Electronic Filing Instructions for your 2012 Federal Tax Return

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

Zakieh Shirafkan & Casey A Carnnia
1958 Teasel ct
Woodbridge, VA 22192-2943

Balance Due/ Refund	Your federal tax return (Form 1040) shows a refund due to you in the amount of $4,464.00. Your tax refund should be mailed to you within three to four weeks after your return is accepted.
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 2013. 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

2012 Federal Tax Return Summary

Adjusted Gross Income	$	102,912.00
Taxable Income	$	56,812.00
Total Tax	$	6,722.00
Total Payments/Credits	$	11,186.00
Amount to be Refunded	$	4,464.00
Effective Tax Rate		5.93%

Hi Zakieh and Casey,

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 Premier:
Your Head Start On Next Year:
When you come back next year, taxes will be so easy! All your information will be 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 2012 taxes:
Your federal refund is: $ 4,464.00

We reviewed over 350 deductions and credits so you can be sure you didn't miss a thing, and that you got the maximum refund - guaranteed.
Your Deductions and Credits:

Your itemized deductions for this year: $38,500.00

You qualified for these important credits:
- Education Credits

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.
- If you sold investments, our Cost Basis Lookup calculated cost basis for those sales.
- We helped you out with extra guidance for rental property income, expenses, and refinancing.
- 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 e-filed your federal returns for free, so you could get your refund the fastest way possible.
- We provide the Audit Support Center free of charge, in the unlikely event you get audited.

Many happy returns from TurboTax.

Form **1040** Department of the Treasury—Internal Revenue Service (99)

U.S. Individual Income Tax Return 2012

OMB No. 1545-0074 | IRS Use Only—Do not write or staple in this space.

For the year Jan. 1–Dec. 31, 2012, or other tax year beginning , 2012, ending , 20 | See separate instructions.

Your first name and initial	Last name	Your social security number
Zakieh	Shirafkan	691-01-5408
If a joint return, spouse's first name and initial	Last name	Spouse's social security number
Casey A	Carnnia	578-11-4072

Home address (number and street). If you have a P.O. box, see instructions. 1958 Teasel ct | Apt. no. | ▲ Make sure the SSN(s) above and on line 6c are correct.

City, town or post office, state, and ZIP code. If you have a foreign address, also complete spaces below (see instructions). Woodbridge VA 22192-2943

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

Exemptions

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

Boxes checked on 6a and 6b: 2

c **Dependents:**

(1) First name Last name	(2) Dependent's social security number	(3) Dependent's relationship to you	(4) ✓ if child under age 17 qualifying for child tax credit (see instructions)
			☐
			☐
			☐
			☐

If more than four dependents, see instructions and check here ▶ ☐

No. of children on 6c who:
• lived with you
• 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 ▶ 2

Income

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

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

Enclose, but do not attach, any payment. Also, please use **Form 1040-V.**

7	Wages, salaries, tips, etc. Attach Form(s) W-2		7	105,831.
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	9b		
10	Taxable refunds, credits, or offsets of state and local income taxes		10	1,618.
11	Alimony received		11	
12	Business income or (loss). Attach Schedule C or C-EZ		12	
13	Capital gain or (loss). Attach Schedule D if required. If not required, check here ▶ ☐		13	
14	Other gains or (losses). Attach Form 4797		14	-4,401.
15a	IRA distributions	15a — b Taxable amount	15b	
16a	Pensions and annuities	16a — b Taxable amount	16b	
17	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E		17	-136.
18	Farm income or (loss). Attach Schedule F		18	
19	Unemployment compensation		19	
20a	Social security benefits	20a — b Taxable amount	20b	
21	Other income. List type and amount		21	
22	Combine the amounts in the far right column for lines 7 through 21. This is your **total income** ▶		22	102,912.

Adjusted Gross Income

23	Educator expenses	23		
24	Certain business expenses of reservists, performing artists, and fee-basis government officials. Attach Form 2106 or 2106-EZ	24		
25	Health savings account deduction. Attach Form 8889	25		
26	Moving expenses. Attach Form 3903	26		
27	Deductible part of self-employment tax. Attach Schedule SE	27		
28	Self-employed SEP, SIMPLE, and qualified plans	28		
29	Self-employed health insurance deduction	29		
30	Penalty on early withdrawal of savings	30		
31a	Alimony paid b Recipient's SSN ▶	31a		
32	IRA deduction	32		
33	Student loan interest deduction	33		
34	Tuition and fees. Attach Form 8917	34		
35	Domestic production activities deduction. Attach Form 8903	35		
36	Add lines 23 through 35		36	
37	Subtract line 36 from line 22. This is your **adjusted gross income** ▶		37	102,912.

Tax and Credits

Standard Deduction for—
- People who check any box on line 39a or 39b **or** who can be claimed as a dependent, see instructions.
- All others:

Single or Married filing separately, $5,950

Married filing jointly or Qualifying widow(er), $11,900

Head of household, $8,700

38	Amount from line 37 (adjusted gross income)	38	102,912.
39a	Check if: ☐ **You** were born before January 2, 1948, ☐ Blind. ☐ **Spouse** was born before January 2, 1948, ☐ Blind. **Total boxes checked ▶ 39a** ☐		
b	If your spouse itemizes on a separate return or you were a dual-status alien, check here ▶ **39b** ☐		
40	**Itemized deductions** (from Schedule A) **or** your **standard deduction** (see left margin)	40	38,500.
41	Subtract line 40 from line 38	41	64,412.
42	**Exemptions.** Multiply $3,800 by the number on line 6d	42	7,600.
43	**Taxable income.** Subtract line 42 from line 41. If line 42 is more than line 41, enter -0-	43	56,812.
44	**Tax** (see instructions). Check if any from: **a** ☐ Form(s) 8814 **b** ☐ Form 4972 **c** ☐ 962 election	44	7,654.
45	**Alternative minimum tax** (see instructions). Attach Form 6251	45	
46	Add lines 44 and 45 ▶	46	7,654.
47	Foreign tax credit. Attach Form 1116 if required	47	
48	Credit for child and dependent care expenses. Attach Form 2441	48	
49	Education credits from Form 8863, line 19	49	932.
50	Retirement savings contributions credit. Attach Form 8880	50	
51	Child tax credit. Attach Schedule 8812, if required	51	
52	Residential energy credits. Attach Form 5695	52	
53	Other credits from Form: **a** ☐ 3800 **b** ☐ 8801 **c** ☐	53	
54	Add lines 47 through 53. These are your **total credits**	54	932.
55	Subtract line 54 from line 46. If line 54 is more than line 46, enter -0- ▶	55	6,722.

Other Taxes

56	Self-employment tax. Attach Schedule SE	56	
57	Unreported social security and Medicare tax from Form: **a** ☐ 4137 **b** ☐ 8919	57	
58	Additional tax on IRAs, other qualified retirement plans, etc. Attach Form 5329 if required	58	
59a	Household employment taxes from Schedule H	59a	
b	First-time homebuyer credit repayment. Attach Form 5405 if required	59b	
60	Other taxes. Enter code(s) from instructions	60	
61	Add lines 55 through 60. This is your **total tax** ▶	61	6,722.

Payments

If you have a qualifying child, attach Schedule EIC.

62	Federal income tax withheld from Forms W-2 and 1099	62	10,564.
63	2012 estimated tax payments and amount applied from 2011 return	63	
64a	**Earned income credit (EIC)**	64a	
b	Nontaxable combat pay election **64b**		
65	Additional child tax credit. Attach Schedule 8812	65	
66	American opportunity credit from Form 8863, line 8	66	622.
67	Reserved	67	
68	Amount paid with request for extension to file	68	
69	Excess social security and tier 1 RRTA tax withheld	69	
70	Credit for federal tax on fuels. Attach Form 4136	70	
71	Credits from Form: **a** ☐ 2439 **b** ☐ Reserved **c** ☐ 8801 **d** ☐ 8885	71	
72	Add lines 62, 63, 64a, and 65 through 71. These are your **total payments** ▶	72	11,186.

Refund

Direct deposit? See instructions.

73	If line 72 is more than line 61, subtract line 61 from line 72. This is the amount you **overpaid**	73	4,464.
74a	Amount of line 73 you want **refunded to you.** If Form 8888 is attached, check here ▶ ☐	74a	4,464.
▶ b	Routing number X X X X X X X X X ▶ **c** Type: ☐ Checking ☐ Savings		
▶ d	Account number X X X X X X X X X X X X X X X X X		
75	Amount of line 73 you want **applied to your 2013 estimated tax** ▶	75	

Amount You Owe

76	**Amount you owe.** Subtract line 72 from line 61. For details on how to pay, see instructions ▶	76	
77	Estimated tax penalty (see instructions)	77	

Third Party Designee

Do you want to allow another person to discuss this return with the IRS (see instructions)? ☐ **Yes.** Complete below. ☒ **No**

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

Sign Here

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

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

Your signature	Date	Your occupation	Daytime phone number
		Instructor	(703)863-3967
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.)
		Webmaster	

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 A (Form 1040)

Department of the Treasury
Internal Revenue Service (99)

Itemized Deductions

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

OMB No. 1545-0074

2012

Attachment Sequence No. 07

Name(s) shown on Form 1040: Zakieh Shirafkan & Casey A Carnnia

Your social security number: 691-01-5408

Medical and Dental Expenses		**Caution.** Do not include expenses reimbursed or paid by others.				
	1	Medical and dental expenses (see instructions)	1			
	2	Enter amount from Form 1040, line 38 [2]				
	3	Multiply line 2 by 7.5% (.075)	3			
	4	Subtract line 3 from line 1. If line 3 is more than line 1, enter -0-			4	
Taxes You Paid	5	State and local **(check only one box):**				
		a ☒ Income taxes, **or** / b ☐ General sales taxes	5	5,118.		
	6	Real estate taxes (see instructions)	6	2,709.		
	7	Personal property taxes	7	295.		
	8	Other taxes. List type and amount ▶	8			
	9	Add lines 5 through 8			9	8,122.
Interest You Paid	10	Home mortgage interest and points reported to you on Form 1098	10	29,945.		
	11	Home mortgage interest not reported to you on Form 1098. If paid to the person from whom you bought the home, see instructions and show that person's name, identifying no., and address ▶	11			
Note. Your mortgage interest deduction may be limited (see instructions).	12	Points not reported to you on Form 1098. See instructions for special rules	12			
	13	Mortgage insurance premiums (see instructions)	13			
	14	Investment interest. Attach Form 4952 if required. (See instructions.)	14			
	15	Add lines 10 through 14			15	29,945.
Gifts to Charity	16	Gifts by cash or check. If you made any gift of $250 or more, see instructions	16			
If you made a gift and got a benefit for it, see instructions.	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	433.		
	18	Carryover from prior year	18			
	19	Add lines 16 through 18			19	433.
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	115.		
	23	Other expenses—investment, safe deposit box, etc. List type and amount ▶	23			
	24	Add lines 21 through 23	24	115.		
	25	Enter amount from Form 1040, line 38 [25] 102,912.				
	26	Multiply line 25 by 2% (.02)	26	2,058.		
	27	Subtract line 26 from line 24. If line 26 is more than line 24, enter -0-			27	0.
Other Miscellaneous Deductions	28	Other—from list in instructions. List type and amount ▶			28	
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	38,500.
	30	If you elect to itemize deductions even though they are less than your standard deduction, check here ▶ ☐				

SCHEDULE E (Form 1040)

Department of the Treasury
Internal Revenue Service (99)

Supplemental Income and Loss

(From rental real estate, royalties, partnerships, S corporations, estates, trusts, REMICs, etc.)

▶ Attach to Form 1040, 1040NR, or Form 1041.

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

OMB No. 1545-0074

2012

Attachment Sequence No. **13**

Name(s) shown on return: Zakieh Shirafkan & Casey A Carnnia

Your social security number: 691-01-5408

Part I — Income or Loss From Rental Real Estate and Royalties **Note.** If you are in the business of renting personal property, use **Schedule C** or **C-EZ** (see instructions). If you are an individual, report farm rental income or loss from **Form 4835** on page 2, line 40.

A Did you make any payments in 2012 that would require you to file Form(s) 1099? (see instructions) ☐ Yes ☒ No

B If "Yes," did you or will you file required Forms 1099? ☐ Yes ☐ No

1a	Physical address of each property (street, city, state, ZIP code)
A	1125 n bond st Baltimore MD 21213
B	
C	

1b	Type of Property (from list below)	2 For each rental real estate property listed above, report the number of fair rental and personal use days. Check the **QJV** box only if you meet the requirements to file as a qualified joint venture. See instructions.		Fair Rental Days	Personal Use Days	QJV
A	8		A	0	0	
B			B			
C			C			

Type of Property: vacant resid prop

1 Single Family Residence
3 Vacation/Short-Term Rental
5 Land
7 Self-Rental
2 Multi-Family Residence
4 Commercial
6 Royalties
8 Other (describe)

Income:	**Properties:**		**A**	**B**	**C**
3	Rents received	3			
4	Royalties received	4			
Expenses:					
5	Advertising	5			
6	Auto and travel (see instructions)	6			
7	Cleaning and maintenance	7			
8	Commissions	8			
9	Insurance	9			
10	Legal and other professional fees	10			
11	Management fees	11			
12	Mortgage interest paid to banks, etc. (see instructions)	12			
13	Other interest	13			
14	Repairs	14			
15	Supplies	15			
16	Taxes	16			
17	Utilities	17			
18	Depreciation expense or depletion	18	136.		
19	Other (list) ▶ annual registeration fee	19	0.		
20	Total expenses. Add lines 5 through 19	20	136.		
21	Subtract line 20 from line 3 (rents) and/or 4 (royalties). If result is a (loss), see instructions to find out if you must file **Form 6198**	21	-136.		
22	Deductible rental real estate loss after limitation, if any, on **Form 8582** (see instructions)	22	(136.)	( )	( )

23a	Total of all amounts reported on line 3 for all rental properties	23a	
b	Total of all amounts reported on line 4 for all royalty properties	23b	
c	Total of all amounts reported on line 12 for all properties	23c	
d	Total of all amounts reported on line 18 for all properties	23d	136.
e	Total of all amounts reported on line 20 for all properties	23e	136.
24	**Income.** Add positive amounts shown on line 21. **Do not** include any losses	24	
25	**Losses.** Add royalty losses from line 21 and rental real estate losses from line 22. Enter total losses here	25	(136.)
26	**Total rental real estate and royalty income or (loss).** Combine lines 24 and 25. Enter the result here. If Parts II, III, IV, and line 40 on page 2 do not apply to you, also enter this amount on Form 1040, line 17, or Form 1040NR, line 18. Otherwise, include this amount in the total on line 41 on page 2 . NPA	26	-136.

