highest ethical standards. To report unethical behavior to the IRS, email us at wi.voltax@irs.gov											
Your first name (pronouns, optional) JOE		M.I.	Last name LOPEZ	Your date of birth 04/12/1983		Your job JANITOR					
Spouse's first name (pronouns, optional)		M.I.	Last name	Spouse's date of birth		Spouse's job					
Mailing address 200 SKY WAY				Apt #	City YOUR CITY	State YS	ZIP code YOUR ZIP				
Telephone number YOUR PHONE NUMBER		Email address		Did you live or work in two or more states in 2024 ☐ Yes ☒ No							
Check if you or your spouse were in 2024: A U.S. citizen ☒ You ☐ Spouse ☐ No In the U.S. on a visa ☐ You ☐ Spouse ☒ No A full-time student ☐ You ☐ Spouse ☒ No											
If due a refund , would you like your refund ☐ Direct deposit ☒ Check by mail ☐ Split refund between accounts ☐ Other											
Would you like to receive written communications from the IRS in a language other than English ☐ Yes ☒ No What language											
As of December 31, 2024, what was your marital status ☐ Never Married ☐ Married If married, were you married for all of 2024 ☐ Yes ☐ No Did you live with your spouse during any part of the last six months of 2024 ☐ Yes ☐ No ☐ Divorced ☐ Legally Separated ☒ Widowed Year of spouse's death 2023											
Can anyone else claim the taxpayer or spouse on their tax return (to be completed by certified volunteer)											
List the names below of everyone who lived with you last year (except your spouse) AND anyone you supported but did not live with you last year.				Answer Yes or No (Y/N)				To be completed by certified volunteer (Refer to Pub 4012 Tab C)			
Name (first, last)	Date of birth (mm/dd/yy)	Relationship to you (son, daughter, parent, none, etc.)	Number of months lived in your home in 2024	Single or Married as of 12/31/2024 (S/M)	A U.S. Citizen	Resident of U.S., Canada or Mexico	Full-time student	Totally and permanently disabled	Qualifying child dependent	Qualifying relative dependent	Provides tax benefits (HOH, EITC, CTC, etc.)
JOSIE LOPEZ	07/24/2015	DAUGHTER	12	S	Y	Y	Y	N			
Catalog Number 52121E											
www.irs.gov											
Form 13614-C (Rev. 10-2024)											

Answer the following questions on this page and the next page about you and your spouse's tax situation

Received money from any of the following in 2024:		Income to be included (To be completed by certified volunteer)	Notes/Comments
☒ (B) Wages as a part-time or full-time employee How many jobs <u>1</u>		☐ (B) W-2s Number of forms _____	
☐ (B/A) Tips		☐ (B/A) Tips (basic when reported on W2)	
☐ (B/A) Retirement account, pension or annuity proceeds		☐ (B/A) 1099-R (basic when taxable amount is reported)	
☐ (B) Disability benefits		Number of forms _____	
☐ (B) Social Security or Railroad Retirement Benefits		☐ (B) SSA-1099, RRB-1099	
☐ (B) Unemployment benefits		☐ (B) 1099-G Number of forms _____	
☐ (B) Refund of state or local income tax		☐ Did you receive a refund of state or local taxes ☐ Yes ☐ No ☐ Did you itemize last year ☐ Yes ☐ No	
☒ (B) Interest or dividends (bank account, bonds, etc.)		☐ (B) 1099-INT/DIV Number of forms _____	
☐ (A) Sale of stocks, bonds or real estate Did you report a loss on last year's return ☐ Yes ☐ No		☐ (A) 1099-B Number of forms _____ (include brokerage statement) ☐ Capital Loss carryover	
☐ (B) Alimony		☐ (B) Alimony Amount \$ _____ Excluded from income ☐ Yes ☐ No	
☐ (M) Income from renting out your house or a room in your house If yes, did you use the dwelling unit as a personal residence and rent it for few than 15 days ☐ Yes ☐ No		☐ (M) Rental income	
☐ Income from renting personal property such as a vehicle			
☐ Farm activity		☐ Farm income (out of scope)	
☐ Gambling winnings, including lottery		☐ (B) W-2G or other gambling winnings (list losses below if taxpayer can itemize deductions)	
☐ Payments for contract or self-employment work Did you report a loss on last year's return ☐ Yes ☒ No		☐ (A) Schedule C ☐ 1099-MISC Number _____ ☐ 1099-K Number _____ ☐ Other income reported elsewhere ☐ Schedule C expenses	
☐ Any other money received during the year (example: cash payments, jury duty, awards, virtual currency, royalties, union strike benefits)		☐ Other income (see Pub 4012 for guidance on other income, i.e., scope of service chart)	

