

Review your print out for checklist items.

Filing Status ☒ Single ☐ Married filing jointly ☐ Married filing separately (MFS) ☐ Head of household (HOH) ☐ Qualifying widow(er) (QW)
Check only one box. If you checked the MFS box, enter the name of your spouse. If you checked the HOH or QW box, enter the child's name if the qualifying person is a child but not your dependent ▶

Your first name and middle initial Liam J		Last name Hughes		Your social security number 385-21-6981	
If joint return, spouse's first name and middle initial		Last name		Spouse's social security number	
Home address (number and street). If you have a P.O. box, see instructions. 1123 S Van Buren St				Apt. no.	
City, town, or post office. If you have a foreign address, also complete spaces below. Bay City			State MI	ZIP code 487088037	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. <input type="checkbox"/> You <input type="checkbox"/> Spouse
Foreign country name		Foreign province/state/county		Foreign postal code	

At any time during 2021, did you receive, sell, exchange, or otherwise dispose of any financial interest in any virtual currency? ☐ Yes ☒ No

Standard Deduction **Someone can claim:** ☐ You as a dependent ☐ Your spouse as a dependent
☐ Spouse itemizes on a separate return or you were a dual-status alien

Age/Blindness **You:** ☐ Were born before January 2, 1957 ☐ Are blind **Spouse:** ☐ Was born before January 2, 1957 ☐ Is blind

Dependents (see instructions):		(2) Social security number	(3) Relationship to you	(4) <input checked="" type="checkbox"/> if qualifies for (see instructions):	
(1) First name	Last name			Child tax credit	Credit for other dependents
If more than four dependents, see instructions and check here ▶ <input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

Attach Sch. B if required.	1	Wages, salaries, tips, etc. Attach Form(s) W-2	1	29,947.
	2a	Tax-exempt interest	2b	
	3a	Qualified dividends	3b	
	4a	IRA distributions	4b	
Standard Deduction for— • Single or Married filing separately, \$12,550 • Married filing jointly or Qualifying widow(er), \$25,100 • Head of household, \$18,800 • If you checked any box under Standard Deduction , see instructions.	5a	Pensions and annuities	5b	
	6a	Social security benefits	6b	
	7	Capital gain or (loss). Attach Schedule D if required. If not required, check here ▶ <input type="checkbox"/>	7	
	8	Other income from Schedule 1, line 10	8	0.
	9	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income ▶	9	29,947.
	10	Adjustments to income from Schedule 1, line 26	10	
	11	Subtract line 10 from line 9. This is your adjusted gross income ▶	11	29,947.
	12a	Standard deduction or itemized deductions (from Schedule A)	12a	12,550.
	b	Charitable contributions if you take the standard deduction (see instructions)	12b	50.
	c	Add lines 12a and 12b	12c	12,600.
	13	Qualified business income deduction from Form 8995 or Form 8995-A	13	
	14	Add lines 12c and 13	14	12,600.
	15	Taxable income. Subtract line 14 from line 11. If zero or less, enter -0-	15	17,347.

16	Tax (see instructions). Check if any from Form(s): 1 <input type="checkbox"/> 8814 2 <input type="checkbox"/> 4972 3 <input type="checkbox"/> _____	16	1,880.
17	Amount from Schedule 2, line 3	17	
18	Add lines 16 and 17	18	1,880.
19	Nonrefundable child tax credit or credit for other dependents from Schedule 8812	19	
20	Amount from Schedule 3, line 8	20	122.
21	Add lines 19 and 20	21	122.
22	Subtract line 21 from line 18. If zero or less, enter -0-	22	1,758.
23	Other taxes, including self-employment tax, from Schedule 2, line 21	23	0.
24	Add lines 22 and 23. This is your total tax	24	1,758.
25	Federal income tax withheld from:		
a	Form(s) W-2	25a	1,929.
b	Form(s) 1099	25b	
c	Other forms (see instructions)	25c	
d	Add lines 25a through 25c	25d	1,929.
26	2021 estimated tax payments and amount applied from 2020 return	26	
27a	Earned income credit (EIC) No	27a	
	Check here if you were born after January 1, 1998, and before January 2, 2004, and you satisfy all the other requirements for taxpayers who are at least age 18, to claim the EIC. See instructions <input type="checkbox"/>		
b	Nontaxable combat pay election	27b	
c	Prior year (2019) earned income	27c	
28	Refundable child tax credit or additional child tax credit from Schedule 8812	28	
29	American opportunity credit from Form 8863, line 8	29	
30	Recovery rebate credit. See instructions	30	1,400.
31	Amount from Schedule 3, line 15	31	
32	Add lines 27a and 28 through 31. These are your total other payments and refundable credits	32	1,400.
33	Add lines 25d, 26, and 32. These are your total payments	33	3,329.
Refund	34 If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid	34	1,571.
	35a Amount of line 34 you want refunded to you . If Form 8888 is attached, check here <input type="checkbox"/>	35a	1,571.
Direct deposit? See instructions.	b Routing number 2 7 2 4 8 4 4 7 0 c Type: <input checked="" type="checkbox"/> Checking <input type="checkbox"/> Savings		
	d Account number 0 2 5 4 6 7 2 3 7 0 7		
	36 Amount of line 34 you want applied to your 2022 estimated tax	36	
Amount You Owe	37 Amount you owe . Subtract line 33 from line 24. For details on how to pay, see instructions	37	
	38 Estimated tax penalty (see instructions)	38	

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.

Your signature

Date

Your occupation

If the IRS sent you an Identity Protection PIN, enter it here (see inst.) ▶

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

Spouse's signature. If a joint return, **both** must sign.

Date

Spouse's occupation

If the IRS sent your spouse an Identity Protection PIN, enter it here (see inst.) ▶

Phone no. (810) 201-0357

Email address

Paid Preparer Use Only

Preparer's name

Preparer's signature

Date

PTIN

Check if:

☐ Self-employed

Firm's name ▶ Self-Prepared

Phone no.

Firm's address ▶

Firm's EIN ▶

SCHEDULE 3
(Form 1040)Department of the Treasury
Internal Revenue Service**Additional Credits and Payments**▶ **Attach to Form 1040, 1040-SR, or 1040-NR.**
▶ **Go to www.irs.gov/Form1040 for instructions and the latest information.**

OMB No. 1545-0074

2021
Attachment
Sequence No. **03**

Name(s) shown on Form 1040, 1040-SR, or 1040-NR

Liam J Hughes

Your social security number

385-21-6981

Part I Nonrefundable Credits

1	Foreign tax credit. Attach Form 1116 if required	1	
2	Credit for child and dependent care expenses from Form 2441, line 11. Attach Form 2441	2	
3	Education credits from Form 8863, line 19	3	122.
4	Retirement savings contributions credit. Attach Form 8880	4	
5	Residential energy credits. Attach Form 5695	5	
6	Other nonrefundable credits:		
a	General business credit. Attach Form 3800	6a	
b	Credit for prior year minimum tax. Attach Form 8801	6b	
c	Adoption credit. Attach Form 8839	6c	
d	Credit for the elderly or disabled. Attach Schedule R	6d	
e	Alternative motor vehicle credit. Attach Form 8910	6e	
f	Qualified plug-in motor vehicle credit. Attach Form 8936	6f	
g	Mortgage interest credit. Attach Form 8396	6g	
h	District of Columbia first-time homebuyer credit. Attach Form 8859	6h	
i	Qualified electric vehicle credit. Attach Form 8834	6i	
j	Alternative fuel vehicle refueling property credit. Attach Form 8911	6j	
k	Credit to holders of tax credit bonds. Attach Form 8912	6k	
l	Amount on Form 8978, line 14. See instructions	6l	
z	Other nonrefundable credits. List type and amount ▶ _____	6z	
7	Total other nonrefundable credits. Add lines 6a through 6z	7	
8	Add lines 1 through 5 and 7. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 20	8	122.

(continued on page 2)

Part II Other Payments and Refundable Credits

9	Net premium tax credit. Attach Form 8962	9	
10	Amount paid with request for extension to file (see instructions)	10	
11	Excess social security and tier 1 RRTA tax withheld	11	
12	Credit for federal tax on fuels. Attach Form 4136	12	
13	Other payments or refundable credits:		
a	Form 2439	13a	
b	Qualified sick and family leave credits from Schedule(s) H and Form(s) 7202 for leave taken before April 1, 2021	13b	
c	Health coverage tax credit from Form 8885	13c	
d	Credit for repayment of amounts included in income from earlier years	13d	
e	Reserved for future use	13e	
f	Deferred amount of net 965 tax liability (see instructions)	13f	
g	Credit for child and dependent care expenses from Form 2441, line 10. Attach Form 2441	13g	
h	Qualified sick and family leave credits from Schedule(s) H and Form(s) 7202 for leave taken after March 31, 2021	13h	
z	Other payments or refundable credits. List type and amount ► _____	13z	
14	Total other payments or refundable credits. Add lines 13a through 13z	14	
15	Add lines 9 through 12 and 14. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 31	15	

Education Credits
(American Opportunity and Lifetime Learning Credits)

▶ Attach to Form 1040 or 1040-SR.

▶ Go to www.irs.gov/Form8863 for instructions and the latest information.

Your social security number

385-21-6981

*Complete a separate Part III on page 2 for each student for whom you're 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	
2	Enter: \$180,000 if married filing jointly; \$90,000 if single, head of household, or qualifying widow(er)	2	
3	Enter the amount from Form 1040 or 1040-SR, line 11. If you're filing Form 2555 or 4563, or you're excluding income from Puerto Rico, see Pub. 970 for the amount to enter	3	
4	Subtract line 3 from line 2. If zero or less, stop ; you can't take any education credit	4	
5	Enter: \$20,000 if married filing jointly; \$10,000 if single, head of household, or qualifying widow(er)	5	
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	
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 can't take the refundable American opportunity credit; skip line 8, enter the amount from line 7 on line 9, and check this box <input type="checkbox"/>	7	
8	Refundable American opportunity credit. Multiply line 7 by 40% (0.40). Enter the amount here and on Form 1040 or 1040-SR, line 29. Then go to line 9 below.	8	

Part II Nonrefundable Education Credits

9	Subtract line 8 from line 7. Enter here and on line 2 of the Credit Limit Worksheet (see instructions) . . .	9	
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	610.
11	Enter the smaller of line 10 or \$10,000	11	610.
12	Multiply line 11 by 20% (0.20)	12	122.
13	Enter: \$180,000 if married filing jointly; \$90,000 if single, head of household, or qualifying widow(er)	13	90,000.
14	Enter the amount from Form 1040 or 1040-SR, line 11. If you're filing Form 2555 or 4563, or you're excluding income from Puerto Rico, see Pub. 970 for the amount to enter	14	29,947.
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	60,053.
16	Enter: \$20,000 if married filing jointly; \$10,000 if single, head of household, or qualifying widow(er)	16	10,000.
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	1.000
18	Multiply line 12 by line 17. Enter here and on line 1 of the Credit Limit Worksheet (see instructions) ▶	18	122.
19	Nonrefundable education credits. Enter the amount from line 7 of the Credit Limit Worksheet (see instructions) here and on Schedule 3 (Form 1040), line 3	19	122.

Name(s) shown on return

Liam J Hughes

Your social security number

385-21-6981



Complete Part III for each student for whom you're 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) Liam J Hughes	21 Student social security number (as shown on page 1 of your tax return) <div style="text-align: right;">385-21-6981</div>
22 Educational institution information (see instructions)	
a. Name of first educational institution Delta 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. 1961 Delta Rd University Center MI 48710 (2) Did the student receive Form 1098-T from this institution for 2021? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (3) Did the student receive Form 1098-T from this institution for 2020 with box 7 checked? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (4) Enter the institution's employer identification number (EIN) if you're claiming the American opportunity credit or if you checked "Yes" in (2) or (3) . You can get the EIN from Form 1098-T or from the institution. <div style="text-align: center;">38-6034011</div>	b. Name of second educational institution (if any) (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 2021? <input type="checkbox"/> Yes <input type="checkbox"/> No (3) Did the student receive Form 1098-T from this institution for 2020 with box 7 checked? <input type="checkbox"/> Yes <input type="checkbox"/> No (4) Enter the institution's employer identification number (EIN) if you're claiming the American opportunity credit or if you checked "Yes" in (2) or (3) . You can get the EIN from Form 1098-T or from the institution.
23 Has the Hope Scholarship Credit or American opportunity credit been claimed for this student for any 4 tax years before 2021? <input type="checkbox"/> Yes — Stop! Go to line 31 for this student. <input checked="" type="checkbox"/> No — Go to line 24.	
24 Was the student enrolled at least half-time for at least one academic period that began or is treated as having begun in 2021 at an eligible educational institution in a program leading towards a postsecondary degree, certificate, or other recognized postsecondary educational credential? See instructions. <input type="checkbox"/> Yes — Go to line 25. <input checked="" type="checkbox"/> No — Stop! Go to line 31 for this student.	
25 Did the student complete the first 4 years of postsecondary education before 2021? See instructions. <input type="checkbox"/> Yes — Stop! Go to line 31 for this student. <input type="checkbox"/> No — Go to line 26.	
26 Was the student convicted, before the end of 2021, of a felony for possession or distribution of a controlled substance? <input type="checkbox"/> Yes — Stop! Go to line 31 for this student. <input type="checkbox"/> No — Complete lines 27 through 30 for this student.	



You *can't* 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, don't complete line 31.

American Opportunity Credit

27 Adjusted qualified education expenses (see instructions). Don't enter more than \$4,000	27
28 Subtract \$2,000 from line 27. If zero or less, enter -0-	28
29 Multiply line 28 by 25% (0.25)	29
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

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
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610.

Tax History Report

► Keep for your records

2021

Name(s) Shown on Return

Liam J Hughes

	Five Year Tax History:				
	2017	2018	2019	2020	2021
Filing status	Single	Single	Single	Single	Single
Total income	16,092.	17,688.	16,596.	21,487.	29,947.
Adjustments to income					
Adjusted gross income	16,092.	17,688.	16,596.	21,487.	29,947.
Tax expense	684.	752.	705.	913.	1,273.
Interest expense . . .					
Contributions					
Misc. deductions . . .					
Other itemized ded'ns					
Total itemized/ standard deduction . .	6,350.	12,000.	12,200.	12,400.	12,600.
Exemption amount . .	4,050.	0.	0.	0.	0.
QBI deduction					
Taxable income	5,692.	5,688.	4,396.	9,087.	17,347.
Tax	568.	568.	438.	908.	1,880.
Alternative min tax . .					
Total credits	568.	568.	438.	908.	122.
Other taxes	0.	0.			
Payments	2,117.	1,737.	1,443.	1,993.	3,329.
Form 2210 penalty . .					
Amount owed					
Applied to next year's estimated tax .					
Refund	2,117.	1,737.	1,443.	1,993.	1,571.
Effective tax rate % . .	-3.16	-4.66	-6.03	-4.65	5.87
**Tax bracket %	10.0	10.0	10.0	10.0	12.0

**Tax bracket % is based on Taxable income.

IMPORTANT DISCLOSURES

If you are owed federal tax refund(s), you have a right to choose how you will receive the refund(s). There are several options available to you. Some options cost money and some options are free. Please read about these options below.

You can file your federal tax return(s) electronically or by paper and obtain your federal tax refund(s) directly from the Internal Revenue Service ("IRS") for free. If you file your tax return(s) electronically, you can receive refund checks directly from the IRS through the U.S. Postal Service in 21 to 28 days from the time you file your tax return(s) or the IRS can deposit your refund(s) directly into your bank account in less than 21 days from the time you file your tax return(s) unless there are delays by the IRS. If you file a paper return through the U.S. Postal Service, you can receive refund checks directly from the IRS through the U.S. Postal Service in 6 to 8 weeks from the time the IRS receives your return(s) or the IRS can deposit your refund(s) directly into your bank account in 6 to 8 weeks from the time the IRS receives your return(s). However, if your return(s) contains Earned Income Tax Credit or Additional Child Tax Credit, the IRS will issue your refund(s) no earlier than February 15, 2022.

You can file your federal tax return(s) electronically, select the Refund Processing Service ("RPS") for an additional fee of \$39.00 (the "RPS fee"), and have your federal tax refund(s) processed through a processor using banking services of a financial institution. The RPS allows your refund(s) to be deposited into a bank account at Green Dot Bank ("Bank") and deducts your TurboTax fees and other amounts that you authorize from your federal refund(s). The balance of your federal refund(s) is delivered to you via the disbursement method you select. If you file your tax return(s) electronically and select the RPS, the IRS will deposit your refund(s) with Bank. Upon Bank's receipt of your refund(s), Santa Barbara Tax Products Group, LLC, a division of Green Dot Corporation, a Delaware corporation, a processor, will deduct from your federal refund(s) the RPS fee, any fees charged by TurboTax for the preparation and filing of your tax return(s) and any other amounts authorized by you and disburse the balance of your refund proceeds to you. Unless there are unexpected delays, federal refunds are received in less than 21 days from the time you file your tax return(s) electronically. However, if your return(s) contains Earned Income Tax Credit or Additional Child Tax Credit, the IRS will issue your refund(s) no earlier than February 15, 2022.