Form **4797**

Department of the Treasury
Internal Revenue Service

Sales of Business Property

(Also Involuntary Conversions and Recapture Amounts Under Sections 179 and 280F(b)(2))

► Attach to your tax return.

► Information about Form 4797 and its separate instructions is at *www.irs.gov/form4797.*

OMB No. 1545-0184

2012

Attachment Sequence No. 27

Name(s) shown on return	Identifying number
Zakieh Shirafkan & Casey A Carnnia	691-01-5408

1	Enter the gross proceeds from sales or exchanges reported to you for 2012 on Form(s) 1099-B or 1099-S (or substitute statement) that you are including on line 2, 10, or 20 (see instructions)	1	

Part I **Sales or Exchanges of Property Used in a Trade or Business and Involuntary Conversions From Other Than Casualty or Theft—Most Property Held More Than 1 Year** (see instructions)

2 (a) Description of property	(b) Date acquired (mo., day, yr.)	(c) Date sold (mo., day, yr.)	(d) Gross sales price	(e) Depreciation allowed or allowable since acquisition	(f) Cost or other basis, plus improvements and expense of sale	(g) Gain or (loss) Subtract (f) from the sum of (d) and (e)
house and land	04/26/2005	08/12/2012	0.	1,599.	6,000.	-4,401.

3	Gain, if any, from Form 4684, line 39	3	
4	Section 1231 gain from installment sales from Form 6252, line 26 or 37	4	
5	Section 1231 gain or (loss) from like-kind exchanges from Form 8824	5	
6	Gain, if any, from line 32, from other than casualty or theft	6	
7	Combine lines 2 through 6. Enter the gain or (loss) here and on the appropriate line as follows:	7	-4,401.
	Partnerships (except electing large partnerships) and S corporations. Report the gain or (loss) following the instructions for Form 1065, Schedule K, line 10, or Form 1120S, Schedule K, line 9. Skip lines 8, 9, 11, and 12 below.		
	Individuals, partners, S corporation shareholders, and all others. If line 7 is zero or a loss, enter the amount from line 7 on line 11 below and skip lines 8 and 9. If line 7 is a gain and you did not have any prior year section 1231 losses, or they were recaptured in an earlier year, enter the gain from line 7 as a long-term capital gain on the Schedule D filed with your return and skip lines 8, 9, 11, and 12 below.		
8	Nonrecaptured net section 1231 losses from prior years (see instructions)	8	
9	Subtract line 8 from line 7. If zero or less, enter -0-. If line 9 is zero, enter the gain from line 7 on line 12 below. If line 9 is more than zero, enter the amount from line 8 on line 12 below and enter the gain from line 9 as a long-term capital gain on the Schedule D filed with your return (see instructions)	9	

Part II **Ordinary Gains and Losses** (see instructions)

10 Ordinary gains and losses not included on lines 11 through 16 (include property held 1 year or less):

11	Loss, if any, from line 7	11	(4,401.)
12	Gain, if any, from line 7 or amount from line 8, if applicable	12	
13	Gain, if any, from line 31	13	
14	Net gain or (loss) from Form 4684, lines 31 and 38a	14	
15	Ordinary gain from installment sales from Form 6252, line 25 or 36	15	
16	Ordinary gain or (loss) from like-kind exchanges from Form 8824	16	
17	Combine lines 10 through 16	17	-4,401.
18	For all except individual returns, enter the amount from line 17 on the appropriate line of your return and skip lines a and b below. For individual returns, complete lines a and b below:		
a	If the loss on line 11 includes a loss from Form 4684, line 35, column (b)(ii), enter that part of the loss here. Enter the part of the loss from income-producing property on Schedule A (Form 1040), line 28, and the part of the loss from property used as an employee on Schedule A (Form 1040), line 23. Identify as from "Form 4797, line 18a." See instructions	18a	
b	Redetermine the gain or (loss) on line 17 excluding the loss, if any, on line 18a. Enter here and on Form 1040, line 14	18b	-4,401.

Form **8863**

Department of the Treasury
Internal Revenue Service (99)

Education Credits (American Opportunity and Lifetime Learning Credits)

▶ See separate instructions to find out if you are eligible to take the credits.
▶ Instructions and more are at *www.irs.gov/form8863.* Attach to Form 1040 or Form 1040A.

OMB No. 1545-0074
2012
Attachment Sequence No. 50

Name(s) shown on return: Zakieh Shirafkan & Casey A Carnnia
Your social security number: 691-01-5408

CAUTION: *Complete a separate Part III on page 2 for each student for whom you are claiming either credit before you complete Parts I and II.*

Part I Refundable American Opportunity Credit

1	After completing Part III for each student, enter the total of all amounts from all Parts III, line 30	1	1,554.
2	Enter: $180,000 if married filing jointly; $90,000 if single, head of household, or qualifying widow(er)	2	180,000.
3	Enter the amount from Form 1040, line 38, or Form 1040A, line 22. If you are filing Form 2555, 2555-EZ, or 4563, or you are excluding income from Puerto Rico, see Pub. 970 for the amount to enter	3	102,912.
4	Subtract line 3 from line 2. If zero or less, **stop**; you cannot take any education credit	4	77,088.
5	Enter: $20,000 if married filing jointly; $10,000 if single, head of household, or qualifying widow(er)	5	20,000.
6	If line 4 is: • Equal to or more than line 5, enter 1.000 on line 6 • Less than line 5, divide line 4 by line 5. Enter the result as a decimal (rounded to at least three places)	6	1.000
7	Multiply line 1 by line 6. **Caution:** If you were under age 24 at the end of the year **and** meet the conditions described in the instructions, you **cannot** take the refundable American opportunity credit; skip line 8, enter the amount from line 7 on line 9, and check this box ▶ ☐	7	1,554.
8	**Refundable American opportunity credit.** Multiply line 7 by 40% (.40). Enter the amount here and on Form 1040, line 66, or Form 1040A, line 40. Then go to line 9 below.	8	622.

Part II Nonrefundable Education Credits

9	Subtract line 8 from line 7. Enter here and on line 8 of the Credit Limit Worksheet (see instructions)	9	932.
10	After completing Part III for each student, enter the total of all amounts from all Parts III, line 31. If zero skip lines 11 through 17, enter -0- on line 18, and go to line 19	10	
11	Enter the smaller of line 10 or $10,000	11	
12	Multiply line 11 by 20% (.20)	12	
13	Enter: $124,000 if married filing jointly; $62,000 if single, head of household, or qualifying widow(er)	13	
14	Enter the amount from Form 1040, line 38, or Form 1040A, line 22. If you are filing Form 2555, 2555-EZ, or 4563, or you are excluding income from Puerto Rico, see Pub. 970 for the amount to enter	14	
15	Subtract line 14 from line 13. If zero or less, skip lines 16 and 17, enter -0- on line 18, and go to line 19	15	
16	Enter: $20,000 if married filing jointly; $10,000 if single, head of household, or qualifying widow(er)	16	
17	If line 15 is: • Equal to or more than line 16, enter 1.000 on line 17 and go to line 18 • Less than line 16, divide line 15 by line 16. Enter the result as a decimal (rounded to at least three places)	17	
18	Multiply line 12 by line 17. Enter here and on line 1 of the Credit Limit Worksheet (see instructions) ▶	18	
19	**Nonrefundable education credits.** Enter the amount from line 13 of the Credit Limit Worksheet (see instructions) here and on Form 1040, line 49, or Form 1040A, line 31	19	932.

Name(s) shown on return: Zakieh Shirafkan & Casey A Carnnia

Your social security number: 691-01-5408

CAUTION

Complete Part III for each student for whom you are claiming either the American opportunity credit or lifetime learning credit. Use additional copies of Page 2 as needed for each student.

Part III Student and Educational Institution Information

See instructions.

20 Student name (as shown on page 1 of your tax return): Casey Carnnia

21 Student social security number (as shown on page 1 of your tax return): 578-11-4072

22 Educational institution information (see instructions)

a. Name of first educational institution	b. Name of second educational institution (if any)
Northern Virginia Community College	
(1) Address. Number and street (or P.O. box). City, town or post office, state, and ZIP code. If a foreign address, see instructions. 3001 N. Beauregard St Room AA 187 Alexandria VA 22311	**(1)** Address. Number and street (or P.O. box). City, town or post office, state, and ZIP code. If a foreign address, see instructions.
(2) Did the student receive Form 1098-T from this institution for 2012? ☒ Yes ☐ No	**(2)** Did the student receive Form 1098-T from this institution for 2012? ☐ Yes ☐ No
(3) Did the student receive Form 1098-T from this institution for 2011 with Box 2 filled in and Box 7 checked? ☐ Yes ☒ No	**(3)** Did the student receive Form 1098-T from this institution for 2011 with Box 2 filled in and Box 7 checked? ☐ Yes ☐ No
If you checked "No" in **both (2) and (3)**, skip **(4)**.	If you checked "No" in **both (2) and (3)**, skip **(4)**.
(4) If you checked "Yes" in **(2) or (3)**, enter the institution's federal identification number (from Form 1098-T). 54-1268263	**(4)** If you checked "Yes" in **(2) or (3)**, enter the institution's federal identification number (from Form 1098-T).

23 Has the Hope Scholarship Credit or American opportunity credit been claimed for this student for any 4 prior tax years? ☐ Yes — **Stop!** Go to line 31 for this student. ☒ No — Go to line 24.

24 Was the student enrolled at least half-time for at least one academic period that began in 2012 at an eligible educational institution in a program leading towards a postsecondary degree, certificate, or other recognized postsecondary educational credential? (see instructions) ☒ Yes — Go to line 25. ☐ No — **Stop!** Go to line 31 for this student.

25 Did the student complete the first 4 years of post-secondary education before 2012? ☐ Yes — **Stop!** Go to line 31 for this student. ☒ No — Go to line 26.

26 Was the student convicted, before the end of 2012, of a felony for possession or distribution of a controlled substance? ☐ Yes — **Stop!** Go to line 31 for this student. ☒ No — See *Tip* below and complete **either** lines 27-30 **or** line 31 for this student.

TIP

When you figure your taxes, you may want to compare the American opportunity credit and lifetime learning credits, and choose the credit for each student that gives you the lower tax liability. You ***cannot*** *take the American opportunity credit and the lifetime learning credit for the* ***same student*** *in the same year. If you complete lines 27 through 30 for this student, do not complete line 31.*

American Opportunity Credit

27	Adjusted qualified education expenses (see instructions). **Do not enter more than $4,000**	27	1,554.
28	Subtract $2,000 from line 27. If zero or less enter -0-	28	0.
29	Multiply line 28 by 25% (.25)	29	0.
30	If line 28 is zero, enter the amount from line 27. Otherwise, add $2,000 to the amount on line 29 and enter the result. Skip line 31. Include the total of all amounts from all Parts III, line 30 on Part I, line 1	30	1,554.

Lifetime Learning Credit

31	Adjusted qualified education expenses (see instructions). Include the total of all amounts from all Parts III, line 31, on Part II, line 10	31	

Form **4562**

Department of the Treasury
Internal Revenue Service (99)

Depreciation and Amortization
(Including Information on Listed Property)

▶ See separate instructions. ▶ Attach to your tax return.

OMB No. 1545-0172

2012

Attachment Sequence No. 179

Name(s) shown on return	Business or activity to which this form relates	Identifying number
Zakieh Shirafkan & Casey A Carnnia	Sch E 1125 n bond st	691-01-5408

Part I Election To Expense Certain Property Under Section 179
Note: *If you have any listed property, complete Part V before you complete Part I.*

1	Maximum amount (see instructions)	1	500,000.
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation (see instructions)	3	2,000,000.
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	

6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
7	Listed property. Enter the amount from line 29	7	

8	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction. Enter the **smaller** of line 5 or line 8	9	
10	Carryover of disallowed deduction from line 13 of your 2011 Form 4562	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions)	11	
12	Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11	12	
13	Carryover of disallowed deduction to 2013. Add lines 9 and 10, less line 12 ▶	13	

Note: *Do not use Part II or Part III below for listed property. Instead, use Part V.*

Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property.**)** (See instructions.)

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions)	14	
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	

Part III MACRS Depreciation (Do not include listed property.**)** (See instructions.)

Section A

17	MACRS deductions for assets placed in service in tax years beginning before 2012	17	136.
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here ▶ ☐		

Section B—Assets Placed in Service During 2012 Tax Year Using the General Depreciation System

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only—see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property						
b 5-year property						
c 7-year property						
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs.		S/L	
h Residential rental property			27.5 yrs.	MM	S/L	
			27.5 yrs.	MM	S/L	
i Nonresidential real property			39 yrs.	MM	S/L	
				MM	S/L	

Section C—Assets Placed in Service During 2012 Tax Year Using the Alternative Depreciation System

20a Class life					S/L	
b 12-year			12 yrs.		S/L	
c 40-year			40 yrs.	MM	S/L	

Part IV Summary (See instructions.)

21	Listed property. Enter amount from line 28	21	
22	**Total.** Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations—see instructions	22	136.
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

Part V **Listed Property** (Include automobiles, certain other vehicles, certain computers, and property used for entertainment, recreation, or amusement.)

