Electronic Filing Instructions for your 2013 Federal Tax Return

Important: Your taxes are not finished until all required steps are completed.

darlies A williams
209 lynn ave
kingsport, TN 37665

Balance Due/ Refund	Your federal tax return (Form 1040A) shows a refund due to you in the amount of $7,340.00. Your tax refund will be direct deposited into your account. The account information you entered - Account Number: 44352686 Routing Transit Number: 103112675.
When Will You Get Your Refund?	The IRS issued more than 9 out of 10 refunds to taxpayers in less than 21 days last year. The same results are expected in 2014. To get your estimated refund date from TurboTax, log into My TurboTax at www.turbotax.com. If you do not receive your refund within 21 days, or the amount you get is not what you expected, contact the Internal Revenue Service directly at 1-800-829-4477. You can also check www.irs.gov and select the "Where's my refund?" link.
What You Need to Keep	Your Electronic Filing Instructions (this form) Printed copy of your federal return
2013 Federal Tax Return Summary	Adjusted Gross Income $ 31,311.00 Taxable Income $ 10,661.00 Total Tax $ 0.00 Total Payments/Credits $ 7,340.00 Amount to be Refunded $ 7,340.00 Effective Tax Rate -10.86%

Hi darlies,

We just want to thank you for using TurboTax this year! It's our goal to make your taxes easy and accurate, year after year.

With TurboTax Deluxe:
Your Head Start On Next Year:
When you come back next year, taxes will be so easy! We'll have all your information saved and ready to transfer in to your new return. We'll ask you questions about what changed since we last talked, and we'll be ready to get you the credits and deductions you deserve, no matter what life throws at you.

Here's the final wrap up for your 2013 taxes:

Your federal refund is: $ 7,340.00

You qualified for these important credits:
- Child Tax Credit
- Earned Income Credit

Your Guarantee of Accuracy:
Breathe easy. The calculations on your return are backed with our 100% Accuracy Guarantee.
- We double checked your return for errors along the way.
- We helped with step-by-step guidance to get your answers on the right IRS forms.
- We made sure you didn't miss a deduction even if something in your life changed, like a new job, new house - or more kids!

Also included:
- We provide the Audit Support Center free of charge, in the unlikely event you get audited.

Many happy returns from TurboTax.

Form **1040A** Department of the Treasury—Internal Revenue Service
U.S. Individual Income Tax Return (99) 2013
IRS Use Only—Do not write or staple in this space.

OMB No. 1545-0074

Your first name and initial	Last name	Your social security number
darlies A	williams	234 90 6160
If a joint return, spouse's first name and initial	Last name	Spouse's social security number

Home address (number and street). If you have a P.O. box, see instructions.	Apt. no.
209 lynn ave	

▲ Make sure the SSN(s) above and on line 6c are correct.

City, town or post office, state, and ZIP code. If you have a foreign address, also complete spaces below (see instructions).
kingsport TN 37665

Foreign country name	Foreign province/state/county	Foreign postal code

Presidential Election Campaign
Check here if you, or your spouse if filing jointly, want $3 to go to this fund. Checking a box below will not change your tax or refund. ☐ You ☐ Spouse

Filing status
Check only one box.

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

Exemptions
6a ☒ **Yourself.** If someone can claim you as a dependent, **do not** check box 6a.
b ☐ **Spouse**

Boxes checked on 6a and 6b: 1

c **Dependents:**

If more than six dependents, see instructions.

(1) First name	Last name	(2) Dependent's social security number	(3) Dependent's relationship to you	(4) ✓ if child under age 17 qualifying for child tax credit (see instructions)
sierra R	jewell	234-49-5371	Grandchild	☒
dakotah J	buchanan	763-10-3979	Grandchild	☒
				☐
				☐
				☐
				☐

No. of children on 6c who:
• lived with you: 2
• did not live with you due to divorce or separation (see instructions):
Dependents on 6c not entered above:

d Total number of exemptions claimed. Add numbers on lines above ▶ 3

Income
Attach Form(s) W-2 here. Also attach Form(s) 1099-R if tax was withheld.

If you did not get a W-2, see instructions.

7	Wages, salaries, tips, etc. Attach Form(s) W-2.	7	31,311.
8a	**Taxable** interest. Attach Schedule B if required.	8a	
b	**Tax-exempt** interest. **Do not** include on line 8a. 8b		
9a	Ordinary dividends. Attach Schedule B if required.	9a	
b	Qualified dividends (see instructions). 9b		
10	Capital gain distributions (see instructions).	10	
11a	IRA distributions. 11a / 11b Taxable amount (see instructions).	11b	
12a	Pensions and annuities. 12a / 12b Taxable amount (see instructions).	12b	
13	Unemployment compensation and Alaska Permanent Fund dividends.	13	
14a	Social security benefits. 14a / 14b Taxable amount (see instructions).	14b	
15	Add lines 7 through 14b (far right column). This is your **total income.** ▶	15	31,311.

Adjusted gross income

16	Educator expenses (see instructions). 16		
17	IRA deduction (see instructions). 17		
18	Student loan interest deduction (see instructions). 18		
19	Tuition and fees. Attach Form 8917. 19		
20	Add lines 16 through 19. These are your **total adjustments.**	20	
21	Subtract line 20 from line 15. This is your **adjusted gross income.** ▶	21	31,311.

Tax, credits, and payments

22	Enter the amount from line 21 (adjusted gross income).			22	31,311.
23a	Check if: ☐ **You** were born before January 2, 1949, ☐ Blind; ☐ **Spouse** was born before January 2, 1949, ☐ Blind. **Total boxes checked** ▶ 23a ☐				
b	If you are married filing separately and your spouse itemizes deductions, check here ▶ 23b ☐				
24	Enter your **standard deduction**.			24	8,950.
25	Subtract line 24 from line 22. If line 24 is more than line 22, enter -0-.			25	22,361.
26	**Exemptions.** Multiply $3,900 by the number on line 6d.			26	11,700.
27	Subtract line 26 from line 25. If line 26 is more than line 25, enter -0-. This is your **taxable income.** ▶			27	10,661.
28	**Tax,** including any alternative minimum tax (see instructions).			28	1,068.
29	Credit for child and dependent care expenses. Attach Form 2441.	29			
30	Credit for the elderly or the disabled. Attach Schedule R.	30			
31	Education credits from Form 8863, line 19.	31			
32	Retirement savings contributions credit. Attach Form 8880.	32			
33	Child tax credit. Attach Schedule 8812, if required.	33	1,068.		
34	Add lines 29 through 33. These are your **total credits.**			34	1,068.
35	Subtract line 34 from line 28. If line 34 is more than line 28, enter -0-. This is your **total tax.**			35	0.
36	Federal income tax withheld from Forms W-2 and 1099.	36	3,941.		
37	2013 estimated tax payments and amount applied from 2012 return.	37			
38a	**Earned income credit (EIC).**	38a	2,467.		
b	Nontaxable combat pay election. 38b				
39	Additional child tax credit. Attach Schedule 8812.	39	932.		
40	American opportunity credit from Form 8863, line 8.	40			
41	Add lines 36, 37, 38a, 39, and 40. These are your **total payments.** ▶			41	7,340.

Standard Deduction for—
- People who check any box on line 23a or 23b **or** who can be claimed as a dependent, see instructions.
- All others:

Single or Married filing separately, $6,100

Married filing jointly or Qualifying widow(er), $12,200

Head of household, $8,950

If you have a qualifying child, attach Schedule EIC.

Refund

42	If line 41 is more than line 35, subtract line 35 from line 41. This is the amount you **overpaid.**			42	7,340.
43a	Amount of line 42 you want **refunded to you.** If Form 8888 is attached, check here ▶ ☐			43a	7,340.
▶ b	Routing number 103112675 ▶ c Type: ☒ Checking ☐ Savings				
▶ d	Account number 44352686				
44	Amount of line 42 you want **applied to your 2014 estimated tax.**	44			

Direct deposit? See instructions and fill in 43b, 43c, and 43d or Form 8888.

Amount you owe

45	**Amount you owe.** Subtract line 41 from line 35. For details on how to pay, see instructions. ▶			45	
46	Estimated tax penalty (see instructions).	46			

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 accurately list all amounts and sources of income I received during the tax year. Declaration of preparer (other than the taxpayer) is based on all information of which the preparer has any knowledge.

Joint return? See instructions. Keep a copy for your records.

Your signature	Date	Your occupation	Daytime phone number
		cna	
Spouse's signature. If a joint return, **both** must sign.	Date	Spouse's occupation	If the IRS sent you an Identity Protection PIN, enter it here (see inst.)

Paid preparer use only

Print/type preparer's name	Preparer's signature	Date	Check ▶ ☐ if self-employed	PTIN
Firm's name ▶ Self-Prepared			Firm's EIN ▶	
Firm's address ▶			Phone no.	

SCHEDULE EIC
(Form 1040A or 1040)

Department of the Treasury
Internal Revenue Service (99)

Earned Income Credit

Qualifying Child Information

▶ **Complete and attach to Form 1040A or 1040 only if you have a qualifying child.**

▶ **Information about Schedule EIC (Form 1040A or 1040) and its instructions is at *www.irs.gov/scheduleeic*.**

1040A
1040
EIC

OMB No. 1545-0074

2013

Attachment Sequence No. **43**

Name(s) shown on return: darlies A williams

Your social security number: 234-90-6160

Before you begin:

- See the instructions for Form 1040A, lines 38a and 38b, or Form 1040, lines 64a and 64b, to make sure that **(a)** you can take the EIC, and **(b)** you have a qualifying child.
- Be sure the child's name on line 1 and social security number (SSN) on line 2 agree with the child's social security card. Otherwise, at the time we process your return, we may reduce or disallow your EIC. If the name or SSN on the child's social security card is not correct, call the Social Security Administration at 1-800-772-1213.

