

PRINTED 11/16/2011

BEN A BAYLOR
 PAT N HARPER
 BEN A BAYLOR
 30911 LOST MEADOW
 ABSECON NJ 08201-

	Taxpayer	Spouse
SSN	221-02-0752	222-02-0752
Birth	03/12/1934	10/30/1936
Death		06/21/2010
Day Phone	609-555-9876	
Evening		
Cell or Fax		
PIN	12345	

Email _____
 Taxpayer Occupation RETIRED Spouse Occupation DECEASED
 Filing Status MARRIED FILING JOINT

<u>MADISON</u>	<u>CHAMBERS</u>	<u>04/05/1994</u>	<u>223-02-0752</u>	<u>GRANDCHILD</u>	<u>12</u>	<u>1</u>
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____

Preparer ID: _____ Preparation Fee: _____ Date: _____
 Preparer: _____

Preparer's Use:	1 _____	4 _____	Time in
	2 _____	5 _____	return
	3 _____	6 _____	min.

Recap of 2010 Income Tax Return

Earned Income	_____	Federal Tax	1,121.
Federal AGI.....	50,620.	Withholding	2,380.
Taxable Income.....	21,332.	Refund/(Due).....	1,259.
EIC	_____	Tax Bracket	15.0 %

State	<u>NJ</u>	_____	_____	_____
Tax	_____	_____	_____	_____
Withholding	120.	_____	_____	_____
Refund/Due.....	170.	_____	_____	_____
State	_____	_____	_____	_____
Tax	_____	_____	_____	_____
Withholding	_____	_____	_____	_____
Refund/Due.....	_____	_____	_____	_____

	Maximum RAL	Partial RAL	2 week check	2 week deposit
Qualifying refund				
Fees				
Net refund				
Fast check				
2 week check.....				
State check				
Check one				

Name: BEN A BAYLOR & PAT N HARPER

SSN: 221-02-0752

Interest. List all interest on Schedule B, regardless of the amount.

Unemployment and/or state tax refund. Fill out 1099G worksheet

Additional Earned Income	Taxpayer	Spouse	Total
Scholarship income - no W2			
Household employee income - no W2			
Social Security/Railroad Tier 1 Benefits	Taxpayer	Spouse	Total
Social Security received this year	12,108 .	3,960 .	
Railroad tier 1 received this year			
Total	12,108 .	3,960 .	16,068 .
Medicare to Schedule A	1,583 .	578 .	
Federal tax withheld	300 .	300 .	

Married Filing Separately

If the filing status is married filing separately and the taxpayer and spouse lived together at any time during the year, up to 85% of social security and railroad benefits received are taxable. See Main Information Sheet, filing status 3

All others

Modified adjusted gross income for this computation consists of AGI (without social security or railroad benefits) + Form 8815, line 14, + Form 8839, line 30 + Form 2555 (EZ) exclusions + student loan interest adjustment 40,644 .

+ tax-exempt interest: _____ and excluded income from American Samoa (Form 4563) or

Puerto Rico: _____ + 50% of the benefits received: 8,034 **48,678 .**

If the modified AGI is less than \$25,001 (\$32,001 married filing jointly), none of the Social Security and RR Benefits are taxable.

If the modified AGI is between \$25,000 and \$34,000 (\$32,000 and \$44,000 married filing jointly), 50% of the benefits received is taxable

If the modified AGI is greater than \$34,000 (\$44,000 married filing jointly):

85% of the social security and railroad benefits received is taxable **A** 13,658 .

Modified AGI 48,678 .

\$34,000 (\$44,000) 44,000 .

Subtract..... 4,678 . X 85%= 3,976 .

Minimum 50% of the benefits received or \$4,500 (\$6,000 married filing jointly) 6,000 .

Add **B** 9,976 .

Taxable social security and railroad retirement tier 1. Minimum of A or B **9,976 .**

Lump Sum Payment of Social Security and Railroad Tier 1 Benefits

	Taxpayer	Spouse	Total
Gross amount received attributable to 2010			
Using the above modified AGI, this is the taxable amount of the 2010 benefit			
Amounts taxable from previous years			
Taxable benefits using the lump-sum election method			

US Child Tax Credit, Federal Extension Payment, and Carryovers Worksheet 2010

Name: **BEN A BAYLOR & PAT N HARPER**

SSN: **221-02-0752**

Child Tax Credit (CTC)

1	\$1,000 X <input type="text" value="1"/> qualifying children		1,000.
2	Modified AGI is AGI plus excluded income from Forms 2555 (EZ) and 4563, and excluded income from Puerto Rico	50,620.	
3	Modified AGI limitation \$110,000 married filing jointly; \$55,000 married filing separately; all others \$75,000	110,000.	
4	Subtract line 3 from line 2. If -0-, go to line 7		
5	Round up to next \$1,000		
6	Multiply line 5 by 5%		
7	Maximum child tax credit. Subtract line 6 from line 1. You cannot take the credit if this amount is -0-		1,000.
8	Amount from Form 1040, line 46, Form 1040A, line 28, or Form 1040NR, line 43	2,121.	
9	Credits for foreign tax, dependent care, elderly, education, retirement savings, adoption, mortgage interest, DC first-time homebuyers and residential energy		

CTC Worksheet for Forms 8396, Mortgage Interest Credit, Form 8839, Adoption Credit, Form 8859, DC First-time Homebuyers Credit, and Form 5695, Residential Energy Credits