Paid any of the following expenses in 2024:

- ☐ (A) Mortgage Interest
☐ (A) Taxes: state, local, real estate, sales, etc.
☐ (A) Medical, Dental, Prescription Expenses
☐ (B) Charitable contributions

Standard or Itemized Deductions (To be completed by certified volunteer)

- ☐ (B) Taxable state/local income taxes
☐ (B) Standard deduction ☐ (A) Itemized deduction

Notes/Comments**Paid any of these expenses in 2024:**

- ☐ (B) Student loan interest
☒ (B) Child and dependent care
☒ (B/A) Contributions to a retirement account
☐ Repayments to a qualified retirement plan
☐ (B) School supplies by a teacher, teacher's aide or other educator
☐ (B) Alimony payments (do not include child support)

Expenses to report (To be completed by certified volunteer)

- ☐ (B) 1098-E
☐ (B) Child and dependent care credit
☐ (A) IRA, 401(k), etc. deduction
☐ (B) Saver's credit
☐ (B) Educator expenses deduction
☐ (B) Alimony payments with spouse's SSN \$ _____
 Adjustment to income ☐ Yes ☐ No

Notes/Comments**Did any of the following happen during 2024:**

- ☐ (B) You or someone in your family took educational classes (technical school, college, job related, etc.)

Information to report (To be completed by certified volunteer)

- ☐ (B) Taxable scholarship income
☐ (B) 1098-T (itemized statement from school, invoice, etc.)
☐ (B) Education credit or tuition and fees deduction

Notes/Comments

- ☐ (A) Sell a home

- ☐ (A) Sale of home (1099-S)

- ☐ (A) Have a health savings account (HSA)

- ☐ HSA contributions ☐ HSA distributions

- ☒ (A) Purchase health insurance through the Marketplace (Exchange)

- ☐ (A) 1095-A

- ☐ (A) Purchase and install energy-efficient home items (example: windows, furnace, insulation, etc.)

- ☐ (B) Energy efficient home improvement credit

- ☐ (A) Have credit card, mortgage, or other debt cancelled/forgiven by a lender

- ☐ (A) 1099-C

- ☐ Have a loss related to a declared federal disaster area

- ☐ (A) 1099-A

- ☐ Disaster relief impacts return

- ☐ (B) Have a tax credit disallowed (example: earned income credit, child tax credit, or American opportunity credit)

- ☐ (B) EITC, CTC, AOTC or HOH disallowed in a previous year
Year disallowed Reason

- ☐ Receive any letter or bill from the IRS

- ☐ Eligible for Low Income Taxpayer Clinic referral

- ☐ (B) Make estimated tax payments or apply last year's refund to 2024 taxes

- ☐ Estimated tax payments

- ☐ Last year's refund applied to this year

- ☐ Last year's return available

- ☐ Additional information you think we should know

- ☐ Additional information for accurate tax preparation

The following information is for statistical purposes. These questions are optional.