CAUTION

- *If you take the EIC even though you are not eligible, you may not be allowed to take the credit for up to 10 years. See the instructions for details.*
- *It will take us longer to process your return and issue your refund if you do not fill in all lines that apply for each qualifying child.*

Qualifying Child Information

Qualifying Child Information	Child 1	Child 2	Child 3
1 Child's name If you have more than three qualifying children, you only have to list three to get the maximum credit.	First name / Last name: sierra R jewell	First name / Last name: dakotah J buchanan	First name / Last name
2 Child's SSN The child must have an SSN as defined in the instructions for Form 1040A, lines 38a and 38b, or Form 1040, lines 64a and 64b, unless the child was born and died in 2013. If your child was born and died in 2013 and did not have an SSN, enter "Died" on this line and attach a copy of the child's birth certificate, death certificate, or hospital medical records.	234-49-5371	763-10-3979	
3 Child's year of birth	Year 2 0 0 2 *If born after 1994 **and** the child was younger than you (or your spouse, if filing jointly), skip lines 4a and 4b; go to line 5.*	Year 2 0 1 0 *If born after 1994 **and** the child was younger than you (or your spouse, if filing jointly), skip lines 4a and 4b; go to line 5.*	Year ___ ___ ___ ___ *If born after 1994 **and** the child was younger than you (or your spouse, if filing jointly), skip lines 4a and 4b; go to line 5.*
4 a Was the child under age 24 at the end of 2013, a student, and younger than you (or your spouse, if filing jointly)?	☐ **Yes.** *Go to line 5.* ☐ **No.** *Go to line 4b.*	☐ **Yes.** *Go to line 5.* ☐ **No.** *Go to line 4b.*	☐ **Yes.** *Go to line 5.* ☐ **No.** *Go to line 4b.*
b Was the child permanently and totally disabled during any part of 2013?	☐ **Yes.** *Go to line 5.* ☐ **No.** The child is not a qualifying child.	☐ **Yes.** *Go to line 5.* ☐ **No.** The child is not a qualifying child.	☐ **Yes.** *Go to line 5.* ☐ **No.** The child is not a qualifying child.
5 Child's relationship to you (for example, son, daughter, grandchild, niece, nephew, foster child, etc.)	Grandchild	Grandchild	
6 Number of months child lived with you in the United States during 2013 • If the child lived with you for more than half of 2013 but less than 7 months, enter "7." • If the child was born or died in 2013 and your home was the child's home for more than half the time he or she was alive during 2013, enter "12."	12 months *Do not enter more than 12 months.*	12 months *Do not enter more than 12 months.*	___ months *Do not enter more than 12 months.*

SCHEDULE 8812 (Form 1040A or 1040)

Department of the Treasury Internal Revenue Service (99)

Child Tax Credit

▶ Attach to Form 1040, Form 1040A, or Form 1040NR.
▶ Information about Schedule 8812 and its separate instructions is at *www.irs.gov/schedule8812.*

1040 1040A 1040NR 8812

OMB No. 1545-0074

2013

Attachment Sequence No. 47

Name(s) shown on return	Your social security number
darlies A williams	234-90-6160

Part I Filers Who Have Certain Child Dependent(s) with an ITIN (Individual Taxpayer Identification Number)

CAUTION

Complete this part only for each dependent who has an ITIN and for whom you are claiming the child tax credit.
If your dependent does not qualify for the credit, you cannot include that dependent in the calculation of this credit.

Answer the following questions for each dependent listed on Form 1040, line 6c; Form 1040A, line 6c; or Form 1040NR, line 7c, who has an ITIN (Individual Taxpayer Identification Number) and that you indicated qualified for the child tax credit by checking column (4) for that dependent.

A For the first dependent identified with an ITIN and listed as a qualifying child for the child tax credit, did this child meet the substantial presence test? See separate instructions.

☐ Yes ☐ No

B For the second dependent identified with an ITIN and listed as a qualifying child for the child tax credit, did this child meet the substantial presence test? See separate instructions.

☐ Yes ☐ No

C For the third dependent identified with an ITIN and listed as a qualifying child for the child tax credit, did this child meet the substantial presence test? See separate instructions.

☐ Yes ☐ No

D For the fourth dependent identified with an ITIN and listed as a qualifying child for the child tax credit, did this child meet the substantial presence test? See separate instructions.

☐ Yes ☐ No

Note. If you have more than four dependents identified with an ITIN and listed as a qualifying child for the child tax credit, see the instructions and check here . . . ▶ ☐

Part II Additional Child Tax Credit Filers

1	**1040 filers:** Enter the amount from line 6 of your Child Tax Credit Worksheet (see the Instructions for Form 1040, line 51). **1040A filers:** Enter the amount from line 6 of your Child Tax Credit Worksheet (see the Instructions for Form 1040A, line 33). **1040NR filers:** Enter the amount from line 6 of your Child Tax Credit Worksheet (see the Instructions for Form 1040NR, line 48). If you used Pub. 972, enter the amount from line 8 of the Child Tax Credit Worksheet in the publication.			1	2,000.
2	Enter the amount from Form 1040, line 51; Form 1040A, line 33; or Form 1040NR, line 48			2	1,068.
3	Subtract line 2 from line 1. If zero, **stop;** you cannot take this credit			3	932.
4a	Earned income (see separate instructions)	4a	31,311.		
b	Nontaxable combat pay (see separate instructions) 4b				
5	Is the amount on line 4a more than $3,000? ☐ **No.** Leave line 5 blank and enter -0- on line 6. ☒ **Yes.** Subtract $3,000 from the amount on line 4a. Enter the result . . .	5	28,311.		
6	Multiply the amount on line 5 by 15% (.15) and enter the result			6	4,247.
	Next. Do you have three or more qualifying children? ☒ **No.** If line 6 is zero, stop; you cannot take this credit. Otherwise, skip Part III and enter the **smaller** of line 3 or line 6 on line 13. ☐ **Yes.** If line 6 is equal to or more than line 3, skip Part III and enter the amount from line 3 on line 13. Otherwise, go to line 7.				

Part III Certain Filers Who Have Three or More Qualifying Children

7	Withheld social security, Medicare, and Additional Medicare taxes from Form(s) W-2, boxes 4 and 6. If married filing jointly, include your spouse's amounts with yours. If your employer withheld or you paid Additional Medicare Tax or tier 1 RRTA taxes, see separate instructions	7	
8	**1040 filers:** Enter the total of the amounts from Form 1040, lines 27 and 57, plus any taxes that you identified using code "UT" and entered on line 60. **1040A filers:** Enter -0-. **1040NR filers:** Enter the total of the amounts from Form 1040NR, lines 27 and 55, plus any taxes that you identified using code "UT" and entered on line 59.	8	
9	Add lines 7 and 8	9	
10	**1040 filers:** Enter the total of the amounts from Form 1040, lines 64a and 69. **1040A filers:** Enter the total of the amount from Form 1040A, line 38a, plus any excess social security and tier 1 RRTA taxes withheld that you entered to the left of line 41 (see separate instructions). **1040NR filers:** Enter the amount from Form 1040NR, line 65.	10	
11	Subtract line 10 from line 9. If zero or less, enter -0-	11	
12	Enter the **larger** of line 6 or line 11 . . . . **Next,** enter the **smaller** of line 3 or line 12 on line 13.	12	

Part IV Additional Child Tax Credit

13	**This is your additional child tax credit**	13	932.

1040 1040A 1040NR

Enter this amount on Form 1040, line 65, Form 1040A, line 39, or Form 1040NR, line 63.

Federal Information Worksheet 2013

► Keep for your records

Part I – Personal Information

Information in Part I is **completely calculated** from entries on Personal Information Worksheets.

Taxpayer:
First name . . . . darlies
Middle initial . . . . . . A Suffix . . . . . .
Last name . . . . williams
Social security no. . . . 234-90-6160
Occupation . . . . cna
Date of birth . . . . . . 09/02/1953 (mm/dd/yyyy)
Age as of 1-1-2014 . . 60
Daytime phone . . . . (423)860-8610 Ext
Legally blind . . . . . . ☐
Date of death . . . . .

Dependent of Someone Else:
Can taxpayer be claimed as dependent of another person (such as parent)? . . ☐ Yes ☒ No
If yes, **was** taxpayer claimed as dependent on that person's return? . . . . ☐ Yes ☐ No

Credit for the Elderly or Disabled (Schedule R):
Is the taxpayer retired on total and permanent disability? . . ☐ Yes ☐ No

Presidential Election Campaign Fund:
Does the taxpayer want $3 to go to the Presidential Election Campaign Fund? . . ☐ Yes ☐ No

Spouse:
First name . . . .
Middle initial . . . . . . Suffix . . . . .
Last name . . . .
Social security no. . . .
Occupation . . . .
Date of birth . . . . . . (mm/dd/yyyy)
Age as of 1-1-2014 . .
Daytime phone . . . . . Ext
Legally blind . . . . . . ☐
Date of death . . . . . .

Dependent of Someone Else:
Can spouse be claimed as dependent of another person (such as parent)? . . ☐ Yes ☐ No
If yes, **was** spouse claimed as dependent on that person's return? . . . . ☐ Yes ☐ No

Credit for the Elderly or Disabled (Schedule R):
Is the spouse retired on total and permanent disability? . . ☐ Yes ☐ No

Presidential Election Campaign Fund:
Does the spouse want $3 to go to the Presidential Election Campaign Fund? . . ☐ Yes ☐ No

Part II – Address and Federal Filing Status (enter information in this section)

Address . . . . . . 209 lynn ave Apt no. . .
City . . . . kingsport State . . . . TN ZIP code . . 37665
Foreign province/county Foreign postal code
Foreign code . . . Foreign country . . .

APO/FPO/DPO address, check if appropriate . . . . APO ☐ FPO ☐ DPO ☐

Home phone . . .
Check to print phone number on Form 1040 . . . . ☐ Home ☐ Taxpayer daytime ☐ Spouse daytime

Federal filing status:

☐ **1** Single
☐ **2** Married filing jointly
☐ **3** Married filing separately
Check this box if you **did not** live with your spouse at any time during the year . . . . ► ☐
Check this box if you are eligible to claim your spouse's exemption (see Help) . . . . ► ☐
☒ **4** Head of household
If the 'qualifying person' is your child but **not** your dependent:
Child's First name MI Last Name Suff
Child's social security number . . .
☐ **5** Qualifying widow(er)
Check the appropriate box for the year your spouse died . . . . 2011 ► ☐
2012 ► ☐

Part III – Dependent/Earned Income Credit/Child and Dependent Care Credit Information

Information in Part III is completely calculated from entries on Dependent/Nondependent Info Worksheets.

First name / Last name	MI / Suff	Social security number / Relationship	Date of birth (mm/dd/yyyy) / Age	Code	Not qual for child tax cr	Qualified child/dep care exps incurred and paid 2013	EIC	Lived with taxpyr in U.S.	Educ Tuitn and Fees	* Dep
sierra / jewell	R	234-49-5371 / Grandchild	05/19/2002 / 11	L			E	12	☐	Yes
dakotah / buchanan	J	763-10-3979 / Grandchild	06/30/2010 / 3	L			E	12	☐	Yes
									☐	
									☐	

* "Yes" - qualifies as dependent, "No" - does not qualify as dependent

Part IV — Earned Income Credit Information (you must answer these questions to calculate EIC)

Is the taxpayer or spouse a qualifying child for EIC for another person? . . . . ► [ ] Yes [X] No

Was the taxpayer's (and spouse's if married filing jointly) home in the United States for more than half of 2013? . . . . . ► [X] Yes [ ] No

If the SSN of the taxpayer, or spouse if married filing jointly, was obtained to get a federally funded benefit, such as Medicaid, and the Social Security card contains the legend **Not Valid for Employment**, check this box (see Help) . . . . . . ► [ ]

Check if you are filing head of household **and** your spouse is a nonresident alien **and** you lived with your spouse during the last six months of 2013 . . . . . ► [ ]

Was EIC disallowed or reduced in a previous year and are you required to file Form 8862 this year? . . . . . ► [ ] Yes [X] No

Check if you were notified by the IRS that EIC cannot be claimed in 2013 . . . . ► [ ]

Part V — Direct Deposit or Direct Debit Information (not applicable for Form 9465)

Do you want to elect **direct deposit** of any federal tax refund? . . . . . ► [X] Yes [ ] No