1	Foreign tax credit + dependent care credit + elderly credit + education credit + retirement savings credit		
2	Amount from line 7 above		
3	Social security or RR tier 1 + Medicare		
4	Form 1040, line 27 + line 59; or Form 1040NR, line 54 + uncollected social security and Medicare taxes listed on W2		
5	Add lines 3 and 4		
6	Earned income credit and excess FICA/RRTA		
7	Subtract line 6 from line 5		
8	Maximum child tax credit, line 7 above, minus the larger of line 7 of this worksheet or Form 8812, line 6. This is the child tax credit for the purpose of figuring Forms 5695, 8396, 8839 and 8859. Use this amount in place of the child tax credit amount asked for on these forms		
9	Total of adoption credit, mortgage interest credit, DC first-time homebuyer credit, and residential energy credits as refigured.		
10	Add lines 1 and 9		
10	Subtract line 9 from line 8		2,121.
11	Child tax credit		1,000.

Amount paid with Federal extension (Form 4868 or 2350)

Carryovers from 2010 to 2011

1	Section 179 expense disallowed, Form 4562, accumulative total														
2	Net operating loss from 2010 only, Form 1045 Amt. carried forward from 2009. Listed on Form 1040, line 21, or Form 1040NR, line 21														
3	2010 charitable contributions. Organization limit:														
		<table border="1"> <tr> <th colspan="2">Cash or other property</th> <th colspan="2">Capital Gain</th> </tr> <tr> <td>50%</td> <td>30%</td> <td>30%</td> <td>20%</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> </tr> </table>	Cash or other property		Capital Gain		50%	30%	30%	20%					
Cash or other property		Capital Gain													
50%	30%	30%	20%												
4	Investment interest expense, Form 4952, accumulative total														
5	Foreign tax credit from 2010 only, Form 1116. Enter amount carried back, if any														
6	Adoption credit, Form 8839														
		<table border="1"> <tr> <td>2006</td> <td>2007</td> <td>2008</td> <td>2009</td> <td>2010</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </table>	2006	2007	2008	2009	2010								
2006	2007	2008	2009	2010											
7	Mortgage interest credit, Form 8396														
		<table border="1"> <tr> <td>2008</td> <td>2009</td> <td>2010</td> </tr> <tr> <td></td> <td></td> <td></td> </tr> </table>	2008	2009	2010										
2008	2009	2010													
8	General business credits for 2010 only, Form 3800														
9	Form 8844, for 2010 only. Enter amount carried back														
10	DC first-time homebuyer credit, Form 8859, cumulative total														
11	Prior year minimum tax credit, Form 8801, cumulative total														
12	AMT limited qualified electric vehicle credit from 2010 only														
13	Nonrecaptured net section 1231 losses														
		<table border="1"> <tr> <td>2006</td> <td>2007</td> <td>2008</td> <td>2009</td> <td>2010</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </table>	2006	2007	2008	2009	2010								
2006	2007	2008	2009	2010											

Form 1040

Department of the Treasury - Internal Revenue Service

U.S. Individual Income Tax Return 2010

(99) IRS Use Only-Do not write or staple in this space.

Header section containing personal information: Name (BEN A BAYLOR), Spouse's Name (PAT N HARPER), Home Address (30911 LOST MEADOW ABSECON NJ 08201), and Social Security Numbers (221-02-0752 and 222-02-0752).

Presidential Election Campaign section with checkboxes for 'You' and 'Spouse'.

Filing Status section with options: Single, Married filing jointly, Married filing separately, and Qualifying widow(er).

Exemptions section including 'Yourself', 'Spouse', and 'Dependents' table with columns for name, SSN, and relationship.

Income section table with columns for line number, description, and amount. Total income reported as 50,620.

Adjusted Gross Income section table with columns for line number, description, and amount. Adjusted gross income reported as 50,620.

For Disclosure, Privacy Act, and Paperwork Reduction Act Notice, see instructions. Form 1040 (2010)