The RPS is not necessary to obtain your refund(s). If you have an existing bank account, you do not need to use the RPS, which requires the payment of a fee, in order to receive a direct deposit from the IRS. You may consult the IRS website (IRS.gov) for information about tax refund processing.

If you select the RPS, no prior debt you may owe to Bank will be deducted from your refund(s).

You can change your income tax withholdings which might result in you receiving additional funds throughout the year rather than waiting to receive these funds potentially in tax refund(s) next year. Please consult your employer or tax advisor for additional details.

This Agreement requires all disputes to be resolved by way of binding arbitration.
The terms of the arbitration provision appear in Section 11.

Information regarding low-cost deposit accounts may be available at www.mymoney.gov

The chart below shows the options for filing your federal tax returns (e-file or paper returns), the RPS product, refund disbursement options, estimated timing for obtaining your federal tax refund proceeds, and costs associated with the various options.

WHAT TYPE OF FILING METHOD?	WHAT ARE YOUR DISBURSEMENT OPTIONS?	WHAT IS THE ESTIMATED TIME TO RECEIVE REFUND(S)?	WHAT COSTS DO YOU INCUR IN ADDITION TO TAX PREPARATION FEES?
PAPER RETURN No Refund Processing Service	IRS direct deposit to your personal bank account.	Approximately 6 to 8 weeks ¹	No additional cost.
	Check mailed by IRS to address on tax return(s).	Approximately 6 to 8 weeks ¹	
ELECTRONIC FILING (E-FILE) No Refund Processing Service	IRS direct deposit to your personal bank account.	Usually within 21 days ¹	No additional cost.
	Check mailed by IRS to address on tax return(s).	Approximately 21 to 28 days ¹	
ELECTRONIC FILING (E-FILE) Refund Processing Service	Direct deposit to your personal bank account.	Usually within 21 days ¹	\$39.00 ²

¹You may experience delays with your tax refund(s) if, for example, you enter incorrect bank account or contact information, you enter a bank account in someone else's name, or if possible suspicious activity is detected. If your return(s) contains Earned Income Tax Credit or Additional Child Tax Credit, the IRS will issue your refund(s) no earlier than February 15, 2022.

²The charges here consist of an RPS Fee, a TurboTax fee and any fees for additional products and services purchased. See Section 3 of the Refund Processing Service Agreement for the cost of the service you have chosen.

Questions? Call 877-908-7228

Santa Barbara Tax Products Group, LLC, a division of Green Dot Corporation, a Delaware corporation, and Green Dot Bank Refund Processing Service Agreement ("Agreement")Name: Liam J HughesSocial Security No.: 385-21-6981

This Agreement contains important terms, conditions and disclosures about the processing of your refund(s) (the "Refund Processing Service" or "RPS") by Santa Barbara Tax Products Group, LLC, a division of Green Dot Corporation, a Delaware corporation ("Processor"), a third party processor using banking services of Green Dot Bank ("Bank"). Read this Agreement carefully before accepting its terms and conditions, and print a copy and/or retain this information electronically for future reference. As used in this Agreement, the words "you" and "your" refer to the applicant or both the applicant and joint applicant if the 2021 federal income tax return(s) is a joint return (individually and collectively, "Applicant"). The words "we," "us" and "our" refer to Bank and Processor.

1. NOTICE: No Requirement To Use the Refund Processing Service In Order To File Electronically.

THE REFUND PROCESSING SERVICE IS A FREE OPTION INCLUDED WITH YOUR PURCHASE OF EITHER TURBOTAX PREMIUM SERVICES OR TURBOTAX MAX, TURBOTAX PLUS, OR SUCH OTHER INTUIT TAX PRODUCTS PURCHASED IN CONNECTION WITH THIS AGREEMENT (EACH A "TAX PRODUCT"). YOU ARE NOT REQUIRED TO USE THE REFUND PROCESSING SERVICE. IF YOU USE THE REFUND PROCESSING SERVICE, YOU CAN EXPECT TO RECEIVE THE PROCEEDS FROM YOUR FEDERAL TAX REFUND(S) WITHIN 21 DAYS FROM WHEN THE INTERNAL REVENUE SERVICE ("IRS") ACCEPTS YOUR RETURN(S) UNLESS THERE ARE PROCESSING DELAYS (OR UNLESS YOUR RETURN(S) CONTAINS EARNED INCOME TAX CREDIT OR ADDITIONAL CHILD TAX CREDIT, IN WHICH CASE THE IRS WILL ISSUE YOUR REFUND(S) NO EARLIER THAN FEBRUARY 15, 2022). THE REFUND PROCESSING SERVICE WILL NEITHER SPEED UP NOR DELAY YOUR FEDERAL TAX REFUND(S). THE COST OF PREPARING YOUR TAX RETURN(S) IS NOT ANY MORE OR LESS IF YOU PURCHASE THE REFUND PROCESSING SERVICE.

2. Authorization to Release Personal Information. You authorize the IRS to disclose any information to Bank and Processor related to the funding of your 2021 federal tax refund(s). You also authorize Intuit Inc., as the transmitter of your electronically filed tax return(s), Bank and Processor to disclose to each other certain information about you and your tax return(s) for the purpose of providing the services contemplated under this Agreement. You also represent that any authorizations you have made in this Section 2 have also been obtained from and are made with respect to your spouse, if this is a jointly filed return. Please see the Privacy Policy at the end of this Agreement describing how Bank may use or share your personal information.

3. Summary of Terms

Expected Federal Refund	\$ 1,571.00
Less Tax Product fees	\$
Less TurboTax Fees	\$ 108.00
Less Fees for Additional Products and Services Purchased	\$
Expected Proceeds*	\$ 1,424.00

* These amounts are itemized. This is only an estimate. The amount will be reduced by any applicable sales taxes, and if applicable, a Return Item Fee and an Account Research and Processing Fee paid to Processor as set forth in Sections 4, 6 and 7 below.

4. Temporary Deposit Account Authorization. You hereby authorize Bank to establish a temporary deposit account ("Deposit Account") for the purpose of receiving your tax year 2021 federal tax refund(s) from the IRS. Bank or Processor must receive an acknowledgement from the IRS that your return(s) has been electronically filed and accepted for processing before the Deposit Account can be opened. You authorize Processor to deduct from your Deposit Account the following amounts: (i) the Tax Product fees; (ii) the fees and charges related to the preparation, processing and transmission of your tax return(s) ("TurboTax Fees"); and (iii) fees for Additional Products and Services Purchased plus applicable taxes. You also authorize Processor to deduct thirty dollars (\$30.00) as a returned item processing fee (the "Return Item Fee") from your Deposit Account for the additional processing required in the event that your deposit is returned or cannot be delivered as directed in Section 7 below. A fee of \$30.00 (the "Account Research and Processing Fee") may be charged if we are required to provide additional processing to return the funds to the IRS. These fees will be deducted from the Deposit Account and will be retained by Processor. You authorize Processor to disburse the balance of the Deposit Account to you after making all authorized deductions or payments. If the Deposit Account does not have sufficient funds to pay the TurboTax Fees, Tax Product fees, and the fees for Additional Products and Services Purchased as set forth in Section 3, and any sales tax, or if your refund proceeds are delayed (a) you authorize Processor to automatically deduct such fees (or any portion thereof) via ACH, electronic check, or wire transfer directly from the account into which you authorized Processor to deposit your expected tax refund proceeds as set forth in Section 7, and (b) if you made alternative arrangements with TurboTax for payment of such fees, those arrangements will be attempted prior to any automatic deduction. To make alternative payment arrangements or revoke your consent to automatic deduction, you must contact Intuit Inc. according to the instructions on the notices e-mailed to you by Intuit Inc. regarding outstanding amounts owed under this Agreement. You also authorize any amounts outstanding pursuant to this Agreement to be deducted from refunds that you may receive up to 24 months after the date of this Agreement and process through the Processor.

5. Acknowledgements. (a) You understand that: (i) neither Bank nor Processor can guarantee the amount of your tax year 2021 federal tax refund(s) or the date it will be issued, and (ii) neither Bank nor Processor is affiliated with the transmitter of the tax return(s) (Intuit Inc.) and neither warrants the accuracy of the software used to prepare the tax return(s). (b) You agree that Intuit Inc. is not acting as your agent and is not under any fiduciary duty with respect to the processing of your refund(s) by Bank and Processor. (c) Your refund(s) may be held or returned to the IRS if it is suspected of fraud or identity theft.

6. Truth in Savings Disclosure. The Deposit Account is being opened for the purpose of receiving your (or both spouses if this is a jointly filed return) tax year 2021 federal tax refund(s). Processor and Bank will deduct from the Deposit Account the amounts set forth in Section 3. No other deposits may be made to the Deposit Account. No withdrawals will be allowed from the Deposit Account except to collect the amounts stated in this Section, Section 3, Section 7, and Section 4. No interest is payable on the deposit; thus, the annual percentage yield and interest rate are 0%. The Deposit Account will be closed after all authorized deductions have been made and any remaining balance has been disbursed to you. We will also charge a Return Item Fee of \$30.00 if the refund(s) cannot be delivered as directed in Section 7 of this Agreement. A \$30.00 Account Research and Processing Fee may be charged if we are required to provide additional processing to return the funds to the IRS. These fees will be deducted from the Deposit Account and will be retained by Processor. Questions or concerns about the Deposit Account should be directed to Santa Barbara Tax Products Group, LLC, PO Box 70010, Pasadena, CA 91117 or via the Internet at <http://sbtptg.com>

7. Disbursement Method: You agree that the disbursement method selected below will be used by Processor to disburse funds to you.

By using the Direct Deposit method of disbursement, the balance of your Deposit Account will be disbursed to you electronically by ACH direct deposit to your personal bank account designated below. If a joint return is filed, the bank account may be a joint account or the individual account of either spouse.

DIRECT DEPOSIT ACCOUNT TYPE:

☒ Checking
☐ Savings

RTN # 272484470

Account # 02546723707

Note: To ensure that there are no delays in receiving your refund(s), please contact your financial institution to confirm that you are using the correct RTN (routing) and account number. If you or your representative enter your account information incorrectly and your deposit is returned to Bank, the Deposit Account balance minus a \$30.00 Return Item Fee will be disbursed to you via a cashier's check mailed to your physical address of record. Bank, Processor and Intuit Inc. are not responsible for the misapplication of a direct deposit that results from error, negligence or malfeasance on the part of you or your representative. In cases where Bank has received your federal tax refund(s) but is unable to deliver the funds directly to you, funds may be held at Bank until claimed, or returned to the IRS. An Account Research and Processing Fee of \$30.00 may be charged if we are required to provide additional processing to return the funds to the IRS. Return Item and Account Research and Processing Fees will not exceed \$60.00 in the aggregate, and will be deducted from the Deposit Account for federal refunds that continue to be undeliverable and unclaimed and must be returned to the IRS. These fees will be retained by Processor. Due to the risk of fraudulent diversion of tax refunds, we will not process any address or account changes for purposes of disbursing your tax refund(s). If we become aware that your address or checking or savings account has changed after you sign this Agreement but before your federal tax refund(s) is received by us, upon receipt of your federal tax refund(s) from the IRS we will return your tax refund(s) to the IRS after deducting our TurboTax Fees and other applicable fees. We will do our best to escalate the return of your federal tax refund(s) to the IRS and you will need to work with the IRS directly for disbursement.

8. FEDERAL ELECTRONIC FUND TRANSFER ACT DISCLOSURES: In case of errors or questions about electronic transfers to or from the Deposit Account, write to Santa Barbara Tax Products Group, LLC, PO Box 70010, Pasadena, CA 91117 or telephone (877) 908-7228 and provide your name, a description or explanation of the error, and the dollar amount of the suspected error. We will determine whether an error occurred within 10 business days after we hear from you and will correct any error promptly. If we need more time, however, we may take up to 45 business days to investigate your complaint or question. If we decide to do this, we will credit your Deposit Account within 10 business days for the amount you think is in error, although in most circumstances you won't have use of the money until we complete our investigation. If we ask you to put your complaint or question in writing and we do not receive it within 10 business days, we may not credit your Deposit Account. For errors involving transfers of funds to or from the Deposit Account within 30 business days after the first deposit to the Deposit Account was made, (i) we may take up to 90 business days to investigate your complaint or question, and (ii) we may take up to 20 business days to credit your Deposit Account for the amount you think is in error. We will tell you the results within three business days after completing our investigation. If we decide that there was no error, we will send you a written explanation. You may ask for copies of the documents that we used in our investigation.

Business Days: Our business days are Monday through Friday, excluding federal holidays. Saturday, Sunday, and federal holidays are not considered business days, even if we are open.

Confidentiality: We will disclose information to third parties about your account or the transfers you make:

- To complete transfers as necessary;
- To verify the existence and condition of your account upon the request of a third party, such as a credit bureau or merchant;
- To comply with government agency or court orders;
- If you give us your written permission; or
- As explained in the Privacy Policy following this Agreement.

Our Liability: If we do not complete a transfer to your account on time or in the correct amount according to this Agreement, we may be liable for your losses or damages. In addition to all other limitations of liability set forth in this Agreement, we will not be liable to you if, among other things:

- Circumstances beyond our control (such as fire, flood, water damage, power failure, strike, labor dispute, pandemic, computer breakdown, telephone line disruption, or a natural disaster) prevent the transfer, despite reasonable precautions that have been taken.
- The funds in your account are subject to legal process or other claim restricting such transfer.
- You, your representative or a third party provide us with inaccurate or untimely information.

9. Governing Law. The enforcement and interpretation of this Agreement and the transactions contemplated herein shall be governed by the laws of the United States, including the Electronic Signatures in Global and National Commerce Act, and, to the extent state law applies, the substantive laws of Ohio.

10. Arbitration Provision. You acknowledge that the services set forth in this Agreement are being made available and priced by Processor on the basis of your acceptance of the following arbitration provision ("Arbitration Provision"). By entering into this Agreement, you acknowledge that you are giving up the right to litigate Claims (as defined below) if you, Bank or Processor elects arbitration of the Claims pursuant to this provision, except as otherwise expressly provided herein, and you hereby knowingly and voluntarily waive the right to trial of all Claims subject to this Agreement. You further acknowledge that you have read this Arbitration Provision carefully, agree to its terms, and are entering into this Agreement voluntarily and not in reliance on any promises or representations whatsoever except those contained in this Agreement.

ARBITRATION NOTICE

THIS AGREEMENT CONTAINS AN ARBITRATION PROVISION. PLEASE READ THIS PROVISION CAREFULLY, AS IT AFFECTS YOUR LEGAL RIGHTS.

10.1. Arbitration of Claims: Except as expressly provided herein, any claim, dispute or controversy (whether based upon contract; tort, intentional or otherwise; constitution; statute; common law; or equity and whether pre-existing, present or future), including initial claims, counter-claims, cross-claims and third-party claims, arising from or relating directly or indirectly to this Agreement, including the validity, enforceability, interpretation, scope, or application of the Agreement and this Arbitration Provision (except for the prohibition on class or other non-individual claims, which shall be for a court to decide) ("Claim") shall be decided, upon the election of you, Bank or Processor (or our agents, employees, successors, representatives, affiliated companies, or assigns), by binding arbitration before the American Arbitration Association ("AAA"). Arbitration replaces the right to litigate a claim in court or to have a jury trial. The AAA's phone number is 800-778-7879 and website is <http://www.adr.org>. You may obtain copies of the current rules, forms, and instructions for initiating an arbitration using the above information.

10.2. Other Claims Subject to Arbitration: In addition to Claims brought by you, Claims made by anyone connected with you or anyone making a Claim through you (including a taxpayer filing jointly, employee, agent, representative, affiliated company, predecessor or successor, heir, assignee, or trustee in bankruptcy) against us shall be subject to arbitration as described herein.

10.3. Exceptions: We agree not to invoke our right to arbitrate any individual Claim you bring in small claims court or an equivalent court so long as the Claim is pending only in that court. This Arbitration Provision also does not limit or constrain our right to interplead funds in the event of claims to the Account by several parties.

10.4. Individual Claims Only: Claims may be submitted to arbitration on an individual basis only. Claims subject to this Arbitration Provision may not be joined or consolidated in arbitration with any Claim of any other person or be arbitrated on a class basis, in a representative capacity on behalf of the general public or on behalf of any other person, unless otherwise agreed to by the parties in writing. However, taxpayers filing jointly and party to this Agreement are considered as one person; Processor and its officers, directors, employees, agents, and affiliates are considered as one person; and Bank and its officers, directors, employees, agents, and affiliates are considered as one person.

10.5. Arbitration Fees: If you initiate arbitration, we will advance any arbitration fees, including any required deposit. If we initiate or elect arbitration, we will pay the entire amount of the arbitration fees, including any required deposit. We will also be responsible for payment and/or reimbursement of any arbitration fees to the extent that such fees exceed the amount of the filing fees you would have incurred if your Claim had been brought in the state or federal court nearest your residence with jurisdiction over the Claims.