1. Would you say you can carry on a conversation in English ☒ Very well ☐ Well ☐ Not well ☐ Not at all ☐ Prefer not to answer 2. Would you say you read a newspaper in English ☒ Very well ☐ Well ☐ Not well ☐ Not at all ☐ Prefer not to answer 3. Do you or any member of your household have a disability ☐ Yes ☒ No ☐ Prefer not to answer 4. Are you or your spouse a Veteran from the U.S. Armed Forces ☐ Yes ☒ No ☐ Prefer not to answer 5. What is your race and/or ethnicity (select all that apply and enter additional details in the spaces below) ☐ American Indian or Alaska Native (enter, for example, Navajo Nation, Blackfeet Tribe of the Blackfeet Indian Reservation of Montana, Native Village of Barrow Inupiat Traditional Government, Nome Eskimo Community, Aztec, Maya, etc.) ☐ Asian (provide details below) ☐ Chinese ☐ Asian Indian ☐ Filipino ☐ Vietnamese ☐ Korean ☐ Japanese Enter, for example, Pakistani, Hmong, Afghan, etc. ☐ Black or African American (provide details below) ☐ African American ☐ Jamaican ☐ Haitian ☐ Nigerian ☐ Ethiopian ☐ Somali Enter, for example, Trinidadian and Tobagonian, Ghanaian, Congolese, etc. ☐ Hispanic or Latino (provide details below) ☐ Mexican ☐ Puerto Rican ☐ Salvadoran ☐ Cuban ☐ Dominican ☐ Guatemalan Enter, for example, Colombian, Honduran, Spaniard, etc. ☐ Middle Eastern or North African (provide details below) ☐ Lebanese ☐ Iranian ☐ Egyptian ☐ Syrian ☐ Iraqi ☐ Israeli Enter, for example, Moroccan, Yemeni, Kurdish, etc. ☐ Native Hawaiian or Pacific Islander (provide details below) ☐ Native Hawaiian ☐ Samoan ☐ Chamorro ☐ Tongan ☐ Fijian ☐ Marshallese Enter, for example, Chuukese, Palauan, Tahitian, etc. ☐ White (provide details below) ☐ English ☐ German ☐ Irish ☐ Italian ☐ Polish ☐ Scottish Enter, for example, French, Swedish, Norwegian, etc.	6. What is your spouse's race and/or ethnicity (select all that apply and enter additional details in the spaces below) ☐ American Indian or Alaska Native (enter, for example, Navajo Nation, Blackfeet Tribe of the Blackfeet Indian Reservation of Montana, Native Village of Barrow Inupiat Traditional Government, Nome Eskimo Community, Aztec, Maya, etc.) ☐ Asian (provide details below) ☐ Chinese ☐ Asian Indian ☐ Filipino ☐ Vietnamese ☐ Korean ☐ Japanese Enter, for example, Pakistani, Hmong, Afghan, etc. ☐ Black or African American (provide details below) ☐ African American ☐ Jamaican ☐ Haitian ☐ Nigerian ☐ Ethiopian ☐ Somali Enter, for example, Trinidadian and Tobagonian, Ghanaian, Congolese, etc. ☐ Hispanic or Latino (provide details below) ☐ Mexican ☐ Puerto Rican ☐ Salvadoran ☐ Cuban ☐ Dominican ☐ Guatemalan Enter, for example, Colombian, Honduran, Spaniard, etc. ☐ Middle Eastern or North African (provide details below) ☐ Lebanese ☐ Iranian ☐ Egyptian ☐ Syrian ☐ Iraqi ☐ Israeli Enter, for example, Moroccan, Yemeni, Kurdish, etc. ☐ Native Hawaiian or Pacific Islander (provide details below) ☐ Native Hawaiian ☐ Samoan ☐ Chamorro ☐ Tongan ☐ Fijian ☐ Marshallese Enter, for example, Chuukese, Palauan, Tahitian, etc. ☐ White (provide details below) ☐ English ☐ German ☐ Irish ☐ Italian ☐ Polish ☐ Scottish Enter, for example, French, Swedish, Norwegian, etc.
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Additional comments