Tax and Credits	38	Amount from line 37 (adjusted gross income)	38	50,620.
	39a	Check <input checked="" type="checkbox"/> You were born before Jan. 2, 1946, <input type="checkbox"/> Blind. <input checked="" type="checkbox"/> Spouse was born before Jan. 2, 1946, <input type="checkbox"/> Blind. Total boxes checked 39a 2		
	b	If your spouse itemizes on a separate return or you were a dual-status alien, see instructions and check here 39b <input type="checkbox"/>		
	40	Itemized deductions (from Schedule A) or your standard deduction (see instructions)	40	18,338.
	41	Subtract line 40a from line 38	41	32,282.
	42	Exemptions. Multiply \$3,650 by the number on line 6d	42	10,950.
	43	Taxable income. Subtract line 42 from line 41. If line 42 is more than line 41, enter -0-	43	21,332.
	44	Tax (see instructions). Check if any tax is from: a <input type="checkbox"/> Form(s) 8814 b <input type="checkbox"/> Form 4972	44	2,121.
	45	Alternative minimum tax (see instructions). Attach Form 6251	45	
	46	Add lines 44 and 45	46	2,121.
Other Taxes	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 23	49	
	50	Retirement savings contributions credit. Attach Form 8880	50	
	51	Child tax credit (see instructions)	51	1,000.
	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	1,000.
	55	Subtract line 54 from line 46. If line 54 is more than line 46, enter -0-	55	1,121.
	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		
59	a <input type="checkbox"/> Form(s) W-2, box 9 b <input type="checkbox"/> Schedule H c <input type="checkbox"/> Form 5405, line 16	59		
60	Add lines 55 through 59. This is your total tax	60	1,121.	
Payments	61	Federal income tax withheld from Forms W-2 and 1099	61	2,380.
	62	2010 estimated tax payments and amount applied from 2009 return	62	
	63	Making work pay and government retiree credits. Attach Schedule M	63	
	64 a	Earned income credit (EIC)	64a	
	b	Nontaxable combat pay election 64b		
	65	Additional child tax credit. Attach Form 8812	65	
	66	American opportunity credit from Form 8863, line 14	66	
	67	First-time homebuyer credit from Form 5405, line 10	67	
	68	Amount paid with request for extension to file (see inst.)	68	
	69	Excess social security and tier 1 RRTA tax withheld (see inst.)	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"/> 8839 c <input type="checkbox"/> 8801 d <input type="checkbox"/> 8885	71		
72	Add lines 61, 62, 63, 64a and 65 through 71. These are your total payments	72	2,380.	
Refund	73	If line 72 is more than line 60, subtract line 60 from line 72. This is the amount you overpaid	73	1,259.
	74 a	Amount of line 73 you want refunded to you. If Form 8888 is attached, check here <input type="checkbox"/>	74a	1,259.
	b	Routing number <input type="text"/> c Type: <input type="checkbox"/> Checking <input type="checkbox"/> Savings		
	d	Account number <input type="text"/>		
	Amount of line 73 you want applied to your 2011 estimated tax	75		
Amount You Owe	76	Amount you owe. Subtract line 72 from line 60. For details on how to pay, see inst.	76	
	77	Estimated tax penalty (see instructions)	77	

If you have a qualifying child, attach Schedule EIC.

Third Party Designee Do you want to allow another person to discuss this return with the IRS (see instructions)? Yes. Complete the following. 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.

Your signature	Date	Your occupation	Daytime phone number
<input type="text"/>	<input type="text"/>	RETIRED	609-555-9876
Spouse's signature. If a joint return, both must sign.	Date	Spouse's occupation	
<input type="text"/>	<input type="text"/>	DECEASED	

Paid Preparer's Use Only

Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN
Firm's name	Firm's EIN		Phone no.	
Firm's address				

**SCHEDULE A
(Form 1040)**

Department of the Treasury
Internal Revenue Service (99)

Itemized Deductions

▶ **Attach to Form 1040.** ▶ **See Instructions for Schedule A (Form 1040).**

OMB No. 1545-0074

2010
Attachment
Sequence No. **07**

Name(s) shown on Form 1040

BEN A BAYLOR & PAT N HARPER

Your social security no.
221-02-0752

Medical and Dental Expenses	Caution. Do not include expenses reimbursed or paid by others.					
	1 Medical and dental expenses (see instructions)	1	14,202.			
	2 Enter amount from Form 1040, line 38	2	50,620.			
	3 Multiply line 2 by 7.5% (.075)	3	3,797.			
4 Subtract line 3 from line 1. If line 3 is more than line 1, enter -0-			4	10,405.		
Taxes You Paid	5 State and local (check only one box):					
	a <input type="checkbox"/> Income taxes, or	5	2,219.			
	b <input checked="" type="checkbox"/> General sales taxes					
	6 Real estate taxes (see instructions).....	6	949.			
	7 New motor vehicle taxes from line 11 of the worksheet on back (for certain vehicles purchased in 2009). Skip this line if you checked box 5b	7				
	8 Other taxes. List type and amount ▶	8				
	9 Add lines 5 through 8			9	3,168.	
	Interest You Paid	10 Home mortgage interest & points reported to you on Form 1098	10	2,164.		
		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 ▶	11			
Note. Your mortgage interest deduction may be limited (see instructions).		12				
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 inst.)		14				
15 Add lines 10 through 14			15	2,164.		
Gifts to Charity	16 Gifts by cash or check. If you made any gift of \$250 or more, see instructions	16	1,051.			
	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	350.			
	18 Carryover from prior year.....	18				
	19 Add lines 16 through 18			19	1,401.	
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				
	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 GAMBLING LOSSES		1,200.	28	1,200.	
Total Itemized Deductions	29 Add the amounts in the far right column for lines 4 through 28. Also, enter this amount on Form 1040, line 40			29	18,338.	
	30 If you elect to itemize deductions even though they are less than your standard deduction, check here					

For Paperwork Reduction Act Notice, see Form 1040 instructions.

Schedule A (Form 1040) 2010

US Schedule A

Itemized Deduction Detail Worksheet

2010

Name: BEN A BAYLOR & PAT N HARPER

SSN: 221-02-0752

Medical Expenses		Medical miles: 1116 x .165 = 184.	
Insurance premiums paid (not pre-tax)		Medicare from 1040 worksheet	2,161.
Taxpayer		Remainder from worksheets	
Spouse		Taxpayer	
Qualified long term care contracts		Spouse	
Taxpayer		Self-employed health insurance	
Spouse		Taxpayer	
Other medical expenses		Spouse	
DOCTORS	4,723.		
HOSPITAL	5,168.		
PRESCRIPTION DRUGS	1,756.		
PRESCRIPTION EYEGLASSES	210.	Amount from additional worksheets	
		Total	14,202.