10.6. Procedure: A single arbitrator will resolve the Claims. The arbitrator will be a lawyer with at least ten years' experience or who is a former or retired judge. The arbitration shall follow the rules and procedures of the arbitration administrator in effect on the date the arbitration is filed, except when there is a conflict or inconsistency between the rules and procedures of the arbitration administrator and this Arbitration Provision, in which case this Arbitration Provision shall govern. Any in-person arbitration hearing for a Claim shall take place within the federal judicial district in which you live or at such other reasonably convenient location as agreed by the parties. The arbitrator shall apply applicable substantive law consistent with the Federal Arbitration Act, 9 U.S.C. Section 1 et seq. (the "FAA") and shall honor all claims of privilege and confidentiality recognized at law. All statutes of limitations that would otherwise be applicable shall apply to any arbitration proceeding. The arbitrator shall be empowered to grant whatever relief would be available in court under law or in equity. Any appropriate court may enter judgment upon the arbitrator's award. This Arbitration Provision is made pursuant to a transaction involving interstate commerce, and shall be governed by the FAA.

11. Taxpayer Identity Validation Disclosure. To help Bank, Processor and the government identify and fight tax refund fraud, as well as fight the funding of terrorism and money laundering activities, Bank and Processor obtain, verify, and record information that identifies each Refund Processing Service taxpayer. What this means for you: When you apply to use the Refund Processing Service for the purpose of receiving your federal tax refund(s), we will ask for your name, address, date of birth, and other information that will allow us to identify you. We may also ask to see your driver's license or other identifying documents if we need to perform additional due diligence on your account.

YOUR AGREEMENT

Bank and Processor agree to all of the terms of this Agreement. By selecting the "I Agree" button in TurboTax: (i) You authorize Bank to receive your 2021 federal tax refund(s) from the IRS and Processor to make the deductions from your refund(s) described in the Agreement, (ii) You agree to receive all communications electronically in accordance with the "Communications" section of the Tax Year 2021 TurboTax^(Registered Trademark) User Agreement, (iii) You consent to the release of your 2021 federal tax refund(s) deposit information and application information as described in Section 2 of this Agreement; (iv) You consent to the automatic debiting of your personal bank account as set forth in Section 4, as applicable, and the Arbitration Provision in Section 10; and (v) You acknowledge that you have reviewed, and agree to be bound by, the Agreement's terms and conditions. If this is a joint return, selecting "I Agree" indicates that both spouses agree to be bound by the terms and conditions of the Agreement.

Rev. 10/2019

FACTS WHAT DOES GREEN DOT BANK DO WITH YOUR PERSONAL INFORMATION?

Why?	Financial companies choose how they share your personal information. Federal law gives consumers the right to limit some but not all sharing. Federal law also requires us to tell you how we collect, share, and protect your personal information. Please read this notice carefully to understand what we do.	
What?	<p>The types of personal information we collect and share depend on the product or service you have with us. This information can include:</p> <ul style="list-style-type: none"> • Social Security number and account balances • account transactions and checking account information • transaction history and payment history <p>When you are no longer our customer, we continue to share your information as described in this notice.</p>	
How?	All financial companies need to share customers' personal information to run their everyday business. In the section below, we list the reasons financial companies can share their customers' personal information; the reasons Green Dot Bank chooses to share; and whether you can limit this sharing.	
	Reasons we can share your personal information	Does Green Dot Bank share?
	For our everyday business purposes — such as to process your transactions, maintain your account(s), respond to court orders and legal investigations, or report to credit bureaus.	Yes
	For our marketing purposes — to offer our products and services to you.	Yes
	For joint marketing with other financial companies.	Yes
	For our affiliates' everyday business purposes — information about your transactions and experiences.	Yes
	For our affiliates' everyday business purposes — information about your creditworthiness	No
	For our affiliates to market to you.	No
	For nonaffiliates to market to you.	No
Questions?	Call Toll Free: 800-901-6663	

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What we do	
How does Green Dot Bank protect my personal information?	To protect your personal information from unauthorized access and use, we use security measures that comply with federal law. These measures include computer safeguards and secured files and buildings.
How does Green Dot Bank collect my personal information?	<p>We collect your personal information, for example, when you</p> <ul style="list-style-type: none"> • open an account or make deposits or withdrawals from your account • tell us where to send the money or provide account information • give us your contact information <p>We also collect your personal information from others, such as credit bureaus, affiliates, or other companies.</p>
Why can't I limit all sharing?	<p>Federal law gives you the right to limit only</p> <ul style="list-style-type: none"> • sharing for affiliates' everyday business purposes — information about your creditworthiness • affiliates from using your information to market to you • sharing for nonaffiliates to market to you <p>State laws and individual companies may give you additional rights to limit sharing.</p>
Definitions	
Affiliates	<p>Companies related by common ownership or control. They can be financial and nonfinancial companies.</p> <ul style="list-style-type: none"> • <i>Our affiliates include companies with a common corporate identity of Green Dot (such as our parent bank holding company Green Dot Corporation) and tax processing services companies, such as Santa Barbara Tax Products Group, LLC.</i>
Nonaffiliates	<p>Companies not related by common ownership or control. They can be financial and nonfinancial companies.</p> <ul style="list-style-type: none"> • <i>Green Dot Bank does not share with nonaffiliates so they can market to you.</i>
Joint marketing	<p>A formal agreement between nonaffiliated financial companies that together market financial products or services to you.</p> <ul style="list-style-type: none"> • <i>The only joint marketing partners we share with are Intuit Inc. and its affiliates and subsidiaries.</i>

Santa Barbara Tax Products Group, LLC, a division of Green Dot Corporation, a Delaware corporation, and Civista Bank Refund Processing Service Agreement ("Agreement")Name: Liam J HughesSocial Security No.: 385-21-6981

This Agreement contains important terms, conditions and disclosures about the processing of your refund(s) (the "Refund Processing Service" or "RPS") by Santa Barbara Tax Products Group, LLC, a division of Green Dot Corporation, a Delaware corporation ("Processor"), a third party processor using banking services of Civista Bank ("Bank"). Read this Agreement carefully before accepting its terms and conditions, and print a copy and/or retain this information electronically for future reference. As used in this Agreement, the words "you" and "your" refer to the applicant or both the applicant and joint applicant if the 2021 federal income tax return(s) is a joint return (individually and collectively, "Applicant"). The words "we," "us" and "our" refer to Bank and Processor.

1. NOTICE: No Requirement To Use the Refund Processing Service In Order To File Electronically.

THE REFUND PROCESSING SERVICE IS A FREE OPTION INCLUDED WITH YOUR PURCHASE OF EITHER TURBOTAX PREMIUM SERVICES OR TURBOTAX MAX, TURBOTAX PLUS, OR SUCH OTHER INTUIT TAX PRODUCTS PURCHASED IN CONNECTION WITH THIS AGREEMENT (EACH A "TAX PRODUCT"). YOU ARE NOT REQUIRED TO USE THE REFUND PROCESSING SERVICE. IF YOU USE THE REFUND PROCESSING SERVICE, YOU CAN EXPECT TO RECEIVE THE PROCEEDS FROM YOUR FEDERAL TAX REFUND(S) WITHIN 21 DAYS FROM WHEN THE INTERNAL REVENUE SERVICE ("IRS") ACCEPTS YOUR RETURN(S) UNLESS THERE ARE PROCESSING DELAYS (OR UNLESS YOUR RETURN(S) CONTAINS EARNED INCOME TAX CREDIT OR ADDITIONAL CHILD TAX CREDIT, IN WHICH CASE THE IRS WILL ISSUE YOUR REFUND(S) NO EARLIER THAN FEBRUARY 15, 2022). THE REFUND PROCESSING SERVICE WILL NEITHER SPEED UP NOR DELAY YOUR FEDERAL TAX REFUND(S). THE COST OF PREPARING YOUR TAX RETURN(S) IS NOT ANY MORE OR LESS IF YOU PURCHASE THE REFUND PROCESSING SERVICE.

2. Authorization to Release Personal Information. You authorize the IRS to disclose any information to Bank and Processor related to the funding of your 2021 federal tax refund(s). You also authorize Intuit Inc., as the transmitter of your electronically filed tax return(s), Bank and Processor to disclose to each other certain information about you and your tax return(s) for the purpose of providing the services contemplated under this Agreement. You also represent that any authorizations you have made in this Section 2 have also been obtained from and are made with respect to your spouse, if this is a jointly filed return. Please see the Privacy Policy at the end of this Agreement describing how Bank may use or share your personal information.

3. Summary of Terms

Expected Federal Refund	\$ 1,571.00
Less Tax Product fees	\$
Less TurboTax Fees	\$ 108.00
Less Fees for Additional Products and Services Purchased	\$
Expected Proceeds*	\$ 1,424.00

* These amounts are itemized. This is only an estimate. The amount will be reduced by any applicable sales taxes, and if applicable, a Return Item Fee and an Account Research and Processing Fee paid to Processor as set forth in Sections 4, 6 and 7 below.

4. Temporary Deposit Account Authorization. You hereby authorize Bank to establish a temporary deposit account ("Deposit Account") for the purpose of receiving your tax year 2021 federal tax refund(s) from the IRS. Bank or Processor must receive an acknowledgement from the IRS that your return(s) has been electronically filed and accepted for processing before the Deposit Account can be opened. You authorize Processor to deduct from your Deposit Account the following amounts: (i) the Tax Product fees; (ii) the fees and charges related to the preparation, processing and transmission of your tax return(s) ("TurboTax Fees"); and (iii) fees for Additional Products and Services Purchased plus applicable taxes. You also authorize Processor to deduct thirty dollars (\$30.00) as a returned item processing fee (the "Return Item Fee") from your Deposit Account for the additional processing required in the event that your deposit is returned or cannot be delivered as directed in Section 7 below. A fee of \$30.00 (the "Account Research and Processing Fee") may be charged if we are required to provide additional processing to return the funds to the IRS. These fees will be deducted from the Deposit Account and will be retained by Processor. You authorize Processor to disburse the balance of the Deposit Account to you after making all authorized deductions or payments. If the Deposit Account does not have sufficient funds to pay the TurboTax Fees, Tax Product fees, and the fees for Additional Products and Services Purchased as set forth in Section 3, and any sales tax, or if your refund proceeds are delayed (a) you authorize Processor to automatically deduct such fees (or any portion thereof) via ACH, electronic check, or wire transfer directly from the account into which you authorized Processor to deposit your expected tax refund proceeds as set forth in Section 7, and (b) if you made alternative arrangements with TurboTax for payment of such fees, those arrangements will be attempted prior to any automatic deduction. To make alternative payment arrangements or revoke your

consent to automatic deduction, you must contact Intuit Inc. according to the instructions on the notices e-mailed to you by Intuit Inc. regarding outstanding amounts owed under this Agreement. You also authorize any amounts outstanding pursuant to this Agreement to be deducted from refunds that you may receive up to 24 months after the date of this Agreement and process through the Processor.

5. Acknowledgements. (a) You understand that: (i) neither Bank nor Processor can guarantee the amount of your tax year 2021 federal tax refund(s) or the date it will be issued, and (ii) neither Bank nor Processor is affiliated with the transmitter of the tax return(s) (Intuit Inc.) and neither warrants the accuracy of the software used to prepare the tax return(s). (b) You agree that Intuit Inc. is not acting as your agent and is not under any fiduciary duty with respect to the processing of your refund(s) by Bank and Processor. (c) Your refund(s) may be held or returned to the IRS if it is suspected of fraud or identity theft.

6. Truth in Savings Disclosure. The Deposit Account is being opened for the purpose of receiving your (or both spouses if this is a jointly filed return) tax year 2021 federal tax refund(s). Processor and Bank will deduct from the Deposit Account the amounts set forth in Section 3. No other deposits may be made to the Deposit Account. No withdrawals will be allowed from the Deposit Account except to collect the amounts stated in this Section, Section 3, Section 7, and Section 4. No interest is payable on the deposit; thus, the annual percentage yield and interest rate are 0%. The Deposit Account will be closed after all authorized deductions have been made and any remaining balance has been disbursed to you. We will also charge a Return Item Fee of \$30.00 if the refund(s) cannot be delivered as directed in Section 7 of this Agreement. A \$30.00 Account Research and Processing Fee may be charged if we are required to provide additional processing to return the funds to the IRS. These fees will be deducted from the Deposit Account and will be retained by Processor. Questions or concerns about the Deposit Account should be directed to Santa Barbara Tax Products Group, LLC, PO Box 70010, Pasadena, CA 91117 or via the Internet at <http://sbtpg.com>.

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DIRECT DEPOSIT ACCOUNT TYPE:

☒ Checking
☐ Savings

RTN # 272484470

Account # 02546723707

Note: To ensure that there are no delays in receiving your refund(s), please contact your financial institution to confirm that you are using the correct RTN (routing) and account number. If you or your representative enter your account information incorrectly and your deposit is returned to Bank, the Deposit Account balance minus a \$30.00 Return Item Fee will be disbursed to you via a cashier's check mailed to your physical address of record. Bank, Processor and Intuit Inc. are not responsible for the misapplication of a direct deposit that results from error, negligence or malfeasance on the part of you or your representative. In cases where Bank has received your federal tax refund(s) but is unable to deliver the funds directly to you, funds may be held at Bank until claimed, or returned to the IRS. An Account Research and Processing Fee of \$30.00 may be charged if we are required to provide additional processing to return the funds to the IRS. Return Item and Account Research and Processing Fees will not exceed \$60.00 in the aggregate, and will be deducted from the Deposit Account for federal refunds that continue to be undeliverable and unclaimed and must be returned to the IRS. These fees will be retained by Processor. Due to the risk of fraudulent diversion of tax refunds, we will not process any address or account changes for purposes of disbursing your tax refund(s). If we become aware that your address or checking or savings account has changed after you sign this Agreement but before your federal tax refund(s) is received by us, upon receipt of your federal tax refund(s) from the IRS we will return your tax refund(s) to the IRS after deducting our TurboTax Fees and other applicable fees. We will do our best to escalate the return of your federal tax refund(s) to the IRS and you will need to work with the IRS directly for disbursement.

8. **FEDERAL ELECTRONIC FUND TRANSFER ACT DISCLOSURES:** In case of errors or questions about electronic transfers to or from the Deposit Account, write to Santa Barbara Tax Products Group, LLC, PO Box 70010, Pasadena, CA 91117 or telephone (877) 908-7228 and provide your name, a description or explanation of the error, and the dollar amount of the suspected error. We will determine whether an error occurred within 10 business days after we hear from you and will correct any error promptly. If we need more time, however, we may take up to 45 business days to investigate your complaint or question. If we decide to do this, we will credit your Deposit Account within 10 business days for the amount you think is in error, although in most circumstances you won't have use of the money until we complete our investigation. If we ask you to put your complaint or question in writing and we do not receive it within 10 business days, we may not credit your Deposit Account. For errors involving transfers of funds to or from the Deposit Account within 30 business days after the first deposit to the Deposit Account was made, (i) we may take up to 90 business days to investigate your complaint or question, and (ii) we may take up to 20 business days to credit your Deposit Account for the amount you think is in error. We will tell you the results within three business days after completing our investigation. If we decide that there was no error, we will send you a written explanation. You may ask for copies of the documents that we used in our investigation.

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- To verify the existence and condition of your account upon the request of a third party, such as a credit bureau or merchant;
- To comply with government agency or court orders;
- If you give us your written permission; or
- As explained in the Privacy Policy following this Agreement.

Our Liability: If we do not complete a transfer to your account on time or in the correct amount according to this Agreement, we may be liable for your losses or damages. In addition to all other limitations of liability set forth in this Agreement, we will not be liable to you if, among other things:

- Circumstances beyond our control (such as fire, flood, water damage, power failure, strike, labor dispute, pandemic, computer breakdown, telephone line disruption, or a natural disaster) prevent the transfer, despite reasonable precautions that have been taken.
- The funds in your account are subject to legal process or other claim restricting such transfer.
- You, your representative or a third party provide us with inaccurate or untimely information.

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ARBITRATION NOTICE

THIS AGREEMENT CONTAINS AN ARBITRATION PROVISION. PLEASE READ THIS PROVISION CAREFULLY, AS IT AFFECTS YOUR LEGAL RIGHTS.

10.1. **Arbitration of Claims:** Except as expressly provided herein, any claim, dispute or controversy (whether based upon contract; tort, intentional or otherwise; constitution; statute; common law; or equity and whether pre-existing, present or future), including initial claims, counter-claims, cross-claims and third-party claims, arising from or relating directly or indirectly to this Agreement, including the validity, enforceability, interpretation, scope, or application of the Agreement and this Arbitration Provision (except for the prohibition on class or other non-individual claims, which shall be for a court to decide) ("Claim") shall be decided, upon the election of you, Bank or Processor (or our agents, employees, successors, representatives, affiliated companies, or assigns), by binding arbitration before the American Arbitration Association ("AAA"). Arbitration replaces the right to litigate a claim in court or to have a jury trial. The AAA's phone number is 800-778-7879 and website is <http://www.adr.org>. You may obtain copies of the current rules, forms, and instructions for initiating an arbitration using the above information.