Privacy Act and Paperwork Reduction Act Notice

We are asking for this information so you may participate in the IRS Volunteer Income Tax Assistance (VITA) and Tax Counseling for the Elderly (TCE) program which provides IRS-certified volunteer income tax preparers to assist with basic income tax return preparation for qualified individuals. The IRS authority to collect this information is 5 USC 301 and 26 USC 7801. The information you provide may be disclosed to others who coordinate VITA/TCE staffing, outreach, and other VITA/TCE related activities. The IRS may only disclose your return and return information as provided by 26 U.S.C. 6103. All other records may be disclosed only for purposes the IRS deems are compatible with the purpose for which IRS collected the records, and consistent with any routine use disclosures described in the System of Record Notice (SORN) Treasury/IRS 24.030, Customer Account Data Engine Individual Master File. You may view Treasury/IRS SORNs on the Treasury SORN website at [Treasury.gov/System of Records Notices \(SORNs\)](https://www.treasury.gov/system-of-records/Notices/SORNs). Providing this information is voluntary however, if you do not provide the requested information the IRS volunteers may not be able to assist you with preparing and filing your tax return. 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, 111 Constitution Ave. NW, Washington, DC 20224.

22222		a Employee's social security number 328-00-XXXX		OMB No. 1545-0008			
b Employer identification number (EIN) 34-800XXXX				1 Wages, tips, other compensation \$42,000.00	2 Federal income tax withheld \$1,700.00		
c Employer's name, address, and ZIP code ROSEWOOD SCHOOL DISTRICT 1452 ROOSEVELT CIRCLE YOUR CITY, YOUR STATE, ZIP				3 Social security wages \$43,500.00	4 Social security tax withheld \$2,697.00		
				5 Medicare wages and tips \$43,500.00	6 Medicare tax withheld \$630.75		
				7 Social security tips	8 Allocated tips		
d Control number				9	10 Dependent care benefits		
e Employee's first name and initial JOE		Last name LOPEZ		Suff.	11 Nonqualified plans		
f Employee's address and ZIP code 200 SKY WAY YOUR CITY, YOUR STATE, ZIP		13 Statutory employee ☐		Retirement plan ☒	Third-party sick pay ☐	12a D \$1,500.00	
						12b	
						12c	
						12d	
15 State YS	Employer's state ID number 34-800XXXX		16 State wages, tips, etc. \$42,000.00	17 State income tax \$600.00	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Form **W-2** Wage and Tax Statement 2024 Department of the Treasury—Internal Revenue Service
Copy 1—For State, City, or Local Tax Department

☐ VOID ☐ CORRECTED				
PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no. NEW BANK AND TRUST 8020 YONKERS BLVD YOUR CITY, YOUR STATE, ZIP		Payer's RTN (optional)	OMB No. 1545-0112 Form 1099-INT (Rev. January 2024) For calendar year 2024	Interest Income
PAYER'S TIN 22-700XXXX		RECIPIENT'S TIN 328-00-XXXX	1 Interest income \$ 140.00	Copy 1 For State Tax Department
RECIPIENT'S name JOE LOPEZ Street address (including apt. no.) 200 SKY WAY City or town, state or province, country, and ZIP or foreign postal code YOUR CITY, YOUR STATE, ZIP		2 Early withdrawal penalty \$ 28.00	3 Interest on U.S. Savings Bonds and Treasury obligations \$	
FATCA filing requirement ☐		4 Federal income tax withheld \$	5 Investment expenses \$	
		6 Foreign tax paid \$	7 Foreign country or U.S. territory	
		8 Tax-exempt interest \$	9 Specified private activity bond interest \$	
		10 Market discount \$	11 Bond premium \$	
Account number (see instructions)		12 Bond premium on Treasury obligations \$	13 Bond premium on tax-exempt bond \$	
14 Tax-exempt and tax credit bond CUSIP no.		15 State	16 State identification no.	17 State tax withheld \$

Form **1099-INT** (Rev. 1-2024) www.irs.gov/Form1099INT Department of the Treasury - Internal Revenue Service

Part I Recipient Information

1 Marketplace identifier 12-3456789	2 Marketplace-assigned policy number 987654	3 Policy issuer's name
4 Recipient's name JOE LOPEZ	5 Recipient's SSN 328-00-XXXX	6 Recipient's date of birth 4/12/1983
7 Recipient's spouse's name	8 Recipient's spouse's SSN	9 Recipient's spouse's date of birth
10 Policy start date 01/01/2024	11 Policy termination date 12/31/2024	12 Street address (including apartment no.)
13 City or town YOUR CITY	14 State or province YOUR STATE	15 Country and ZIP or foreign postal code ZIP