Cash Contributions		Other Charitable miles: X .14 =	
50% Limit Organizations			
CHURCH	850.		
PBS	201.		
		From Schedules K-1	
		Amount from additional worksheets	
		Total	1,051.

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

Other Than Cash Contributions		50% Limit Organizations	
SALVATION ARMY	350.	From Forms 8283	
		Amount from additional worksheets	
From Schedules K-1		Total	350.

30% Limit		Capital gain property donated to 50% limit organizations.	
		From Forms 8283	
From Schedules K-1		Total	

30% Limit		Not capital gain property donated to 30% limit organizations.	
		From Forms 8283	
From Schedules K-1		Total	

20% Limit Organization		Capital gain property donated to 30% limit organizations.	
		From Forms 8283	
From Schedules K-1		Total	

	From years 2005 through 2009				To 2011 tax year			
	Cash and other property		Capital gain property		Cash and other property		Capital gain property	
	50%	30%	30%	20%	50%	30%	30%	20%
2005								
2006								
2007								
2008								
2009								
2010								

Contributions allowed this year		
50% of adjusted gross income	25,310.	
This year's 50% organization cash contributions allowed		1,401.
30% of adjusted gross income	15,186.	
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	10,124.	
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		1,401.

SCHEDULE B
(Form 1040A or 1040)

Department of the Treasury
Internal Revenue Service (99)

Interest and Ordinary Dividends

▶ **Attach to Form 1040A or 1040.** ▶ **See Instructions**

OMB No. 1545-0074

2010
Attachment
Sequence No. **08**

Name(s) shown on return **BEN A BAYLOR & PAT N HARPER** Your social security number **221-02-0752**

		Amount	
Part I Interest (See instructions and the instructions for Form 1040A, or Form 1040, line 8a.) Note. If you received a Form 1099-INT, Form 1099-OID, or substitute statement from a brokerage firm, list the firm's name as the payer and enter the total interest shown on that form.	1 List name of payer. If any interest is from a seller-financed mortgage and the buyer used the property as a personal residence, see instructions and list this interest first. Also, show that buyer's social security number and address ▶ _____ _____ _____ _____ _____ _____ _____ _____ _____	1	
	2 Add the amounts on line 1	2	
	3 Excludable interest on series EE and I U.S. savings bonds issued after 1989. Attach Form 8815	3	
	4 Subtract line 3 from line 2. Enter the result here and on Form 1040A, or Form 1040, line 8a ▶	4	
	Note. If line 4 is over \$1,500, you must complete Part III.		Amount

Part II Ordinary Dividends (See instructions and the instructions for Form 1040A, or Form 1040, line 9a.) Note. If you received a Form 1099-DIV or substitute statement from a brokerage firm, list the firm's name as the payer and enter the ordinary dividends shown on that form.	5 List name of payer ▶ <u>THE LONE STAR FUND</u> _____ _____ _____ _____ _____ _____ _____ _____ _____	5	1,565.	
	6 Add the amounts on line 5. Enter the total here and on Form 1040A, or Form 1040, line 9a ▶	6	1,565.	
	Note. If line 6 is over \$1,500, you must complete Part III.			

		Yes	No
Part III Foreign Accounts and Trusts (See instructions)	You must complete this part if you (a) had over \$1,500 of taxable interest or ordinary dividends; (b) had a foreign account; or (c) received a distribution from, or were a grantor of, or a transferor to, a foreign trust.		
	7 a At any time during 2010, did you have an interest in or a signature or other authority over a financial account in a foreign country, such as a bank account, securities account, or other financial account? See instructions for exceptions and filing requirements for Form TD F 90-22.1.....		X
	b If "Yes," enter the name of the foreign country ▶ _____		
8 During 2010, did you receive a distribution from, or were you the grantor of, or transferor to, a foreign trust? If "Yes," you may have to file Form 3520. See instructions.....		X	

For Paperwork Reduction Act Notice, see your tax return instructions. Schedule B (Form 1040A or 1040) 2010

US Schedule D

Schedule D Tax Worksheet

2010

Name: **BEN A BAYLOR & PAT N HARPER**

SSN: **221-02-0752**

1	Taxable income from Form 1040, line 43, Form 1040NR, line 40, Form 1040A, line 27, or from the Foreign Earned Income Tax Worksheet				21,332.
2	Qualified dividends from Form 1040, line 9b, Form 1040A, line 9b, or Form 1040NR, line 10b	875.			
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-		875.		
7	Smaller of line 15 or line 16 of Schedule D	737.			
8	Smaller of line 3 or line 4				
9	Subtract line 8 from line 7. If -0- or less, enter -0-		737.		
10	Add lines 6 and 9			1,612.	
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, enter -0-				1,612.
14	Subtract line 13 from line 1. If -0- or less, enter -0-				19,720.
15	Smaller of line 1 or \$68,000 if married filing jointly or qualifying widow(er); \$34,000, if single or married filing separately; \$45,550 if head of household	21,332.			
16	Smaller of line 14 or line 15	19,720.			
17	Subtract line 10 from line 1. If -0- or less, enter -0-	19,720.			
18	Larger of line 16 or line 17			19,720.	
19	Subtract line 16 from line 15			1,612.	
20	Smaller of line 1 or line 13				
21	Amount from line 19				
22	Subtract line 21 from line 20				
23	Multiply line 22 by 15%				
24	Smaller of line 9 above or Schedule D, line 19				
25	Add lines 10 and 18				
26	Amount from line 1				
27	Subtract line 26 from line 25. If -0- or less, enter -0-				
28	Subtract line 27 from line 24. If -0- or less, enter -0-				
29	Multiply line 28 by 25%				
30	Add lines 18, 19, 22, and 28				
31	Subtract line 30 from line 1				
32	Multiply line 31 by 28%				
33	Tax on line 18 amount				2,121.
34	Add lines 23, 29, 32, and 33				2,121.
35	Tax on line 1 amount				2,361.
36	Tax on all taxable income. Smaller of lines 34 or 35				2,121.