10.2. Other Claims Subject to Arbitration: In addition to Claims brought by you, Claims made by anyone connected with you or anyone making a Claim through you (including a taxpayer filing jointly, employee, agent, representative, affiliated company, predecessor or successor, heir, assignee, or trustee in bankruptcy) against us shall be subject to arbitration as described herein.

10.3. Exceptions: We agree not to invoke our right to arbitrate any individual Claim you bring in small claims court or an equivalent court so long as the Claim is pending only in that court. This Arbitration Provision also does not limit or constrain our right to interplead funds in the event of claims to the Account by several parties.

10.4. Individual Claims Only: Claims may be submitted to arbitration on an individual basis only. Claims subject to this Arbitration Provision may not be joined or consolidated in arbitration with any Claim of any other person or be arbitrated on a class basis, in a representative capacity on behalf of the general public or on behalf of any other person, unless otherwise agreed to by the parties in writing. However, taxpayers filing jointly and party to this Agreement are considered as one person; Processor and its officers, directors, employees, agents, and affiliates are considered as one person; and Bank and its officers, directors, employees, agents, and affiliates are considered as one person.

10.5. Arbitration Fees: If you initiate arbitration, we will advance any arbitration fees, including any required deposit. If we initiate or elect arbitration, we will pay the entire amount of the arbitration fees, including any required deposit. We will also be responsible for payment and/or reimbursement of any arbitration fees to the extent that such fees exceed the amount of the filing fees you would have incurred if your Claim had been brought in the state or federal court nearest your residence with jurisdiction over the Claims.

10.6. Procedure: A single arbitrator will resolve the Claims. The arbitrator will be a lawyer with at least ten years' experience or who is a former or retired judge. The arbitration shall follow the rules and procedures of the arbitration administrator in effect on the date the arbitration is filed, except when there is a conflict or inconsistency between the rules and procedures of the arbitration administrator and this Arbitration Provision, in which case this Arbitration Provision shall govern. Any in-person arbitration hearing for a Claim shall take place within the federal judicial district in which you live or at such other reasonably convenient location as agreed by the parties. The arbitrator shall apply applicable substantive law consistent with the Federal Arbitration Act, 9 U.S.C. § 1 et seq. (the "FAA") and shall honor all claims of privilege and confidentiality recognized at law. All statutes of limitations that would otherwise be applicable shall apply to any arbitration proceeding. The arbitrator shall be empowered to grant whatever relief would be available in court under law or in equity. Any appropriate court may enter judgment upon the arbitrator's award. This Arbitration Provision is made pursuant to a transaction involving interstate commerce, and shall be governed by the FAA.

11. Taxpayer Identity Validation Disclosure. To help Bank, Processor and the government identify and fight tax refund fraud, as well as fight the funding of terrorism and money laundering activities, Bank and Processor obtain, verify, and record information that identifies each Refund Processing Service taxpayer. What this means for you: When you apply to use the Refund Processing Service for the purpose of receiving your federal tax refund(s), we will ask for your name, address, date of birth, and other information that will allow us to identify you. We may also ask to see your driver's license or other identifying documents if we need to perform additional due diligence on your account.

YOUR AGREEMENT

Bank and Processor agree to all of the terms of this Agreement. By selecting the "I Agree" button in TurboTax: (i) You authorize Bank to receive your 2021 federal tax refund(s) from the IRS and Processor to make the deductions from your refund(s) described in the Agreement, (ii) You agree to receive all communications electronically in accordance with the "Communications" section of the Tax Year 2021 TurboTax User Agreement, (iii) You consent to the release of your 2021 federal tax refund(s) deposit information and application information as described in Section 2 of this Agreement; (iv) You consent to the automatic debiting of your personal bank account as set forth in Section 4, as applicable, and the Arbitration Provision in Section 10; and (v) You acknowledge that you have reviewed, and agree to be bound by, the Agreement's terms and conditions. If this is a joint return, selecting "I Agree" indicates that both spouses agree to be bound by the terms and conditions of the Agreement.

Rev. 02/2015

Civista Bank Tax Product Privacy Policy**FACTS** What does Civista Bank do with your Personal Information?

Why?	Financial Companies choose how they share your personal information. Federal law gives consumers the right to limit some but not all sharing. Federal law also requires us to tell you how we collect, share and protect your personal information. Please read this notice carefully to understand what we do.	
What?	<p>The types of personal information that we collect and share depend on the product or service you have with us. This can include:</p> <ul style="list-style-type: none">• Social Security number and account balances• payment history and transaction history• overdraft history and account transactions <p>When you are no longer our customer, we continue to share your information as described in this notice.</p>	
How?	All Financial Companies need to share customers' personal information to run their everyday business. In the section below we list the reasons financial companies can share their customers' personal information; the reasons Civista Bank chooses to share and whether you can limit the sharing.	
Reasons we can share your personal information	Does Civista Bank Share?	Can you limit this sharing?
For our everyday business purposes — such as to process your transaction, maintain your account(s), respond to court orders and legal investigations, or report to credit bureaus.	Yes	No
For our marketing purposes — to offer our products and services to you.	Yes	No
For joint marketing with other financial companies.	Yes	No
For our affiliates' everyday business purposes — information about your transactions and experiences.	No	We don't share
For our affiliates' everyday business purposes — information about your creditworthiness.	No	We don't share
For our affiliates to market to you.	No	We don't share
For non affiliates to market to you.	No	We don't share
Questions?	Call Toll Free: 800-901-6663 or go to www.civista.bank	

Who we are	
Who is providing this notice?	Civista Bank
What we do	
How does Civista Bank protect my personal information?	To protect your personal information from unauthorized access and use, we use security measures that comply with federal law. These measures include computer safeguards and secured files and buildings.
How does Civista Bank collect my personal information?	We collect personal information about you when you apply for a tax related product. This includes information in your application, such as your name, address, social security number, income, deductions, refund and the like. We also collect information about your transactions with us, tax preparers and similar providers, such as payment histories, balances due, and tax information. We may also collect information concerning your credit history from a consumer reporting agency.
Why can't I limit all sharing?	<p>Federal law gives you the right to limit only:</p> <ul style="list-style-type: none"> • Sharing for affiliates everyday business purposes — information about your creditworthiness, • Affiliates from using your information to market to you, • Sharing for non affiliates to market to you. <p>State laws and individual companies may give you additional rights to limit sharing.</p>
Definitions	
Affiliates	<p>Companies related by common ownership or control. They can be financial and nonfinancial companies.</p> <ul style="list-style-type: none"> • Civista Bank does not share with our affiliates.
Non affiliates	<p>Companies not related by common ownership or control. They can be financial or nonfinancial companies.</p> <ul style="list-style-type: none"> • Civista Bank does not share with non affiliates so they can market to you.
Joint Marketing	<p>A formal joint marketing agreement between non affiliated financial companies that together market financial products or services to you.</p> <ul style="list-style-type: none"> • Our joint marketing providers include: financial service providers that offer additional payment products.
Other Important Information	
This Notice is adopted in recognition of our obligations under Title V of Gramm-Leach Bliley Act of 1999.	
This Notice applies only to individuals who have applied for a tax-related bank product.	

Read and accept this Disclosure Consent

This is an IRS requirement

In order to finalize your request for this payment option, we need to send the following information to Green Dot Bank, Member FDIC ('BANK') and to Santa Barbara Tax Products Group, LLC ('SBTPG'), the administrator and servicer of this payment option: your identifying information, your deposit information and your refund amount.

We transmit this information so that you may use this payment option. BANK and SBTPG will use your information in accordance with their applicable refund processing service agreement and privacy policy.

IRS regulations require the following statements:

"Federal law requires this consent form be provided to you. Unless authorized by law, we cannot disclose your tax return information to third parties 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. If you agree to the disclosure of your tax return information, 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) at <https://www.treasury.gov/tigta/>.

To agree, enter your name 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 disclose to BANK and SBTPG that portion of my 2021 tax return information that is necessary to enable BANK and SBTPG to process my refund.

Sign this agreement by entering your name:

Liam

Hughes

Please type the date below:

04/15/2022

Date

Read and accept this Disclosure Consent

This is an IRS requirement

In order to finalize your request for this payment option, we need to send the following information to Civista Bank of Sandusky, OH ('BANK') and to Santa Barbara Tax Products Group, LLC ('SBTPG'), the administrator and servicer of this payment option: your identifying information, your deposit information and your refund amount.

We transmit this information so that you may use this payment option. BANK and SBTPG will use your information in accordance with their applicable refund processing service agreement and privacy policy.

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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. If you agree to the disclosure of your tax return information, 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."

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Sign this agreement by entering your name:

Please type the date below:

Date

FORM 1040 or FORM 1040-SR WORKSHEET
NOTE: Form 1040, 1040-SR and Schedules 1 - 3 are fully calculated.

2021

Use this worksheet to enter all data which will flow to the Form 1040 or Form 1040SR and Schedules 1- 3.
Use these QuickZooms to jump to the entry sections for Schedules 1- 3 on this Worksheet:

Form 1040 or Form 1040SR Worksheet Navigation QuickZooms

QuickZoom to Schedule 1 — Additional Income and Adjustments to Income ►
QuickZoom to Schedule 2 — Additional Taxes ►
QuickZoom to Schedule 3 — Additional Credits and Payments ►

Form 1040 or Form 1040-SR — Personal Info, Filing Status, Dependent Info

For the year January 1 - December 31, 2021, or other tax year
beginning _____, 2021, ending _____, 20 ____.

Your First Name MI Last Name Your Social Security No.
Liam J Hughes 385-21-6981
If Joint Return, Spouse's First Name MI Last Name Spouse's Social Security No.

Home Address (No. and Street). If You Have a P.O. Box, See Instructions. Apt. No.
1123 S Van Buren St
City, Town or Post Office. If you have a foreign address, also complete below. State ZIP Code
Bay City MI 48708-8037
Foreign country name Foreign province/state/county Foreign postal code

QuickZoom to explanation statement for overseas extension ►

Presidential Election Campaign

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

At any time during 2021, did you receive, sell, exchange, or otherwise
dispose of any financial interest in any virtual currency? ☐ Yes ☒ No

Filing Status Check only one box.

All entries for filing status and dependents should be made on the Federal Information Worksheet.

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

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

(1) First name	Last name	(2) Social security number	(3) Relationship to you	(4) <input checked="" type="checkbox"/> if qualifies for: under age 18 qualifying for child tax credit	Credit for other dependents
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

QuickZoom to the Federal Information Worksheet
QuickZoom to the Dependent and Nondependent Information Worksheet . . .

Standard Deduction

- ☐ Someone can claim you as a dependent
☐ Someone can claim your spouse as a dependent

a Check if: ☐ **You** were born before January 2, 1957 ☐ **Blind**
☐ **Spouse** was born before January 2, 1957 ☐ **Blind**
Total boxes checked **a** ☐

b If your spouse itemizes on a separate return or you were a dual-status alien, check here **b** ☐

QuickZoom to required PPP loan forgiveness statement to report tax-exempt income.

Form 1040 or Form 1040-SR, Lines 1 - 7

1	Wages, salaries, tips, etc. Attach Form(s) W-2	1	29,947.
2 a	Tax-exempt interest 2a		
b	Taxable interest	2b	
3 a	Qualified dividends 3a		
b	Ordinary dividends	3b	
4 a	IRA distributions 4a		
b	Taxable amount	4b	
5 a	Pensions and annuities 5a		
b	Taxable amount	5b	
6 a	Social security benefits 6a		
b	Taxable amount	6b	
7	Capital gain or (loss). Attach Schedule D if required. If not required, check here. <input type="checkbox"/>	7	

QuickZoom to Schedule 1 — Additional Income and Adjustments to Income

Form 1040 or Form 1040-SR, Lines 8 - 11

8	Other income from Schedule 1, line 10.	8	0.
9	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income 9		29,947.
10	Adjustments to income from Schedule 1, line 26 10		
11	Subtract line 10 from line 9. This is your adjusted gross income 11		29,947.
	AGI including excludable Puerto Rico Income		29,947.

Form 1040 or Form 1040-SR, Line 12 — Standard or Itemized Deduction

12	Standard deduction or itemized deductions (from Schedule A) Standard Deduction for — <ul style="list-style-type: none"> ● People who checked blind or over 65 or who can be claimed as a dependent, see instructions. ● All others: <ul style="list-style-type: none"> ● Single or Married filing separately: \$12,550 ● Married filing jointly or Qualifying widow(er): \$25,100 ● Head of household: \$18,800 ● If you checked any box under <i>Standard Deduction</i>, see instructions. QuickZoom to the Standard Deduction Worksheet.			
a	Itemized deductions (from Schedule A) or your standard deduction , see above 12 a		12,550.	
	Enter the smaller of these cash contributions made or \$300 (\$600 if married filing jointly) on line 12b below if you take the standard deduction 50.			
b	Charitable contributions if you take the standard deduction. 12 b		50.	
c	Add lines 12a and 12b.	12 c	12,600.	
	Subtract itemized or standard deduction from adjusted gross income amount		17,347.	

Form 1040 or Form 1040-SR, Lines 13 - 18

13	Qualified business income deduction from Form 8995 or Form 8995-A	13	
14	Add lines 12c and 13	14	12,600.
15	Taxable income. Subtract line 14 from line 11. If zero or less, enter -0-	15	17,347.

16	Tax. Check if any from Form(s): 1 <input type="checkbox"/> 8814 2 <input type="checkbox"/> 4972 3 <input type="checkbox"/>		
17	Amount from Schedule 2, line 3.	17	1,880.
18	Add lines 16 and 17	18	1,880.
QuickZoom to Schedule 2 — Additional Tax section ▶			

Form 1040 or Form 1040-SR, Line 19 - 24

19	Nonrefundable child tax credit or credit for other dependents from Schedule 8812	19	
20	Amount from Schedule 3, line 8.	20	122.
21	Add lines 19 and 20	21	122.
22	Subtract line 21 from line 18. If zero or less, enter -0-	22	1,758.
23	Other taxes, including self-employment tax, from Schedule 2, line 21.	23	0.
24	Add lines 22 and 23. This is your total tax ▶	24	1,758.

QuickZoom to Schedule 3 — Additional Credits and Payments ▶

Form 1040 or Form 1040-SR, Lines 25 - 33

25	Federal income tax withheld from:		
a	Form(s) W-2	25 a	1,929.
b	Form(s) 1099	25 b	
c	Other forms	25 c	
d	Add lines 25a through 25c.	25 d	1,929.
26	2021 estimated tax payments and amount applied from 2020 return	26	
27	If you have a qualifying child, attach Sch. EIC.		
a	Earned income credit (EIC) No Check here if you were born after January 1, 1998, and before January 2, 2004, and you satisfy all the other requirements for taxpayers who are at least age 18, to claim the EIC ▶ <input type="checkbox"/>	27 a	
b	Nontaxable combat pay election	27 b	
c	Prior year (2019) earned income	27 c	
28	Refundable child tax credit or additional child tax credit from Schedule 8812	28	
29	American opportunity credit from Form 8863, line 8.	29	
30	Recovery rebate credit.	30	1,400.
31	Amount from Schedule 3, line 15	31	
32	Add lines 27a and 28 through 31. These are your other payments and refundable credits ▶	32	1,400.
33	Add Lines 25d, 26, and 32. These are your total payments ▶	33	3,329.

QuickZoom to Schedule EIC Worksheet, pg. 2 if credit is not calculated. ▶

QuickZoom to "due diligence checklist" substitute for Form 8867. ▶

QuickZoom to Schedule 3 — Additional Credits and Payments ▶

Form 1040 or Form 1040-SR, Lines 34 - 36**Refund:**

34	If total Payments is more than total tax, subtract total tax from payments . This is the amount you overpaid	34	<u>1,571.</u>
35 a	Amount of overpayment you want refunded to you . If Form 8888 is attached, check here. <input type="checkbox"/>	35	<u>1,571.</u>
Direct deposit?			
▶ b Routing number <u>272484470</u>			
▶ c Type:			
<input checked="" type="checkbox"/> Checking			
<input type="checkbox"/> Savings			
▶ d Account number <u>02546723707</u>			
36	Amount of overpayment on line 34 you want applied to your 2022 estimated tax	36	<u> </u>

Form 1040 or Form 1040-SR, Lines 37 and 38**Amount You Owe:**

37	Subtract total payments from total tax ▶ 37	<u> </u>
Note: Schedule H and Schedule E SE filers, line 37 may not represent all of the taxes you owe for 2021. See Schedule 3, line 12e, and its instructions for details.		
38	Estimated tax penalty ▶ 38	<u> </u>
QuickZoom to Late Penalties and Interest Worksheet ▶ QuickZoom.		