Part II Covered Individuals

	A. Covered individual name	B. Covered individual SSN	C. Covered individual date of birth	D. Coverage start date	E. Coverage termination date
16	JOE LOPEZ	328-00-XXXX	04/12/1983	01/01/2024	12/31/2024
17	JOSIE LOPEZ	125-00-XXXX	07/24/2015	01/01/2024	12/31/2024
18					
19					
20					

Part III Coverage Information

Month	A. Monthly enrollment premiums	B. Monthly second lowest cost silver plan (SLCSP) premium	C. Monthly advance payment of premium tax credit
21 January	\$446	\$602	\$388
22 February	\$446	\$602	\$388
23 March	\$446	\$602	\$388
24 April	\$446	\$602	\$388
25 May	\$446	\$602	\$388
26 June	\$446	\$602	\$388
27 July	\$446	\$602	\$388
28 August	\$446	\$602	\$388
29 September	\$446	\$602	\$388
30 October	\$446	\$602	\$388
31 November	\$446	\$602	\$388
32 December	\$446	\$602	\$388
33 Annual Totals	\$5,352	\$7,224	\$4,656



Southside **Day Care**

303 Twiggs Trail
Your City, Your State, Zip
Ph: (555) 555-1234

December 31, 2024

Received from Joe Lopez

\$7,200 for daycare services for Josie

Total amount received for after school
care in 2024 - \$7,200

Ellen River

EIN: 35-900XXXX

Advanced Scenario 9: Test Questions

Directions

Using the tax software, complete the tax return, including Form 1040 and all appropriate forms, schedules, or worksheets. Answer the questions following the scenario.

 *When entering Social Security numbers (SSNs) or Employer Identification Numbers (EINs), replace the Xs as directed, or with any four digits of your choice.*

30. What is Joe's most advantageous filing status?
- a. Single
 - b. Married Filing Separately
 - c. Head of Household
 - d. Qualifying Surviving Spouse (QSS)
31. Joe adjusted gross income on his Form 1040 is _____.
- a. \$12,912
 - b. \$42,000
 - c. \$42,112
 - d. \$42,140
32. Joe is eligible to claim the Child Tax Credit.
- a. True
 - b. False
33. Joe's retirement savings contributions credit is _____.
- a. \$0
 - b. \$100
 - c. \$150
 - d. \$1,500
34. The total amount of Joe's net premium tax credit on Form 1040 Schedule 3, line 9 is \$696.
- a. True
 - b. False
35. Joe's child and dependent care credit from Form 2441 is _____.
(Note: whole number only, do not use special characters.)

Advanced Course Retest Questions

Directions

The first five scenarios do not require you to prepare a tax return. **Read the interview notes for each scenario carefully and use your training and resource materials to answer the questions after the scenarios.**

Advanced Scenario 1: Sharon Smith

Interview Notes

- Sharon's husband, Daniel, moved out of their home in February of 2022. Sharon has had no contact with Daniel since he moved out. Sharon and Daniel are not legally separated.
- Sharon has one child, Lea, age 10. She will claim Lea as a dependent on her 2024 tax return.
- Sharon is 31 years old.
- Sharon earned \$44,500 in wages and received \$50 of interest. Sharon had lottery winnings of \$2,000 reported on Form W-2G.
- Sharon paid all the costs of keeping up her home. She provided over half of the support for Lea.
- They all are U.S. citizens and have valid Social Security numbers. They lived in the U.S. all year.

Advanced Scenario 1: Retest Questions

1. What is the most beneficial allowable filing status that Sharon is eligible to claim on her 2024 tax return?
 - a. Single
 - b. Married Filing Separately
 - c. Qualifying Surviving Spouse (QSS)
 - d. Head of Household
2. Based on the information provided, Sharon qualifies for the Earned Income Credit.
 - a. True
 - b. False
3. Sharon does **not** need to report her gambling winnings on her federal tax return.
 - a. True
 - b. False

Advanced Scenario 2: Jeff and Jane Spring

Interview Notes

- Jeff and Jane are married and want to file a joint return.
- Jeff is a U.S. citizen and has a valid Social Security number. Jane is a resident alien and has an ITIN. They resided in the United States all year with their children.
- Jeff and Jane have two children, Joan, age 7, and Jim, age 15. Joan and Jim are U.S. citizens and have valid Social Security numbers.
- Jeff earned \$23,000 in wages.
- Jane earned \$21,000 in wages.
- In order to work, the Springs paid \$2,000 to their son, Jim to care for Joan after school.
- Jeff and Jane provided all of the support for their two children.