Do you want to elect **direct debit** of federal balance due (Electronic filing only)? . . . ► [ ] Yes [X] No

If you selected either of the options above, fill out the information below:

Name of Financial Institution (optional) . . . . . . ► Fort Sill National Bank

Check the appropriate box . . . . ► Checking [X] Savings [ ]

Routing number . . . . . . ► 103112675 Account number . . . . . ► 44352686

Enter the following information only if you are requesting direct debit of balance due:

Enter the payment date to withdraw from the account above . . . . . ► ____

Balance-due amount from this return . . . . . ► ____

Part VI — Additional Information for Your Federal Return

Standard Deduction/Itemized Deductions:

Check this box if you are itemizing for state tax or other purposes even though your itemized deductions are less than your standard deduction . . . . . ► [ ]

Check this box if you are married filing separately and your spouse itemized deductions . . . . . ► [ ]

Check this box to take the standard deduction even if less than itemized deductions . . . . . ► [ ]

Main Form Selection:

Check this box to calculate Form 1040 even if you qualify to use Form 1040A or 1040EZ . . . . . ► [ ]

Real Estate Professionals:

Do you or your spouse qualify for the special passive activity rules for taxpayers in real property business? (see Help) . . . . . ► [ ] Yes [ ] No

Credit for Qualified Retirement Savings Contributions (Form 8880):

Is the taxpayer a full-time student? . . . . . ► [ ] Yes [X] No

Is the spouse a full-time student? . . . . . ► [ ] Yes [ ] No

Foreign Tax Credit (Form 1116):

Check this box to file Form 1116 even if you're not required to file Form 1116 . . . . . ► [ ]

Resident country . . . . . ► USA

Excludable Income from Am. Samoa, Guam, Commonwealth of the N. Mariana Islands, or Puerto Rico:

Excludable income of bona fide residents of American Samoa, Guam, or the Commonwealth of the Northern Mariana Islands . . . . . ____

Excludable income from Puerto Rico . . . . . ____

Dual Status Alien Return:

Check this box if you are a dual-status alien . . . . . ► [ ]

Third Party Designee:

Caution: Review transferred information for accuracy.

Do you want to allow another person to discuss this return with the IRS? . . . . . ► [ ] Yes [ ] No

If Yes, complete the following:

Third party designee name . . . . ► ____

Third party designee phone number . . ► ____

Personal Identification number (enter any 5 numbers) . . ► ____

If you are entitled to a filing extension or other disaster relief provision as declared by the IRS, enter the appropriate information (see Help) . . . . . ► ____

Part VI — Additional Information for Your Federal Return - Continued

Personal Representative for deceased taxpayers:
Name of personal representative required for E-filed returns when Form 1310 is not filed or it is not the surviving spouse . . . . ► ______

Part VII — State Filing Information

Identity Protection PIN:

If the IRS sent the taxpayer an Identity Protection PIN, enter it here . . . . ► ______
If the IRS sent the spouse an Identity Protection PIN, enter it here . . . . ► ______

Taxpayer:

Enter the taxpayer's state of residence as of December 31, 2013 . . . . ► TN
Check the appropriate box:
Taxpayer is a resident of the state above for the entire year . . . . ► [X]
Taxpayer is a resident of the state above for only part of year . . . . ► [ ]
Date the taxpayer established residence in state above . . . . ► ______
In which state (or foreign country) did the taxpayer reside before this change? . . . . ► ______

Spouse:

Enter the spouse's state of residence as of December 31, 2013 . . . . ► ______
Check the appropriate box:
Spouse is a resident of the state above for the entire year . . . . ► [ ]
Spouse is a resident of the state above for only part of year . . . . ► [ ]
Date the spouse established residence in state above . . . . ► ______
In which state (or foreign country) did the spouse reside before this change? . . . . ► ______

Nonresident states:

Nonresident State(s)	Taxpayer/Spouse/Joint
VA	

Check this box if you are in a Registered Domestic Partnership or a civil union . . . . ► [ ]
If you checked the box on the line above, also check the appropriate box below:
Check if this is your individual federal return you are filing with the IRS . . . . ► [ ]
Check if this is the joint return created to file joint state tax return (see Help) . . . . ► [ ]

Check this box if you are in a same-sex marriage . . . . ► [ ]
If you checked the box on the line above, also check the appropriate box below:
Check if this is your federal return to be filed. . . . . ► [ ]
Check if this is your individual return for filing state return only (see Help) . . . . ► [ ]

Personal Information Worksheet For the Taxpayer — 2013

► Keep for your records

QuickZoom to another copy of Personal Information Worksheet . . . . ►
QuickZoom to Federal Information Worksheet . . . . ►

Part I — Taxpayer's Personal Information

First name . . . darlies   Middle initial . A   Last name . . williams
Suffix . . . . .
Social security no. . . 234-90-6160   Member of U.S. Armed Forces in 2013? . . [ ] Yes [X] No

Date of birth . . . . . . 09/02/1953 (mm/dd/yyyy)   age as of 1-1-2014 60

Occupation . . . . cna   Daytime phone . . . . (423)860-8610   Ext

Marital status . . . Single
If widowed, check the appropriate box for the year your spouse died:
After 2013 ► [ ]   2013 ► [ ]   2012 ► [ ]   2011 ► [ ]   Before 2011 ► [ ]

Are you retired on total and permanent disability? (for Schedule R, see Help). . . . . . ► [ ] Yes [ ] No
Check if this person is legally blind . . . . ► [ ]
If deceased, enter the date of death . . . . ► (mm/dd/yyyy)

Were you under the age of 16 as of 1-1-2014 and this is the first year you are filing a tax return? . . . . ► [ ] Yes [ ] No

Do you want $3 to go to Presidential Election Campaign Fund? . . . . ► [ ] Yes [ ] No

Part II — Questions for Individuals Who Could Be Or Are Dependents of Another Taxpayer

1 **Can** someone (such as your parent) claim you as a dependent? . . . . ► [ ] Yes [X] No
2 If you answered 'Yes' to question 1, are you actually claimed as a dependent on that person's tax return?. . . . . ► [ ] Yes [ ] No
Questions 3 through 5 are only required for individuals who claim the American Opportunity Credit.
3 Were you a full-time student during any part of five months during 2013? . . . . . ► [ ] Yes [ ] No
4 Did your earned income exceed one-half of your support? . . . . ► [ ] Yes [ ] No
5 Was at least one of your parents alive on December 31, 2013?. . . . . ► [ ] Yes [ ] No

Part III — Taxpayer's State Residency Information

Enter this person's state of residence as of December 31, 2013 . . . . TN
Check the appropriate box:
This person is a resident of the state above for the entire year . . . . [X]
This person is a resident of the state above for only part of year . . . . [ ]
Date this person established residence in state above . . . . ►
In which state (or foreign country) did this person reside before this change? . . . . ►

Part IV — Dependent Care Expenses

Qualified dependent care expenses incurred and paid for this person in 2013 . . . .

Dependent and Nondependent Information Worksheet 2013

► Keep for your records

QuickZoom to another copy of Dependent and Nondependent Information Worksheet . . . . ►
QuickZoom to Federal Information Worksheet . . . . ►

Part I – Personal Information

First name . . . sierra Middle initial . R Last name . . jewell
Suffix . . . . . ______

Social security no. . . 234-49-5371

Date of birth . . . . . . 05/19/2002 (mm/dd/yyyy) age as of 12-31-2013 11
Did this person pass away in 2013 (deceased)? . . . . ☐ Yes ☐ No

Relationship to taxpayer or spouse . . . . Grandchild
CAUTION: If claiming a child other than your own, see **Relationship** in the Tax Help.

NOTE: The ability to set your answers to being the same as last year for the dependent is only available in Step-by-Step mode and not in Forms mode.
Are the answers to the questions below for this person, to determine whether they are your dependent, the same as they were last year? . . . . ► X Yes ☐ No

Dependency code *. L – Your dependent child who lived with you

*Dependency code is set based on your selections in the Dependency Exemption/EIC Smart Worksheet

Dependent is disabled . . . . ☐

Part II – Earned Income Credit and Child Tax Credit

Is this person a U.S. citizen, U.S. national, or a U.S. resident? . . . . X Yes ☐ No
Is this person a resident of Canada or Mexico? . . . . ☐ Yes X No

This person is adopted and you are a U.S. citizen or U.S. national ☐
The adopted child lived with you all year ☐
*If the child is adopted, you are a U.S. citizen or U.S. national and they lived with you all year, they are considered to meet the citizen test and the U.S. citizen box will automatically be checked yes.

Qualifying for the earned income credit * . E – Qualifying child

*EIC code is set based on your selections in the Dependency Exemption/EIC Smart Worksheet
Months lived with taxpayer in the United States 12

Check if this person is **not** a qualifying child for the child tax credit . . . . ☐

If this dependent has an ITIN issued by the IRS instead of a social security number issued by the social security administration, did they meet the substantial presence test? (see Schedule 8812 Instructions) ☐ Yes ☐ No

Part III – Dependent Care Expenses

Qualified child or dependent care expenses incurred and paid in 2013 . . . . ______

Dependent and Nondependent Information Worksheet 2013

► Keep for your records

QuickZoom to another copy of Dependent and Nondependent Information Worksheet . . . . ►
QuickZoom to Federal Information Worksheet . . . . ►

Part I — Personal Information

First name . . . dakotah Middle initial . J Last name . . buchanan
Suffix . . . . . ______

Social security no. . . 763-10-3979

Date of birth . . . . . . 06/30/2010 (mm/dd/yyyy) age as of 12-31-2013 3
Did this person pass away in 2013 (deceased)? . . . . ☐ Yes ☐ No

Relationship to taxpayer or spouse . . . . Grandchild
CAUTION: If claiming a child other than your own, see **Relationship** in the Tax Help.

NOTE: The ability to set your answers to being the same as last year for the dependent is only available in Step-by-Step mode and not in Forms mode.
Are the answers to the questions below for this person, to determine whether they are your dependent, the same as they were last year? . . . . ► X Yes ☐ No

Dependency code *. L — Your dependent child who lived with you

*Dependency code is set based on your selections in the Dependency Exemption/EIC Smart Worksheet

Dependent is disabled . . . . ☐

Part II — Earned Income Credit and Child Tax Credit

Is this person a U.S. citizen, U.S. national, or a U.S. resident? . . . . X Yes ☐ No
Is this person a resident of Canada or Mexico? . . . . ☐ Yes X No

This person is adopted and you are a U.S. citizen or U.S. national ☐
The adopted child lived with you all year ☐
*If the child is adopted, you are a U.S. citizen or U.S. national and they lived with you all year, they are considered to meet the citizen test and the U.S. citizen box will automatically be checked yes.