Schedule 1 — Additional Income and Adjustments to Income**Part I Additional Income**

1	Taxable refunds, credits, or offsets of state and local income taxes	1	<u>0.</u>
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Alimony Received Smart Worksheet

A	Taxpayer	Spouse	Date of divorce/sep	*
B	<u> </u>	<u> </u>	<u> </u>	<input type="checkbox"/>
* Check the box if the pre-2019 decree was modified after 2018 to treat the payments as nontaxable				
2 a	Alimony received. Taxpayer <u> </u> Spouse <u> </u>	2 a	<u> </u>	
b	Date of original divorce or separation agreement ▶ <u> </u>	3	<u> </u>	
3	Business income or (loss). Attach Schedule C	4	<u> </u>	
4	Other gains or (losses). Attach Form 4797	5	<u> </u>	
5	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E	6	<u> </u>	
6	Farm income or (loss). Attach Schedule F	7	<u> </u>	
7	Unemployment compensation			
8	Other income:			
a	Net operating loss	8 a	<u> </u>	
b	Gambling income	8 b	<u> </u>	
c	Cancellation of debt	8 c	<u> </u>	
d	Foreign earned income exclusion from Form 2555	8 d	<u> </u>	
e	Taxable Health Savings Account distribution	8 e	<u> </u>	
f	Alaska Permanent Fund dividends	8 f	<u> </u>	
g	Jury duty pay	8 g	<u> </u>	
h	Prizes and awards	8 h	<u> </u>	
i	Activity not engaged in for profit income	8 i	<u> </u>	
j	Stock options	8 j	<u> </u>	
k	Income from the rental of personal property if you engaged in the rental for profit but were not in the business of renting such property	8 k	<u> </u>	
l	Olympic and Paralympic medals and USOC prize money	8 l	<u> </u>	
m	Section 951(a) inclusion	8 m	<u> </u>	
n	Section 951A(a) inclusion	8 n	<u> </u>	
o	Section 461(l) excess business loss adjustment	8 o	<u> </u>	
p	Taxable distributions from an ABL account	8 p	<u> </u>	
z	Other income. List type and amount: <u> </u>	8 z	<u> </u>	
9	Total other income. Add lines 8a through 8z	9	<u> </u>	
10	Combine lines 1 through 7 and 9. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 8.	10	<u>0.</u>	
Total Income. Combine Form 1040 lines 1- 7 and Schedule 1, line 10, enter on Form 1040, line 9.			<u>29,947.</u>	

Quickzoom to 1040 Worksheet, line 9 — Total Income ▶ **QuickZoom.**

Part II Adjustments to Income

11	Educator expenses	11	
12	Certain business expenses of reservists, performing artists, and fee-basis government officials. Attach Form 2106	12	
13	Health savings account deduction. Attach Form 8889	13	
14	Moving expenses for members of the Armed Forces. Attach Form 3903	14	
15	Deductible part of self-employment tax. Attach Schedule SE	15	
16	Self-employed SEP, SIMPLE, and qualified plans	16	
17	Self-employed health insurance deduction	17	
18	Penalty on early withdrawal of savings	18	

Alimony Paid Smart Worksheet

	Recipient's name	Recipient's SSN	Date of divorce/sep	*	Alimony paid
A					
B					

* Check the box if the pre-2019 decree was modified after 2018 to treat the payments as nondeductible

19 a	Alimony paid	19 a	
b	Recipient's SSN ▶		
c	Date of original divorce or separation agreement ▶		
20	IRA deduction	20	
21	Student loan interest deduction	21	
22	Reserved for future use	22	
23	Archer MSA deduction	23	
24	Other adjustments:		
a	Jury duty pay	24 a	
b	Deductible expenses related to income reported on line 8k from the rental of personal property engaged in for profit	24 b	
c	Nontaxable amount of the value of Olympic and Paralympic medals and USOC prize money reported on line 8l	24 c	
d	Reforestation amortization and expenses	24 d	
e	Repayment of supplemental unemployment benefits under the Trade Act of 1974	24 e	
f	Contributions to section 501(c)(18)(D) pension plans.	24 f	
g	Contributions by certain chaplains to section 403(b) plans	24 g	
h	Attorney fees and court costs for actions involving certain unlawful discrimination claims	24 h	
i	Attorney fees and court costs you paid in connection with an award from the IRS for information you provided that helped the IRS detect tax law violations	24 i	
j	Housing deduction from Form 2555	24 j	
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form 1041)	24 k	
z	Other adjustments. List type and amount:	24 z	
25	Total other adjustments. Add lines 24a through 24z	25	
26	Add lines 11 through 23 and 25 These are your adjustments to income . Enter here and on Form 1040 or 1040-SR, line 10, or Form 1040-NR, line 10a	26	

Schedule 2 – Additional Taxes**Part I Tax**

1	Alternative minimum tax (see instructions). Attach Form 6251	1	
2	Excess advance premium tax credit repayment. Attach Form 8962	2	
3	Add lines 1 and 2. Enter here and include on Form 1040, 1040-SR, or 1040-NR, line 17	3	

Part II Other Taxes

4	Self-employment tax. Attach Schedule SE		4	
5	Social security and Medicare tax on unreported tip income. Attach Form 4137	5		
6	Uncollected social security and Medicare tax on wages. Attach Form 8919.	6		
7	Total additional social security and Medicare tax. Add lines 5 and 6		7	
8	Additional tax on IRAs or other tax-favored accounts. Attach Form 5329 if required		8	
9	Household employment taxes from Schedule H		9	
10	Repayment of first-time homebuyer credit. Attach Form 5405 if required		10	
11	Additional Medicare Tax. Attach Form 8959.		11	
12	Net investment income tax. Attach Form 8960		12	
13	Uncollected social security and Medicare or RRTA tax on tips or group-term life insurance from W-2, box 12.		13	
14	Interest on tax due on installment income from the sale of certain residential lots and timeshares		14	
15	Interest on the deferred tax on gain from certain installment sales with a sales price over \$150,000.		15	
16	Recapture of low-income housing credit. Attach Form 8611		16	
17	Other additional taxes:			
a	Recapture of other credits. List type, form number, and amount: ▶ _____	17 a		
b	Recapture of federal mortgage subsidy. If you sold your home in 2021, see instructions	17 b		
c	Additional tax on HSA distributions. Attach Form 8889.	17 c		
d	Additional tax on an HSA because you didn't remain an eligible individual. Attach Form 8889	17 d		
e	Additional tax on Archer MSA distributions. Attach Form 8853	17 e		
f	Additional tax on Medicare Advantage MSA distributions. Attach Form 8853.	17 f		
g	Recapture of a charitable contribution deduction related to a fractional interest in tangible personal property	17 g		
h	Income you received from a nonqualified deferred compensation plan that fails to meet the requirements of section 409A	17 h		
i	Compensation you received from a nonqualified deferred compensation plan described in section 457A	17 i		
j	Section 72(m)(5) excess benefits tax	17 j		
k	Golden parachute payments	17 k		
l	Tax on accumulation distribution of trusts	17 l		
m	Excise tax on insider stock compensation from an expatriated corporation	17 m		
n	Look-back interest under section 167(g) or 460(b) from Form 8697 or 8866	17 n		
o	Tax on non-effectively connected income for any part of the year you were a nonresident alien from Form 1040-NR	17 o		
p	Any interest from Form 8621, line 16f, relating to distributions from, and dispositions of, stock of a section 1291 fund	17 p		
q	Any interest from Form 8621, line 24.	17 q		
z	Any other taxes. List type and amount: ▶ _____	17 z		
18	Total additional taxes. Add lines 17a through 17z.		18	
19	Additional tax from Schedule 8812		19	
20	Section 965 net tax liability installment from Form 965-A.	20		
21	Add lines 4, 7 through 16, 18, and 19. These are your total other taxes . Enter here and on Form 1040 or 1040-SR, line 23, or Form 1040-NR, line 23b . . .		21	0.
	Total tax (add line 21 and Schedule 3, line 7b)			1,758.

Schedule 3 – Additional Credits and Payments**Part I Nonrefundable Credits**

1	Foreign tax credit. Attach Form 1116 if required	1	
2	Credit for child and dependent care expenses from Form 2441, line 11.		
2	Attach Form 2441	2	
3	Education credits from Form 8863, line 19	3	122.
4	Retirement savings contributions credit. Attach Form 8880	4	
5	Residential Energy Credit. Attach Form 5695	5	
6	Other nonrefundable credits:		
a	General business credit. Attach Form 3800	6 a	
b	Credit for prior year minimum tax. Attach Form 8801	6 b	
c	Adoption credit. Attach Form 8839	6 c	
d	Credit for the elderly or disabled. Attach Schedule R	6 d	
e	Alternative motor vehicle credit. Attach Form 8910	6 e	
f	Qualified plug-in motor vehicle credit.		
	Attach Form 8936	6 f	
g	Mortgage interest credit. Attach Form 8396	6 g	
h	District of Columbia first-time homebuyer credit.		
	Attach Form 8859	6 h	
i	Qualified electric vehicle credit. Attach Form 8834	6 i	
j	Alternative fuel vehicle refueling property credit.		
	Attach Form 8911	6 j	
k	Credit to holders of tax credit bonds. Attach Form 8912	6 k	
l	Amount on Form 8978, line 14	6 l	
z	Other nonrefundable credits. List type and amount:		
	▶ _____	6 z	
7	Total other nonrefundable credits. Add lines 6a through 6z	7	
8	Add lines 1 through 5 and 7.		
	Enter here and on Form 1040, 1040-SR, or 1040-NR, line 20	8	122.
a	Add line 8 plus child tax/other dep. credit on line 19 above		122.
b	Subtract total credits on line 8a from tax on line 18 above		1,758.

Quickzoom to 1040 Worksheet, line 24 – Total Tax ▶ QuickZoom. . . ▶

Part II Other Payments and Refundable Credits

9	Net premium tax credit. Attach Form 8962	9	
10	Amount paid with request for extension to file	10	
11	Excess social security and tier 1 RRTA tax withheld	11	
12	Credit for federal tax on fuels. Attach Form 4136	12	
13	Other payments or refundable credits:		
a	Form 2439	13 a	
b	Qualified sick and family leave credits from Schedule(s) H and Form(s) 7202 for leave taken before April 1, 2021	13 b	
c	Health coverage tax credit from Form 8885	13 c	
d	Credit for repayment of amounts included in income from earlier years	13 d	
e	Reserved for future use	13 e	
f		13 f	
g	Credit for child and dependent care expenses from Form 2441, line 10. Attach Form 2441	13 g	
h	Qualified sick and family leave credits from Schedule(s) H and Form(s) 7202 for leave taken after March 31, 2021	13 h	
z	Other payments or refundable credits. List type and amount . ▶		
	_____	13 z	

14	Total other payments or refundable credits. Add lines 13a through 13z.	14	
15	Total Payments: Part II, lines 9 through 12 and 14,		
	Withholding (Form 1040, line 25d),		
	Estimated Tax Payments (Form 1040, line 26) and Form 1040, lines 27-30	15	3,329.
	Other Payments and Refundable Credits (Form 1040, line 32) . ▶		1,400.

Third Party Designee

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

Designee's Name ▶ _____
 Phone Number ▶ _____ Personal Identification Number (PIN) . . ▶ _____

Signature and Paid Preparer**Sign Here**

Joint return? See instructions.

Keep a copy of this return for your records.

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

Your Signature

Date

Your Occupation

If the IRS sent you an Identity Protection PIN, enter it here

Spouse's Signature. If joint, **both** must sign.

Date

Full time Trainer ▶ _____

Spouse's Occupation

▶ _____

Daytime Phone No.

(810) 201-0357

Email Address

Paid Preparer's Use Only

Print/Type Preparer's name

Preparer's PTIN

Check if:

Preparer's Signature

Date

☐ Self-employed

Firm's Address (or yours if self-employed)

Firm's EIN.

Phone No.

Self-Prepared

State

ZIP Code

Filing Address Information

Send Form 1040 to: You have chosen to electronically file this return.

Name(s) Shown on Return Liam J Hughes	Your SSN 385-21-6981
--	-------------------------

Line 4b - Adjustment for trade or business income or loss

(a) Activity name	(b) Gain or loss
Enter additional adjustments not included above:	
Adjustment for trade or business income not subject to net investment tax	

Line 5b - Adjustment for gain or loss on dispositions

(a) Activity name	(b) Gain or loss
Capital loss carryover adjustment from 2020 for net investment tax purposes	
Enter additional adjustments not included above and check the box if a capital gain or loss:	
	<input type="checkbox"/>
	<input type="checkbox"/>
Net gain or loss from disposition of property not subject to net investment tax	

Capital gain/loss not included in net investment income

(a) Activity name	(b) Capital Gain or Loss
Capital gain or loss from sale of property not subject to net investment income tax	

Calculation of line 5b adjustment due to capital loss carryforward

1	Net capital loss not included in net investment income	1	0 .
2	Capital loss carryover to next year	2	
3	Lesser of line 1 or line 2 (Included as an adjustment on line 5b table above). . .	3	0 .

Line 7 - Other modifications to investment income

1	Casualty and theft losses reported on Schedule A, line 15.	1	
2	Amounts reported on Form 8814, line 12	2	
3	Adjustment for distributions from estates and trusts	3	
4	Schedules C and F income/loss included in net investment income.	4	
5	Substitute interest and dividend payments	5	
6	Recovery of a prior year deduction	6	
7		7	
8	Total other modifications to investment income	8	

Line 9b - State, local, and foreign income taxes allocable to net investment income

1	State and local income taxes	1	
2	Investment income.	2	
3	Total adjusted gross income	3	
4	Divide line 2 by line 3. Enter result as a decimal amount.	4	
5	State and local income taxes allocable to investment income	5	
6	State and local taxes (Schedule A, line 5e)	6	
7	Lesser of line 5 or line 6.	7	
8	Foreign income taxes	8	
9	Foreign income taxes allocable to investment income. Line 8 times line 4.	9	
10	Add lines 7 and 9. State, local and foreign income taxes allocable to investment income	10	

Lines 9 and 10 - Application of Itemized Deduction Limitations Worksheet**Part III - Application of Section 68 to Deductions Properly Allocable to Investment Income**

1	Reserved	1	
2	Enter the amount of state, local, and foreign income taxes that are properly allocable to investment income	2	
3	Enter the amount of other Itemized Deductions subject to the section 68 limitation and properly allocable to investment income before any itemized deduction limitation: <div style="border: 1px solid black; height: 40px; width: 450px; margin-top: 5px;"></div>	3	
4	Enter the total deductions properly allocable to investment income subject to the section 68 limitation. Enter the sum of lines 1 through 3.	4	
5	Enter the amount of total itemized deductions allowed after the section 68 limitation. Form 1040, line 12	5	
6	Enter all other itemized deductions allowed but not subject to the section 68 deduction limitation:	6	
7	Subtract line 6 from line 5.	7	
8	Enter the lesser of line 7 or line 4	8	

Part IV - Reconciliation of Schedule A Deductions to Form 8960 plus additional expenses, lines 9 and 10

(A)	(B)	(C)
Reenter the amounts and descriptions from Part III, lines 1-3	Fraction (see Help)	Column A times B
Miscellaneous Itemized Deductions properly allocable to Investment Income reportable on Form 8960, line 9c:		
1 Reserved.		
2 State, local, and foreign income taxes.	x	=
Itemized Deductions Subject to Section 68 reportable on Form 8960, line 10:		
3 _____	x	=
_____	x	=
_____	x	=
_____	x	=
Penalty on early withdrawal of savings		
Other modifications:		

Total additional modifications to Form 8960, line 10		

Calculation of Former Passive Activity Suspended Losses Allowed as Deduction Against NII**1) Former Passive Activity Suspended Losses**

(a) Activity name	(b) Suspended 12/31/2020	(c) Suspended 12/31/2021	(d) Used against activity	(e) Used against other passive

2) Former Passive Activity Suspended Losses - Schedule D

(a) Activity name	(b) Suspended 12/31/2020	(c) Suspended 12/31/2021	(d) Used against activity	(e) Used against other passive

3) Former Passive Activity Suspended Losses - Form 4797

(a) Activity name	(b) Suspended 12/31/2020	(c) Suspended 12/31/2021	(d) Used against activity	(e) Used against other passive

Federal Information Worksheet

► Keep for your records

2021

Part I – Personal InformationInformation in Part I is **completely calculated** from entries on Personal Information Worksheets.**Taxpayer:**

First name Liam
 Middle initial J Suffix
 Last name Hughes
 Social security no. 385-21-6981
 Occupation Full time Trainer
 Date of birth 12/17/1997 (mm/dd/yyyy)
 Age as of 1-1-2022 24
 Daytime phone (810) 201-0357 Ext
 Legally blind ☐
 Date of death

Spouse:

First name
 Middle initial Suffix
 Last name
 Social security no.
 Occupation
 Date of birth (mm/dd/yyyy)
 Age as of 1-1-2022
 Daytime phone Ext
 Legally blind ☐
 Date of death

Dependent of Someone Else:

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

Credit for the Elderly or Disabled (Schedule R):

Is the taxpayer retired on total and permanent disability? . . ☐ Yes ☐ No

Presidential Election Campaign Fund:

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

Dependent of Someone Else:

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

Credit for the Elderly or Disabled (Schedule R):