Advanced Scenario 2: Retest Questions

4. The maximum amount Jeff and Jane are eligible to claim for the Child Tax Credit is \$2,000.
 - a. True
 - b. False
5. Payments made to Jim can be claimed on Form 2441 as child and dependent care expenses.
 - a. True
 - b. False

Advanced Scenario 3: Mary Wood

Interview Notes

- Mary Wood, age 58, is single.
- Mary earned wages of \$51,000 and was enrolled the entire year in a high deductible health plan (HDHP) with self-only coverage.
- During the year, Mary contributed \$2,000 to her Health Savings Account (HSA) and her mother also contributed \$1,000 to Mary's HSA.
- Mary's Form W-2 shows \$1,150 in Box 12 with code W. She has Form 5498-SA showing \$4,150 in Box 2.
- Mary has Form 1099-SA showing her HSA distributions. She used her distributions to pay the following unreimbursed expenses:
 - \$500 for nine visits to a physical therapist after her knee surgery
 - \$1,000 unreimbursed doctor bills
 - \$280 prescription medicine
 - \$1,500 replacement of a crown
 - \$300 deep cleaning for teeth
 - \$40 over the counter medication
 - \$260 gym membership (for her general health and fitness)
- Mary is a U.S. citizen with a valid Social Security number.

Advanced Scenario 3: Retest Questions

6. Mary is eligible to contribute an additional \$2,000 to her HSA because she is age 55 or older.
 - a. True
 - b. False
7. Mary **cannot** include her mother's contribution on Form 8889, Part I.
 - a. True
 - b. False
8. The gym membership is a qualified medical expense for HSA purposes.
 - a. True
 - b. False

Advanced Scenario 4: Cheryl Brown

Interview Notes

- Cheryl, age 62, is single. She owns her home and provided all the costs of keeping up her home for the entire year. Her only income for 2024 was \$48,700 in W-2 wages.
- Cindy, age 24, and her daughter Cary, age 5, have lived with Cindy's mother, Cheryl, since Cindy separated from her spouse in April of 2023. Cindy's only income for 2024 was \$24,000 in wages. Cindy provided over half of her own support. Cary did not provide more than half of her own support.
- Cindy will not file a joint return with her spouse.
- All individuals in the household are U.S. citizens with valid Social Security numbers. No one has a disability. They lived in the United States all year.

Advanced Scenario 4: Retest Questions

9. Which of the following statements is true:
 - a. Cindy may **not** claim Cary as a dependent since Cheryl paid all of their housing costs.
 - b. Cheryl may claim Cary as a dependent if Cindy chooses not to claim her.
 - c. Only Cheryl may claim Cary as a dependent since her income is higher than Cindy's income.
 - d. Only Cindy may claim Cary as a dependent since Cary is her daughter.
10. Cindy is eligible to claim Cary for the Earned Income Credit.
 - a. True
 - b. False

Advanced Scenario 5: Elizabeth Greene

Interview Notes

- Elizabeth is 54 years old and files as single.
- Her 2024 adjusted gross income (AGI) is \$52,000, which includes gambling winnings of \$2,000.
- Elizabeth would like to itemize her deductions this year.
- Elizabeth brings documents for the following items:
 - \$9,500 hospital and doctor bills
 - \$600 contributions to Health Savings Account (HSA)
 - \$3,600 state withholding (higher than Elizabeth's calculated state sales tax deduction)
 - \$300 personal property taxes based on the value of the vehicle
 - \$600 friend's personal GoFundMe campaign
 - \$350 cash contributions to the Red Cross
 - \$200 fair market value of clothing in good used condition donated to the Salvation Army (Elizabeth purchased the clothing for \$900)
 - \$7,300 mortgage interest
 - \$2,300 real estate tax
 - \$1,500 homeowners association fees
 - \$4,000 gambling losses