W-2G DETAIL REPORT - 2010

Payer	EIN	TP SP	Federal Withheld	Gross Winnings	State Withheld	Losses
CASINO REALE	22-3020752	X	200	1200	120	2550
			---	----	---	----
			200	1200	120	2550

1099-R DETAIL REPORT - 2010

Payer	EIN	T S	Box 7	IRA/SEP Simple	Fed. With.	State With.	Gross	1099R Taxable	Roll/ Exclude	Net	Cost	Cost Bal.
DEFENSE FINANCE ACCO	22-7020752	T	7		1580NJ		23919	23919		23919		
HARRIS TRUST	22-2020752	T	7		NJ		13223	13223		13223		
					-----		-----	-----		-----		
					1580		37142	37142		37142		

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. See instructions.

2010

Declaration Control Number (DCN) ▶ 00200752 1

Taxpayer's name BEN A BAYLOR	Social security number 221-02-0752
Spouse's name PAT N HARPER	Spouse's social security number 222-02-0752

Part I Tax Return Information-Tax Year Ending December 31, 2010 (Whole Dollars Only)	
1 Adjusted gross income (Form 1040, line 38; Form 1040A, line 22; Form 1040EZ, line 4)	1 50,620.
2 Total tax (Form 1040, line 60; Form 1040A, line 37; Form 1040EZ, line 11)	2 1,121.
3 Federal income tax withheld (Form 1040, line 61; Form 1040A, line 38; Form 1040EZ, line 7)	3 2,380.
4 Refund (Form 1040, line 74a; Form 1040A, line 46a; Form 1040EZ, line 12a; Form 1040-SS, Part I, line 12a)	4 1,259.
5 Amount you owe (Form 1040, line 76; Form 1040A, line 48; Form 1040EZ, line 13)	5

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, 2010, 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. I further understand that this authorization may apply to future Federal tax payments that I direct to be debited through the Electronic Federal Tax Payment System (EFTPS). In order for me to initiate future payments, I request that the IRS send me a personal identification number (PIN) to access EFTPS. 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 a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 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 LIBRARY TCE 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 2010 electronically filed income tax return.

I will enter my PIN as my signature on my tax year 2010 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 ▶ 10/15/2011

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 2010 electronically filed income tax return.

I will enter my PIN as my signature on my tax year 2010 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

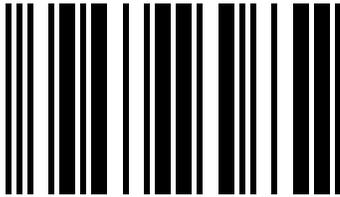
Part III Certification and Authentication-Practitioner PIN Method Only

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 2010 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 LIBRARY TCE Date ▶ 10/15/2011

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



STATE OF NEW JERSEY INCOME TAX - RESIDENT RETURN

For Privacy Act Notification, See Instructions
For Tax Year Jan. - Dec. 2010 or Other Tax Year

Beginning _____, 2010 ____ Month Ending _____ 200__
On-line Federal Ext. Confirmation # _____

BAYLOR BEN A & HARPER PAT N DECD

BEN A BAYLOR

30911 LOST MEADOW

ABSECON

NJ 08201-0000 0101

3665

221020752

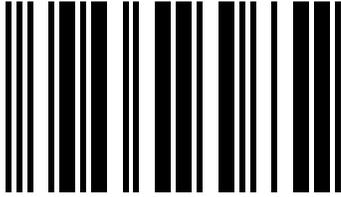
Under the penalties of perjury, I declare that I have examined this income tax return and rebate application, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct and complete and that I occupied the rental property for which I am applying for the tenant rebate as my principal residence on October 1, 2010. If prepared by a person other than the taxpayer, this declaration is based on all information of which the preparer has any knowledge.

Pay amount on line 54 in full. Write Social Security # on check or money order and make payable to:
STATE OF NEW JERSEY - TGI
If you have an amount due, enclose your check and NJ-1040-V payment voucher and your return to: N J Division of Taxation, Revenue Processing Center, PO Box 111, Trenton, NJ 08645-0111
If REFUND: N J Division of Taxation, Revenue Processing Center, PO Box 555, Trenton, NJ 08647-0555

▶ _____ ▶ DECD 06-21-2010
Your Signature Date Spouse/CU Partner's Signature (If filing jointly, BOTH must sign)