Is the spouse retired on total and permanent disability? . . ☐ Yes ☐ No

Presidential Election Campaign Fund:

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

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

Address 1123 S Van Buren St Apt no.
 City Bay City State MI ZIP code 48708-8037

Foreign Address: Check this box to use foreign address . . ☐

Address Apt no.
 City
 Foreign code Foreign country
 Foreign province/county Foreign postal code

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

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

Print Form 1040-SR instead of Form 1040 ☐ Yes ☒ No

Federal filing status:

☒ 1 Single
☐ 2 Married filing jointly
☐ 3 Married filing separately
 Check this box if you **did not** live with your spouse at any time during the year. ☐
 Check this box if you are eligible to claim your spouse's exemption/blind/over age 65 (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 2019 ☐ 2020 ☐
 Are you a dependent with a qualifying child Yes ☐ No ☐
 Enter qualifying person's name:
 Child's First name MI Last Name Suff
 Child's social security number

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)			Date of death (mm/dd/yyyy)		E I C	Lived with taxpyr in U.S.	Not qual credit other dep Educ Tuitn and Fees	* D e p
			Age	C o d e	Not qual for child tax cr	Qualified child/dep care exps incurred and paid 2021					

* "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 2021? ☐ 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 2021 ☐

Check if you were notified by the IRS that EIC cannot be claimed in 2021 or if you are ineligible to claim the EIC in 2021 for any other reason ☐

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) ☐ Team One

Check the appropriate box ☐ Checking ☒ Savings ☐

Routing number 272484470

Account number 02546723707

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

Amended Returns:

Do you want to elect **direct debit** of federal **amended** balance due (e-File only)? . . . ☐ Yes ☐ No

Enter the payment date to withdraw from the account above

Balance-due amount from this **amended** 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 ☐

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

American Opportunity and Lifetime Learning Credit (Form 8863)

For 2021, were you (or your spouse if married) a nonresident alien for any part of the year, and did not elect to be treated as a resident alien? ☐ 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 ☐

Check this box to print 'DUAL-STATUS STATEMENT' on Form 1040 ☐

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)

Disaster Tax Relief:

Check if you took a disaster distribution between 2018 and 2020 ☐

Part VI – Additional Information for Your Federal Return – Continued**Personal Representative for deceased taxpayers:**

Name of personal representative required for E-filed returns when Form 1310 is not filed or it is not the surviving spouse ▶ _____

Part VII – State Filing Information**Identity Protection PIN:**

If the IRS sent the taxpayer an Identity Protection PIN, enter it here ▶ _____

If the IRS sent the spouse an Identity Protection PIN, enter it here ▶ _____

Taxpayer:

Enter the taxpayer's state of residence as of December 31, 2021 ▶ MI

Check the appropriate box:

Taxpayer is a resident of the state above for the entire year ▶ ☒

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, 2021 ▶ _____

Check the appropriate box:

Spouse is a resident of the state above for the entire year ▶ ☐

Spouse is a resident of the state above for only part of year ▶ ☐

Date the spouse established residence in state above ▶ _____

In which state (or foreign country) did the spouse reside before this change? ▶ _____

Nonresident states:

Nonresident State(s)	Taxpayer/Spouse/Joint
_____	_____
_____	_____
_____	_____
_____	_____

Check this box if you are in a Registered Domestic Partnership or a civil union ▶ ☐

If you checked the box on the line above, also check the appropriate box below:

Check if this is your individual federal return you are filing with the IRS ▶ ☐

Check if this is the joint return created to file joint state tax return (see Help) ▶ ☐

Use the PIN that you signed last year's tax return with.

Taxpayer's Prior year PIN . . . _____

Spouse's Prior year PIN . . . _____

These signature PINs are chosen by the taxpayer and spouse and used for e-filing your tax return

Taxpayer's PIN used to sign the return 36914

Spouse's PIN used to sign the return _____

Taxpayer:

Drivers license or state ID number H220522402957

Issued by what state MI

License or ID license . ▶ ☒ ID . ▶ ☐ neither . ▶ ☐ decline . ▶ ☐

Spouse

Drivers license or state ID number _____

Issued by what state _____

License or ID license . ▶ ☐ ID . ▶ ☐ neither . ▶ ☐ decline . ▶ ☐

**Personal Information Worksheet
For the Taxpayer**

2021

► 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 . . . Liam Middle initial . J Last name . . . Hughes
Suffix
Social security no. . . 385-21-6981 Member of U.S. Armed Forces in 2021? . . ☐ Yes ☒ No
Date of birth 12/17/1997 (mm/dd/yyyy) age as of 1-1-2022 24
Occupation Full time Trainer Daytime phone (810) 201-0357 Ext _____
Marital status . . . Single
If widowed, check the appropriate box for the year your spouse died:
After 2021 ► ☐ 2021 . ► ☐ 2020 . ► ☐ 2019 . ► ☐ Before 2019 . ► ☐
Are you retired on total and permanent disability? (for Schedule R, see Help). ► ☐ Yes ☐ No
Check if this person is legally blind ► ☐ Yes ☒ No
If deceased, enter the date of death ► (mm/dd/yyyy) _____
Were you under the age of 16 as of 1-1-2022 and this is the first year you
are filing a tax return? ► ☐ Yes ☐ No
Language in which you want the IRS to communicate with you ► _____
Do you want \$3 to go to Presidential Election Campaign Fund? ► ☐ Yes ☒ No

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

- 1 **Can** someone (such as your parent) claim you as a dependent? ► ☐ Yes ☒ 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 2021? ► ☐ 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, 2021? ► ☐ Yes ☐ No

Part III – Taxpayer's State Residency Information

Enter this person's state of residence as of December 31, 2021 MI
Check the appropriate box:
This person is a resident of the state above for the entire year ☒
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 2021 _____
Unreimbursed medical expenses paid for qualifying person in 2021 _____
Employment taxes paid for dependent care providers in 2021 _____
Full-time student for 5 calendar months during 2021? ► ☐ Yes ☐ No
Disabled person who was not physically or mentally capable of self-care? ► ☐ Yes ☐ No
This person is a qualifying person for the child and dependent care credit ► ☐ Yes ☒ No

Student Information Worksheet

2021

► Keep for your records

Name of Student Liam J Hughes	Social Security Number 385-21-6981
----------------------------------	---------------------------------------

Part I – Student Status

- Was this person a student during 2021? ☒ Yes ☐ No
- What kind of school did the student attend during 2021? (Check all that apply.)

a <input type="checkbox"/> Elementary	d <input type="checkbox"/> Vocational school	g <input type="checkbox"/> Not applicable
b <input type="checkbox"/> High school (secondary)	e <input type="checkbox"/> Military academy	
c <input checked="" type="checkbox"/> College (postsecondary)	f <input type="checkbox"/> Apprenticeship (Qualified Tuition Program only)	
- Did the student receive scholarships or other education assistance? ☐ Yes ☐ No
- Qualified Tuition Program only:
 - Did the student make any education loan payments to treat as expenses? ☐ Yes ☒ No
 If Yes, or line 2f is checked, complete the Apprenticeship and Education Loan Smart Worksheet in Part VIII, Qualified Tuition Program (Section 529 Plan) below.

Part II – College Student Information

- Did the student complete the first 4 years of postsecondary education as of 1/1/2021? ☐ Yes ☒ No ☐ NA
- Was this student enrolled at an eligible education institution during 2021? ☒ Yes ☐ No ☐ NA
- Was this student enrolled in a program that leads to a degree, certificate, or credential? ☒ Yes ☐ No ☐ NA
- Was this student taking courses as part of a postsecondary degree program or to acquire or improve job skills? ☒ Yes ☐ No ☐ NA
- Did this student take at least one-half the normal full-time workload for one academic period? ☐ Yes ☒ No ☐ NA
- Has this student been convicted of a felony for possessing or distributing a controlled substance? ☐ Yes ☒ No ☐ NA
- Is this student an eligible dependent of the taxpayer? ☐ Yes ☒ No ☒ NA
- In how many prior years has an American Opportunity Credit been claimed for this student? ►
- In how many prior years has a Hope Credit been claimed for this student ►

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

- Is this student qualified for the American Opportunity Credit? ☐ Yes ☒ No
Did not take at least half-time workload
- Is this student qualified for the Lifetime Learning Credit? ☒ Yes ☐ No
- Reserved ☐ Yes ☐ No

Part IV – Educational Institution and Tuition Summary

Received 2020 1098T with Box 2 filled and box 7 checked?					
School Name EIN	Address (number, street, apt no., city, state, and ZIP Code)	Tuition paid	Scholar- ships or grants	On Form 1098-T	
Delta College 38-6034011	1961 Delta Rd University Center MI 48710	610.	0.	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
If a foreign address: foreign province/state: _____ Postal code: _____ Country: _____				Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
If a foreign address: foreign province/state: _____ Postal code: _____ Country: _____				Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Totals		610.	0.		

Are all School Employer Identification Numbers (EIN) known? (School EIN's must be entered in the program to claim the American Opportunity Credit) ☒ Yes ☐ No

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 or certain Indian tribal payments	_____		
c Other tax-free employer-provided assistance	_____		
d Total	_____		_____
2 Scholarships, fellowships, and grants not reported on Form W-2:			
a Scholarships and grants from Part IV above	_____		
b Other scholarships, fellowships and grants	_____		
c Total	_____		
3 Scholarship reported in 2021 not allocable to 2021 expense	_____		
4 Amount required to be used for other than qualified education expenses		_____	
5 Subtract line 3 and 4 from line 2c.	_____		
6 Total qualified education expenses from Part VI below.	<u>610.</u>		
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 4 and 8.		_____	
10 Tax-free educational assistance. Add lines 1d and 7			_____

Part VI – Education Expenses

Description	Total	Amount eligible for						
		American Opportunity Credit	Lifetime Learning Credit	Reserved	Qualified Higher Education Expense for 529 Plan	Qualified Higher Education Expense for ESA	Qualified Higher Education Expense for US Bonds	Qualified Elementary and Secondary Expense for ESA and QTP
		Not Qualified			Not Applicable	Not Applicable	Not Applicable	Not Applicable
Expenses:								
1 Tuition paid from Part IV and qualified elementary and secondary tuition.	610.	610.	610.		610.	610.	610.	
Paid to institution as a condition of enrollment:								
2 Fees								
3 Books, supplies, equipment								
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 . .	610.	610.	610.		610.	610.	610.	
Adjustments:								
14 Refunds								
15 Tax-free assistance								

16	Deducted on Sched A . . .							
17	Used for credit							
18	Used for exclusion		0.	0.				
See tax help								
19	Total adjustments.		0.	0.				
20	Adjusted qualified expenses	610.	610.	610.		610.	610.	610.

Liam J Hughes

385-21-6981 Page 3

Part VII – Education Credit or Deduction Election

1	Elect credit or deduction which results in best tax outcome.	<input checked="" type="checkbox"/>
2	Elect the American Opportunity Credit	<input type="checkbox"/>
3	Elect the Lifetime Learning Credit	<input type="checkbox"/>
4	Reserved	<input type="checkbox"/>
5	Not applicable	<input type="checkbox"/>

Part VIII – Qualified Tuition Program (Section 529 Plan)

	For Purposes of Regular Tax	For Purposes of 10% Additional Tax
1	Enter the total distributions from this QTP during 2021	
2	Enter the amount of adjusted qualified education expenses attributable to this QTP:	
a	Qualified Education Loan Payments	
b	Qualified Education Loan Payments applied	
c	Qualified Apprenticeship Education Expenses	
d	Qualified Apprenticeship Education Expenses applied	
e	Qualified Elementary and Secondary Education Expenses	
f	Qualified Elementary and Secondary Education Expenses applied	
g	Adjusted Qualified Higher Education Expenses	
h	Adjusted Qualified Higher Education Expenses applied	
3	Total qualified education expenses attributable to this QTP	
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 2021 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

Part-Year Resident State Allocation Worksheet

2021

► Keep for your records

Check the box to activate this worksheet ☐

Name(s) Shown on Return Liam J Hughes	Social Security Number 385-21-6981
--	---------------------------------------

INCOME	Federal Amount	Resident State	Source State	Allocated Amount
1 T Wages, salaries, tips				
S Wages, salaries, tips				

* Enter state of source only if income is associated with a trade or a business ▼

	Federal Amount	Residency Info			* Src St	Allocated Amount
		From mm/dd	To mm/dd	Res St		
2 T Taxable interest						
S Taxable interest						
3 T Dividends						
S Dividends						
4 T State/local tax refund						
S State/local tax refund						
5 T Alimony received						
S Alimony received						

* Enter the state of source for this income ▼

INCOME (continued)	Federal Amount		Residency Info			* Src St	Allocated Amount
	Total	Subtotal	From mm/dd	To mm/dd	Res St		
6 T Business inc or loss .							
S Business inc or loss .							
7 T Farm income or loss .							
S Farm income or loss .							
8 Total Schedule E. T		See Sch E Income Allocation Smart Worksheet					
S							

* Enter the state of source for this income (See Tax Help) ▼

INCOME (continued)	Federal Amount	Residency Info			* Src St	Allocated Amount
		From mm/dd	To mm/dd	Res St		
9 T Capital gain or loss						
S Capital gain or loss						
10 T Other gains/losses						
S Other gains/losses						
11 T Unemployment compensation .						
S Unemployment compensation .						

	Federal Amount	Residency Info			Allocated Amount
		From mm/dd	To mm/dd	Res State	
12 T Taxable IRA distributions					
S Taxable IRA distributions					
13 T Taxable pensions/annuities . . .					
S Taxable pensions/annuities . . .					
14a T Taxable social security benefits .					
S Taxable social security benefits .					
b T Taxable railroad retirements . .					
S Taxable railroad retirements . .					
15 Total other income T					
S					
16 Total Income. T					
S					

ADJUSTMENTS	Federal Amount	Residency Info			Allocated Amount
		From mm/dd	To mm/dd	Res St	
17 T Educator expenses					
S Educator expenses					
18 Certain business expenses T					
S					
19 T Health savings account deduction . . .					
S Health savings account deduction . . .					
20 T Moving expenses					
S Moving expenses					
21 T Penalty - early withdrawal of savings . .					
S Penalty - early withdrawal of savings . .					

ADJUSTMENTS (continued)	Federal Amount	Residency Info			Allocated Amount
		From mm/dd	To mm/dd	Res St	
22 T Alimony paid S Alimony paid					
23 T IRA deduction S IRA deduction					
24 T Student loan interest deduction S Student loan interest deduction					

* Enter the state of source for this adjustment ▼

ADJUSTMENTS (continued)	Federal Amount	Residency Info			* Src St	Allocated Amount
		From mm/dd	To mm/dd	Res St		
25 T Self-employment tax						
S Self-employment tax						
26 T SEP, SIMPLE and qualified plans .						
S SEP, SIMPLE and qualified plans .						
27 T Self-employed health insurance . .						
S Self-employed health insurance . .						
28 T Reserved						
S Reserved						
29 Other adjustments T						
S						
	Federal Amount	From mm/dd	To mm/dd	Res St		Allocated Amount
30 Total adjustments T						
S						
31 Adjusted gross income T						
S						

► Keep for your records

Name(s) Shown on Return
Liam J HughesSocial Security Number
385-21-6981

Form W-2 Summary

Box No.	Description	Taxpayer	Spouse	Total
1	Total wages, tips and compensation:			
	Non-statutory & statutory wages not on Sch C . . .	29,947.		29,947.
	Statutory wages reported on Schedule C			
	Foreign wages included in total wages.			
	Unreported tips.	0.		0.
2	Total federal tax withheld	1,929.		1,929.
3 & 7	Total social security wages/tips	29,947.		29,947.
4	Total social security tax withheld	1,857.		1,857.
5	Total Medicare wages and tips	29,947.		29,947.
6	Total Medicare tax withheld	434.		434.
8	Total allocated tips			
9	Not used			
10 a	Total dependent care benefits			
b	Offsite dependent care benefits			
c	Onsite dependent care benefits			
11	Total distributions from nonqualified plans . . .			
12 a	Total from Box 12			
b	Elective deferrals to qualified plans			
c	Roth contrib. to 401(k), 403(b), 457(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	QSEHRA benefits			
n	Total other items from box 12			
14 a	Total deductible mandatory state tax			
b	Total deductible charitable contributions			
c	This line does not apply to TurboTax			
d	Total RR Compensation			
e	Total RR Tier 1 tax			
f	Total RR Tier 2 tax			
g	Total RR Medicare tax			
h	Total RR Additional Medicare tax			
i	Total RRTA tips.			
j	Total other items from box 14			
k	Total sick leave subject to \$511 limit			
l	Total sick leave subject to \$200 limit			
m	Total emergency family leave wages			
16	Total state wages and tips	29,947.		29,947.
17	Total state tax withheld	1,273.		1,273.
19	Total local tax withheld.			