Advanced Scenario 5: Retest Questions

11. If Elizabeth chooses to itemize, which of the following is **not** an eligible deduction on Form 1040, Schedule A?
 - a. \$7,300 mortgage interest
 - b. \$1,500 homeowners association fees
 - c. \$2,300 real estate tax
 - d. \$350 contribution to the Red Cross
12. Elizabeth is eligible to claim \$4,000 in gambling losses as a deduction on her Form 1040, Schedule A.
 - a. True
 - b. False

Advanced Scenario 6: David Stone

Interview Notes

- David Stone is 28 years old and single. He provides all of his own support.
- David works at a gas station and earned \$18,500 in wages.
- David took two management courses at a community college to improve his job skills. He was less than a half time student. He wants to know if that qualifies for any tax benefit.
- David took an early distribution from his IRA of \$2,000 for tuition and \$500 for emergency repairs of his air conditioning system. This is the first time he has taken a distribution from his IRA.
- David is a U.S. citizen and lived in the U.S. for the entire year. He has a valid Social Security number.

Advanced Scenario 6: Retest Questions

13. David's modified adjusted gross income (MAGI) must be less than \$90,000 to claim the Lifetime Learning Credit in 2024.
- a. True
 - b. False
14. David will owe an additional \$50 tax on the \$500 IRA distribution for emergency repairs?
- a. True
 - b. False

Advanced Scenario 7: Vincent and Faith Hunter

Interview Notes

- Vincent is a 5th grade teacher at a public school. Vincent and Faith are married and choose to file Married Filing Jointly on their 2024 tax return.
- Vincent worked a total of 1,800 hours in 2024. During the school year, he spent \$844 on unreimbursed classroom expenses.
- Faith retired in 2021 and began receiving her pension on November 1st of that year. She explains that this is a joint and survivor annuity. She has already recovered \$1,259 of the cost of the plan.
- Vincent settled with his credit card company on an outstanding bill and brought the Form 1099-C to the site. They aren't sure how it will impact their tax return for tax year 2024. The Hunters determined that they were solvent as of the date of the canceled debt.
- Faith received \$280 from Jury duty.
- Their daughter, Hope, is in her second year of college pursuing a bachelor's degree in Physics at a qualified educational institution. She received a scholarship, and the terms require that it be used to pay tuition. Box 2 was not filled in and Box 7 was not checked on her Form 1098-T for the previous tax year. The Hunters provided Form 1098-T and an account statement from the college that included additional expenses. The Hunters paid \$1,500 for books and equipment required for Hope's courses. This information is also included on the college statement of account. The Hunters claimed the American Opportunity Credit last year for the first time.
- Hope does not have a felony drug conviction.
- They are all U.S. citizens with valid Social Security numbers.

Advanced Scenario 7: Retest Questions

15. The taxable portion of Faith's pension from Liberty Enterprises using the simplified method is \$23,899.
- a. True
 - b. False
16. Which of the following credits are the Hunters able to claim on their federal tax return?
- a. American Opportunity Credit
 - b. Earned Income Credit
 - c. Child Tax Credit
 - d. Premium Tax Credit
17. The total amount of other income reported on the Hunters' Form 1040, Schedule 1 is \$1,130.
- a. True
 - b. False

18. What is the amount Vincent is eligible to claim as qualified educator expenses on Form 1040, Schedule 1?
- a. \$0
 - b. \$250
 - c. \$300
 - d. \$844
19. The Hunters' standard deduction on their Form 1040 for tax year 2024 is \$29,200.
- a. True
 - b. False
20. Which is **not** a qualifying expense for the American opportunity credit?
- a. Tuition
 - b. Required course related books
 - c. Parking pass
 - d. Required course related equipment
21. All of Faith's Social Security benefits are taxable according to the Social Security benefits worksheet.
- a. True
 - b. False
22. The federal income tax withholding reported on the Hunters' Form 1040 is \$4,400
- a. True
 - b. False