Note: *For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete **only** 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.*

Section A—Depreciation and Other Information (Caution: *See the instructions for limits for passenger automobiles.***)**

24a Do you have evidence to support the business/investment use claimed? ☐ **Yes** ☐ **No** **24b** If "Yes," is the evidence written? ☐ **Yes** ☐ **No**

(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/ investment use percentage	(d) Cost or other basis	(e) Basis for depreciation (business/investment use only)	(f) Recovery period	(g) Method/ Convention	(h) Depreciation deduction	(i) Elected section 179 cost
25 Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use (see instructions) .						**25**		
26 Property used more than 50% in a qualified business use:								
		%						
		%						
		%						
27 Property used 50% or less in a qualified business use:								
		%				S/L –		
		%				S/L –		
		%				S/L –		
28 Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1 .						**28**		
29 Add amounts in column (i), line 26. Enter here and on line 7, page 1							**29**	

Section B—Information on Use of Vehicles

Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.

	(a) Vehicle 1		(b) Vehicle 2		(c) Vehicle 3		(d) Vehicle 4		(e) Vehicle 5		(f) Vehicle 6	
30 Total business/investment miles driven during the year (**do not** include commuting miles) .	0		0		0							
31 Total commuting miles driven during the year												
32 Total other personal (noncommuting) miles driven	0		0		0							
33 Total miles driven during the year. Add lines 30 through 32	0		0		0							
	Yes	**No**	**Yes**	**No**	**Yes**	**No**	**Yes**	**No**	**Yes**	**No**	**Yes**	**No**
34 Was the vehicle available for personal use during off-duty hours?		X		X		X						
35 Was the vehicle used primarily by a more than 5% owner or related person? . .		X		X		X						
36 Is another vehicle available for personal use?		X		X		X						

Section C—Questions for Employers Who Provide Vehicles for Use by Their Employees

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who **are not** more than 5% owners or related persons (see instructions).

	Yes	No
37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees?		
38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners . .		
39 Do you treat all use of vehicles by employees as personal use?		
40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received?		
41 Do you meet the requirements concerning qualified automobile demonstration use? (See instructions.) . . .		
Note: *If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles.*		

Part VI **Amortization**

(a) Description of costs	(b) Date amortization begins	(c) Amortizable amount	(d) Code section	(e) Amortization period or percentage	(f) Amortization for this year
42 Amortization of costs that begins during your 2012 tax year (see instructions):					
43 Amortization of costs that began before your 2012 tax year				**43**	
44 **Total.** Add amounts in column (f). See the instructions for where to report				**44**	

Before you finish, we need your consent to keep you advised on how the new healthcare law may affect you

A new law, the Affordable Care Act (sometimes referred to as Obamacare) is offering money-saving tax credits and benefits to help you pay for your health insurance, even if you're already covered. By signing this agreement, you give TurboTax permission to send you personalized information that will keep you informed on this issue. We will not share your data with any third parties. You do not need to sign this in order to file.

IRS regulations require the following statements:

"Federal law requires this consent form be provided to you. Unless authorized by law, we cannot use your tax return information for purposes other than the preparation and filing of your tax return without your consent. If you consent to the disclosure of your tax return information, Federal law may not protect your tax return information from further use or distribution.

You are not required to complete this form to engage our tax return preparation services. If we obtain your signature on this form by conditioning our tax return preparation services on your consent, your consent will not be valid. Your consent is valid for the amount of time that you specify. If you do not specify the duration of your consent, your consent is valid for one year from the date of signature."

If you believe your tax return information has been disclosed or used improperly in a manner unauthorized by law or without your permission, you may contact the Treasury Inspector General for Tax Administration (TIGTA) by telephone at 1-800-366-4484, or by email at *complaints@tigta.treas.gov.*

To agree, enter your name(s) and date in the boxes below and select the "I Agree" button on the bottom of the page.

I authorize Intuit, the maker of TurboTax, to review the information in my 2012 return to provide the best recommendations to me to maximize my savings and benefits for health coverage.

Zakieh	Shirafkan
Taxpayer's First Name	Taxpayer's Last Name
Casey	Carnnia
Spouse's First Name (if applicable)	Spouse's Last name (if applicable)

Please type the date below:

04/07/2013

Date

Charitable Organization Worksheet 2012

► Keep for your records

Name(s) Shown on Return	Social Security Number
Zakieh Shirafkan & Casey A Carnnia	691-01-5408

Charity Name . . . The family store

Address . . . . . .

City. . . . . Woodbridge State . . . . VA ZIP code . . 22192

Combined Amounts Worksheet

Note: Amounts entered in worksheets below will be summarized in this worksheet.

Ref. No.	Date	Donation Description	Donation Type	Donation Amount
1	08/10/2012	Summary	Items - ItsDeductible	433.00
			Total:	433.00
			Prior Year Total:	82.00

ItsDeductible Item Donations Worksheet

Note: Amounts in this worksheet can only be entered using the interview process.

Ref. No.	Donat. Date	VM*	Item Description	High Value	Qty.	Med. Value	Qty.	Total Value
1	08/10/2012	1	Women's All Occasion Dress: Sundress	13.00	1	9.00	0	13.00
1	08/10/2012	1	Women's Jogging Suit	9.00	2	6.00	0	18.00
1	08/10/2012	1	Women's Pants: Cargo	23.00	2	10.00	0	46.00
1	08/10/2012	1	Women's Pants: Jeans/Denim	16.00	2	9.00	0	32.00
			See Detail of Item Donations - Continued					324.00

* VM, Valuation Method. 1 indicates it has been valued by ItsDeductible, 0 indicates you have created a custom valuation item.

Zakieh Shirafkan & Casey A Carnnia 691-01-5408

Other Item Donations Worksheet

Note: Double-click to enter additional information if needed.

Ref. No.	Donated Date Acquired Date	Donation Description Donation Type How Acquired	Donation Cost How Valued Donation Value	Donation Allowed

Detail of Money Donations Worksheet

Ref. No.	Donat. Date	Each Don. Amt	Don. Per Yr	Once or Recurring	2012 Amount
				Once Recur	
				Once Recur	
				Once Recur	
				Once Recur	
				Once Recur	

Detail of Mileage and Transportation Costs Worksheet

Ref. No. / Miles Per Trip / Other Costs	Donation Date / Trips Per Yr	Description of Trip / Once or Recurring / Description of Other Costs	Miles Driven / Value of Miles	Total Donation Value
		Once Recur		
		Once Recur		
		Once Recur		

Zakieh Shirafkan & Casey A Carnnia 691-01-5408

Detail of Stock Donations Worksheet

Ref. No.	Date of Donation	Stock Symbol	Value on Donation Date	Date Acquired	Stock Original Cost	Donation Value

Charitable Organization Questions

1 Was the **entire interest** given for all property donated to this charity? . . . . [X] **Yes** [ ] **No**

2 Were **restrictions** attached to the charity's right
to use or dispose of any property donated to this charity? . . . . ► [ ] **Yes** [ ] **No**

3 Did you give to anyone other than this charity the right to income from any
of the donated property or to possession of any of the donated property? . . . . . ► [ ] **Yes** [ ] **No**

4 What Type of charitable organization was it? Check one:
[X] **(a)** 50% charity [ ] **(b)** Other than 50% charity

Federal Information Worksheet 2012

► Keep for your records

Part I – Personal Information

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

Taxpayer:

First name . . . . Zakieh
Middle initial . . . . . . Suffix . . . . . .
Last name . . . . Shirafkan
Social security no. . . . 691-01-5408
Occupation . . . . . . Instructor
Date of birth . . . . . . 08/21/1976 (mm/dd/yyyy)
Age as of 1-1-2013 . . 36
Daytime phone . . . . (703)863-3967 Ext
Legally blind . . . . . . [ ]
Date of death . . . . .

Dependent of Someone Else:
Can taxpayer be claimed as dependent of another person (such as parent)? . . [ ] Yes [X] 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 [X] No

Spouse:

First name . . . . Casey
Middle initial . . . . . . A Suffix . . . . .
Last name . . . . Carnnia
Social security no. . . . 578-11-4072
Occupation . . . . Webmaster
Date of birth . . . . . . 06/10/1968 (mm/dd/yyyy)
Age as of 1-1-2013 . . 44
Daytime phone . . . . . (703)868-8836 Ext
Legally blind . . . . . . [ ]
Date of death . . . . . .

Dependent of Someone Else:
Can spouse be claimed as dependent of another person (such as parent)? . . [ ] Yes [X] 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 [X] No

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

Address . . . . . . 1958 Teasel ct Apt no. . .
City. . . . . Woodbridge State . . . . VA ZIP code . . 22192-2943
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 [X] Taxpayer daytime [ ] Spouse daytime

Federal filing status:

[ ] **1** Single
[X] **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 . . . . 2010 ► [ ]
2011 ► [ ]

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 2012	EIC	Lived with taxpyr in U.S.	Educ Tuitn and Fees	* Dep

* "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 ☐ No

Was the taxpayer's (and spouse's if married filing jointly) home in the United States for more than half of 2012? . . . . . ► ☐ 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 2012 . . . . ► ☐

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

Check if you were notified by the IRS that EIC cannot be claimed in 2012 . . . . ► ☐

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? . . . . ► ☐ Yes ☒ No

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

If you selected either of the options above, fill out the information below:
Name of Financial Institution (optional) . . . . . . ► ____
Check the appropriate box . . . . ► Checking ☐ Savings ☐
Routing number . . . . . . ► ____ Account number . . . . . ► ____

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 ☐ 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 VII – State Filing Information

Taxpayer:

Enter the taxpayer's state of residence as of December 31, 2012 . . . . ► VA

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, 2012 . . . . ► VA

Check the appropriate box:

Spouse is a resident of the state above for the entire year . . . . ► X

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

Check this box if you are in a Registered Domestic Partnership, a civil union, or same-sex marriage . . . ►

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) . . . . ►

Personal Information Worksheet 2012
For the Taxpayer

► 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 . . . Zakieh Middle initial . ___ Last name . . Shirafkan
Suffix . . . . . ____

Social security no. . . 691-01-5408 Member of U.S. Armed Forces in 2012? . . [ ] Yes [X] No

Date of birth . . . . . . 08/21/1976 (mm/dd/yyyy) age as of 1-1-2013 36

Occupation . . . . Instructor Daytime phone . . . . (703)863-3967 Ext ____

Marital status . . . Married
If widowed, check the appropriate box for the year your spouse died:
After 2012 ► [ ] 2012 ► [ ] 2011 ► [ ] 2010 ► [ ] Before 2010 ► [ ]

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 1-1-2013 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 [X] 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 2012? . . . . . ► [ ] 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, 2012?. . . . . ► [ ] Yes [ ] No

Part III — Taxpayer's State Residency Information

Enter this person's state of residence as of December 31, 2012 . . . . VA
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 2012 . . . . ____

Personal Information Worksheet For the Spouse

2012

► Keep for your records

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

Part I — Spouse's Personal Information

First name . . . Casey Middle initial . A Last name . . Carnnia
Suffix . . . . . ______
Social security no. . . 578-11-4072 Member of U.S. Armed Forces in 2012? . . [ ] Yes [X] No

Date of birth . . . . . . 06/10/1968 (mm/dd/yyyy) age as of 1-1-2013. 44

Occupation . . . . Webmaster Daytime phone . . . . (703)868-8836 Ext ______

Marital status . . . Married
If widowed, check the appropriate box for the year your spouse died:
After 2012 ► [ ] 2012 ► [ ] 2011 ► [ ] 2010 ► [ ] Before 2010 ► [ ]

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 1-1-2013 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 [X] 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 2012? . . . . . ► [ ] 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, 2012?. . . . . ► [ ] Yes [ ] No

Part III — Spouse's State Residency Information

Enter this person's state of residence as of December 31, 2012 . . . . VA
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 2012 . . . . ______

Student Information Worksheet 2012

► Keep for your records

Name of Student	Social Security Number
Casey A Carnnia	578-11-4072

Part I – Student Status

1	Was this person a student during 2012?	[X] Yes	[ ] No
2	What kind of school did the student attend during 2012? (Check all that apply.)		
	a [ ] Elementary; b [ ] High school (secondary); c [X] College (postsecondary); d [ ] Vocational school; e [ ] Military academy; f [ ] Not applicable		
3	Did the student receive scholarships or other education assistance?	[ ] Yes	[X] No

Part II – College Student Information

		Yes	No	NA
1	Did the student complete the first 4 years of postsecondary education as of 1/1/2012?	[ ]	[X]	[ ]
2	Was this student enrolled at an eligible education institution during 2012?	[X]	[ ]	[ ]
3	Was this student enrolled in a program that leads to a degree, certificate, or credential?	[X]	[ ]	[ ]
4	Was this student taking courses as part of a postsecondary degree program or to acquire or improve job skills?	[ ]	[X]	[ ]
5	Did this student take at least one-half the normal full-time workload for one academic period?	[X]	[ ]	[ ]
6	Has this student been convicted of a felony for possessing or distributing a controlled substance?	[ ]	[X]	[ ]
7	Is this student an eligible dependent of the taxpayer?	[ ]	[ ]	[X]

8 In how many prior years has an American Opportunity Credit been claimed for this student? ► ______

9 In how many prior years has a Hope Credit been claimed for this student ► ______

Part III – Education Credit and Deduction Qualifications (Determined based entries in Part II)

1	Is this student qualified for the American Opportunity Credit?	[X] Yes	[ ] No
2	Is this student qualified for the Lifetime Learning Credit?	[X] Yes	[ ] No
3	Is this student qualified for the Tuition and Fees Deduction?	[X] Yes	[ ] No

Part IV – Educational Institution and Tuition Summary

School Name EIN	Address (number, street, apt no., city, state, and ZIP Code)	Tuition paid	Scholar-ships or grants	On Form 1098-T	Received 2011 1098T with Box 2 filled and box 7 checked?
Northern Virginia Community College 54-1268263	3001 N. Beauregard St Room AA 187 Alexandria VA 22311 If a foreign address: foreign province/state: Postal code: Country:	1,285.	0.	Yes [X] No [ ]	Yes [ ] No [X]
	If a foreign address: foreign province/state: Postal code: Country:			Yes [ ] No [ ]	Yes [ ] No [ ]
Totals		1,285.	0.		