Qualifying for the earned income credit * . E — Qualifying child

*EIC code is set based on your selections in the Dependency Exemption/EIC Smart Worksheet
Months lived with taxpayer in the United States 12

Check if this person is **not** a qualifying child for the child tax credit . . . . ☐

If this dependent has an ITIN issued by the IRS instead of a social security number issued by the social security administration, did they meet the substantial presence test? (see Schedule 8812 Instructions) ☐ Yes ☐ No

Part III — Dependent Care Expenses

Qualified child or dependent care expenses incurred and paid in 2013 . . . . ______

Form 1040	Forms W-2 & W-2G Summary	2013
	► Keep for your records	

Name(s) Shown on Return	Social Security Number
darlies A williams	234-90-6160

Form W-2 Summary

Box No.	Description	Taxpayer	Spouse	Total
1	Total wages, tips and compensation:			
	Non-statutory & statutory wages not on Sch C	31,311.		31,311.
	Statutory wages reported on Schedule C			
	Foreign wages included in total wages			
	Unreported tips			
2	Total federal tax withheld	3,941.		3,941.
3 & 7	Total social security wages/tips	31,311.		31,311.
4	Total social security tax withheld	1,941.		1,941.
5	Total Medicare wages and tips	31,311.		31,311.
6	Total Medicare tax withheld	454.		454.
8	Total allocated tips			
9	Not used			
10	Total dependent care benefits			
11	Total distributions from nonqualified plans			
12 a	Total from Box 12	5,741.		5,741.
b	Elective deferrals to qualified plans			
c	Roth contributions to 401(k) & 403(b) plans			
d	Deferrals to government 457 plans			
e	Deferrals to non-government 457 plans			
f	Deferrals 409A nonqual deferred comp plan			
g	Income 409A nonqual deferred comp plan			
h	Uncollected Medicare tax			
i	Uncollected social security and RRTA tier 1			
j	Uncollected RRTA tier 2			
k	Income from nonstatutory stock options			
l	Non-taxable combat pay			
m	Total other items from box 12	5,741.		5,741.
14 a	Total deductible mandatory state tax			
b	Total deductible charitable contributions			
c	This line does not apply to TurboTax			
d	Total RR Compensation			
e	Total RR Tier 1 tax			
f	Total RR Tier 2 tax			
g	Total RR Medicare tax			
h	Total RR Additional Medicare tax			
i	Total RRTA tips			
j	Total other items from box 14			
16	Total state wages and tips	2,111.		2,111.
17	Total state tax withheld	75.		75.
19	Total local tax withheld			

Form **W-2**

Wage and Tax Statement

► Keep for your records

2013

Name	Social Security Number
darlies A williams	234-90-6160

☐ **Spouse's W-2**
☐ **Do not transfer this W-2 to next year**

Military: Complete **Part VI** on Page 2 below

a Employee's social security No . 234-90-6160
b Employer's ID number 58-1859039
c Employer's name, address, and ZIP code
resource healthcare of america

Street 2421 john b dennis highway
City kingsport
State TN ZIP Code 37660
Foreign Country

d Control number .

☒ **Transfer employee information from the Federal Information Worksheet**

e Employee's name
First darlies M.I. A
Last williams Suff.

f Employee's address and ZIP code
Street 209 lynn ave
City kingsport
State TN ZIP Code 37665
Foreign Country

1 Wages, tips, other compensation: 29,200.04
2 Federal income tax withheld: 3,708.45
3 Social security wages: 29,200.04
4 Social security tax withheld: 1,810.40
5 Medicare wages and tips: 29,200.04
6 Medicare tax withheld: 423.40
7 Social security tips
8 Allocated tips
9
10 Dependent care benefits
11 Nonqualified plans
Distributions from sect. 457 and nonqualified plans *(Important, see Help)*
12 Enter box 12 below

13
☐ Statutory employee
☐ Retirement plan
☐ Third-party sick pay

14 Enter box 14 below **after** entering boxes 18, 19, and 20.
NOTE: Enter box 15 **before** entering box 14.

Box 12 Code	**Box 12** Amount
DD	5,741.35

If Box 12 code is:
A: Enter amount attributable to RRTA Tier 2 tax
M: Enter amount attributable to RRTA Tier 2 tax
P: Double click to link to Form 3903, line 4 . . .
R: Enter MSA contribution for Taxpayer . . .
Spouse . . . .
W: Enter HSA contribution for Taxpayer . . .
Spouse . . . .
G: ☐ Employer is **not** a state or local government

Box 15 State	Employer's state I.D. no.	**Box 16** State wages, tips, etc.	**Box 17** State income tax

Box 20 Locality name	**Box 18** Local wages, tips, etc.	**Box 19** Local income tax	Associated State

Box 14 Description or Code on Actual Form W-2	Amount	TurboTax Identification of Description or Code (Identify this item by selecting the identification from the drop down list. If not on the list, select Other).

Form **W-2** | **Wage and Tax Statement** | **2013**

► Keep for your records

Name	Social Security Number
darlies A williams	234-90-6160

☐ **Spouse's W-2**
☐ **Do not transfer this W-2 to next year**

Military: Complete **Part VI** on Page 2 below

a Employee's social security No . 234-90-6160
b Employer's ID number 90-0893139
c Employer's name, address, and ZIP code
Nova Healthcare Group LLC

Street 377 Clonce Street
City Weber City
State VA ZIP Code 24290
Foreign Country

d Control number .

[X] **Transfer employee information from the Federal Information Worksheet**

e Employee's name
First darlies M.I. A
Last williams Suff.
f Employee's address and ZIP code
Street 209 lynn ave
City kingsport
State TN ZIP Code 37665
Foreign Country

1 Wages, tips, other compensation: 2,110.65
2 Federal income tax withheld: 233.24
3 Social security wages: 2,110.65
4 Social security tax withheld: 130.86
5 Medicare wages and tips: 2,110.65
6 Medicare tax withheld: 30.60
7 Social security tips
8 Allocated tips
9
10 Dependent care benefits
11 Nonqualified plans
Distributions from sect. 457 and nonqualified plans *(Important, see Help)*
12 Enter box 12 below

13 ☐ Statutory employee ☐ Retirement plan ☐ Third-party sick pay

14 Enter box 14 below **after** entering boxes 18, 19, and 20.
NOTE: Enter box 15 **before** entering box 14.

Box 12 Code	**Box 12** Amount

If Box 12 code is:
A: Enter amount attributable to RRTA Tier 2 tax
M: Enter amount attributable to RRTA Tier 2 tax
P: Double click to link to Form 3903, line 4. . .
R: Enter MSA contribution for Taxpayer . . . / Spouse . . . .
W: Enter HSA contribution for Taxpayer . . . / Spouse . . . .
G: ☐ Employer is **not** a state or local government

Box 15 State	Employer's state I.D. no.	**Box 16** State wages, tips, etc.	**Box 17** State income tax
VA	30900893139F001	2,110.65	75.33

Box 20 Locality name	**Box 18** Local wages, tips, etc.	**Box 19** Local income tax	Associated State

Box 14 Description or Code on Actual Form W-2	Amount	TurboTax Identification of Description or Code (Identify this item by selecting the identification from the drop down list. If not on the list, select Other).

Form 1040
Line 51

Child Tax Credit Worksheet

► Keep for your records

2013

Name as Shown on Return: darlies A williams
Social Security No.: 234-90-6160

Note:
- To be a qualifying child for the child tax credit, the child must be **under age 17** at the end of 2013 and meet the other requirements listed in the instructions for Form 1040 or 1040A.
- If applicable, first complete Form 2555, Foreign Earned Income and enter any exclusion of income from U.S. Possessions on the Federal Information Worksheet.

Part 1

1 Number of qualifying children: 2 X $1,000. Enter the result . . . . 1 2,000.

2 Enter the amount from Form 1040, line 38, or Form 1040A, line 22 . . . . 2 31,311.

3 **1040 filers:** enter the total of any —
- Exclusion of income from Puerto Rico, and
- Amounts from Form 2555, lines 45 and 50; Form 2555-EZ, line 18; and Form 4563, line 15.

1040A filers: Enter -0-. . 3 0.

4 Add lines 2 and 3. Enter the total . . . . 4 31,311.

5 Enter the amount shown below for your filing status.
- Married filing jointly — $110,000
- Single, head of household, or qualifying widow(er) — $75,000
- Married filing separately — $55,000

. 5 75,000.

6 Is the amount on line 4 more than the amount on line 5?

[X] **No.** Leave line 6 blank. Enter -0- on line 7.

[ ] **Yes.** Subtract line 5 from line 4 . . . . 6 ______
If the result is not a multiple of $1,000, increase it to the next multiple of $1,000. For example, increase $425 to $1,000, increase $1,025 to $2,000, etc.

7 Multiply the amount on line 6 by 5% (.05). Enter the result . . . . 7 0.

8 Is the amount on line 1 more than the amount on line 7?

[ ] **No. Stop.**
You cannot take the child tax credit on Form 1040, line 51, or Form 1040A, line 33. You also cannot take the additional child tax credit on Form 1040, line 65, or Form 1040A, line 39. Complete the rest of your Form 1040 or 1040A.

[X] **Yes.** Subtract line 7 from line 1. Enter the result. *Go to Part 2* . . . . 8 2,000.

Part 2

9 Enter the amount from Form 1040, line 46, or Form 1040A, line 28 . . . . 9 1,068.

10 Add the amounts from —

Form 1040, line 47	
Form 1040, line 48, or Form 1040A, line 29 . . . . +	
Form 1040, line 49, or Form 1040A, line 31 . . . . +	
Form 1040, line 50, or Form 1040A, line 32 . . . . +	
Form 5695, line 30 . . . . +	
Form 8910, line 15 . . . . +	
Form 8936, line 23 . . . . +	
Schedule R, line 22 . . . . +	
Enter the total 10	0.

11 Are you claiming any of the following credits?
- Mortgage interest credit, Form 8396
- Adoption Credit, Form 8839
- Residential energy efficient property credit, Form 5695, Part I
- District of Columbia first-time homebuyer credit, Form 8859

[X] **No.** Enter the amount from line 10. . . . .

[ ] **Yes.** Complete the *Line 11 Worksheet* below to figure the amount to enter here

. . 11 0.

12 Subtract line 11 from line 9. Enter the result. . . . . 12 1,068.

13 Is the amount on line 8 of this worksheet more than the amount on line 12?

[ ] **No.** Enter the amount from line 8

[X] **Yes.** Enter the amount from line 12. See the **TIP** below.

This is your child tax credit. . . . . 13 1,068.

Enter this amount on Form 1040, line 51, or Form 1040A, line 33.

TIP: You may be able to take the **additional child tax credit** on Form 1040, line 65, **or** Form 1040A, line 39, only if you answered 'Yes' on line 13.
- First, complete your Form 1040 through line 64a (also complete line 69), or Form 1040A through line 38a.
- Then, use Parts II through IV of Schedule 8812 to figure any additional child tax credit.

Tax Payments Worksheet 2013

► Keep for your records

Name(s) Shown on Return	Social Security Number
darlies A williams	234-90-6160

Estimated Tax Payments for 2013 (If more than 4 payments for any state or locality, see Tax Help)

	Federal		State			Local		
	Date	Amount	Date	Amount	ID	Date	Amount	ID
1	04/15/13		04/15/13			04/15/13		
2	06/17/13		06/17/13			06/17/13		
3	09/16/13		09/16/13			09/16/13		
4	01/15/14		01/15/14			01/15/14		
5								
Tot Estimated Payments . . .								