Name
Liam J HughesSocial Security Number
385-21-6981**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. . . 385-21-6981
b Employer ID number (EIN). . . 38-2687736
c Employer's name, address, and ZIP code
MORLEY COMPANIES INC
2811 SCHUST RD
Street PO BOX 1908
City SAGINAW
State MI ZIP Code 48605

Foreign Province _____
Foreign Postal Code _____
Foreign Country _____

1 Wages, tips, other compensation
29,946.87
3 Social security wages
29,946.87
5 Medicare wages and tips
29,946.87
7 Social security tips

2 Federal income tax withheld
1,928.58
4 Social security tax withheld
1,856.71
6 Medicare tax withheld
434.23
8 Allocated tips

► Enter unreported tips in **Part VII** on Page 2 below.**d** Control number .0000003456URX**Transfer employee information from the Federal Information Worksheet**

e Employee's name
First LIAM M.I. _____
Last HUGHES Suff. _____
f Employee's address and ZIP code
Street 1123 S VAN BUREN
City BAY CITY
State MI ZIP Code 48708

Foreign Province _____
Foreign Postal Code _____
Foreign Country _____

9 _____

10 Dependent care benefits

Distributions from sect. 457 and nonqualified plans (Important, see Help)

11 Nonqualified plans**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: Is employer a state or local government? Yes <input type="checkbox"/> No <input type="checkbox"/>

Box 15 State	Box 15 Employer's state I.D. number	Box 16 State wages, tips, etc.	Box 17 State income tax
MI	38-2687736	29,946.87	1,272.75
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

I confirm that the state withholding identification number(s) are accurate ☐

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

2021

Taxpayer's name <u>Liam J Hughes</u>	Social Security No. <u>385-21-6981</u>
---	---

1098-T Information (Required):

- A** A Form 1098-T was received from this institution for 2021. Yes ☒ No ☐
- B** A Form 1098-T was received from this institution for **2020** with Box 2 filled in and Box 7 checked Yes ☐ No ☒

Identify Student (Required):

- A** If student is Liam
Double-click to link this 1098-T to the applicable **Taxpayer or Spouse Student Information Worksheet** ► Liam
- B** If student is _____
Double-click to link this 1098-T to the applicable **Dependent Student Information Worksheet** ► _____

Filer's name <u>Delta College</u> Street address <u>1961 Delta Rd</u> City _____ State _____ Zip Code _____ <u>University Center</u> <u>MI</u> <u>48710</u> Foreign province/country _____ Foreign postal code _____ Foreign country _____		1 Payments received for qualified tuition and related expenses \$ <u>610.</u>	
Filer's Employer Identification Number <u>38-6034011</u>	Student's Taxpayer Identification Number <u>385-21-6981</u>	4 Adjustments made for a prior year \$ _____	5 Scholarships or grants \$ _____
Student's name <u>Liam</u> Street address _____ Apt. No. _____ <u>1123 S Van Buren St</u> City _____ State _____ Zip Code _____ <u>Bay City</u> <u>MI</u> <u>48708-8037</u>		6 Adjustments to scholarships or grants for a prior year \$ _____	7 Checked if the amount in box 1 includes amounts for an academic period beginning January - March 2022 ► <input type="checkbox"/>
Service Provider/ Acct No _____	8 Check if at least half-time student ► <input type="checkbox"/>	9 Check if a graduate student . . ► <input type="checkbox"/>	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 2021 0.
- B** Enter box 1 amount actually paid during 2021 610.

Reconciliation of Box 5, Scholarships or Grants

- A** Enter portion of box 5 amount from veteran- or tax free employer-provided assistance . . . _____
- B** Enter portion of box 5 amount already included in income (on Forms W-2, 1099-MISC) . . . _____
- C** Portion of box 5 amount from scholarships or grants _____
- D** Box 5 amount includes veteran- or employer-provided educational assistance ☐

Form 1099-Q Summary

2021

► Keep for your records

Name(s) Shown on Return
Liam J Hughes

Social Security No.
385-21-6981

Coverdell Educational Savings Account (ESA) Distributions		Recipient Taxpayer	Recipient Spouse
1	Total gross distributions from box 1 of Form 1099-Q		
a	Less: Rollover to another ESA of beneficiary		
b	Less: Transfer to another family member		
c	Less: Transfer to a non-family member		
d	Less: Return of 2021 contributions		
e	Less: Return of pre 2021 contributions. These are reported on the tax return in the year the contribution was made, not on the 2021 tax return		
2	Balance of gross Coverdell ESA distributions		
3	Education expenses not used as basis for credits		
4	Amount of ESA distributions after return of basis		
5	Earnings on return of 2021 contributions		
6	Earnings on non-family member transfer		
7	Taxable amount of ESA distributions on line 2		
8	Taxable amount included on Schedule 1 (Form 1040), line 21		
9	Non-taxable ESA distributions		
Gross State Qualified Tuition Plan (QTP) Distributions			
10	Total gross distributions from box 1 of Form 1099-Q		
a	Less: Rollover to another QTP of beneficiary		
b	Less: Transfer to another family member		
c	Less: Transfer to a non-family member		
d	Less: Expenses refunded and recontributed		
11	Balance of gross state QTP distributions		
12	Earnings on state QTP distributions on line 11		
Gross Private Qualified Tuition Plan (QTP) Distributions			
13	Total gross distributions from box 1 of Form 1099-Q		
a	Less: Rollover to another QTP of beneficiary		
b	Less: Transfer to another family member		
c	Less: Transfer to a non-family member		
d	Less: Expenses refunded and recontributed		
14	Balance of gross private QTP distributions		
15	Earnings on private QTP distributions on line 14		
Taxable Qualified Tuition Plan (QTP) Distributions			
16	Balance of gross QTP distributions.		
17	Earnings on QTP distributions on line 16		
18	Education expenses not used as basis for credits		
19	Non-taxable QTP distributions		
20	Taxable amount of earnings on line 17		
21	Earnings on non-family member transfer (state)		
22	Earnings on non-family member transfer (private)		
23	Taxable amount included on Schedule 1 (Form 1040), line 21		

Qualified Tuition Plan (QTP) Distributions for Other Beneficiaries (included in page 1)

T S	Beneficiary	Distribution	Earnings	Expenses	Taxable amount	Recipient Taxpayer	Recipient Spouse
0 Total.							

Educational Savings Account (ESA) Distributions for Other Beneficiaries (included in page 1)

T S	Beneficiary	Distribution	Taxable amount	Recipient Taxpayer	Recipient Spouse
0 Total.					

Wages, Salaries, & Tips Worksheet

2021

► Keep for your records

Name(s) Shown on Return <u>Liam J Hughes</u>	Social Security Number <u>385-21-6981</u>
---	--

The following amounts are included in the total entered on line 1 of Form 1040 or on line 8 of Form 1040NR:

	Taxpayer	Spouse	Total
1 Wages, from Form W-2	29,947.		29,947.
2 Miscellaneous income, from Form 8919			
3 Items from Form 1099-R:			
a Disability before minimum retirement age			
b Return of contributions			
4 Excess reimbursement, from Form 2106			
5 a Taxable tips, from Form 4137			
b Noncash tips			
6 Excess moving expense reimbursement, from Form 3903			
7 Wages earned as a household employee (if less than \$2,100 and without a Form W-2)			
8 Items not on Form W-2 or Form 1099-R:			
a Sick pay or disability payments			
b Total foreign source income			
c Check this box if the amount on line 8b is eligible for the foreign exclusion/deduction . ► <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
d Ordinary income from employer stock transactions not reported on Form W-2			
9 Other earned income:			
a Non-gov unemployment received/repaid 2021			
b _____			

10 Subtotal. Add lines 1 through 9	29,947.		29,947.
11 Taxable employer-provided dependent care benefits, from Form 2441			
12 Taxable employer-provided adoption benefits less any excluded benefits from Form 8839			
13 Scholarship/fellowship income not on Form W-2			
14 Other non-earned income:			

15 Total of lines 10 through 14	29,947.		29,947.

Schedule D
Line 19

Unrecaptured Section 1250 Gain Worksheet

2021

► Keep for your records

Name(s) Shown on Return
Liam J Hughes

Social Security Number
385-21-6981

		Regular Tax	Alternative Minimum Tax																								
If you are not reporting a gain on Form 4797, line 7, skip lines 1 through 9 and go to line 10.																											
1	If you have a section 1250 property in Part III of Form 4797 for which you made an entry in Part I of Form 4797 (but not Form 6252), enter the smaller of line 22 or line 24 of Form 4797 for that property. If you did not have any such property, go to line 4.	1																									
2	Enter the amount from Form 4797, line 26g, for the property for which you made an entry on line 1	2																									
3	Subtract line 2 from line 1	3																									
4	Enter the total unrecaptured section 1250 gain included on lines 26 or 37 of Form(s) 6252 from installment sales of trade or business property held more than one year	4																									
5	Enter the total of any amounts reported on a Schedule K-1 from a partnership or an S corporation as "unrecaptured section 1250 gain".	5																									
6	Add lines 3 through 5	6																									
7	Enter the smaller of line 6 or the gain from Form 4797, line 7	7																									
8	Enter the amount, if any, from Form 4797, line 8	8																									
9	Subtract line 8 from line 7. If zero or less, enter -0-	9																									
10	Enter the amount of any gain from sale of an interest in a partnership attributable to unrecaptured section 1250 gain.	10																									
11	Enter the total of any amounts reported to you as "unrecaptured section 1250 gain" from an estate, trust, real estate investment trust or mutual fund																										
	<table border="0"> <tr> <td></td> <td>Regular</td> <td>AMT</td> </tr> <tr> <td>a</td> <td>On Form 1099-DIV</td> <td></td> </tr> <tr> <td>b</td> <td>On Form 2439</td> <td></td> </tr> <tr> <td>c</td> <td>On Schedule(s) K-1</td> <td></td> </tr> <tr> <td>d</td> <td>On Form 1099-R</td> <td></td> </tr> <tr> <td>e</td> <td>From Form 8814</td> <td></td> </tr> <tr> <td>f</td> <td>Other.</td> <td></td> </tr> <tr> <td></td> <td>Total</td> <td></td> </tr> </table>		Regular	AMT	a	On Form 1099-DIV		b	On Form 2439		c	On Schedule(s) K-1		d	On Form 1099-R		e	From Form 8814		f	Other.			Total		11	
	Regular	AMT																									
a	On Form 1099-DIV																										
b	On Form 2439																										
c	On Schedule(s) K-1																										
d	On Form 1099-R																										
e	From Form 8814																										
f	Other.																										
	Total																										
12	Enter the total of any unrecaptured section 1250 gain from sales (including installment sales) or other dispositions of section 1250 property held more than 1 year for which you did not make an entry in Part I of Form 4797 for the year of sale	12																									
13	Add lines 9 through 12.	13																									
14	If you had any section 1202 gain or collectibles gain or (loss), enter the total of lines 1 thru 4 of the 28% Rate Gain Worksheet . Otherwise, enter -0-	14	0.																								
15	Enter the (loss), if any, from Schedule D, line 7. If Schedule D, line 7, is zero or a gain, enter -0-	15	0.																								
16	Enter your long-term capital loss carryovers from Schedule D, line 14, and Schedule K-1 (Form 1041), line 11, code D	16																									
a	Enter your capital gain excess, if you are filing Form 2555	a	0.																								
17	Combine lines 14 through 16a. If the result is a (loss), enter it as a positive amount. If the result is zero or a gain, enter -0-	17	0.																								
18	Unrecaptured section 1250 gain. Subtract line 17 from line 13. If zero or less, enter -0-. If more than zero, enter the result here and on Schedule D, line 19.	18																									

Schedule D
Line 18

28% Rate Gain Worksheet

► Keep for your records

2021

Name(s) Shown on Return
Liam J Hughes

Social Security Number
385-21-6981

				Regular Tax	Alternative Minimum Tax
1	Enter the total of all collectibles gain or (loss) from items you reported on Form 8949, Part II	1			
2	Enter as a positive number the amount of any section 1202 exclusion you reported in column (g) of Form 8949, Part II, with code "Q" in column (f), that is 50% of the gain, plus 2/3 of any section 1202 exclusion you reported in column (g) of Form 8949, Part II, with code "Q" in column (f), that is 60% of the gain, plus 1/3 of any section 1202 exclusion you reported in column (g) of Form 8949, Part II, with code "Q" in column (f), that is 75% of the gain.				
	<div style="display: flex; justify-content: space-around;"> <div>50 % Exclusion</div> <div>60 % Exclusion</div> <div>75% Exclusion</div> </div>				
a	Schedule D				
b	Form 8814				
c	Schedule B				
d	Form 6252				
e	Form 2439				
f	Other				
	Total	2			
3	Enter the total of all collectibles gain or (loss) from:				
	<div style="display: flex; justify-content: space-around;"> <div>Regular</div> <div>AMT</div> </div>				
a	Form 4684, line 4 (but only if line 15 is more than zero)				
b	Form 6252				
c	Form 6781, Part II				
d	Form 8824				
	Total	3			
4	Enter the total of any collectibles gain reported to you on:				
	<div style="display: flex; justify-content: space-around;"> <div>Regular</div> <div>AMT</div> </div>				
a	Form 1099-DIV, box 2d				
b	Form 2439, box 1d				
c	Schedule K-1 from a partnership, S corporation, estate, or trust				
d	Disposition of interest in partnership or S corporation				
e	Other				
	Total	4			
5	Enter your long-term capital loss carryovers from Schedule D, line 14, and Schedule K-1 (Form 1041), line 11, code C	5			
6	If Schedule D, line 7, is a (loss), enter that (loss) here. Otherwise, enter -0-	6			
7	Combine lines 1 through 6. If zero or less, enter -0-. If more than zero, also enter this amount on Schedule D, line 18	7			
8	Enter the amount of any capital gain excess	8			0.
9	Subtract line 8 from line 7. If zero or less, enter -0-. Enter this amount on Schedule D Tax Worksheet, line 11a	9	0.		0.

Name(s) Shown on Return
Liam J HughesSocial Security Number
385-21-6981

1 a	Enter your taxable income from Form 1040, line 15	1 a	17,347.
b	Enter amount on line 2c of your (and spouse's) Foreign Earned Income Tax Wksht . . .	b	
c	Add lines 1a and 1b	1 c	17,347.
2 a	Enter your qualified dividends from Form 1040, line 3a	2 a	
b	Enter any capital gain excess attributable to qualified dividends	b	
c	Subtract line 2b from line 2a	2 c	
3	Amount from Form 4952, line 4g	3	
4 a	Amount from Form 4952, line 4e	4 a	
b	Amount from the dotted line next to Form 4952, line 4e	b	
c	Line 4b, if applicable, 4a, if not	c	
5	Subtract line 4c from line 3	5	0.
6	Subtract line 5 from line 2c. If zero or less, enter -0-	6	0.
7 a	Enter line 15 of Schedule D	7 a	
b	Enter line 16 of Schedule D	b	
c	Enter the smaller of line 7a or line 7b	7 c	0.
8	Enter the smaller of line 3 or line 4c	8	
9 a	Subtract line 8 from line 7	9 a	0.
b	Enter any capital gain excess attributable to capital gains	b	
c	Subtract line 9b from line 9a	9 c	0.
10	Add lines 6 and 9c	10	0.
11 a	Enter the amount from Schedule D, line 18	11 a	0.
b	Enter the amount from Schedule D, line 19	b	
c	Add lines 11a and 11b	11 c	0.
12	Enter the smaller of line 9c or line 11c	12	0.
13	Subtract line 12 from line 10	13	0.
14	Subtract line 13 from line 1c. If zero or less, enter -0-	14	17,347.
15	Enter: • \$40,400 if single or married filing separately, • \$80,800 if married filing jointly or qualifying widow(er), or • \$54,100 if head of household.	15	40,400.
16	Enter the smaller of line 1c or line 15	16	17,347.
17	Enter the smaller of line 14 or line 16	17	17,347.
18	Subtr ln 10 from ln 1c. If zero or less, enter -0-	18	17,347.
19	Enter the smaller of line 1c or: • \$164,925 if single or married filing sep, • \$329,850 if MFJ or qual widow(er), or • \$164,900 if head of household.	19	17,347.
20	Enter the smaller of line 14 or line 19	20	17,347.
21	Enter the larger of line 18 or line 20	21	17,347.
22	Subtract line 17 from line 16. This amount is taxed at 0%	22	0.
If lines 1c and 16 are the same, skip lines 23 through 43 and go to line 44. Otherwise, go to line 23.			
23	Enter the smaller of line 1c or line 13	23	
24	Enter the amount from line 22 (if line 22 is blank, enter -0-)	24	
25	Subtract line 24 from line 23. If zero or less, enter -0-	25	
26	Enter: • \$445,850 if single, • \$250,800 if married filing separately, • \$501,600 if married filing jointly or qualifying widow(er), or • \$473,750 if head of household.	26	
27	Enter the smaller of line 1c or line 26	27	
28	Add lines 21 and 22	28	
29	Subtract line 28 from line 27. If zero or less, enter -0-	29	
30	Enter the smaller of line 25 or line 29	30	
31	Multiply line 30 by 15% (0.15)	31	
32	Add lines 24 and 30	32	
If lines 1 and 32 are the same, skip lines 33 through 43 and go to line 44. Otherwise, go to line 33			
33	Subtract line 32 from line 23	33	
34	Multiply line 33 by 20% (0.20)	34	
If Schedule D, line 19, is zero or blank, skip lines 35 through 40 and go to line 41. Otherwise, go to line 35.			
35	Enter the smaller of line 9c above or Schedule D, line 19	35	
36	Add lines 10 and 21	36	
37	Enter the amount from line 1c above	37	