Part V — Education Assistance (Scholarships, Fellowships, Grants, etc.)

		Total	Taxable	Tax-free
1	Educational assistance that is always tax-free:			
a	Veteran or employer assistance from Form 1098-T Worksheets			
b	Other veteran assistance			
c	Other tax-free employer-provided assistance			
d	Other			
e	Total			
2	Scholarships, fellowships, and grants not reported on Form W-2:			
a	Scholarships and grants from Part IV above			
b	Other scholarships and grants			
c	Other fellowships			
d	Other			
e	Total			
3	Amount representing payment for teaching, research, or other services			
4	Amount required to be used for other than qualified education expenses			
5	Subtract lines 3 and 4 from line 2e			
6	Total qualified education expenses from Part VI below	1,554.		
7	If student is a candidate for a degree, enter the amount used for qualified education expenses, otherwise, enter -0-			
8	Subtract line 7 from line 5			
9	Taxable part. Add lines 3, 4, and 8.			
10	Tax-free educational assistance. Add lines 1e and 7			

Part VI — Education Expenses

	Description	Total	American Opportunity Credit	Lifetime Learning Credit	Tuition and Fees Deduction	Qualified Higher Education Expense for 529 Plan Not Applicable	Qualified Higher Education Expense for ESA Not Applicable	Qualified Higher Education Expense for US Bonds Not Applicable	Qualified Elementary and Secondary Expense for ESA Not Applicable
	Expenses:								
1	Tuition paid from Part IV	1,285.	1,285.	1,285.	1,285.	1,285.	1,285.	1,285.	
	Paid to institution as a condition of enrollment:								
2	Fees								
3	Books, supplies, equipment	269.	269	269	269	269	269		
	Paid to other than institution or not a condition of enrollment:								
4	Books, supplies, equipment								
5	Other course-related								
6	Room and board								
7	Special needs expenses								
8	Computer expenses								
9	QTP or ESA contribution								
10	Academic tutoring								
11	Uniforms								
12	Transportation								
13	Total qualified expenses	1,554.	1,554.	1,554.	1,554.	1,554.	1,554.	1,285.	
	Adjustments:								
14	Refunds								
15	Tax-free assistance								
16	Deducted on Sched A								
17	Used for credit or deduction								
18	Used for exclusion **See tax help**		0.	0.	0.				
19	Total adjustments.		0.	0.	0.				
20	Adjusted qualified expenses	1,554.	1,554.	1,554.	1,554.	1,554.	1,554.	1,285.	0.

Part VII — Education Credit or Deduction Election

1	Elect credit or deduction which results in best tax outcome	X
2	Elect the American Opportunity Credit	
3	Elect the Lifetime Learning Credit	
4	Elect the tuition and fees deduction	
5	Not applicable	

Part VIII — Qualified Tuition Program (Section 529 Plan)

		For Purposes of Regular Tax	For Purposes of 10% Additional Tax
1	Total Qualified Tuition Plan (QTP) distributions from Form 1099-Q		
2	Adjusted Qualified Higher Education Expenses		
3	Qualified Higher Education Expenses applied to QTP distributions		
4	Excess distributions. Subtract line 3 from line 1.		
	If line 4 is greater than zero, complete lines 5 through 8.		
5	Total distributed earnings from Form 1099-Q box 2		
6	Fraction. Divide line 3 by line 1.		
7	Multiply line 5 by line 6.		
8	Earnings taxable to recipient. Subtract line 7 from line 5.		

Part IX — Education Savings Account (ESA)

		For Purposes of Regular Tax	For Purposes of 10% Additional Tax
1	Total Education Savings Account (ESA) distributions from Form 1099-Q		
2	Qualified Elementary and Secondary Education Expenses		
3	Qualified Elementary and Secondary Education Expenses applied		
4	Subtract line 3 from line 1.		
5	Adjusted Qualified Higher Education Expenses		
6	Qualified Higher Education Expenses applied to ESA distributions		
7	Excess distributions. Subtract line 6 from line 4.		
8	Distributions taxable to recipient		

Part X — Series EE and I U.S. Savings Bonds Issued After 1989

1	Total proceeds from U.S. Savings Bonds cashed during 2012 for this student	
2	Adjusted Qualified Higher Education Expenses	
3	Qualified Higher Education Expenses applied to exclusion of U.S. bond interest	
4	Interest included in line 1	

5 Name and address of eligible educational institution(s) attended:

Institution Name			Institution Name		
Street address			Street address		
City	State	Zip Code	City	State	Zip Code

Form 1040 | **Forms W-2 & W-2G Summary** | **2012**

► Keep for your records

Name(s) Shown on Return: Zakieh Shirafkan & Casey A Carnnia

Social Security Number: 691-01-5408

Form W-2 Summary

Box No.	Description	Taxpayer	Spouse	Total
1	Total wages, tips and compensation:			
	Non-statutory & statutory wages not on Sch C	47,982.	57,849.	105,831.
	Statutory wages reported on Schedule C			
	Foreign wages included in total wages			
	Unreported tips			
2	Total federal tax withheld	5,112.	5,452.	10,564.
3 & 7	Total social security wages/tips	47,982.	69,159.	117,141.
4	Total social security tax withheld	2,015.	2,905.	4,920.
5	Total Medicare wages and tips	47,982.	69,159.	117,141.
6	Total Medicare tax withheld	696.	1,003.	1,699.
8	Total allocated tips			
9	Not used			
10	Total dependent care benefits			
11	Total distributions from nonqualified plans			
12 a	Total from Box 12		27,034.	27,034.
b	Elective deferrals to qualified plans		11,310.	11,310.
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		15,724.	15,724.
14 a	Total deductible mandatory state tax			
b	Total deductible charitable contributions			
c	This line does not apply to TurboTax			
d	Total RR Tier 1 wages			
e	Total RR Tier 1 tax			
f	Total RR Tier 2 tax			
g	Total RRTA tips			
h	Total other items from box 14			
16	Total state wages and tips	47,982.	57,849.	105,831.
17	Total state tax withheld	2,329.	2,789.	5,118.
19	Total local tax withheld			

Form **W-2** | **Wage and Tax Statement** ► Keep for your records | **2012**

Name	Social Security Number
Casey A Carnnia	578-11-4072

[X] **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 . 578-11-4072
b Employer's ID number 53-6002523
c Employer's name, address, and ZIP code
U. S. House of Representatives

Street B215 Longworth HOB
City Washington
State DC ZIP Code 20515
Foreign Country

d Control number .

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

e Employee's name
First Casey M.I. A
Last Carnnia Suff.
f Employee's address and ZIP code
Street 1958 Teasel ct
City Woodbridge
State VA ZIP Code 22192-2943
Foreign Country

1 Wages, tips, other compensation	57,848.68	**2** Federal income tax withheld	5,452.28
3 Social security wages	69,158.52	**4** Social security tax withheld	2,904.66
5 Medicare wages and tips	69,158.52	**6** Medicare tax withheld	1,002.80
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
[X] 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
D	11,309.84
DD	15,724.32

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	001070368-9	57,848.68	2,789.36

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** | **2012**

► Keep for your records

Name: Zakieh Shirafkan

Social Security Number: 691-01-5408

☐ **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 . 691-01-5408
b Employer's ID number 33-1019021
c Employer's name, address, and ZIP code
International Comm Associate

Street 1901 N. Moore St. # ML02
City Arlington
State VA ZIP Code 22209
Foreign Country

d Control number .

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

e Employee's name
First Zakieh M.I.
Last Shirafkan Suff.

f Employee's address and ZIP code
Street 1958 Teasel ct
City Woodbridge
State VA ZIP Code 22192-2943
Foreign Country

1 Wages, tips, other compensation	47,982.00	**2** Federal income tax withheld	5,112.22
3 Social security wages	47,982.00	**4** Social security tax withheld	2,015.24
5 Medicare wages and tips	47,982.00	**6** Medicare tax withheld	695.74
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	30-331019021F-001	47,982.00	2,328.96

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).

1098-T Worksheet

Tuition Statement

► Keep for your records

2012

Taxpayer's name	Social Security No.
Zakieh Shirafkan & Casey A Carnnia	691-01-5408

1098-T Information (Required):

A A Form 1098-T was received from this institution . . . . Yes [X] No [ ]

B A Form 1098-T was received from this institution in **2011** with Box 2 filled in and Box 7 checked . . . . Yes [ ] No [X]

Identify Student (Required):

A If student is Zakieh or Casey

Double-click *to link this 1098-T to the applicable* ***Taxpayer or Spouse Student Information Worksheet*** . . . . ► Casey

B If student is

Double-click *to link this 1098-T to the applicable* ***Dependent Student Information Worksheet*** . . . . ►

Filer's name: Northern Virginia Community College

Street address: 3001 N. Beauregard St Room AA 187

City: Alexandria State: VA Zip Code: 22311

Foreign province/county:

Foreign postal code: Foreign country:

1 Payments received for qualified tuition and related expenses . . . . $ 1,285.

2 Amounts billed for qualified tuition and related expenses. . . . . $

3 If this box is checked, your educational institution has changed its reporting method for 2012 . . . . . . [ ]

Filer's Federal identification number: 54-1268263

Student's Social Security Number. 578-11-4072

4 Adjustments made for a prior year $

5 Scholarships or grants $

Student's name: Casey

Street address: 1958 Teasel ct Apt. No.:

City: Woodbridge State: VA Zip Code: 22192-2943

6 Adjustments to scholarships or grants for a prior year $

7 Checked if the amount in box 1 or 2 includes amounts for an academic period beginning January - March 2013 . . . . ► [ ]

Service Provider/ Acct No

8 Check if at least half-time student ► [X]

9 Checked if a graduate student . . ► [ ]

10 Ins. contract reimb./refund $

Reconciliation of Box 1, Payments Received for Qualified Tuition and Related Expenses

A Enter box 1 amount **not** paid during 2012 . . . . 0.

B Enter box 1 amount actually paid during 2012 . . . . 1,285.

Reconciliation of Box 2, Amounts Billed for Qualified Tuition and Related Expenses

A Enter box 2 amount **not** paid during 2012. . . . .

B Enter box 2 amount actually paid during 2012 . . . .

Reconciliation of Box 5, Veteran- or Employer-Provided Assistance Included in Box 5

A Enter portion of box 5 amount from veteran- or tax free employer-provided assistance . . .

B Enter portion of box 5 amount from employer-provided assistance included in income . . . .

C Portion of box 5 amount from scholarships or grants. . . . .

D Box 5 amount includes veteran- or employer-provided educational assistance . . . . [ ]

Tax Payments Worksheet 2012

► Keep for your records

Name(s) Shown on Return	Social Security Number
Zakieh Shirafkan & Casey A Carnnia	691-01-5408

Estimated Tax Payments for 2012 (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	04/17/12		04/17/12			04/17/12		
2	06/15/12		06/15/12			06/15/12		
3	09/17/12		09/17/12			09/17/12		
4	01/15/13		01/15/13			01/15/13		
5								
Tot Estimated Payments . . .								

Tax Payments Other Than Withholding (If multiple states, see Tax Help)	Federal	State	ID	Local	ID
6 Overpayments applied to 2012					
7 Credited by estates and trusts					
8 **Totals** Lines 1 through 7					
9 2012 extensions					

Taxes Withheld From:					Federal	State	Local
10	Forms W-2				10,564.	5,118.	
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			
19	**Total Withholding** Lines 10 through 18e				10,564.	5,118.	
20	**Total Tax Payments for 2012**				10,564.	5,118.	

Prior Year Taxes Paid In 2012 (If multiple states or localities, see Tax Help)	State	ID	Local	ID
21 Tax paid with 2011 extensions				
22 2011 estimated tax paid after 12/31/11				
23 Balance due paid with 2011 return				
24 Other (amended returns, installment payments, etc) . .				

Schedule A
Lines 5 - 12

Tax and Interest Deduction Worksheet

2012

► Keep for your records

Name(s) Shown on Return	Social Security Number
Zakieh Shirafkan & Casey A Carnnia	691-01-5408

Tax Deductions

1 State and local taxes:

Optional Sales Tax Tables

a Available Income:

(1) Income from Form 1040, line 38	102,912.
(2) Nontaxable income entered elsewhere on return	
(3) Available income: 2011 refundable credits in excess of tax	0.
(4) **Enter** any additional nontaxable income	
(5) Total available income	102,912.

b Sales Tax Per State of Residence:

Enter state in column (1), then enter total (combined) state and local sales tax rate in column (4).
Arizona, Colorado, New Jersey, New York, South Carolina or West Virginia only:
Double-click in column (4) to select your locality for each state entered.

(1) State	**(2)** Date Lived in State From	**(3)** Date Lived in State To	**(4)** **Enter** Total State & Local Rate (%)	**(5)** State Sales Tax Rate (%)	**(6)** Local Sales Tax Rate (%) (4) - (5)	**(7)** State Sales Tax Table Amount	**(8)** Local Sales Tax Amount	**(9)** Prorated or Total Amount

c Total general sales tax using tables	

d Sales Tax Paid on Specific Items (see help):

(1) ST	**(2)** Total State & Local Rate	**(3)** Description	**(4)** Type	**(5)** Cost	**(6)** Rate if Different	**(7)** Actual Sales Tax Amount Paid	**(8)** Specific Item Deduction

e Total sales tax deduction on specific items	
f Total general sales tax per tables plus sales tax on specific items	
g **Actual State and Local General Sales Tax:** Actual sales taxes (enter the total sales taxes paid during the year on all items)	
h **State and Local Income Taxes:** State and Local Income taxes	5,118.00
i **State and Local Tax Deduction to Schedule A, line 5:** Greater of line 1f, line 1g, or line 1h (to Schedule A, line 5)	5,118.00

j Check a box to choose to use income taxes paid, sales taxes paid, or whichever provides the greater deduction:
Income Taxes . . [ ] Sales Taxes . . . . [ ] Greater amount . [X]

2 Real estate taxes:

a Real estate taxes paid on principal residence **not** entered on Form 1098	2,709.48

b	Real estate taxes paid on principal residence entered on Form 1098	
c	Real estate taxes paid on additional homes or land	
	Personal portion of real estate taxes from Schedule E Worksheet for:	
d	Principal residence	
e	Vacation home	
f	Less real estate taxes deducted on Form 8829	
g	Add lines 2a through 2f (to Schedule A, line 6)	2,709.48
3	**Personal property taxes:**	
a	Auto registration fees based on the value of the vehicle.	