Tax Payments Other Than Withholding (If multiple states, see Tax Help)	Federal	State	ID	Local	ID
6 Overpayments applied to 2013					
7 Credited by estates and trusts					
8 **Totals** Lines 1 through 7					
9 2013 extensions					

Taxes Withheld From:			Federal	State	Local
10 Forms W-2			3,941.	75.	
11 Forms W-2G					
12 Forms 1099-R					
13 Forms 1099-MISC and 1099-G					
14 Schedules K-1					
15 Forms 1099-INT, DIV and OID					
16 Social Security and Railroad Benefits					
17 Form 1099-B	St	Loc			
18 a Other withholding	St	Loc			
b Other withholding	St	Loc			
c Other withholding	St	Loc			
d Positive Adjustment . . .	St	Loc			
e Negative Adjustment . .	St	Loc			
f Additional Medicare Tax					
19 **Total Withholding** Lines 10 through 18f			3,941.	75.	
20 **Total Tax Payments for 2013**			3,941.	75.	

Prior Year Taxes Paid In 2013 (If multiple states or localities, see Tax Help)	State	ID	Local	ID
21 Tax paid with 2012 extensions				
22 2012 estimated tax paid after 12/31/2012				
23 Balance due paid with 2012 return				
24 Other (amended returns, installment payments, etc) . .				

Earned Income Worksheet 2013

► Keep for your records

Name(s) Shown on Return	Social Security Number
darlies A williams	234-90-6160

Part I — Earned Income Credit Wks Computation	Taxpayer	Spouse	Total
1 If filing Schedule SE:			
a Net self-employment income			
b Optional Method and Church Employee income			
c Add lines 1a and 1b			
d One-half of self-employment tax			
e Subtract line 1d from line 1c			
2 If not required to file Schedule SE:			
a Net farm profit or (loss)			
b Net nonfarm profit or (loss)			
c Add lines 2a and 2b			
3 **If filing Schedule C or C-EZ as a statutory employee,** enter the amount from line 1 of that Schedule C or C-EZ			
4 Add lines 1e, 2c and 3. To EIC Wks, line 5			

Part II — Form 2441 and Standard Deduction Worksheet Computations

	Taxpayer	Spouse	Total
5 Net self-employment earnings (line 4 above)			
6 Wages, salaries, and tips less distributions from nonqualified or section 457 plans, etc	31,311.		31,311.
7 Taxable employer-provided adoption benefits			
8 Add lines 5 through 7. To Form 2441, lines 19 and 20	31,311.		31,311.
9 a Taxable dependent care benefits			
b Nontaxable combat pay			
10 Add lines 8, 9a and 9b . To Form 2441, lines 4 and 5	31,311.		31,311.
11 Scholarship or fellowship income not on W-2			
12 SE exempt earnings less nontaxable income			
13 Distributions from nonqualified/Sec. 457 plans			
14 Add lines 8, 9a and 11 through 13. To Standard Deduction Worksheet	31,311.		31,311.

Part III — IRA Deduction Worksheet Computation

	Taxpayer	Spouse	Total
15 Net self-employment income or (loss)			
16 Wages, salaries, tips, etc	31,311.		31,311.
17 Net self-employment loss			
18 Alimony received			
19 Nontaxable combat pay			
20 Foreign earned income exclusion			
21 Keogh, SEP or SIMPLE deduction			
22 Combine lines 15 through 21. To IRA Wks, ln 2	31,311.		31,311.

Part IV — Schedule 8812 and Child Tax Credit Line 11 Worksheet Computations

	Taxpayer	Spouse	Total
23 Self-employed, church and statutory employees			
24 Wages, salaries, tips, etc	31,311.		31,311.
25 Nontaxable combat pay			
26 Foreign earned income exclusion			
27 Combine lines 23 through 26. To Schedule 8812, line 4a & Line 11 Wks, line 2	31,311.		31,311.

Form **1040** Line 64

Earned Income Credit Worksheet

► Keep for your records

2013

Name(s) Shown on Return	Social Security Number
darlies A williams	234-90-6160

QuickZoom to Schedule EIC . . . . ►

QuickZoom to Dependent Information Worksheet to enter qualifying children information. . . . . ►

QuickZoom to Wages, Salaries, & Tips Worksheet to enter earned and non-earned income . . . ►

QuickZoom to page 2 of this worksheet, if credit is not calculated on line 7. . . . ►

1	Enter the amount from Form 1040 or 1040A, line 7, or Form 1040EZ, line 1, less amounts considered **not** earned for EIC purposes	1	31,311.
2	Adjustments to line 1 amount:		
a	Income reported as wages **and** as self-employment income	2 a	
b	Other income entered as wages that is not considered earned income	b	
c	Distributions from section 457 and other nonqualified plans reported on W-2	c	
3	Subtract lines 2a, 2b and 2c from line 1	3	31,311.
4 a	Taxpayer's nontaxable combat pay election for EIC — 4 a		
b	Spouse's nontaxable combat pay election for EIC — b		
c	Total nontaxable combat pay election	4 c	
5	If you were self-employed **or** used Schedule C or Schedule C-EZ as a statutory employee, enter the amount from the Earned Income Worksheet, line 4	5	
6	**Earned income.** Add lines 3, 4c, and 5	6	31,311.
7	Enter the credit, from the **EIC Table**, for the amount on line 6. Be sure to use the correct column for filing status and number of children	7	2,467.
	If line 7 is zero, **stop**. You **cannot** take the credit. Enter "No" on the dotted line next to Form 1040, line 64a.		
8	Enter your **AGI** from Form 1040, line 38	8	31,311.
9	If you have: • No qualifying children, is the amount on line 8 less than $8,000 ($13,350 if married filing jointly)? • 1 or more qualifying children, is the amount on line 8 less than $17,550 ($22,900 if married filing jointly)?		
	[ ] **Yes.** Go to line 10 now.		
	[X] **No.** Enter the credit, from the **EIC Table,** for the amount on line **8**. Be sure to use the correct column for filing status and number of children	9	2,467.
10	**Earned income credit.** • If 'Yes' on line 9, enter the amount from line 7 • If 'No' on line 9, enter the **smaller** of line 7 or line 9	10	2,467.

Enter line 10 amount on Form 1040, line 64a, Form 1040A, line 38a, or Form 1040EZ, line 8a.

Federal Carryover Worksheet 2013

► Keep for your records

Name(s) Shown on Return	Social Security Number
darlies A williams	234-90-6160

2012 State and Local Income Tax Information (See Tax Help)

	(a) State or Local ID	(b) Paid With Extension	(c) Estimates Pd After 12/31	(d) Total With-held/Pmts	(e) Paid With Return	(f) Total Over-payment	(g) Applied Amount
Totals . .							

Other Tax and Income Information		2012	2013
1 Filing status	1	4 HH	4 HH
2 Number of exemptions for blind or over 65 (0 - 4)	2		
3 Itemized deductions	3	0.	75.
4 Check box if required to itemize deductions	4	☐	☐
5 Adjusted gross income	5	38,546.	31,311.
6 Tax liability for Form 2210 or Form 2210-F	6	0.	0.
7 Alternative minimum tax	7		
8 Federal overpayment applied to next year estimated tax	8		

QuickZoom to the IRA Information Worksheet for IRA information ►

Excess Contributions		2012	2013
9 a Taxpayer's excess Archer MSA contributions as of 12/31	9 a		
b Spouse's excess Archer MSA contributions as of 12/31	b		
10 a Taxpayer's excess Coverdell ESA contributions as of 12/31	10 a		
b Spouse's excess Coverdell ESA contributions as of 12/31	b		
11 a Taxpayer's excess HSA contributions as of 12/31	11 a		
b Spouse's excess HSA contributions as of 12/31	b		

Loss and Expense Carryovers Note: Enter all entries as a positive amount		2012	2013
12 a Short-term capital loss	12 a		
b AMT Short-term capital loss	b		
13 a Long-term capital loss	13 a		
b AMT Long-term capital loss	b		
14 a Net operating loss available to carry forward	14 a		
b AMT Net operating loss available to carry forward	b		
15 a Investment interest expense disallowed	15 a		
b AMT Investment interest expense disallowed	b		
16 Nonrecaptured net Section 1231 losses from: a 2013	16 a		
b 2012	b		
c 2011	c		
d 2010	d		
e 2009	e		
f 2008	f		

darlies A williams 234-90-6160

Loss and Expense Carryovers (cont'd)		2012	2013
17 AMT Nonrecap'd net Sec 1231 losses from: a 2013	17 a		
b 2012	b		
c 2011	c		
d 2010	d		
e 2009	e		
f 2008	f		

Credit Carryovers		2012	2013
18 General business credit	18		
19 Adoption credit from: a 2013	19 a		
b 2012	b		
20 Mortgage interest credit from: a 2013	20 a		
b 2012	b		
c 2011	c		
d 2010	d		
21 Credit for prior year minimum tax	21		
22 District of Columbia first-time homebuyer credit	22		
23 Residential energy efficient property credit	23		

Other Carryovers		2012	2013
24 Section 179 expense deduction disallowed	24		
25 Excess foreign housing deduction: a Taxpayer (Form 2555, line 46)	25 a		
b Taxpayer (Form 2555, line 48)	b		
c Spouse (Form 2555, line 46)	c		
d Spouse (Form 2555, line 48)	d		

Charitable Contribution Carryovers

26 **2012** Carryover of charitable contributions from:	Other Property		Capital Gain	
	(a) 50%	**(b)** 30%	**(c)** 30%	**(d)** 20%
a 2012				
b 2011				
c 2010				
d 2009				
e 2008				

27 **2013** Carryover of charitable contributions from:	Other Property		Capital Gain	
	(a) 50%	**(b)** 30%	**(c)** 30%	**(d)** 20%
a 2013				
b 2012				
c 2011				
d 2010				
e 2009				

28 Amount overpaid less earned income credit . . . . . 5,297.

2012 State Capital Loss Carryovers (For users **not** transferring from the prior year)

State ID	Short-term Capital Loss for State	AMT Short-term Capital Loss for State	Long-term Capital Loss for State	AMT Long-term Capital Loss for State	Capital Loss (combined) for State	AMT Capital Loss (combined) for State

Two-Year Comparison 2013

Name(s) Shown on Return: darlies A williams

Social Security Number:

Income	2012	2013	Difference	%
Wages, salaries, tips, etc	38,546.	31,311.	-7,235.	-18.77
Interest and dividend income				
State tax refund				
Business income (loss)				
Capital and other gains (losses)				
IRA distributions				
Pensions and annuities				
Rents and royalties				
Partnerships, S Corps, etc				
Farm income (loss)				
Social security benefits				
Income other than the above				
Total Income	38,546.	31,311.	-7,235.	-18.77
Adjustments to Income				
Adjusted Gross Income	38,546.	31,311.	-7,235.	-18.77
Itemized Deductions				
Medical and dental				
Income or sales tax		75.	75.	
Real estate taxes				
Personal property and other taxes				
Interest paid				
Gifts to charity				
Casualty and theft losses				
Miscellaneous				
Phaseout of itemized deductions				
Total Itemized Deductions		75.	75.	
Standard or Itemized Deduction	8,700.	8,950.	250.	2.87
Exemption Amount	11,400.	11,700.	300.	2.63
Taxable Income	18,446.	10,661.	-7,785.	-42.20
Income tax	2,144.	1,068.	-1,076.	-50.19
Additional income taxes				
Alternative minimum tax				
Total Income Taxes	2,144.	1,068.	-1,076.	-50.19
Nonbusiness credits	2,000.	1,068.	-932.	-46.60
Business credits				
Total Credits	2,000.	1,068.	-932.	-46.60
Self-employment tax				
Other taxes				
Total Tax After Credits	144.	0.	-144.	-100.00
Withholding	5,441.	3,941.	-1,500.	-27.57
Estimated and extension payments				
Earned income credit	722.	2,467.	1,745.	241.69
Additional child tax credit		932.	932.	
Other payments				
Total Payments	6,163.	7,340.	1,177.	19.10
Form 2210 penalty				
Applied to next year's estimated tax				
Refund	6,019.	7,340.	1,321.	21.95
Balance Due				

Current year effective tax rate: -10.86 %

Tax History Report 2013

► Keep for your records

Name(s) Shown on Return
darlies A williams

	Five Year Tax History:				
	2009	2010	2011	2012	2013
Filing status		HH	HH	HH	HH
Total income		28,582.	36,208.	38,546.	31,311.
Adjustments to income					
Adjusted gross income		28,582.	36,208.	38,546.	31,311.
Tax expense					75.
Interest expense					
Contributions					
Miscellaneous deductions					
Other Itemized Deductions					
Total itemized/ standard deduction		8,400.	8,500.	8,700.	8,950.
Exemption amount		10,950.	11,100.	11,400.	11,700.
Taxable income		9,232.	16,608.	18,446.	10,661.
Tax		923.	1,886.	2,144.	1,068.
Alternative min tax					
Total credits		923.	1,886.	2,000.	1,068.
Other taxes					
Payments		6,961.	6,016.	6,163.	7,340.
Form 2210 penalty					
Amount owed					
Applied to next year's estimated tax					
Refund		6,961.	6,016.	6,019.	7,340.
Effective tax rate %		-13.85	-3.07	-1.50	-10.86
**Tax bracket %		10.0	15.0	15.0	10.0

**Tax bracket % is based on Taxable income.

Tax Summary 2013

► Keep for your records

Name (s)
darlies A williams

Total income	31,311.
Adjustments to income	
Adjusted gross income	31,311.
Itemized/standard deduction	8,950.
Exemption amount	11,700.
Taxable income	10,661.
Tentative tax	1,068.
Additional taxes	
Alternative minimum tax	
Total credits	1,068.
Other taxes	
Total tax	0.
Total payments	7,340.
Estimated tax penalty	
Amount Overpaid	7,340.
Refund	7,340.
Amount Applied to Estimate	
Balance due	0.

Which Form 1040 to file?

You must use Form 1040A or Form 1040 because your filing status is head of household.

Compare to U. S. Averages 2013

► Keep for your records

Name(s) Shown on Return	Social Security No
darlies A williams	234-90-6160

Your 2013 adjusted gross income (AGI) . . . . . 31,311.

National adjusted gross income range used below . . . . . from 30,000. to 49,999.

Note: National average amounts have been adjusted for inflation. See Help for details.

Selected Income, Deductions, and Credits	**Actual Per Return**	**National Average**
Salaries and wages	31,311.	37,223.
Taxable interest		1,243.
Tax-exempt interest		6,215.
Dividends		3,016.
Business net income		14,396.
Business net loss		6,804.
Net capital gain		5,552.
Net capital loss		2,300.
Taxable IRA		9,936.
Taxable pensions and annuities		18,020.
Rent and royalty net income		7,620.
Rent and royalty net loss		9,112.
Partnership and S corporation net income		13,801.
Partnership and S corporation net loss		11,894.
Taxable social security benefits		7,272.
Medical and dental expenses deduction		7,179.
Taxes paid deduction	75.	4,124.
Interest paid deduction		7,689.
Charitable contributions deduction		2,365.
Total itemized deductions	75.	15,946.
Child care credit		611.
Education tax credits		1,067.
Child tax credit	1,068.	1,053.
Retirement savings contributions credit		190.
Earned income credit	2,467.	1,374.

Other Information	**Actual Per Return**	**National Average**
Adjusted gross income	31,311.	40,398.
Taxable income	10,661.	22,584.
Income tax	1,068.	2,919.
Alternative minimum tax		2,947.
Total tax liability	0.	3,071.

Smart Worksheets from your 2013 Federal Tax Return

SMART WORKSHEET FOR: Form 1040A: Individual Tax Return

Tax Smart Worksheet

A	Tax	1,068.
	Check if from:	
1	Tax table	X
2	Qualified Dividends and Capital Gain Tax Worksheet	
3	Form 8615	
B	Recapture tax from Form 8863	
C	Alternative minimum tax	
D	**Tax**. Add lines A through C. Enter the result here and on line **28**	1,068.

SMART WORKSHEET FOR: Dependent Information Worksheet (sierra)

Dependency Exemption/EIC Smart Worksheet

NOTE: It is recommended that you answer the questions below using the Step-by-Step mode. That will help insure that answers to the questions are not inconsistent.

A How many months did this person live with you?
Note: if born or died in current year and lived with you entire time or qualified missing child select "The whole year". If more than one-half the year select 7 or more . . . . ► The whole year

B Who are the parents of this person?
To determine if additional questions are necessary for children of divorced parents.
- Both Taxpayer and spouse . . . . ► [ ]
- Taxpayer . . . . ► [ ]
- Spouse . . . . ► [ ]

C Did this person provide more than 1/2 their own support? . . ► [ ] Yes [X] No

D Was this person married on December 31, 2013 and filing a joint return for the year (You may answer **no** if the only reason the joint return is filed is to get a refund of tax withheld or estimated tax payments and neither spouse would have a tax liability on their return if they filed separate returns)? . . . . ► [ ] Yes [ ] No

E Is this person a Full time student? . . . . ► [ ] Yes [ ] No

F Is this person's gross income less than $3,800? . . . . ► [ ] Yes [ ] No

1 Did you provide over 1/2 the support for this person?
or
Did you provide over 10% of the support for the person and with other individuals who would be able to claim the person except for the support test over 1/2 the support and all of you have agreed that you alone will claim the person and you have filled out the Multiple Support Declaration, Form 2120, to attach to your return? [ ] Yes [ ] No

G Is there an agreement with this person's other parent about who can claim this person as a dependent? . . . . . . ► [ ] Yes [ ] No
Note: The noncustodial parent claiming the exemption for the child must attach to their return Form 8332 from the custodial parent releasing the claim to the exemption for the child

H Who will be claiming this person as a dependent as a result of
an agreement between the parents
or
as a result of the rules controlling who can claim a qualifying child when the child meets the conditions to be a qualifying child of more than one person?
- Taxpayer (includes spouse if married filing joint) in this return? . . . . ► [X]
- Other parent in different return? . . . . ► [ ]
- Someone else in different return? . . . . ► [ ]

SMART WORKSHEET FOR: Dependent Information Worksheet (dakotah)

Dependency Exemption/EIC Smart Worksheet

NOTE: It is recommended that you answer the questions below using the Step-by-Step mode.
That will help insure that answers to the questions are not inconsistent.

A How many months did this person live with you?
Note: if born or died in current year and lived with you entire time or qualified missing child select "The whole year". If more than one-half the year select 7 or more . . . . ► The whole year

B Who are the parents of this person?
To determine if additional questions are necessary for children of divorced parents.
- Both Taxpayer and spouse . . . . ► [ ]
- Taxpayer . . . . ► [ ]
- Spouse . . . . ► [ ]

C Did this person provide more than 1/2 their own support? . . ► [ ] Yes [X] No

D Was this person married on December 31, 2013 and filing a joint return for the year (You may answer **no** if the only reason the joint return is filed is to get a refund of tax withheld or estimated tax payments and neither spouse would have a tax liability on their return if they filed separate returns)? . . . . ► [ ] Yes [ ] No

E Is this person a Full time student? . . . . ► [ ] Yes [ ] No

F Is this person's gross income less than $3,800? . . . . ► [ ] Yes [ ] No

1 Did you provide over 1/2 the support for this person?
or
Did you provide over 10% of the support for the person and with other individuals who would be able to claim the person except for the support test over 1/2 the support and all of you have agreed that you alone will claim the person and you have filled out the Multiple Support Declaration, Form 2120, to attach to your return? [ ] Yes [ ] No

G Is there an agreement with this person's other parent about who can claim this person as a dependent? . . . . . . ► [ ] Yes [ ] No
Note: The noncustodial parent claiming the exemption for the child must attach to their return Form 8332 from the custodial parent releasing the claim to the exemption for the child

H Who will be claiming this person as a dependent as a result of
an agreement between the parents
or
as a result of the rules controlling who can claim a qualifying child when the child meets the conditions to be a qualifying child of more than one person?
- Taxpayer (includes spouse if married filing joint) in this return? . . . . ► [X]
- Other parent in different return? . . . . ► [ ]
- Someone else in different return? . . . . ► [ ]

SMART WORKSHEET FOR: Earned Income Credit Worksheet

Nontaxable Combat Pay Election Smart Worksheet

QuickZoom to enter nontaxable combat pay on Form W-2 ►

A Taxpayer:

1 Taxpayer, nontaxable combat pay

2 **Election for earned income credit (EIC):**
Elect taxpayer's nontaxable combat pay as earned income for EIC? ► ☐ **Yes** ☐ **No**

3 **Election for dependent care benefits (DCB):**
Elect taxpayer's nontaxable combat pay as earned income for DCB? ► ☐ **Yes** ☐ **No**

4 **Election for child and dependent care credit:**
Elect taxpayer's nontaxable combat pay as earned income for child and dependent care credit? ► ☐ **Yes** ☐ **No**

B Spouse:

1 Spouse, nontaxable combat pay

2 **Election for earned income credit (EIC):**
Elect spouse's nontaxable combat pay as earned income for EIC? ► ☐ **Yes** ☐ **No**

3 **Election for dependent care benefits (DCB):**
Elect spouse's nontaxable combat pay as earned income for DCB? ► ☐ **Yes** ☐ **No**

4 **Election for child and dependent care credit:**
Elect spouse's nontaxable combat pay as earned income for child and dependent care credit? ► ☐ **Yes** ☐ **No**

C You may compare the tax benefit of electing or not electing by checking a box on line A or line B and reviewing the overpayment or amount due below:

Overpayment 7,340. Amount due

SMART WORKSHEET FOR: Earned Income Credit Worksheet

Investment Income Smart Worksheet

A	Taxable and tax exempt interest	
B	Dividend income	
C	Capital gain net **income**	
D	Royalty and rental of personal property net **income**	
E	Passive activity net **income**:	
1	Rental real estate net income or loss	
2	Farm rental net income or loss	
3	Partnerships and S corporations net income or loss	
4	Estates and trusts net income or loss	
5	Total of lines 1 through 4	
6	Total passive activity net **income**, line 5 if greater than zero	
F	Interest and dividends from Forms 8814	
G	Adjustments	
H	**Total investment income,** add lines A through G	0.