Advanced Scenario 8: Stephanie Winter

Interview Notes

- Stephanie is a paralegal, age 26, and single.
- Stephanie has investment income and a consolidated broker's statement.
- Stephanie is self-employed delivering meals for Fast Eats on the weekends. She received a Form 1099-NEC and a Form 1099-K. She received additional cash payments of \$570 including tips.
- Stephanie uses the cash method of accounting. She uses business code 492000.
- Stephanie provided a statement from Fast Eats indicating the fees paid for the year. These fees are considered ordinary and necessary for the food delivery business:
 - \$150 for insulated box rental
 - \$50 for vehicle safety inspection (required by Fast Eats)
 - \$600 for Fast Eats fees
- Stephanie also kept receipts for the following out-of-pocket expenses:
 - \$80 for tolls while making deliveries
 - \$300 for speeding ticket
 - \$160 for Stephanie's lunches
- Stephanie's record keeping application shows she has driven a total of 3,000 miles during and between deliveries:
 - She placed her only vehicle, an SUV, in service on 3/15/2020. The total mileage on her SUV for tax year 2024 was 12,500 miles. Of that, 9,500 miles were personal and commuting miles. Stephanie will take the standard business mileage rate.
- Stephanie is paying on her student loan from 2019, when she completed her undergraduate degree.
- Stephanie is working towards her Juris Doctorate degree to start a new career as a Lawyer.
- She took a few college courses this year at an accredited college.
- Stephanie took an early distribution of \$5,000 from her IRA in April. She used \$2,400 of the IRA distribution to pay her educational expenses for the current year.
- If Stephanie has a refund, she would like it deposited into her checking account.

Advanced Scenario 8: Retest Questions

23. Stephanie's net short-term capital gain reported on Schedule D is \$350.
- a. True
 - b. False
24. Stephanie can claim her lunches as a business expense on her Schedule C
- a. True
 - b. False

- 25.** What is the amount Stephanie can take as a student loan interest deduction on her Form 1040, Schedule 1?
- a.** \$0
 - b.** \$750
 - c.** \$2,500
 - d.** \$3,750
- 26.** The total standard mileage deduction for Stephanie's business on Schedule C is \$2,010.
- a.** True
 - b.** False
- 27.** Which credit is Stephanie eligible for?
- a.** American Opportunity Credit
 - b.** Earned Income Credit
 - c.** Lifetime Learning Credit
 - d.** Premium Tax Credit
- 28.** Stephanie will have to pay \$240 additional tax because she received the early distribution from her IRA.
- a.** True
 - b.** False
- 29.** How can Stephanie prevent having a balance due next year?
- a.** She can increase the withholding on a new Form W-4.
 - b.** She can make estimated tax payments.
 - c.** She can do nothing and file as usual.
 - d.** Both a and b.

Advanced Scenario 9: Joe Lopez

Interview Notes

- Joe is age 41 and was widowed in July, 2023. He has a daughter, Josie, age 9, who lived with him the entire year.
- Joe provided the entire cost of maintaining the household and over half of the support for Josie. In order to work, he pays childcare expenses to Southside Daycare.
- Joe purchased health insurance for himself and his daughter through the Marketplace. He received a Form 1095-A.
- Joe and Josie are U.S. citizens and lived in the United States all year in 2024.

Advanced Scenario 9: Retest Questions

30. Joe can claim the Qualifying Surviving Spouse filing status.
- a. True
 - b. False
31. Joe's adjusted gross income is \$42,140.
- a. True
 - b. False
32. Joe **cannot** claim which of the following credits on his tax return.
- a. Child Tax Credit
 - b. Credit for Other Dependents
 - c. Premium Tax Credit
 - d. Child and Dependent Care Credit
33. Joe qualifies to claim the Retirement Savings Contribution Credit.
- a. True
 - b. False
34. Joe's net premium tax credit on his Form 1040 Schedule 3, line 9 is \$_____.
(Note: whole number only, do not use special characters.)
35. Joe's child and dependent care credit is \$630.
- a. True
 - b. False