2011 Amount	Enter 2012 description:	
80.00	chrysler pt cruiser	71.73
80.00	Honda fit	223.67

b	Non-business portion of personal property taxes from Car & Truck Exp Wks	
c	Other personal property taxes	
d	Add lines 3a through 3c (to Schedule A, line 7)	295.40
4	**Other taxes:**	
a	Other taxes from Schedule(s) K-1	
b	Foreign taxes from interest and dividends	
c	Foreign taxes from Schedule(s) K-1	
d	Other foreign taxes (not used to claim a foreign tax credit)	
e	Other taxes.	

2011 Amount	Enter 2012 description:	

f	Add lines 4a through 4e (to Schedule A, line 8)	

Interest Deductions

5	**Home mortgage interest and points reported on Form 1098:**	
a	Mortgage interest and points from the Home Mortgage Interest Worksheet	29,944.50
b	Qualified mortgage interest from Schedule E Worksheet	
c	Less home mortgage interest/points deducted on Form 8829	
d	Less home mortgage interest from Form 8396, line 3	
e	Add lines 5a through 5d (to Sch A, line 10) or line A2 from above	29,944.50
6	**Home mortgage interest not reported on Form 1098:**	
a	Mortgage interest from the Home Mortgage Interest Worksheet	
b	Less home mortgage interest deducted on Form 8829	
c	Add lines 6a and 6b (to Sch A, line 11) or line B2 from above	
7	**Points not reported on Form 1098:**	
a	Amortizable points from the Home Mortgage Interest Worksheet	
b	Other points not on Form 1098 from the Home Mortgage Interest Worksheet	
c	Less points deducted on Form 8829	
d	Add lines 7a through 7c (to Schedule A, line 12) or line C2 from above	

Schedule A
Lines 10 - 12

Home Mortgage Interest Worksheet

► Keep for your records

2012

Name(s) Shown on Return	Social Security Number
Zakieh Shirafkan & Casey A Carnnia	691-01-5408

Note: Use this worksheet to report home mortgage interest you paid on your main home or second home. Enter mortgage interest you paid for business property other than a home office on the appropriate schedule or form for the business activity (Schedule C, Schedule E, etc.).

1 Was the mortgage interest reported to you on Form 1098? . . . . Yes [X] No [ ]

2 Recipient's/lender's name. . . . . Wells Fargo Bank

3 Mortgage interest paid on your main home or second home in 2012 29,944.50

4 Points paid in 2012 to buy your main home from Form 1098, box 2. . . . . ________

QuickZoom if you paid more interest than is shown on Form 1098 . . . . ________ ________

5 If you bought your home from the recipient and did **NOT** receive a Form 1098, enter the recipient's identifying number and address:
Recipient's SSN or ID number . ________
Recipient's address . . . . ________
City ________ State ____ ZIP ________

6 If you and someone else were liable for this mortgage and the **other person** received the Form 1098, enter the other person's name and address:
Name . . . . ________
Address. . . . . ________
City ________ State ____ ZIP ________

Points NOT reported on Form 1098:

7 Points not reported on Form 1098 that you paid in 2012 to purchase or improve your **main home** . . . . ________

8 If you paid other points to this lender which must be spread over the life of the loan, for example points you paid on your second home, on a home equity loan, or when you refinanced, enter the following:

a Total points originally paid on a loan for which the points must be amortized . . . . ________
b Date loan was made or date of refinance . . . . ________
c Length of loan (years) . . . . ________
d Points deducted in prior years for this loan . . . . ________
e Amortized points allowable this year . . . . ________
f Check this box if the points remaining for this loan are deductible in full in 2012 because you refinanced with a different lender or paid off the loan . . . . [ ]
g Amortizable points deducted this year (to Tax and Interest Deduction Wkst., line 7a) . . . ________

Schedule A
Line 17

Noncash Contributions Worksheet

► Keep for your records

2012

Name(s) Shown on Return: Zakieh Shirafkan & Casey A Carnnia

Social Security Number: 691-01-5408

Part I Name of Charity and Donation Value

1 Name of charity . . . . The family store

2 a Value of contribution 433.00

Part II Type of Donated Property

3 Check one:

		Tangible personal property			Intangible property
a	X	Household items & clothing	**i**		Stock, Publicly traded
b		Motor vehicle, boat, or airplane	**j**		Stock, Other than publicly traded
c		Art, Other than self-created	**k**		Securities, Other than stock
d		Art, Self-created	**l**		Intellectual property
e		Collectibles	**m**		Other
f		Business equipment			**Real property**
g		Business inventory	**n**		Real property, Conservation property
h		Other	**o**		Real property, Other than conservation

Part III Additional Information

If **total** noncash contributions are more than $500, complete Part III

4 a Street address of charity . . . .

b Charity City or Town . . Woodbridge State . . VA ZIP . 22192

5 Unique description of donated property . . . . Clothing, Footwear, Accessories & Household items

6 Date of donation (mm/dd/yyyy or Various) 08/10/2012

7 Method used to determine the fair market value . . Comparative sales

Part IV Acquisition Information

If the value of this contribution is more than $500, complete Part IV

8 Date the donated property was acquired (mm/dd/yyyy) . . . .

9 How the donated property was acquired . . . .

10 Cost or adjusted basis in the donated property . . . .

11 If business equipment, enter accumulated depreciation . . . .

Part V Deduction

12 Amount claimed as a deduction . . . . 433.

Part VI Type of Charitable Organization

13 Check one: [X] **(a)** 50% charity [ ] **(b)** Other than 50% charity

Part VII Charity's Use of Certain Appreciated Property

Complete when value is greater than cost.

14 Is the charity's use of property related to its exempt purpose? . . . . ► [ ] **Yes** [ ] **No**
Check 'No' if the charity sold the donated property.

Part VIII Motor vehicle, boat, airplanes

15 a Was a Form 1098-C received? . . . . ► [ ] **Yes** [ ] **No**
b If **no**, did you receive other written acknowledgment? . . . . ► [ ] **Yes** [ ] **No**
c Vehicle Identification Number . . . . ► ____________

Part IX Additional Information for Contributions of Property More than $5,000

Complete Part IX for a contribution of property that has a value of more than $5,000.
Generally, you must have a written appraisal for these contributions.

16 Was an appraisal required for this property? . . . . [ ] **Yes** [ ] **No**
17 Appraiser Information:
a Date of Appraisal . . . . ____________
b Appraiser Title . . . . ____________
c Appraiser Identifying Number . . . . ____________
d Appraiser Business Address (including room or suite number)
____
e Appraiser City or Town State ZIP Code
____
18 Charity Information:
a Charity Date of Receipt of Gift . . . . ____________
b Charity Representative Title . . . . ____________
c Charity Identifying Number . . . . ____________
d Charity Street Address (including room or suite number)
____
e Charity City or Town State ZIP Code
____
19 Other Information:
a If a group of items were donated, describe any items
which were appraised at $500 or less . . . . ____________
b For **tangible property**, give a brief summary of its overall physical
condition on the date it was donated . . . . ____________
c For **stock and securities** (checkboxes 3i-3j), enter average trading price . . . . ____________
d For **bargain sales**, enter the amount received . . . . ____________

Part X Partial Interest Donations

If entire interest in the property was **not** donated, complete Part X.
Complete Part X for a contribution of property that has a value of $5,000 or less and for publicly traded stock donations.

20 Was the **entire interest** donated for this property? . . . . [X] **Yes** [ ] **No**
If **no**, complete line 21
21 Partial interest donation information:
a Amount claimed as a deduction on 2012 tax return . . . . ____________
b Deduction claimed for this property on prior years' tax returns . . . . ____________
c Location of tangible property donated . . . . ____________
d Name of the person, other than the charity on line 1, who has
possession of the donated property . . . . ____________
Complete lines 21e through 21g only if different from the charity on line 1:
e If a partial interest in this property was donated to a different charity
in a prior year, enter the name of the charity . . . . ____________
f Street address of prior charity . . . . ____________
g City of prior charity State ZIP Code
____

Charitable Contributions Summary

2012

► Keep for your records

Name(s) Shown on Return	Social Security Number
Zakieh Shirafkan & Casey A Carnnia	691-01-5408

Part I Cash Contributions Summary

Name of Charitable Organization	(a) Total	(b) 50% Limit	(c) 30% Limit	(d) RESERVED for future use
Totals:				

Part II Non-Cash Contributions Summary

	Total	Other Property		Capital Gain Property	
Name of Charitable Organization	(a) Total	(b) 50% Limit	(c) 30% Limit	(d) 30% Limit	(e) 20% Limit
The family store	433.	433.			
Totals:	433.	433.			

Part III Contribution Carryovers to 2013

	Total	Cash and Other Non-Capital Gain Property			Capital Gain Property	
	(a) Total	(b) RESERVED	(c) 50% Limit	(d) 30% Limit	(e) 30% Limit	(f) 20% Limit
1 2012 contributions	433.		433.			
2 2012 contributions allowed	433.		433.	0.	0.	0.
3 **Carryovers from:**						
a 2011 tax year						
b 2010 tax year						
c 2009 tax year						
d 2008 tax year						
e 2007 tax year						
4 Carryovers allowed in 2012	0.		0.	0.	0.	0.
5 Carryovers disallowed in 2012	0.		0.	0.	0.	0.
6 **Carryovers to 2013:**						
a From 2012	0.		0.	0.	0.	0.
b From 2011						
c From 2010						
d From 2009						
e From 2008						
f From 2007 (expired)						

Part IV Special Situations in Your Return for Current Year Donations

		Yes	No
1	Was the **entire interest** given for all property donated to all charities?	X	
2	Were **restrictions** attached to any charities's right to use or dispose of any property donated to any charity? ►		X
3	Did you give to anyone other than the charity the right to income from any of the donated property or to possession of any of the donated property? ►		X
4	Was any charity other than a 50% charity?		X

Earned Income Worksheet 2012

► Keep for your records

Name(s) Shown on Return	Social Security Number
Zakieh Shirafkan & Casey A Carnnia	691-01-5408

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	47,982.	57,849.	105,831.
7 Taxable employer-provided adoption benefits			
8 Add lines 5 through 7. To Form 2441, lines 19 and 20	47,982.	57,849.	105,831.
9 a Taxable dependent care benefits			
b Nontaxable combat pay			
10 Add lines 8, 9a and 9b . To Form 2441, lines 4 and 5	47,982.	57,849.	105,831.
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	47,982.	57,849.	105,831.

Part III — IRA Deduction Worksheet Computation	Taxpayer	Spouse	Total
15 Net self-employment income or (loss)			
16 Wages, salaries, tips, etc	47,982.	57,849.	105,831.
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	47,982.	57,849.	105,831.

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	47,982.	57,849.	105,831.
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	47,982.	57,849.	105,831.

Schedule E	Schedule E Worksheet ► Keep for your records	2012

Name(s) shown on return	Social Security No.
Zakieh Shirafkan & Casey A Carnnia	691-01-5408

General Information:

Property description . . . . towne house

Property type. . . 8 Other If type is other, enter a description. . vacant resid prop

Location (street address) . . . . . 1125 n bond st

City . . . . Baltimore State . . . . MD ZIP code 21213

If a foreign address: Foreign province or state . .

Foreign postal code . . . . Foreign country . . . .

Complete For All Properties:

Did you make any payments that would require you to file Form(s) 1099? . . . . Yes [ ] No [X]

If **yes**, did you or will you file all required Form(s) 1099? . . . . Yes [ ] No [ ]

Complete For All Rental Properties:

Days rented at fair rental value . . . 0 Days of personal use 0

Check All That Apply:

A	Owned by spouse	X	**B**	Owned jointly	
C	Active participation.	X	**D**	Material participation	
E	Qualified joint venture		**F**	Some investment is not at risk.	
G	Other passive exceptions		**H**	Complete taxable disposition - See Help .	X

I Treat all MACRS assets for this activity as qualified Indian reservation property? . . . Yes [ ] No [X]

J Treat all assets acquired after August 27, 2005 as qualified GO Zone property? . . . . Regular [ ] Extension [ ] No [X]

K Treat all assets acquired after May 4, 2007 as qualified Kansas Disaster Zone property? . . . . Yes [ ] No [X]

L Was this activity located in a Qualified Disaster Area? . . . . Yes [ ] No [X]

Ownership Percentage:

M Check to allocate income and expenses using ownership percentage . . . . [ ]

N Enter ownership percentage . . . . %

Owner-Occupied Rentals:

O Check to allocate personal use items to Schedule A . . . . [ ]

P Percentage of rental use . . . . %

Vacation Home or Property with Personal Use Days:

Q Check to allocate interest and taxes using the Tax Court Method . . . . [ ]

R Number of days property owned if less than the entire year . . . .