Is line H, **total investment income** over $3,300?

☒ **No.** You may take the credit.

☐ **Yes. Stop.** You **cannot** take the credit.

File by Mail Instructions for your 2013 Virginia Tax Return

Important: Your taxes are not finished until all required steps are completed.

(If you prefer, you can still e-file. Go to the end of these instructions for more information.)

darlies A williams
209 lynn ave
kingsport, TN 37665

Balance Due/ Refund	Your Virginia state tax return (Form 763) shows you are due a refund of $75.00 Your refund will be direct deposited into the following account: Account Number: 44352686, Routing Transit Number: 103112675.
What You Need to Mail	Your tax return - The official return for mailing is included in this printout. Remember to sign and date the return. Be sure to attach copy 2 of Forms W-2, W-2G, 1099-R, and a complete copy of your federal income tax return including all schedules. If you claimed a Credit for Tax Paid to Another State, attach a copy of the tax return for that state. Mail your return and attachments to: Commissioner of the Revenue 202 W. Jackson St., Suite 114 Gate City, VA 24251 Deadline: Postmarked by May 1, 2014 Don't forget correct postage on the envelope.
What You Need to Keep	Keep these instructions and a copy of your return for your records. If you did not print one before closing TurboTax, go back to the program and select File tab, then select the Print for Your Records category.
2013 Virginia Tax Return Summary	Taxable Income $ 1,710.00 Total Tax $ 34.00 Total Payments/Credits $ 109.00 Amount to be Refunded $ 75.00
Special Formatting	Your printed state tax forms may have special formatting on them, such as bar codes or other symbols. This is to enable fast processing. Don't worry, these forms have been approved by your taxing authority and are acceptable for printing and mailing.
Changed Your Mind About e-filing?	You can still file electronically. Just go back to TurboTax, select the File tab, then select the E-file category. We'll walk you through the process. Once you file, we will let you know if your return is accepted (or rejected) by the state taxing agency.

763
Page1

2013 Virginia Nonresident Income Tax Return

Staple Here

Due May 1, 2014

Attach a complete copy of your federal tax return and all other required Virginia attachments.

First Name	MI	Last Name	Suffix	Your Social Security Number	Check if deceased
DARLIES	A	WILLIAMS		234-90-6160	☐
Spouse's First Name (Filing Status 2 Only)	MI	Last Name	Suffix	Spouse's Social Security Number	☐ Check if deceased

Present Home Address (Number and Street or Rural Route)	State of Residence
209 LYNN AVE	TN

City, Town or Post Office	State	ZIP Code
KINGSPORT	TN	37665

Important - Name of Virginia City or County in which principal place of business, employment or income source is located.
SCOTT ☐ City **OR** ☒ County

Locality Code from Instructions: 169

Your Home Phone Number	Your Business Phone Number	Spouse's Business Phone Number

Preparer's PTIN	Filing Election	Code	
		1555	☐ I (we) authorize the Department of Taxation to discuss my (our) return with my (our) preparer.

Check Applicable Boxes

- ☐ Amended Return Check if Result of NOL ☐
- ☐ Dependent on Another's Return
- ☐ Name(s) And Address Different Than Shown on 2012 VA Return
- ☐ Qualifying Farmer, Fisherman or Merchant Seaman
- ☐ Overseas on Due Date
- EIC Claimed on federal return $ 2467.00

EXEMPTIONS (Enter Number below)

Filing Status (Check Only One)

Filing Status	You		Dependents				Total Section 1	65 or over		Blind				Total Section 2
☒ (1) **Single -** Did you claim federal head of household? YES ☒	1	+	2	=	3	X $930 =	2790		+		=		X $800 =	
☐ (2) **Married, Filing Joint Return - BOTH** must have Virginia source income	2	+		=		X $930 =			+		=		X $800 =	
☐ (3) **Married, Spouse Has No Income From Any Source-** Enter Spouse's SSN above Spouse's full name ____	2	+		=		X $930 =			+		=		X $800 =	
☐ (4) **Married, Filing Separate Returns -** Enter Spouse's SSN above Spouse's full name ____	1	+		=		X $930 =			+		=		X $800 =	

Add the Total of Section 1 plus the Total of Section 2. Enter the sum on Line 13

Date of Birth — **Your Birth Date (mm-dd-yyyy)** 09/02/1953 — **Spouse's Birth Date (mm-dd-yyyy)** - -

1	Federal Adjusted Gross Income.	1	31311	00
2	Additions from Schedule 763 ADJ, Line 3.	2		00
3	**Add Lines 1 and 2.**	3	31311	00
4	Age Deduction (See instructions and the Age Deduction Worksheet). Enter Birth Dates above. Enter Your Age Deduction — You	4a		00
	on Line 4a and Your Spouse's Age Deduction on Line 4b. — Spouse	4b		00
5	Social Security Act and equivalent Tier 1 Railroad Retirement Act benefits reported on your federal return.	5		00
6	State income tax refund or overpayment credit reported as income on your federal return.	6		00
7	Subtractions from Schedule 763 ADJ, Line 7.	7		00
8	**Add Lines 4a, 4b, 5, 6 and 7.**	8		00
9	**Virginia Adjusted Gross Income (VAGI). Subtract Line 8 from Line 3.**	9	31311	00
10	Deductions: See instructions.	10		00
11	State and local income taxes claimed from federal Schedule A, if claiming itemized deductions.	11		00
12	If claiming itemized deductions subtract Line 11 from Line 10 or enter standard deduction amount.	12	3000	00
13	Exemption amount. Enter the total amount from the Exemption Sections 1 and 2 above.	13	2790	00
14	Deductions from Schedule 763 ADJ, Line 9.	14		00
15	**Add Lines 12, 13, and 14.**	15	5790	00

Staple Forms W-2, W-2G, 1099 and VK-1 here.

Staple check or money order here.

For Local Use
1555

Va. Dept. of Taxation
2601044 REV. 08/13
REV 12/26/13 TTW

LTD ☐ $____

Your Name	Your SSN
DARLIES A WILLIAMS	234-90-6160

16	Virginia Taxable Income computed as a resident. Subtract Line 15 from Line 9.	16	25521	00
17	Percentage from Nonresident Allocation Section below (**Enter to one decimal place only**).	17	6.7	%
18	Nonresident Taxable Income. (Multiply Line 16 by percentage on Line 17).	18	1710	00
19	Income Tax from Tax Table or Tax Rate Schedule.	19	34	00
20a	Your Virginia income tax withheld, Attach Forms W-2, W-2G, 1099 and VK-1.	20a	75	00
20b	Spouse's Virginia income tax withheld, Attach Forms W-2, W-2G, 1099 and VK-1.	20b		00
21	2013 Estimated Tax Payments (Include credit from 2012).	21		00
22	Extension Payment - submitted using Form 760IP.	22		00
23	Tax Credit for Low-Income Individuals or Virginia Earned Income Credit from Schedule 763 ADJ, Line 17.	23	34	00
24	Total credits from Schedule OSC.	24		00
25	Credits from Schedule CR, Section 5, Line 1A. If claiming Political Contribution Credit only, check box. ☐	25		00
26	**Total payments and credits. Add Lines 20a, 20b, 21, 22, 23, 24 and 25.**	26	109	00
27	If Line 19 is larger than Line 26, enter the difference. This is the **INCOME TAX YOU OWE.** Skip to Line 30.	27		00
28	If Line 26 is larger than Line 19, enter the difference. This is the **OVERPAYMENT AMOUNT.**	28	75	00
29	Amount of overpayment on Line 28 to be **CREDITED TO 2014 ESTIMATED INCOME TAX.**	29		00
30	Adjustments and Voluntary Contributions from **attached** Schedule 763 ADJ, Line 24.	30		00
31	Add Lines 29 and 30.	31		00
32	If you owe tax on Line 27, add Lines 27 and 31 - **OR** - If you have an overpayment on Line 28 and Line 31 is larger than Line 28, enter the difference. This is the **AMOUNT YOU OWE**. Attach payment. Check here if credit card payment has been made. ☐	32		00
33	If Line 28 is larger than Line 31, subtract Line 31 from Line 28. This is the amount to be **REFUNDED TO YOU.**	33	75	00

Choose Direct Deposit or Debit Card Direct Bank Deposit ☒ Debit Card (Fees may apply) ☐

You authorize the Department to issue a Debit Card if the Direct Deposit section below is not completed.

DIRECT BANK DEPOSIT
Domestic Accounts Only
No International Deposits

Your Bank Routing Transit Number: 1 0 3 1 1 2 6 7 5

Your Bank Account Number: 4 4 3 5 2 6 8 6

Checking ☒ Savings ☐

NONRESIDENT ALLOCATION PERCENTAGE. Enter negative numbers in brackets.

			A - All Sources		B - Virginia Sources	
1	Wages, salaries, tips, etc.	1	31311	00	2111	00
2	Interest income.	2		00		00
3	Dividends.	3		00		00
4	Alimony received.	4		00		00
5	Business income or loss.	5		00		00
6	Capital gain or loss/capital gain distributions	6		00		00
7	Other gains or losses	7		00		00
8	Taxable pensions, annuities and IRA distributions.	8		00		
9	Rents, royalties, partnerships, estates, trusts, S corporations, etc.	9		00		00
10	Farm income or loss.	10		00		00
11	Other income.	11		00		00
12	Interest on obligations of other states from Schedule 763 ADJ, Line 1.	12		00		
13	Lump-sum distributions/accumulation distributions included on Schedule 763 ADJ, Line 3.	13		00		00
14	TOTAL - Add Lines 1 through 13 and enter each column total here	14	31311	00	2111	00
15	Nonresident allocation percentage - Divide Line 14 B, by Line 14 A. *Compute percentage to one decimal place, but not more than 100% (example 5.4%).* ENTER here and on Line 17 on Page 2.	15			6.7	%

☐ I agree to obtain my Form 1099-G income tax refund statement electronically at **www.tax.virginia.gov** instead of receiving a paper copy.

I (We), the undersigned, declare under penalty provided by law that I (we) have examined this return and to the best of my (our) knowledge, it is a true, correct and complete return.