Paid Preparer's Signature Federal Identification Number

Firm's Name Federal Employer Identification Number



000000000000000000

BAYLOR BEN A & HARPER PAT N DECD

001	00	014	0	040	0	SS#	221020752
EXT	0	15a	0	40a	0	SP#	222020752
FS	2	15b	0	042	0	SS1	223020752
DP	0	016	1565	044	0	BY1	1994
006	2	017	0	045	0	SS2	0
007	2	018	737	046	0	BY2	0
008	0	019	13223	047	120	SS3	0
009	1	020	0	048	50	BY3	0
010	0	021	0	049	0	SS4	0
011	0	022	0	050	0	BY4	0
12a	4	023	0	50b	0	DDI	4
12b	1	024	0	50c	0	AT	0
RSF	000000	025	0	051	0	FOR	0
RST	000000	026	15525	052	0	RN	0
GEF	0	27a	13223	053	0	PID	0
HCa	0	27b	6777	054	170	FID	0
HCb	0	27c	20000	055	0		
HCc	0	029	5500	056	170		
HCd	0	030	14202	057	0		
22c	0	031	0	058	0		
VC	1045	032	0	059	0		
CTY	0101	033	0	060	0		
PDR	0	36a	303	061	0		
DNM	0	36b	1	062	0		
PA	0	36c	0	063	0		
CDV	6121	037	0	63c	0		
		038	0	064	0		
				065	170		

Name BAYLOR BEN A & HARPER PAT N	Social Security Number 221-02-0752
-------------------------------------	---------------------------------------

RESIDENCY STATUS If you were a New Jersey resident for ONLY part of the taxable year, give the period of New Jersey residency: From _____ To _____
 MONTH DAY YEAR MONTH DAY YEAR

FILING STATUS 1. Single 2. Married/CU Couple, filing joint return 3. Married/CU Partner, filing separate return 4. Head of Household 5. Qualifying Widow(er)/Surviving CU Partner

EXEMPTIONS 6. Regular	2	10. Number of other dependents	0
7. Age 65 or Over	2	11. Dependents attending colleges	0
8. Blind or Disabled	0	12. Totals (Line 12a - Add Lines 6, 7, 8 and 11)	4
9. Number of qualified dependent children	1	(Line 12b - Add Lines 9 and 10)	1

13. Dependent's information from Lines 9 and 10. (ATTACH RIDER IF MORE THAN FOUR)

LAST NAME, FIRST NAME, MIDDLE INITIAL	SOCIAL SECURITY #	BIRTH YEAR
a. CHAMBERS MADISON	223-02-0752	1994
b.		
c.		
d.		

If the dep. does not have health ins. including NJ Family Care / Medicaid, Medicare, private or other, check the box. (see inst.)

GUBERNATORIAL Do you wish to designate \$1 of your taxes for this fund? Yes No

ELECTIONS FUND If joint return, does your spouse/CU partner wish to designate \$1? Yes No

14. Wages, salaries, tips, and other employee compensation (Enclose W-2)	14	
15a. Taxable interest income (See instructions) (Enclose Fed Sch B if over \$1,500)	15a	
15b. Tax exempt interest income. DO NOT include on Line 15a	15b	
16. Dividends	16	1,565.
17. Net profits from business (Enclose copy of Federal Schedule C, Form 1040)	17	
18. Net gains or income from disposition of property (Schedule B, Line 4)	18	737.
19. Pensions, Annuities, and IRA Withdrawals (See instructions)	19	13,223.
20. Distributive Share of Partnership Income (See instructions)	20	
21. Net pro rata share of S Corporation Income (See instructions) (Enclose Schedule)	21	
22. Net gain or income from rents, royalties, patents & copyrights (Schedule C, Line 3)	22	
23. Net Gambling Winnings (See Instructions)	23	
24. Alimony and separate maintenance payments received	24	
25. Other (See instructions)	25	
26. Total income (Add Lines 14, 15a, 16 through 25)	26	15,525.
27a. Pension Exclusion (See instructions)	27a	13,223.
27b. Other Retirement Income Exclusion (See Worksheet and instr.)	27b	6,777.
27c. Total Exclusion Amount (Add line 27a and Line 27b)	27c	20,000.
28. New Jersey Gross Income (Subtract Line 27c from Line 26) See instructions.	28	
29. Total Exemption Amount - See instructions (Part Year Residents see instructions.)	29	5,500.
30. Medical Expenses (See Worksheet and instr.)	30	14,202.
31. Alimony and Separate Maintenance Payments	31	
32. Qualified Conservation Contribution	32	
33. Health Enterprise Zone Deduction	33	
34. Total Exemptions and Deductions (Add Lines 29, 30, 31, 32 and 33)	34	19,702.
35. Taxable Income (Subtract Line 34 from Line 28) If zero or less, MAKE NO ENTRY.	35	0
36a. Total Property Taxes Paid	36a	303.
36b. Fill in oval if you were a New Jersey homeowner on October 1, 2010	<input checked="" type="checkbox"/>	
36c. Property Tax Deduction (See instructions)	36c	
37. NEW JERSEY TAXABLE INCOME (Subtract Line 36c from Line 35) If zero or less, MAKE NO ENTRY.	37	
38. Tax (From Tax Tables, see instructions)	38	0
39. THIS LINE IS NOT USED ON COMPUTER GENERATED RETURNS		
40. Credit For Income Taxes Paid to Other Jurisdictions. Enter other jurisdiction code (See instr.)	<input type="checkbox"/>	
41. Balance of Tax (Subtract Line 40 from Line 38)	41	
42. Sheltered Workshop Tax Credit	42	
43. Balance of Tax after Credit (Subtract Line 42 from 41)	43	
44. Use Tax Due on Out-of-State Purchases (See instructions) If no Use Tax, enter ZERO.	44	
45. Penalty for Underpayment of Estimated Tax Check if Form 2210 enclosed. <input type="checkbox"/>	45	
46. Total Tax and Penalty (Add Lines 43, 44 and 45)	46	0.