Property Location

1125 n bond st, Baltimore, MD 21213

Income		% if Different	Total
3 **Enter** rental income (not reported elsewhere)			
Rental income from Form 1099-MISC			
Rental Income from Cancellation of Debt Wks			
Total rents received		100.000000	
4 **Enter** royalties received (not reported elsewhere)			
Royalty income from Form 1099-MISC			
Royalty Income from Cancellation of Debt Wks			
Royalty Income from Schedule K-1			
Total royalties received			

Expenses	(a) Total	(b) Enter % if not 100.00	(c) Reported On Schedule E	(d) Vacation Home Loss Limitation	(e) Allocated to Personal use
5 Advertising					
6 a Auto					
b Travel					
7 Cleaning and maint					
8 Commissions					
9 a Mort insur qualified					
From Form 1098 Wks					
Total mort insur qual					
b Other Insurance					
10 Legal & other prof fees					
11 Management fees					
12 a Mortgage int qualified					
From Form 1098 Wks					
Total mort int qualified					
b Mort int other					
From Form 1098 Wks					
Total mort int other					
13 Other interest					
14 Repairs					
15 Supplies					
16 a Real estate taxes					
From Form 1098 Wks					
Total real estate taxes					
b Other taxes					
17 Utilities					
18 a Depreciation	136.		136.		
b Depletion					
c Depreciation carryover					
19 Other expenses					
a annual registeration fee	0.		0.		
b					
c					
d					
e Indirect operating exp					
f Operating exp carryover					
g Vehicle rental					
h Amortization					
20 Add lines 5 through 19	136.		136.		
21 Income or (loss)			-136.		
22 Deductible rental real estate loss			-136.		

Education Tuition and Fees Summary 2012

► Keep for your records

Name(s) Shown on Return	Your Social Security No.
Zakieh Shirafkan & Casey A Carnnia	691-01-5408

Part I - Qualified Education Expense Summary

(a) Student's name: First Name / MI; Last Name / Suffix; Social Security Number	(b) Qualified Education Expenses	(c) Qualified for:	Yes	No	(d) Elected Credit or Deduction if **manual**	(e) Elected Credit or Deduction if **automatic**
Casey A	1,554.	Amer Opp Cr ►	X			X
Carnnia	1,554.	Lifetime Cr ►	X			
578-11-4072	1,554.	Tuition Ded ►	X			
	1,554.	Total Qualified Expenses				
		Amer Opp Cr ►				
		Lifetime Cr ►				
		Tuition Ded ►				
		Total Qualified Expenses				
		Amer Opp Cr ►				
		Lifetime Cr ►				
		Tuition Ded ►				
		Total Qualified Expenses				
Total qualified expenses	1,554.	Amer Opp Cr				
	1,554.	Lifetime Cr				
	1,554.	Tuition Ded				

Part II - Optimize Education Expenses for the Lowest Tax

Automatic

1 **Launch OPTIMIZER** - Check to launch Automatic Education Expense Optimizer now ► [ ]

2 **Automatic** - Check to use the Credit choices calculated in Part I, column (e) above ► [X]

or

3 **Manual** - Check to use the Credit choices you entered in Part I, column (d) above ► [ ]

Part III - Summary of Deduction and Credits

Tuition and Fees Deduction Summary

1	Total 2012 tuition and fees paid for purposes of deduction	1	
2	Modified adjusted gross income	2	
3	Maximum deduction allowed	3	
4	Allowable Tuition and Fees Deduction (lesser of line 1 or line 2)	4	0.

American Opportunity, Lifetime Learning Credits Summary

5	Tentative American Opportunity Credit	5	1,554.
6	Tentative Lifetime Learning Credit	6	
7	Total Education Credits (after limitations)	7	1,554.

Federal Carryover Worksheet 2012

► Keep for your records

Name(s) Shown on Return	Social Security Number
Zakieh Shirafkan & Casey A Carnnia	691-01-5408

2011 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
	VA			5,002.		1,618.	
Totals . .				5,002.		1,618.	

Other Tax and Income Information		**2011**	**2012**
1 Filing status	**1**	2 MFJ	2 MFJ
2 Number of exemptions for blind or over 65 (0 - 4)	**2**		
3 Itemized deductions	**3**	23,722.	38,500.
4 Check box if required to itemize deductions	**4**	☐	☐
5 Adjusted gross income	**5**	89,439.	102,912.
6 Tax liability for Form 2210 or Form 2210-F	**6**	8,112.	6,100.
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		**2011**	**2012**
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		**2011**	**2012**
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** 2012	**16 a**		4,401.
b 2011	**b**	14,293.	14,293.
c 2010	**c**		
d 2009	**d**		
e 2008	**e**		
f 2007	**f**		

Zakieh Shirafkan & Casey A Carnnia 691-01-5408

Loss and Expense Carryovers (cont'd)			2011	2012
17 AMT Nonrecap'd net Sec 1231 losses from:	a 2012	17 a		4,401.
	b 2011	b	14,293.	14,293.
	c 2010	c		
	d 2009	d		
	e 2008	e		
	f 2007	f		

Credit Carryovers			2011	2012
18 General business credit		18		
19 Adoption credit from:	a 2012	19 a		
20 Mortgage interest credit from:	a 2012	20 a		
	b 2011	b		
	c 2010	c		
	d 2009	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			2011	2012
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 **2011** Carryover of charitable contributions from:	Other Property		Capital Gain	
	(a) 50%	**(b)** 30%	**(c)** 30%	**(d)** 20%
a 2011				
b 2010				
c 2009				
d 2008				
e 2007				

27 **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				

28 Amount overpaid less earned income credit . . . . . . 2,315.

2011 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

Disposition Report 2012

Name as Shown on Return	Social Security Number
Zakieh Shirafkan & Casey A Carnnia	691-01-5408

Activity: towne house

	(a) Description of Property	(b) Date Acquired	(c) Date Sold	(d) Gross Sales Price	(e) Cost or Other Basis plus Selling Expenses	(f) Depreciation Allowed or Allowable
1	house and land	04/26/2005	08/12/2012	0.	6,000.	1,599.
2						
3						
4						
5						
6						
7						
8						
9						
10						

Activity: towne house

	Reporting Form	(g) Suspended (Loss) Carryover from Prior Year	(h) Gain/(Loss) Limited by 6198 (if applicable)	(i) Disposition Gain (Loss) Allowed	(j) (Loss) Suspended Current Year
1	Form 4797, Pt I		-4,401.	-4,401.	
2					
3					
4					
5					
6					
7					
8					
9					
10					
	Totals		-4,401.	-4,401.	

Form 4562 **Depreciation and Amortization Report** **2012**

Tax Year 2012

► Keep for your records

Name as Shown on Return	Identifying Number
Zakieh Shirafkan & Casey A Carnnia	691-01-5408

QuickZoom here to enter assets . . . . . ►

QuickZoom here to enter home office assets . . . . . ►

QuickZoom here to enter vehicles . . . . . ►

QuickZoom here to set MACRS convention for assets acquired in 2012 . . . . . ►

Activity: Sch E - 1125 n bond st

Asset Description	Code *	Date In Service	Cost (Net of Land)	Land	Bus Use %	Section 179	Special Depreciation Allowance	Depreciable Basis	Life	Method/ Convention	Prior Depreciation	Current Depreciation
DEPRECIATION												
house and land	S	04/26/05	6,000		100.00			6,000	27.5	SL/MM	1,463	136
SUBTOTAL PRIOR YEAR			6,000	0		0	0	6,000			1,463	136
TOTALS			6,000	0		0	0	6,000			1,463	136

* Code: S = Sold, A = Auto, L = Listed, H = Home Office

Form 4562 Alternative Minimum Tax Depreciation Report 2012

Tax Year 2012

► Keep for your records

Name as Shown on Return: Zakieh Shirafkan & Casey A Carnnia

Identifying Number: 691-01-5408

Activity: Sch E - 1125 n bond st

Asset Description	Code *	Date In Service	Cost (Net of Land)	Land	Bus Use %	Section 179	Special Depr Allowance	Depr Basis	Life	Method/ Convention	Prior Depr	Current Depr	Adj/ Pref
DEPRECIATION													
house and land	S	04/26/05	6,000		100.00			6,000	27.5	SL/MM	1,463	136	0.
SUBTOTAL PRIOR YEAR			6,000	0		0	0	6,000			1,463	136	0.
TOTALS			6,000	0		0	0	6,000			1,463	136	0.

* Code: S = Sold, A = Auto, L = Listed, H = Home Office

Two-Year Comparison 2012

Name(s) Shown on Return: Zakieh Shirafkan & Casey A Carnnia

Social Security Number:

Income	2011	2012	Difference	%
Wages, salaries, tips, etc	104,067.	105,831.	1,764.	1.70
Interest and dividend income				
State tax refund	1,021.	1,618.	597.	58.47
Business income (loss)	1,735.		-1,735.	-100.00
Capital and other gains (losses)	-14,293.	-4,401.	9,892.	69.21
IRA distributions				
Pensions and annuities				
Rents and royalties	-2,782.	-136.	2,646.	95.11
Partnerships, S Corps, etc				
Farm income (loss)				
Social security benefits				
Income other than the above				
Total Income	89,748.	102,912.	13,164.	14.67
Adjustments to Income	309.		-309.	-100.00
Adjusted Gross Income	89,439.	102,912.	13,473.	15.06
Itemized Deductions				
Medical and dental	0.		0.	
Income or sales tax	5,002.	5,118.	116.	2.32
Real estate taxes	2,703.	2,709.	6.	0.22
Personal property and other taxes	160.	295.	135.	84.38
Interest paid	15,775.	29,945.	14,170.	89.83
Gifts to charity	82.	433.	351.	428.05
Casualty and theft losses				
Miscellaneous	0.	0.	0.	
Total Itemized Deductions	23,722.	38,500.	14,778.	62.30
Standard or Itemized Deduction	23,722.	38,500.	14,778.	62.30
Exemption Amount	7,400.	7,600.	200.	2.70
Taxable Income	58,317.	56,812.	-1,505.	-2.58
Income tax	7,899.	7,654.	-245.	-3.10
Additional income taxes				
Alternative minimum tax				
Total Income Taxes	7,899.	7,654.	-245.	-3.10
Nonbusiness credits		932.	932.	
Business credits				
Total Credits		932.	932.	
Self-employment tax	213.		-213.	-100.00
Other taxes				
Total Tax After Credits	8,112.	6,722.	-1,390.	-17.14
Withholding	10,427.	10,564.	137.	1.31
Estimated and extension payments				
Earned income credit				
Additional child tax credit				
Other payments		622.	622.	
Total Payments	10,427.	11,186.	759.	7.28
Form 2210 penalty				
Applied to next year's estimated tax				
Refund	2,315.	4,464.	2,149.	92.83
Balance Due				

Current year effective tax rate . . . 5.93 %

Tax History Report

2012

► Keep for your records

Name(s) Shown on Return
Zakieh Shirafkan & Casey A Carnnia

Five Year Tax History:

	2008	2009	2010	2011	2012
Filing status	MFJ	MFJ	MFJ	MFJ	MFJ
Total income	117,627.	101,819.	94,836.	89,748.	102,912.
Adjustments to income	2,176.	816.	500.	309.	
Adjusted gross income	115,451.	101,003.	94,336.	89,439.	102,912.
Tax expense	9,306.	7,879.	7,917.	7,865.	8,122.
Interest expense	12,279.	9,164.	14,674.	15,775.	29,945.
Contributions	1,200.	638.	380.	82.	433.
Miscellaneous deductions	9,233.				0.
Other Itemized Deductions					
Total itemized/ standard deduction	32,018.	17,681.	22,971.	23,722.	38,500.
Exemption amount	7,000.	7,300.	7,300.	7,400.	7,600.
Taxable income	76,433.	76,022.	64,065.	58,317.	56,812.
Tax	11,794.	11,381.	8,774.	7,899.	7,654.
Alternative min tax					
Total credits					932.
Other taxes	1,909.			213.	
Payments	10,832.	9,793.	9,464.	10,427.	11,186.
Form 2210 penalty		14.			
Amount owed	2,871.	1,602.			
Applied to next year's estimated tax					
Refund			690.	2,315.	4,464.
Effective tax rate %	10.22	10.48	8.45	8.83	5.93
**Tax bracket %	25	25	15	15	15

**Tax bracket % is based on Taxable income.

Tax Summary 2012

► Keep for your records

Name (s)
Zakieh Shirafkan & Casey A Carnnia

Total income	102,912.
Adjustments to income	
Adjusted gross income	102,912.
Itemized/standard deduction	38,500.
Exemption amount	7,600.
Taxable income	56,812.
Tentative tax	7,654.
Additional taxes	
Alternative minimum tax	
Total credits	932.
Other taxes	
Total tax	6,722.
Total payments	11,186.
Estimated tax penalty	
Amount Overpaid	4,464.
Refund	4,464.
Amount Applied to Estimate	
Balance due	0.

Which Form 1040 to file?

You must use Form 1040 because
you had taxable state or local income tax refunds.

Compare to U. S. Averages

2012

► Keep for your records

Name(s) Shown on Return	Social Security No
Zakieh Shirafkan & Casey A Carnnia	691-01-5408

Your 2012 adjusted gross income (AGI) . . . . 102,912.

National adjusted gross income range used below . . . . from 100,000. to 199,999.

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	105,831.	119,497.
Taxable interest		1,991.
Tax-exempt interest		9,670.
Dividends		4,526.
Business net income		31,431.
Business net loss		7,122.
Net capital gain		14,949.
Net capital loss		2,424.
Taxable IRA		27,032.
Taxable pensions and annuities		38,868.
Rent and royalty net income		15,972.
Rent and royalty net loss	-136.	9,278.
Partnership and S corporation net income		41,158.
Partnership and S corporation net loss		13,561.
Taxable social security benefits		21,123.
Medical and dental expenses deduction		10,438.
Taxes paid deduction	8,122.	11,413.
Interest paid deduction	29,945.	12,709.
Charitable contributions deduction	433.	4,053.
Total itemized deductions	38,500.	28,888.
Child care credit		584.
Education tax credits	932.	1,528.
Child tax credit		1,457.
Retirement savings contributions credit		0.
Earned income credit		0.