Please Sign Here	Your Signature	Date	Spouse's Signature (If a joint return, **both** must sign)	Date
Preparer's Use Only	Preparer's Name	Firm's Name (or Yours if Self-Employed) SELF-PREPARED	Preparer's Phone Number	

2013 Virginia Schedule 763 ADJ (Form 763 ADJ)

Page 1

Your Name	Your SSN
DARLIES A WILLIAMS	234-90-6160

Additions to Adjusted Gross Income

1. Interest on obligations of other states, exempt from federal income tax, but not from state tax. 1 | .00

2. Other additions to adjusted gross income.
   2a. Fixed Date Conformity addition - See instructions .... 2a | .00
   2b - 2c. Refer to the Form 763 instructions for Other Addition Codes. 2b [ ] 2b | .00
   2c [ ] 2c | .00

3. Total Additions. Add Lines 1, 2a - 2c. Enter here and on Form 763, Line 2. .... 3 | .00

Subtractions from Adjusted Gross Income

4. Income (interest, dividends or gains) from obligations or securities of the U.S. exempt from state income tax, but not from federal tax .... 4 | .00

5. Disability income reported as wages (or payments in lieu of wages) on your federal return. If claiming this subtraction **you cannot also claim Age Deduction. Claim the one that benefits you most.**
   5a. Enter **YOUR** disability subtraction on 5a. .... 5a | .00
   5b. Enter **SPOUSE's** disability subtraction on 5b, if claiming Filing status 2 .... 5b | .00

6. Other Subtractions as provided in instructions
   6a. Fixed Date Conformity subtraction. See instructions... 6a | .00
   6b - 6d. Refer to the Form 763 instructions for Other Subtraction Codes. 6b. [ ] 6b | .00
   6c. [ ] 6c | .00
   6d. [ ] 6d | .00

7. Total Subtractions. Add Lines 4, 5a, 5b, and 6a - 6d. Enter here and on Form 763, Line 7....... 7 | .00

Deductions from Virginia Adjusted Gross Income

8. Refer to the Form 763 instructions for Deduction Codes
   8a. [ ] 8a | .00
   8b. [ ] 8b | .00
   8c. [ ] 8c | .00

9. Total Deductions. Add Lines 8a - 8c. Enter here and on Form 763, Line 14 .... 9 | .00

Avoid delays - If completed, attach Schedule 763 ADJ to Form 763

2013 Virginia Schedule 763 ADJ

Your Name	Your SSN
DARLIES A WILLIAMS	234-90-6160

Tax Credit for Low-Income Individuals or Virginia Earned Income Credit - SEE INSTRUCTIONS

Family VAGI		Name	Social Security Number (SSN)	Guideline Income	
	Yourself	DARLIES A WILLIAMS	234-90-6160	31311	00
	Spouse				00
	a. Dependent	SIERRA R JEWELL	234-49-5371		00
	b. Dependent	DAKOTAH J BUCHANAN	763-10-3979		00
10.	If more than 4 exemptions, attach schedule listing the name, SSN & VAGI. Enter total Family Guideline Income here.		10	31311	00

11.	Enter the total number of exemptions reported in the table above. Next, go to the Poverty Guidelines Table shown in the Form 763 instruction book for this Line to see if you qualify for this credit	11	3	
12.	If you qualify, enter the number of personal exemptions reported on your Form 763	12	0	
13.	Multiply Line 12 by $300. Enter the result on Line 13 and proceed to Line 14. If you do not qualify for the Tax Credit for Low-Income Individuals, but claimed an Earned Income Credit on your federal return, enter $0 and proceed to Line 14	13	0	00
14.	Enter the amount of Earned Income Credit claimed on your federal return. If you did not claim an Earned Income Credit on your federal return, enter $0	14	2467	00
15.	Multiply Line 14 by 20% (.20)	15	493	00
16.	Enter the greater of Line 13 or Line 15	16	493	00
17.	Compare the amount on Line 16 above to the amount of tax on Form 763, Line 19. Enter the lesser of the two amounts here and on Form 763, Line 23. This is your credit amount.	17	34	00

Adjustments and Voluntary Contributions

18.	Addition to tax. Check if addition came from: ☐ Form 760C ☐ Form 760F	18		00
19.	Penalty ☐ Late Filing Penalty ☐ Extension Penalty	19		00
20.	Interest (accrued on the tax you owe)	20		00
21.	Consumer's Use Tax	21		00
22.	Voluntary Contributions. Enter the code for the contribution(s) and the contribution amount(s) in boxes 22a - 22c. If contributing to more than 3 qualifying organizations, see Form 763 instructions. 22a	22a		00
	22b	22b		00
	22c	22c		00
23.	If contributing to a Public School Foundation or a Public Library Foundation, enter the code for the foundation(s) and the contribution amount(s) in boxes 23a - 23c. If contributing to more than 3 school or library foundations, see Form 763 instructions. 23a	23a		00
	23b	23b		00
	23c	23c		00
24.	Total Adjustments (add Lines 18 - 23c). Enter here and on Form 763, Line 30	24		00

Virginia Information Worksheet 2013

► Keep for your records

Part I – Personal Information

Taxpayer:

First Name . . . . darlies
Last Name . . . . williams
Middle Initial . . . . . . A   Suffix . .
Social Security No . . 234-90-6160
Date of Birth 09/02/1953
Date of Death . . . . .
E-mail Address . . . .
Daytime Phone . . . . (423)860-8610 * [ ]
Home Phone . . . . . * [ ]

Spouse:

First Name . . . . . .
Last Name . . . . . .
Middle Initial . . . . .   Suffix . .
Social Security No . .
Date of Birth . . . . .
Date of Death. . . . .
E-mail Address . . . .
Daytime Phone . . . . * [ ]

** Check a box to print daytime and/or home phone numbers on the return.*

Address . . . . 209 lynn ave   Apartment Number . . .
City. . . . . kingsport   State . . . TN   ZIP Code . . . 37665
Locality *. . . . . Scott   City [ ]   County [X]

** Select a Virginia city or county you were a resident of on January 1, 2014.*
If nonresident, select a city or county where the Virginia source income was located (see help).

Part II – Main Form

- [ ] Form 760: Resident Tax Return . . . . ►
- [ ] Form 760PY: Part-Year Resident Tax Return . . . . ►
- [X] Form 763: Nonresident Tax Return. . . . . ►
- [ ] Form 763S: Special Nonresident Claim for Income Tax Withheld . . . . Taxpayer ►
  Spouse ►

	Taxpayer	Spouse
Nonresident		
• Enter state of residence	TN	
Part-Year Resident		
• If you moved out of Virginia during 2013, enter date you moved out		
• If you moved into Virginia during 2013, enter date you moved in		
• Part-year residency ratio		

Part III – Filing Status

Resident
- [ ] **1** = Single
- [ ] **2** = Married, joint
- [ ] **3** = Married, separate

Part-Year Resident
- [ ] **1** = Single
- [ ] **2** = Married, joint
- [ ] **3** = Married, separate
- [ ] **4** = Married, combined separate

Nonresident
- [X] **1** = Single
- [ ] **2** = Married, joint
- [ ] **3** = Married, spouse no income
- [ ] **4** = Married, separate

Low Income Credit
- [ ] Check if married Filing Separate and spouse is claiming the low income credit

Part IV – Other Information

- [ ] You agree to obtain Form 1099-G income tax refund statement electronically at www.tax.virginia.gov
- [ ] You mail your return directly to the state of Virginia
- [ ] Your address is different from last year
- [ ] Your name or filing status is different from last year
- [X] You did not file a Virginia return last year
- [ ] You are a Virginia resident who have income from **only one** of these states that borders Virginia: Kentucky, Maryland, North Carolina or West Virginia, and your only income from the border state was earned income on wages and salaries or business income reported on federal Schedule C.

Part IV — Other Information (continued)

Farmers and Fishermen

☐ You are self-employed in farming/fishing or a merchant seaman
☐ Return will be filed and tax due will be paid by March 3, 2014

Use Tax Information (complete when total out-of-state purchase was over $100)

Enter total cost of food items purchased . . . . ______
Enter total cost of non-food items purchased from January 1, 2013 to June 30, 2013 . . . . ______
Enter total cost of non-food items purchased from July 1, 2013 to December 31, 2013 . . . . . . ______
Check this box if home is in Northern Virginia or Hampton Roads region affected by increase of Use Tax Rate to 6% (except for Gloucester and Surry counties where increase is to 5.3%) . . ☐

Underpayment Penalty Information

Enter last year's Virginia adjusted gross income . . . . ______
Enter last year's deductions . . . . ______
Enter last year's nonrefundable credits . . . . ______
Enter last year's total tax liability before credits . . . . ______
Enter last year's spouse tax adjustment credit (if you filed Form 760 last year) . . . . ______

Part V — Direct Deposit Information or Direct Debit Information

Yes	No	
X		Do you want to elect direct deposit of state tax refund?

Important If you answered **No** to direct deposit, your state refund will be issued on a prepaid debit card. The Virginia Department of Taxation no longer issues paper checks.

	X	Do you want to elect direct debit of state tax payment (Electronic Filing Only)?

Note: Direct debit occurs upon acceptance date

International ACH Transactions:

	X	Will the fund go to or originate from an account outside the U.S.?

Virginia does not currently support International ACH transactions.

If you answered **No** to International ACH Transactions, fill out the information below:

Name of Financial Institution (optional) . . . . ► Fort Sill National Bank

Check the appropriate box:

X	Checking	Routing number . . . . ►	103112675
	Savings	Account number. . . . . ►	44352686

Enter the date to withdraw from the account above (***Caution:*** *See help for date to enter*) . . . . ________

State balance-due amount from this return . . . . ________

Part VI — Extension Status

Yes	No	
	X	Has the tax return due date been extended for a six month extension?

Extended due date . . . . ________

QuickZoom to Form 760-IP Automatic Extension Payment . . . . ►

Part VII — Amended Return

	You are filing a Virginia amended return
	You are filing a Virginia amended return due to NOL

Enter the tax year you are amending . . . . ________

Previous Virginia payment made . . . . ________

Previous Virginia refund received . . . . ________

If amending a current year return, **QuickZoom** to Worksheet for Amended Returns to determine if you are due a refund, or need to make an additional payment . . . . ►

QuickZoom to Form 760 . . . . ►

QuickZoom to Form 760PY . . . . ►

QuickZoom to Form 763 . . . . ►

QuickZoom to Form 763S (Taxpayer) . . . . ►

QuickZoom to Form 763S (Spouse) . . . . ►

Tax Payments Worksheet

2013

► Keep for your records

Name	Social Security Number
darlies A williams	234-90-6160

Tax Payments for the Current Year

		Date	Payment
1	First Payment		
2	Second Payment		
3	Third Payment		
4	Fourth Payment		
	Additional Payments		
5 a	Payment		
b	Payment		
c	Payment		
d	Payment		
e	Payment		
6	Overpayment from previous year applied to 2013		
7	Amount paid with current year extension		
8	**Total tax payments**. Add lines 1 through 7		

Income Taxes Withheld for the Current Year

		Spouse	Taxpayer
9	State withholding on Forms W-2		75.
10	State withholding on Forms W-2G		
11	State withholding on Forms 1099-R		
12 a	State withholding on Forms 1099-MISC		
b	State withholding on Forms 1099-G		
c	State withholding on Forms 1099-INT		
13 a	Withholding from Schedule VK-1		
b	Other state tax withholding		
	☐ Check this box if you entered Schedule VK-1 withholding on the federal Tax Payment Worksheet, line 18. Enter the Schedule VK-1 withholding as a negative amount here ►		
14	**Total income tax withheld**		75.
15	Date return will be filed and balance paid		