Name		Social Security Number	
BAYLOR BEN A & HARPER PAT N		221-02-0752	
47	Total New Jersey Income Tax Withheld (Enclose forms W-2 and 1099)	47	120.
48	Property Tax Credit (See instructions)	48	50.
49	New Jersey Estimated Tax Payments/Credit from 2009 tax return.	49	
50	New Jersey Earned Income Tax Credit (See instructions) (Fill in only one)	50	
Fill in the box if you had the IRS figure your Federal Earned Income Credit. <input type="checkbox"/>			
Fill in the box if you are a CU couple claiming the NJ Earned Income Tax Credit <input type="checkbox"/>			
51	EXCESS New Jersey UI/SF/SWF Withheld (See instr.) (Enclose Form NJ-2450)	51	
52	EXCESS New Jersey Disability Insurance Withheld (See instr.) (Enclose Form NJ-2450)	52	
53	EXCESS New Jersey Family Leave Withheld (See instructions) (Enclose Form NJ-2450)	53	
54	Total Payments/Credits (Add Lines 47 through 53)	54	170.
55	If Line 54 is LESS THAN Line 46, enter AMOUNT YOU OWE.	55	
If you owe tax, you may make a donation by entering an amount on Lines 58, 59, 60, 61, 62 and/or 63 and adding this to your payment amount.			
56	If Line 54 is MORE THAN Line 46, enter OVERPAYMENT	56	170.
Deductions from Overpayment on Line 56 which you elect to credit to:			
57	Your 2011 tax	57	
58	N.J. Endangered Wildlife Fund <input type="checkbox"/> \$10 <input type="checkbox"/> \$20 <input type="checkbox"/> Other	58	
59	N.J. Children's Trust Fund <input type="checkbox"/> \$10 <input type="checkbox"/> \$20 <input type="checkbox"/> Other	59	
60	N.J. Vietnam Veterans' Memorial Fund <input type="checkbox"/> \$10 <input type="checkbox"/> \$20 <input type="checkbox"/> Other	60	
61	N.J. Breast Cancer Research Fund <input type="checkbox"/> \$10 <input type="checkbox"/> \$20 <input type="checkbox"/> Other	61	
62	U.S.S. New Jersey Educational Museum Fund <input type="checkbox"/> \$10 <input type="checkbox"/> \$20 <input type="checkbox"/> Other	62	
63	Other Designated Contribution (See instructions) <input type="checkbox"/> \$10 <input type="checkbox"/> \$20 <input type="checkbox"/> Other <input type="checkbox"/>	63	
64	Total Deductions from Overpayment (Add Lines 57 through 63)	64	
65	REFUND (Amount to be sent to you. Subtract Line 64 from Line 56)	65	170.

DIRECT DEPOSIT INFORMATION

`1' for Refund only and `4' for no.

Check Routing Number

Account Number

Type of account (`C' for Checking, `S' for Savings)

Fill in check box if refund is going to an account outside the US

I authorize the Division of Taxation to discuss my return and enclosures with my preparer

Name(s) as shown on Form NJ-1040 BAYLOR BEN A & HARPER PAT N	Your Social Security Number 221-02-0752
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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.

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 _____ (Divide Line 2 into Line 1) 2 _____	3.	%
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 35, Form NJ-1040	4.	
5.	Property Tax Enter in Box 5a the amount from Worksheet F and Deduction line 1. See instructions. Property tax deduction. Enter the amount from Worksheet F, line 2. See instructions.	5.	
6.	New Jersey Taxable Income (Line 4 minus Line 5)	6.	
7.	Tax on Line 6 amount (From Tax Tables or Tax Rate Schedules)	7.	
8.	Allowable Credit (Line 3 times Line 7)	8.	
9.	Credit for Taxes Enter in Box 9a the income or wage tax Paid to Other paid to other jurisdiction during tax year on Jurisdiction income shown on Line 1. See instructions. Credit allowed. (Enter lesser of Line 8 or Box 9a). (The credit may not exceed your New Jersey tax on Line 38).	9.	

- If you are not eligible for a property tax benefit, enter the amount from Line 9, Column B, on Line 40, Form NJ-1040. Make no entry on Lines 36c or 48, Form NJ-1040.
- If you are eligible for a property tax benefit, you must complete Worksheet H 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)
2.	Capital Gains Distributions					737.
3.	Other Net Gains					
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) ..					737.

Schedule C NET GAIN 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 as reported on your Federal Income Tax Return. If you have passive losses for Federal purposes, see instructions.

1.	a. Kind of Property	b. Net Rental Income (Loss)	c. Net Income From Royalties	d. Net Income From Patents	e. Net Income From Copyrights
2.	Totals	b.	c.	d.	e.
3.	Net Income (Combine Columns b, c, d, and e) (Enter here and on Line 22. If loss enter ZERO here and make no entry on Line 22)				3.