Other Information	**Actual Per Return**	**National Average**
Adjusted gross income	102,912.	140,435.
Taxable income	56,812.	103,536.
Income tax	7,654.	17,029.
Alternative minimum tax		2,134.
Total tax liability	6,722.	17,825.

ELECTRONIC POSTMARK - CERTIFICATION OF ELECTRONIC FILING

Taxpayer: Zakieh Shirafkan & Casey A Carnnia
Primary SSN: 691-01-5408

Federal Return Submitted: April 07, 2013 09:03 AM PDT
Federal Return Acceptance Date: ___________

Your return was electronically transmitted on 04/07/2013

The Intuit Electronic Postmark shows the date and time Intuit received your federal tax return. The Intuit Electronic Postmark documents the filing date of your income tax return, and the electronic postmark information should be kept on file with your tax return and other tax-related documentation.

There are two important aspects of the Intuit Electronic Postmark:

1. THE INTUIT ELECTRONIC POSTMARK.
The electronic postmark shows the date and time Intuit received the federal return, and is deemed the filing date if the date of the electronic postmark is on or before the date prescribed for filing of the federal individual income tax return.

TIMELY FILING:
For your federal return to be considered filed on time, your return must be postmarked on or before midnight April 15, 2013. Intuit's electronic postmark is issued in the Pacific Time (PT) zone. If you are not filing in the PT zone, you will need to add or subtract hours from the Intuit Electronic Postmark time to determine your local postmark time. For example, if you are filing in the Eastern Time (ET) zone and you electronically file your return at 9 AM on April 15, 2013, your Intuit electronic postmark will indicate April 15, 2013, 6 AM. If your federal tax return is rejected, the IRS still considers it filed on time if the electronic postmark is on or before April 15, 2013, and a corrected return is submitted and accepted before April 20, 2013. If your return is submitted after April 20, 2013, a new time stamp is issued to reflect that your return was submitted after the IRS deadline and, consequently, is no longer considered to have been filed on time.

If you request an automatic six-month extension, your return must be electronically postmarked by midnight October 15, 2013 If your federal tax return is rejected, the IRS will still consider it filed on time if the electronic postmark is on or before October 15, 2013, and the corrected return is submitted and accepted by October 20, 2013.

2. THE ACCEPTANCE DATE.
Once the IRS accepts the electronically filed return, the acceptance date will be provided by the Intuit Electronic Filing Center. This date is proof that the IRS accepted the electronically filed return.

Smart Worksheets from your 2012 Federal Tax Return

SMART WORKSHEET FOR: Form 1040: Individual Tax Return

Tax Smart Worksheet

A	Tax	7,654.
	Check if from:	
1	Tax table	X
2	Tax Computation Worksheet (see instructions)	
3	Schedule D Tax Worksheet	
4	Qualified Dividends and Capital Gain Tax Worksheet	
5	Schedule J	
6	Form 8615	
7	Foreign Earned Income Tax Worksheet	
B	Additional tax from Form 8814	
C	Additional tax from Form 4972	
D	Tax from additional Form(s) 4972	
E	Recapture tax from Form 8863	
F	IRC Section 197(f)(9)(B)(ii) election for an additional tax	
G	**Tax**. Add lines A through F. Enter the result here and on line **44**	7,654.

SMART WORKSHEET FOR: Form 8863: Education Credits

Nonrefundable Credit -- Form 8863, Line 19

1	Enter amount from line 18, Form 8863	**1**	
2	Lines 2 - 7 are reserved for future use		
8	Enter amount from line 9, Form 8863	**8**	932.
9	Add lines 1 and 8	**9**	932.
10	Enter the amount from Form 1040, line 46	**10**	7,654.
11	Enter the amount form Form 1040 lines 47 and 48 and the amount included on Form 1040, line 53	**11**	
12	Subtract line 11 from line 10	**12**	7,654.
13	Enter the smaller of line 9 or line 12 here and on Form 8863, line 19	**13**	932.

SMART WORKSHEET FOR: Tax and Interest Deduction Worksheet

Mortgage Interest Limited Smart Worksheet

When mortgage interest is limited because the principal amount of the mortgage is over one million dollars or the home equity debt amount is over one-hundred-thousand dollars, use the Deductible Home Mortgage Interest Worksheet to determine the amount to be reported on lines **A**, **B**, and **C** below.

QuickZoom to Deductible Home Mortgage Interest Worksheet ►

Does your mortgage interest need to be limited: Yes ☐ No ☐

A	**Home mortgage interest and points reported on Form 1098:**	
1	Sum of lines 5a through 5d below	29,944.50
2	Limited amount to report on Sch A, line 10	
B	**Home mortgage interest not reported on Form 1098:**	
1	Sum of lines 6a and 6b below	
2	Limited amount to report on Sch A, line 11	
C	**Points not reported on Form 1098:**	
1	Sum of lines 7a through 7c below	
2	Limited amount to report on Sch A, line 12	

SMART WORKSHEET FOR: Schedule E Worksheet (1125 n bond st)
This copy of the Worksheet will be on . ► Schedule E, Page 1, Copy 1, Property A

SMART WORKSHEET FOR: Schedule E Worksheet (1125 n bond st)

Activity Summary Smart Worksheet
Supporting information provided by program. NO ENTRIES ARE NEEDED.

A	Ownership	Spouse
B	At-risk status	All
C	Passive status	Disposition

		Regular	AMT
	Schedule E		
D	Tentative profit (loss)	-136.	-136.
E	Other adjustments and preferences		
F	At-risk disallowed loss		
G	Passive carryover loss		
H	Passive disallowed loss		
I	Net profit (loss) allowed	-136.	-136.
	Related Disposition		
J	Tentative profit (loss)	-4,401.	-4,401.
K	At-risk disallowed loss		
L	Passive carryover loss		
M	Passive disallowed loss		
N	Net profit (loss) allowed	-4,401.	-4,401.

Additional information from your 2012 Federal Tax Return

Some forms were not able to fit all of the information you entered. We've included this information below.

Charitable Organization (The family store)

Detail of Item Donations - Continued **Continuation Statement**

Note: Amounts in this worksheet can only be entered using the interview process.

Ref. No.	Donat. Date	VM*	Item Description	High Value	Qty.	Med. Value	Qty.	Total Value
1	08/10/2012	1	Women's Shirt: Sweatshirt/Fleece	15.00	2	8.00	0	30.00
1	08/10/2012	1	Women's Suit: Blazer	16.00	1	9.00	0	16.00
1	08/10/2012	1	Women's Suit: Pant Suit	24.00	2	13.00	0	48.00
1	08/10/2012	1	Women's Sweater: Cardigan	13.00	2	7.00	0	26.00
1	08/10/2012	1	Women's Sweater: Vest	8.00	4	4.00	0	32.00
1	08/10/2012	1	Printer Cable	6.00	4	2.50	0	24.00
1	08/10/2012	1	Printer: Ink Jet	43.00	1	22.00	0	43.00
1	08/10/2012	1	Printer: Laser	73.00	1	42.00	0	73.00
1	08/10/2012	1	Bread Machine	19.00	1	13.00	0	19.00
1	08/10/2012	1	Toaster Oven	13.00	1	9.00	0	13.00
Total								324.00

Electronic Filing Instructions for your 2012 Virginia Tax Return

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

TurboTax

Zakieh Shirafkan & Casey A Carnnia
1958 Teasel ct
Woodbridge, VA 22192-2943

Balance Due/ Refund	Your Virginia state tax return (Form 760) shows a refund due to you in the amount of $1,837.00. Your tax refund should be mailed to you within three to four weeks after your return is accepted.
Where's My Refund?	Before you call the Virginia Department of Taxation with questions about your refund, give them three to four weeks processing time from the date your return is accepted. If then you have not received your refund, or the amount is not what you expected, contact the Virginia Department of Taxation directly at 1-804-367-2486. You can also visit the Virginia Department of Taxation web site at www.tax.virginia.gov.
What You Need to Sign	Sign and date Form VA-8453 within one days of acceptance. Since you are married filing jointly, your spouse must also sign and date the form.
Do Not Mail	Do not mail a paper copy of your tax return. Since you filed electronically, the Virginia Department of Taxation already has your return.
What You Need to Keep	Your Electronic Filing Instructions (this form) - Form VA-8453 and attachment(s) Printed copy of your state and federal returns
2012 Virginia Tax Return Summary	Taxable Income $ 66,052.00 Total Tax $ 3,281.00 Total Payments/Credits $ 5,118.00 Amount to be Refunded $ 1,837.00

VA-8453
Virginia Department of Taxation

Virginia Individual Income Tax Declaration for Electronic Filing

Tax Year 2012

DO NOT MAIL TO THE VIRGINIA DEPARTMENT OF TAXATION
KEEP IT WITH YOUR RECORDS

IRS Submission Identification Number (SID)

First name and initial (if joint or combined return, enter both)	Last Name	B Your Social Security #
ZAKIEH & CASEY A	SHIRAFKAN & CARNNIA	691-01-5408
Present Home Address		A Spouse's Social Security #
1958 TEASEL CT		578-11-4072
City, State and Zip Code		On-line filed return
WOODBRIDGE VA 22192-2943		☒

Part I Tax Return Information	A Spouse	B Yourself
1. Federal Adjusted Gross Income (Form 760CG, line 1; 760PY, line 1, columns A & B; Form 763, line 1)		102,912.
2. Virginia Adjusted Gross Income (Form 760CG, line 9; 760PY, line 10, columns A & B; Form 763, line 9)		101,294.
3. Taxable Income (Form 760CG, line 14; 760PY, line 17, columns A & B; Form 763, line 16)		66,052.
4. Virginia Income Tax (Form 760CG, line 17; 760PY, line 18, columns A & B; Form 763 line 19)		3,281.
5. Withholding (Form 760CG, line 18a and b; 760PY, lines 20a & 20b; Form 763, lines 20a & 20b)	2,789.	2,329.
6. Amount you Owe (Form 760CG; Form 760PY, line 32; Form 763, line 32)		
7. Refund (Form 760CG; 760PY, line 33; Form 763, line 33)		1,837.

Part II Declaration of Taxpayer

8a. ☐ I consent that my refund be directly deposited as designated on my 2012 Virginia income tax return. If I have filed a joint return, this is an irrevocable appointment of the other spouse as an agent to receive the refund. I certify that the transaction does not directly involve a financial institution outside of the territorial jurisdiction of the United States at any point in the process.

b. ☒ I do not want direct deposit of my refund **or** I am not receiving a refund. I choose to have a debit card mailed to me.

c. ☐ I authorize the Virginia Department of Taxation (The Department) and it's designated Financial Agent to initiate an ACH electronic funds withdrawal entry to the financial institution account indicated on my 2012 Virginia income tax return for payment of my state taxes owed on this return and/or a payment of estimated tax. 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 certify that the transaction does not directly involve a financial institution outside of the territorial jurisdiction of the United States at any point in the process.

I declare under penalties of perjury that I have compared the information on my return with the information I have provided to my electronic return originator and that the amounts described in Part I above agree with the amounts shown on the corresponding lines of my 2012 Virginia individual income tax return. To the best of my knowledge and belief, my return is true, correct and complete. I consent that my return including this declaration and accompanying schedules and statements be sent to the Internal Revenue Service (IRS) by my electronic return originator (ERO) and by the IRS to the Department. This declaration is to be retained by the ERO or transmitter as validation of my electronically filed Virginia income tax return. Taxpayers may sign the form using a rubber stamp, mechanical device, such as a signature pen, or computer software program.

Your Signature ______ Date ______ Spouse's Signature (If Filing Status 2 or 4, BOTH must sign) ______ Date ______

Part III Declaration of Electronic Return Originator (ERO) and Paid Preparer

I declare that I have reviewed the above taxpayer's return and that the entries on this form are complete and correct to the best of my knowledge. I have obtained the taxpayer's signature on Form VA-8453 before submitting this return to the Internal Revenue Service (IRS) and the Virginia Department of Taxation (The Department.) I have provided the taxpayer with a copy of all forms and information to be filed with the IRS and the Department and have followed all other requirements as described in Handbook for Electronic Filers of Individual Income Tax Returns (Tax Year 2012) and any requirements specified by the Department. If I am also the Paid Preparer, under penalties of perjury, I declare that I have examined the above taxpayer's return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer is based on all information of which preparer has any knowledge. EROs and paid preparer can sign the form using a rubber stamp, mechanical device, such as a signature pen, or computer software program.

ERO's Signature | Date | SSN/PTIN

Firm's name (or yours if self-employed) | Paid Preparer? ☐Y ☐N | Self-employed? ☐Y ☐N

Address, City, State and Zip | EIN

SELF PREPARED

Paid Preparer's Signature | Date | SSN/PTIN

Firm's name (or yours if self-employed) | Self-employed? ☐Y ☐N

Address, City, State and Zip | EIN

2012 VA760CG Page 1 [ ]
Individual Income Tax Return

ZAKIEH SHIRAFKAN
CASEY A CARNNIA
1958 TEASEL CT

WOODBRIDGE VA 221922943

Filing Status: 2
Head of Household:

Name or Filing Change:
Address Change:
Virginia Return Not Filed Last Year:

Amended:
NOL:
Federal Earned Income Credit:
Locality: 153

Exemptions	Dependents	Total	65 and over	Blind	Total
Yourself	1	2			
Spouse	1				

Your SSN SHIR 691015408

Vendor ID: 1555 1555

Spouse's SSN CARN 578114072

1.	Fed Adj Gross Income	1.	102912.
2.	Additions, see Pg 2, Line 3	2.	
3.	Subtotal	3.	102912.
4a.	Age Deduction - You	4a.	
4b.	Age Deduction - Spouse	4b.	
5.	Soc Sec & Tier 1 Railroad	5.	
6.	State Inc Tax Overpayment	6.	1618.
7.	Other Subtractions, see Pg 2, Line 7	7.	
8.	Subtotal Subtractions	8.	1618.
9.	Total VAGI	9.	101294.
10a.	Federal Sch. A Itemized Deductions	10a.	38500.
10b.	State/Local Income Tax	10b.	5118.
10.	Standard/Itemized Deductions	10.	33382.
11.	Exemptions	11.	1860.
12.	Deductions VAGI, see Pg 2, Line 9	12.	
13.	Add Lines 10, 11 and 12	13.	35242.
14.	VA Taxable Income	14.	66052.
15.	Tax Amount	15.	3540.
16.	Spouse Tax Adjustment	16.	259.

16a.	Your VAGI	16a.	43581.
16b.	Spouse's VAGI	16b.	57713.
17.	Net Tax	17.	3281.
18a.	Your Withholding	18a.	2329.
18b.	Spouse's Withholding	18b.	2789.
19.	Estimated Payments	19.	
20.	Extension Payments	20.	
21.	Credit for Low Income	21.	
22.	Credit tax paid another state	22.	
23.	Other Credits	23.	
24.	Total Payments /Credits	24.	5118.
25.	Tax You Owe	25.	
26.	Overpayment Amount	26.	1837.
27.	Amount to Credit to Next Year's Tax	27.	
28.	Adjustments/Contributions	28.	

Amount You Owe:
Paid by Credit Card

Refund: 1837.
Bank Routing Number
Bank Account Number

Virginia Approved Form

REV 12/05/12 TTO

____LAR ____DLA ____DTD ____LTD $____________

691015408

ADDITIONAL FILING INFORMATION

	Your	Spouse
DOB:	08211976	06101968

Direct Bank Deposit:

Debit Card: X

Dependent on another's return:

Farmer/ Fisherman, Merchant Seaman:

Taxpayer Deceased:

Overseas when due:

Additions - SCH ADJ/CG - Part 1

1. Interest on obligations of other state
2. Other Additions:
   a. Fixed Date Conformity
   b.
   c.
3. Total Additions:

Subtractions

4. Income from obligations or securities of the U.S.
5. Disability Income reported as wages
   5a. You
   5b. Spouse
6. Other Subtractions:
   a. Fixed Date Conformity
   b.
   c.
   d.
7. Total Subtractions:

Deductions

8. Deduction Code and Amount
   a.
   b.
   c.
9. Total Deductions:

Spouse's Name - Filing Status 3 Only

AGE DEDUCTION DETAILS

You

Spouse

Contact Information

Your Phone 7038633967

Spouse

Dept of Taxation may discuss my return with my preparer.

Preparer Phone Number

Preparer Info

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

If you are requesting direct deposit of your refund by providing bank information on your return, you are certifying that the ultimate destination of the funds is within the territorial jurisdiction of the United States.

Your Signature ______________________ Date __________

Spouse's Signature ______________________ Date __________

Preparer Signature ______________________ Date __________

SELF PREPARED

Virginia Approved Form

2012 Virginia Schedule INC/CG
Report all W-2s, 1099s, and VK-1s with Virginia Withholding

ZAKIEH SHIRAFKAN

CASEY A CARNNIA

691015408

Your/ Spouse SSN	Withholding Type	Virginia Withholding	Employer FEIN	Virginia Account Number	Virginia Wages, tips, other comp.
578114072	W	2789.	536002523	0010703689	57849.
691015408	W	2329.	331019021	30331019021F001	47982.

Virginia Approved Form

Total Virginia Withholding:	SSN	VA Withholding
YOU	691015408	2329.
SPOUSE	578114072	2789.

TOTAL NUMBER OF W-2s,1099s, and VK-1s 02

AVOID DELAYS in processing your return! Be sure to enter all information including Employer's FEIN.

1555

REV 12/05/12 TTO

Virginia Information Worksheet 2012

► Keep for your records

Part I — Personal Information

Taxpayer:

First Name	Zakieh
Last Name	Shirafkan
Middle Initial	Suffix
Social Security No	691-01-5408
Date of Birth	08/21/1976
Date of Death	
E-mail Address	
Daytime Phone	(703)863-3967 * [X]
Home Phone	* [ ]

Spouse:

First Name	Casey
Last Name	Carnnia
Middle Initial	A Suffix
Social Security No	578-11-4072
Date of Birth	06/10/1968
Date of Death	
E-mail Address	
Daytime Phone	(703)868-8836 * [ ]

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

Address . . . . 1958 Teasel ct Apartment Number. . .

City. . . . . Woodbridge State . . . VA ZIP Code . . . 22192-2943

Locality *. . . . . Prince William City [ ] County [X]

** Select a Virginia city or county you were a resident of on January 1, 2013.*
If nonresident, select a city or county where the Virginia source income was located (see help).

Part II — Main Form

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

Nonresident	**Taxpayer**	**Spouse**
• Enter state of residence		

Part-Year Resident		
• If you moved out of Virginia during 2012, enter date you moved out		
• If you moved into Virginia during 2012, enter date you moved in		
• Part-year residency ratio		

Part III — Filing Status

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

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

Nonresident
- [ ] **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 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
- [ ] 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 April 15, 2013

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	

Underpayment Penalty Information

Enter last year's Virginia adjusted gross income	88,418.
Enter last year's deductions	18,720.
Enter last year's nonrefundable credits	
Enter last year's total tax liability before credits	3,643.
Enter last year's spouse tax adjustment credit (if you filed Form 760 last year)	259.

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.

Yes	No	
☐	☐	Do you want to elect direct debit of state tax payment (Electronic Filing Only)?

Note: Direct debit occurs upon acceptance date

International ACH Transactions:

Yes	No	
☐	☐	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) ►

Check the appropriate box:

☐ Checking — Routing number ►
☐ Savings — Account number ►

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

2012

► Keep for your records

Name	Social Security Number
Zakieh Shirafkan & Casey A Carnnia	691-01-5408

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 2012		
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	2,789.	2,329.
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		
13 a	Withholding from Schedule VK-1		
b	Other state tax withholding		
	☐ Check this box if line 13b includes the withholding from Schedule VK-1 already reported on line 13a. Enter adjustment as a negative amount		
14	**Total income tax withheld**	2,789.	2,329.
15	Date return will be filed and balance paid		

Worksheet for Spoused Tax Adjustment and Virginia Taxable Income Allocation

2012

► Keep for your records

Name	Social Security Number
Zakieh Shirafkan & Casey A Carnnia	691-01-5408

Part 1 — Separate Income and Exemptions		Taxpayer	Spouse
1	Federal adjusted gross income	44,178.	58,734.
2	Additions:		
a	Fixed date conformity additions		
b	Interest and obligations of other states		
c	Other additions		
d	Total additions. Add lines 2a, 2b and 2c		
3	Subtotal. Add lines 1 and 2d	44,178.	58,734.
4	Age Deduction		
5	Social Security Act and Tier 1 Railroad Retirement Act Benefits		
6	State income tax refund or overpayment credit reported as income on your federal return	597.	1,021.
7	Other subtractions:		
a	Fixed date conformity subtractions		
b	Income from obligations or securities of the United States		
c	Disability income reported as wages		
d	Other subtractions		
e	Add lines 7a through 7d		
8	Total subtractions. Add lines 4, 5, 6 and 7e	597.	1,021.
9	**Virginia Adjusted Gross Income (VAGI)**. Subtract line 8 from line 3. Enter here and on Form 760, lines 16a and 16b	43,581.	57,713.
10	Personal exemptions:		
	You $930 Plus 65 or over ☐ Blind ☐ = 0 x $800 =	930.	
	Spouse $930 Plus 65 or over ☐ Blind ☐ = 0 x $800 =		930.
11	Subtract line 10 from line 9. **If either amount is 0 or less, STOP**; you do not qualify for this credit	42,651.	56,783.

Part 2 — Virginia Taxable Income Allocation

Complete lines 12 through 15 if the taxpayer or spouse is claiming a credit for tax paid to another state, and filed a separate return with the other state.

		Taxpayer	Spouse
12	Standard or itemized deduction amount	33,382.	
13 a	Enter number of dependents to allocate to each spouse		
b	Dependent exemptions: $930 x number of dependents on line 13a		
14	Deductions from VAGI		
15	**Virginia Taxable Income**. Line 11 minus lines 12, 13b and 14	9,269.	56,783.

Part 3 — Spouse Tax Adjustment

16	Enter the taxable income from line 14 of Form 760	66,052.
17	Enter the smaller amount from line 11 above. If this amount is larger than $17,000 and line 16 is larger than $34,000, skip to line 24 and enter $259 as the credit	42,651.
18	Subtract line 17 from line 16 (if $0 or less, enter $0)	
19	Divide the amount on line 16 by 2	
20	Enter the tax on the **smaller** of line 17 or line 19	
21	Enter the tax on the **larger** of line 18 or line 19	
22	Add lines 20 and 21	
23	Enter the tax from line 19 of Form 760	
24	**Tax Adjustment:** Subtract line 22 from line 23. *Also enter on Form 760, line 16*	259.

Taxpayer/Spouse Allocation Worksheet 2012

► Keep for your records

Name	Social Security No.
Zakieh Shirafkan & Casey A Carnnia	691-01-5408

	Part 1 — Income and Adjustments	Column A **Taxpayer**	Column B **Spouse**
1	Wages, salaries, tips, etc	47,982.	57,849.
2	Taxable interest income		
3	Dividend income		
4	Taxable refunds, credits or offsets of state and local income taxes	597.	1,021.
5	Alimony received		
6	Business income or (loss)		
7	Capital gain or (loss)		
8	Other gains or (losses)	-4,401.	
9	Taxable amount of IRA distributions		
10	Taxable amount of pensions and annuities		
11	Rents, royalties, partnerships, estates, trusts		-136.
12	Farm income or (loss)		
13	Unemployment compensation		
14	Taxable social security benefits		
15	Other income		
16	**Total income** (add lines 1 through 15)	44,178.	58,734.
17	Educator expenses		
18	Expenses of reservists, performing artists, fee-based govt officials		
19	Health savings account deduction		
20	Moving expenses		
21	Deductible part of self-employment tax		
22	Self-employed SEP, SIMPLE, and qualified plans		
23	Self-employed health insurance deduction		
24	Penalty on early withdrawal of savings		
25	Alimony paid		
26	IRA deduction		
27	Student loan interest deduction		
28	Tuition and fees deduction		
29	Domestic production activities deduction		
30	Other adjustments		
31	**Total adjustments to income** (add lines 17 through 30)		
32	**Federal adjusted gross income** (line 16 minus line 31)	44,178.	58,734.

Part 2 — Fixed Date Conformity Adjustments

1	Fixed Date Conformity addition (depreciation and section 179)		
2	Fixed Date Conformity subtraction (depreciation and section 179)		

SCHEDULE E (Form 1040)

Department of the Treasury
Internal Revenue Service (99)

Supplemental Income and Loss

(From rental real estate, royalties, partnerships, S corporations, estates, trusts, REMICs, etc.)

▶ Attach to Form 1040, 1040NR, or Form 1041.

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

OMB No. 1545-0074

2012

Attachment Sequence No. **13**

Name(s) shown on return: Zakieh Shirafkan & Casey A Carnnia

Your social security number: 691-01-5408

Part I **Income or Loss From Rental Real Estate and Royalties** **Note.** If you are in the business of renting personal property, use **Schedule C** or **C-EZ** (see instructions). If you are an individual, report farm rental income or loss from **Form 4835** on page 2, line 40.

A Did you make any payments in 2012 that would require you to file Form(s) 1099? (see instructions) ☐ Yes ☒ No

B If "Yes," did you or will you file required Forms 1099? ☐ Yes ☐ No

1a	Physical address of each property (street, city, state, ZIP code)
A	1125 n bond st Baltimore MD 21213
B	
C	

1b	Type of Property (from list below)
A	8
B	
C	

2 For each rental real estate property listed above, report the number of fair rental and personal use days. Check the **QJV** box only if you meet the requirements to file as a qualified joint venture. See instructions.

	Fair Rental Days	Personal Use Days	QJV
A	0	0	
B			
C			

Type of Property:

1 Single Family Residence
2 Multi-Family Residence
3 Vacation/Short-Term Rental
4 Commercial
5 Land
6 Royalties
7 Self-Rental
8 Other (describe) vacant resid prop

Income:	**Properties:**	**A**	**B**	**C**
3 Rents received	3			
4 Royalties received	4			
Expenses:				
5 Advertising	5			
6 Auto and travel (see instructions)	6			
7 Cleaning and maintenance	7			
8 Commissions	8			
9 Insurance	9			
10 Legal and other professional fees	10			
11 Management fees	11			
12 Mortgage interest paid to banks, etc. (see instructions)	12			
13 Other interest	13			
14 Repairs	14			
15 Supplies	15			
16 Taxes	16			
17 Utilities	17			
18 Depreciation expense or depletion	18	136.		
19 Other (list) ▶ annual registeration fee	19	0.		
20 Total expenses. Add lines 5 through 19	20	136.		
21 Subtract line 20 from line 3 (rents) and/or 4 (royalties). If result is a (loss), see instructions to find out if you must file **Form 6198**	21	-136.		
22 Deductible rental real estate loss after limitation, if any, on **Form 8582** (see instructions)	22	(136.)	( )	( )

23a Total of all amounts reported on line 3 for all rental properties	23a	
b Total of all amounts reported on line 4 for all royalty properties	23b	
c Total of all amounts reported on line 12 for all properties	23c	
d Total of all amounts reported on line 18 for all properties	23d	136.
e Total of all amounts reported on line 20 for all properties	23e	136.
24 **Income.** Add positive amounts shown on line 21. **Do not** include any losses	24	
25 **Losses.** Add royalty losses from line 21 and rental real estate losses from line 22. Enter total losses here	25	(136.)
26 **Total rental real estate and royalty income or (loss).** Combine lines 24 and 25. Enter the result here. If Parts II, III, IV, and line 40 on page 2 do not apply to you, also enter this amount on Form 1040, line 17, or Form 1040NR, line 18. Otherwise, include this amount in the total on line 41 on page 2 . NPA	26	-136.