NJ

Dependents Information

2010

Name: BEN A BAYLOR & PAT N HARPER

SSN: 221-02-0752

First name	MI	Last name	SSN	Birth year
MADISON		CHAMBERS	223-02-0752	1994

Name: BAYLOR BEN A & HARPER PAT N

SSN: 221-02-0752

Is your gross income, combined income if filing jointly, for the entire year before subtracting any pension exclusion more than \$100,000?

If "Yes", do not complete Part I. Enter "0" on line 9 and continue with Part II.

Yes No

Part I

1	Amount from NJ-1040, line 14 or NJ-1040NR, line 14, column A	
2	Amount from NJ-1040, line 17 or NJ-1040NR, line 17, column A	
3	Amount from NJ-1040, line 20 or NJ-1040NR, line 22, column A	
4	Amount from NJ-1040, line 21 or NJ-1040NR, line 23, column A	
5	Add lines 1, 2, 3, and 4	
Is the amount on line 5 more than \$3,000?		
<input type="checkbox"/> Yes. Enter "0" on line 9 and continue to Part II.		
<input checked="" type="checkbox"/> No. Continue to line 6.		
6	Enter \$20,000 if married filing a joint return, \$15,000 if single, head of household, or qualifying widow(er), or \$10,000 if married filing a separate return	20,000.
7	Amount from NJ-1040, line 19b or NJ-1040NR, line 21a	13,223.
8	Subtract line 7 from line 6	6,777.

Part II

9	Unclaimed pension exclusion	6,777.
10 a	Are you and/or your spouse, if filing jointly, now receiving, or will you and/or your spouse, if filing jointly, ever be eligible to receive social security or railroad retirement benefits? <input type="checkbox"/> No. Continue to line 10b. <input checked="" type="checkbox"/> Yes. Enter "0" on line 10 and continue to line 11.	
b	Would you and/or your spouse, if filing jointly, be receiving, or ever be eligible to receive social security or railroad retirement benefits if you had participated in either program? <input type="checkbox"/> No. Enter "0" on line 10 and continue to line 11. <input type="checkbox"/> Yes. Enter on line 10 the amount of exclusion for your filing status shown below and continue to line 11.	
c	\$6,000 for if married filing a joint return, head of household, or qualifying widow(er), or \$3,000 if single or married filing a separate return	
11	Other retirement income exclusion	6,777.

US Schedule A

Sales Tax Worksheet

2010

Name: BEN A BAYLOR & PAT N HARPER

SSN: 221-02-0752

1	Federal AGI		50,620.	
2	Nontaxable income listed on tax return			
a	Nontaxable interest			
b	Social security	6,092.		
c	Combat pay			
d	Income on Forms 4970 and 4972			
e	Nontaxable part of IRA, pension, or annuity distributions, not including rollovers		6,092.	
3	Other nontaxable income			
a			
b			
c			
d			
e			
4	Income for sales tax chart		56,712.	
1	Enter the taxpayer's state of residency for 2010			NJ
	If the taxpayer was a part-year resident, enter the dates resided in this state _____ to _____			
	State sales tax from the applicable table			819.
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 2010?			
	<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 2010? 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			819.
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.			
a	Enter the state or local sales tax you paid in 2010 for the purchase of a NEW motor vehicle AFTER February 16, 2009 and BEFORE January 1, 2010			
b	Enter the purchase price (before taxes) of the new motor vehicles			
c	If the amount on line 8b is more than \$49,500, enter the portion of the tax from line 8a that is attributable to the first \$49,500 of the purchase price of each new motor vehicle			
d	Sales tax paid on motor vehicles not included on 8a and sales tax paid on aircraft, boats, homes, including mobile and prefabricated, or home building material - only Only deductible if the sales tax charged is at the general sales tax rate			1,400.
9	Total sales tax using the sales tax chart			2,219.
10	Sales tax using actual receipts			
11	Sales tax deduction for Schedule A, line 5			2,219.

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. See instructions.

2010

Declaration Control Number (DCN) ▶ 00200752 1

Taxpayer's name BEN A BAYLOR	Social security number 221-02-0752
Spouse's name PAT N HARPER	Spouse's social security number 222-02-0752

Part I Tax Return Information-Tax Year Ending December 31, 2010 (Whole Dollars Only)	
1 Adjusted gross income (Form 1040, line 38; Form 1040A, line 22; Form 1040EZ, line 4)	1 50,620.
2 Total tax (Form 1040, line 60; Form 1040A, line 37; Form 1040EZ, line 11)	2 1,121.
3 Federal income tax withheld (Form 1040, line 61; Form 1040A, line 38; Form 1040EZ, line 7)	3 2,380.
4 Refund (Form 1040, line 74a; Form 1040A, line 46a; Form 1040EZ, line 12a; Form 1040-SS, Part I, line 12a)	4 1,259.
5 Amount you owe (Form 1040, line 76; Form 1040A, line 48; Form 1040EZ, line 13)	5

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, 2010, 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. I further understand that this authorization may apply to future Federal tax payments that I direct to be debited through the Electronic Federal Tax Payment System (EFTPS). In order for me to initiate future payments, I request that the IRS send me a personal identification number (PIN) to access EFTPS. 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 a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 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 LIBRARY TCE 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 2010 electronically filed income tax return.

I will enter my PIN as my signature on my tax year 2010 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 ▶ 10/15/2011

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 2010 electronically filed income tax return.

I will enter my PIN as my signature on my tax year 2010 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 2010 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 LIBRARY TCE Date ▶ 10/15/2011

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