38	Subtract line 37 from line 36. If zero or less, enter -0-	38	_____
39	Subtract line 38 from line 35. If zero or less, enter -0-	39	_____
40	Multiply line 39 by 25% (0.25)	40	_____
If Schedule D, line 18, is zero or blank, skip lines 41 through 43 and go to line 44. Otherwise, go to line 41.			
41	Add lines 21, 22, 30, 33, and 39	41	_____
42	Subtract line 41 from line 1c	42	_____
43	Multiply line 42 by 28% (0.28)	43	_____
44	Figure the tax on the amount on line 21 . If the amount on line 21 is less than \$100,000, use the Tax Table to figure this tax. If the amount on line 21 is \$100,000 or more, use the Tax Computation Worksheet	44	<u>1,880.</u>
45	Add lines 31, 34, 40, 43, and 44	45	<u>1,880.</u>
46	Figure the tax on the amount on line 1c . If the amount on line 1c is less than \$100,000, use the Tax Table to figure this tax. If the amount on line 1c is \$100,000 or more, use the Tax Computation Worksheet	46	<u>1,880.</u>
47	Tax on all taxable income (including capital gains and qualified dividends). Enter the smaller of line 45 or line 46. Also include this amount on Form 1040, line 16	47	<u>1,880.</u>

Form 1040
Line 16

Qualified Dividends and Capital Gain Tax Worksheet

2021

► Keep for your records

Name(s) Shown on Return
Liam J Hughes

Social Security Number
385-21-6981

1	Enter the amount from Form 1040 or 1040-SR, line 15.	1	_____
2	Enter the amount from Form 1040 or 1040-SR, line 3a	2	_____
3	Are you filing Schedule D?		
<input type="checkbox"/>	Yes. Enter the smaller of line 15 or 16 of Schedule D. If either line 15 or 16 is blank or loss, enter -0-	3	_____
<input type="checkbox"/>	No. Enter the amount from Form 1040 or 1040-SR, line 7.		
4	Add lines 2 and 3	4	_____
5	Subtract line 4 from line 1. If zero or less, enter -0-	5	_____
6	Enter:		
	\$40,400 if single or married filing separately,	}	6 _____
	\$80,800 if married filing jointly or qualifying widow(er),		
	\$54,100 if head of household.		
7	Enter the smaller of line 1 or line 6	7	_____
8	Enter the smaller of line 5 or line 7	8	_____
9	Subtract line 8 from line 7 (this amount taxed at 0%)	9	_____
10	Enter the smaller of line 1 or line 4	10	_____
11	Enter the amount from line 9	11	_____
12	Subtract line 11 from line 10.	12	_____
13	Enter:		
	\$445,850 if single,	}	13 _____
	\$250,800 if married filing separately,		
	\$501,600 if married filing jointly or qualifying widow(er),		
	\$473,750 if head of household.		
14	Enter the smaller of line 1 or line 13	14	_____
15	Add lines 5 and 9	15	_____
16	Subtract line 15 from line 14. If zero or less, enter -0-	16	_____
17	Enter the smaller of line 12 or line 16	17	_____
18	Multiply line 17 by 15% (0.15)	18	_____
19	Add lines 9 and 17	19	_____
20	Subtract line 19 from line 10	20	_____
21	Multiply line 20 by 20% (0.20)	21	_____
22	Figure the tax on the amount on line 5. If the amount on line 5 is less than \$100,000, use the Tax Table to figure the tax. If the amount on line 5 is \$100,000 or more, use the Tax Computation Worksheet.		
23	Add lines 18, 21, and 22	23	_____
24	Figure the tax on the amount on line 1. If the amount on line 1 is less than \$100,000, use the Tax Table to figure this tax. If the amount on line 1 is \$100,000 or more, use the Tax Computation Worksheet.		
25	Tax on all taxable income. Enter the smaller of line 23 or line 24 here and on Form 1040 or 1040-SR, line 16.		
		25	_____

IRA Contributions Worksheet

2021

► Keep for your records

Name(s) Shown on Return Liam J Hughes	Social Security Number 385-21-6981
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Traditional IRA Contributions

Regular Traditional IRA Contributions		Taxpayer	Spouse
1	Enter traditional IRA contributions made for 2021, including any made between 1/1/2022 and 4/18/2022, any amounts later recharacterized to a Roth IRA, and any excess contributions, but not including any rollovers. Also include any contributions to deemed IRAs under an employer plan		
2	Contributions recharacterized from a Roth IRA (from line 24) . . .		
3	Traditional IRA contributions, from Schedule(s) K-1		
4	Contributions recharacterized (not converted) to a Roth IRA . . .		
►	If there is a recharacterization indicated on line 4, an explanation must be attached to the tax return.		
5	Traditional IRA contributions. Combine lines 1 through 4		
6	Enter any contribution included on line 5 withdrawn before the due date of the tax return. <i>See Help</i>		
7	Excess traditional IRA contribution credit.		
8	Repayments of qualified reservist distributions		
9	Total traditional IRA contributions.		
Additional Traditional IRA Contribution Information		Taxpayer	Spouse
10	Check if covered by a retirement plan at work. If married filing a separate return, check box in spouse column, if applicable . . .	<input type="checkbox"/>	<input type="checkbox"/>
11	Enter any contributions included on line 9 that were made during 1/1/2022 to 4/18/2022 (<i>See Help</i>).		
Deductible and Non-deductible Traditional IRA Contributions		Taxpayer	Spouse
12	Deductible traditional IRA contributions from worksheet.		
13	Nondeductible traditional IRA contributions from worksheet.		
	QuickZoom to worksheet indicated by the check: <input type="checkbox"/> IRA deduction worksheet ► <input type="checkbox"/> Worksheet for social security recipients ►		
14	Amount on line 13 you elect to make nondeductible		
15	Excess traditional IRA contributions, to Form 5329, line 15 Note: You may avoid a penalty by withdrawing the amount on line 15 before due date of return, including extensions.		
16	Deductible traditional IRA contributions, to Schedule 1 (Form 1040), Line 19.		
17	Qualified reservist repayments		
18	Nondeductible traditional IRA contributions, to Form 8606, ln 1. . .		

IRA Contributions Worksheet

2021

► Keep for your records

Liam J Hughes

385-21-6981

Page 2

Roth IRA Contributions

Regular Roth IRA Contributions		Taxpayer	Spouse
19	Enter regular Roth IRA contributions made for 2021, including any made between 1/1/2022 and 4/18/2022, any amounts later recharacterized to a traditional IRA, and any excess contributions, but not including any rollovers or conversions. Also include any contributions to deemed Roth IRAs under an employer plan.		
20	Contributions recharacterized from a traditional IRA, (from In 4). . .		
21	Roth IRA contributions, from Schedule(s) K-1		
22	Enter contributions recharacterized to a traditional IRA.		
►	If there is a recharacterization indicated on line 23, an explanation must be attached to the tax return.		
23	Disallowed Roth IRA conversions		
24	Roth IRA contributions. Combine lines 20 through 23		
25	Enter any contribution included on line 24 withdrawn before the due date of the tax return. <i>See Help</i>		
26	Excess Roth IRA contribution credit		
27	Total Roth IRA contributions		
28	Repayments of qualified Roth reservist distributions		

Roth IRA Contributions After Limitations		Taxpayer	Spouse
29	Roth IRA contributions after limitation		
30	Excess Roth IRA contributions, to Form(s) 5329, line 23		
Note: You may avoid a penalty by withdrawing the amount on line 31 before due date of return, including extensions.			

Coverdell Education Savings Account (Education IRA) Contributions

Excess Coverdell Education Savings Account Contributions		Taxpayer	Spouse
31	Enter any excess contributions made to Coverdell Education Savings Accounts (ESAs) of which you are the beneficiary.		
Note: You do not need to report any Coverdell ESA contributions which are not excess contributions..			

2021

Social Security Number

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Estimated Tax Payments for 2021 (If more than 4 payments for any state or locality, see Tax Help)

	Federal		State			Local		
	Date	Amount	Date	Amount	ID	Date	Amount	ID
1	04/15/21		04/15/21			04/15/21		
2	06/15/21		06/15/21			06/15/21		
3	09/15/21		09/15/21			09/15/21		
4	01/18/22		01/18/22			01/18/22		
5								
Tot Estimated Payments . . .								

Tax Payments Other Than Withholding (If multiple states, see Tax Help)		Federal	State	ID	Local	ID
6	Overpayments applied to 2021					
7	Credited by estates and trusts					
8	Totals Lines 1 through 7					
9	2021 extensions					

Taxes Withheld From:					Federal	State	Local
10	Forms W-2				1,929.	1,273.	
11	Forms W-2G						
12	Forms 1099-R						
13	Forms 1099-MISC, 1099-NEC, 1099-K, 1099-G .						
14	Schedules K-1						
15	Forms 1099-INT, DIV and OID						
16	Social Security and Railroad Benefits						
17	Form 1099-B	St		Loc			
18 a	Other withholding	St		Loc			
b	Other withholding	St		Loc			
c	Other withholding	St		Loc			
d	Positive Adjustment	St		Loc			
e	Negative Adjustment	St		Loc			
f	Additional Medicare Tax						
19	Total Withholding Lines 10 through 18f				1,929.	1,273.	
20	Total Tax Payments for 2021				1,929.	1,273.	

Prior Year Taxes Paid In 2021 (If multiple states or localities, see Tax Help)		State	ID	Local	ID
21	Tax paid with 2020 extensions				
22	2020 estimated tax paid after 12/31/2020				
23	Balance due paid with 2020 return				
24	Other (amended returns, installment payments, etc) . .				

25 Amount paid with 2020 federal extension _____ Date paid. . . . _____
(If blank, 5/17/2021 will be used)

Schedule A
Lines 5 - 12

Tax and Interest Deduction Worksheet

2021

► Keep for your records

Name(s) Shown on Return
Liam J Hughes

Social Security Number
385-21-6981

Tax Deductions

1 State and local taxes:

Optional Sales Tax Tables

a Available Income:

(1) Income from Form 1040, line 7	29,947.
(2) Nontaxable income entered elsewhere on return	
(3) Available income: 2020 refundable credits in excess of tax	0.
(4) Enter any additional nontaxable income	
(5) Total available income	29,947.

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, Louisiana, Mississippi, New York or South Carolina 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 1,273.00

i State and Local Tax Deduction to Schedule A, line 5a:

Greater of line 1f, line 1g, or line 1h (to Schedule A, line 5a). 1,273.00

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 . ☒

2 State and local real estate taxes:

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

b	Real estate taxes paid on principal residence entered on Home Mortgage Int. Wks . . .	_____
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	Foreign real property taxes included in lines 2a-2f above	_____
h	Add lines 2a through 2f, less line 2g (to Schedule A, line 5b)	_____
3	State and local personal property taxes:	
a	Auto registration fees based on the value of the vehicle.	
	2020 Amount Enter 2021 description:	
	_____	_____
	_____	_____
	_____	_____
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 5c)	_____
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.	
	2020 Amount Enter 2021 description:	
	_____	_____
	_____	_____
	_____	_____
f	Foreign real property taxes included in lines 4a-4e above	_____
g	Add lines 4a through 4e, less line 4f (to Schedule A, line 6)	_____

Interest Deductions

5	Home mortgage interest and points reported on Form 1098:	
a	Mortgage interest and points from the Home Mortgage Interest Worksheet	_____
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 8a) or line A2 from above	_____
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 8b) 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 8c) or line C2 from above	_____

Schedule A
Line 5

State and Local Tax Deduction Worksheet

2021

► Keep for your records

Name(s) Shown on Return
Liam J Hughes

Social Security Number
385-21-6981

State and Local Income Taxes

State income taxes:		
1 State income tax withheld	1	1,273.
2 2021 state estimated taxes paid in 2021	2	
3 2020 state estimated taxes paid in 2021	3	
4 Amount paid with 2020 state application for extension	4	
5 Amount paid with 2020 state income tax return	5	
6 Overpayment on 2020 state income tax return applied to 2021 tax	6	
7 Other amounts paid in 2021 (amended returns, installment payments, etc.)	7	
8 State estimated tax from Schedule(s) K-1 (Form 1041)	8	
Local income taxes:		
9 Local income tax withheld	9	
10 2021 local estimated taxes paid in 2021	10	
11 2020 local estimated taxes paid in 2021	11	
12 Amount paid with 2020 local application for extension	12	
13 Amount paid with 2020 local income tax return	13	
14 Overpayment on 2020 local income tax return applied to 2021 tax	14	
15 Other amounts paid in 2021 (amended returns, installment payments, etc.)	15	
16 Local estimated tax from Schedule(s) K-1 (Form 1041)	16	
Other:		
17	17	
18 Total Add lines 1 through 17	18	1,273.
19 State and local refund allocated to 2021	19	
20 Nondeductible state income tax from line 28	20	
21 Total reductions Add lines 19 and 20.	21	
22 Total state and local income tax deduction Line 18 less line 21	22	1,273.

Nondeductible State Income Tax (Hawaii Only)

23 Nontaxable federal employee cost of living allowance	23	
24 Adjusted gross income	24	
25 Add lines 23 and 24	25	
26 Nondeductible percent. Line 23 divided by line 25	26	%
27 Hawaii state income tax included in line 18	27	
28 Nondeductible Hawaii state income tax. Multiply line 26 by line 27.	28	

Charitable Deduction Limits Worksheet For Current Year Contributions

2021

► Keep for your records

Name(s) Shown on Return Liam J Hughes	Social Security Number 385-21-6981
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Step 1 — Enter your other charitable contributions made during the year.

1	Enter your cash contributions to 100% limit organizations	1	
2	Enter your contributions of capital gain property "for the use of" any qualified organization	2	
3	Enter your other contributions "for the use of" any qualified organization. Don't include any contributions you entered on a previous line	3	
4	Enter your other contributions to qualified organizations that aren't 50% limit organizations. Don't include any contributions you entered on a previous line	4	
5	Enter your contributions of capital gain property to 50% limit organizations deducted at fair market value. Don't include any contributions you entered on a previous line.	5	
6	Enter your noncash contributions to 50% limit organizations other than capital gain property you deducted at fair market value. Be sure to include contributions of capital gain property to 50% limit organizations if you reduced the property's fair market value. Don't include any contributions you entered on a previous line	6	
7	Enter your cash contributions to 50% limit organizations. Don't include any contributions you entered on a previous line	7	

Step 2 — Figure your deduction for the year (if any result is zero or less, enter -0-)

8	Enter your adjusted gross income (AGI)	8	29,947.
---	--	---	---------

A Cash contributions subject to the limit based on 60% of AGI

(If line 7 is zero, leave lines 9 through 11 blank)

9	Multiply line 8 by 0.6	9	
10	Deductible amount. Enter the smaller of line 7 or line 9.	10	
11	Carryover. Subtract line 10 from line 7.	11	

B Noncash contributions subject to the limit based on 50% of AGI

(If line 6 is zero, leave lines 12 through 15 blank)

12	Multiply line 8 by 0.5	12	
13	Subtract line 10 from line 12	13	
14	Deductible amount. Enter the smaller of line 6 or line 13.	14	
15	Carryover. Subtract line 14 from line 6.	15	

C Contributions (other than capital gain property) subject to limit based on 30% of AGI

(If lines 3 and 4 are both zero, leave lines 16 through 22 blank)

16	Multiply line 8 by 0.5	16	
17	Add lines 5, 6, and 7.	17	
18	Subtract line 17 from line 16	18	
19	Multiply line 8 by 0.3	19	
20	Add lines 3 and 4	20	
21	Deductible amount. Enter the smallest of line 18, 19, or 20	21	
a	Cash portion of deductible amount - for Sch A line 11	a	
b	Non-cash portion of deductible amount - for Sch A line 12.	b	
22	Carryover. Subtract line 21 from line 20	22	

D Contributions of capital gain property subject to limit based on 30% of AGI

(If line 5 is zero, leave lines 23 through 28 blank)

23	Multiply line 8 by 0.5	23	
24	Add lines 6 and 7	24	
25	Subtract line 24 from line 23	25	
26	Multiply line 8 by 0.3	26	
27	Deductible amount. Enter the smallest of line 5, 25, or 26	27	
28	Carryover. Subtract line 27 from line 5.	28	

E Contributions subject to the limit based on 20% of AGI

(If line 2 is zero, leave lines 29 through 37 blank)

29	Multiply line 8 by 0.5	29		
30	Add lines 10, 14, 21, and 27	30		
31	Subtract line 30 from line 29	31		
32	Multiply line 8 by 0.3	32		
33	Subtract line 21 from line 32	33		
34	Subtract line 27 from line 32	34		
35	Multiply line 8 by 0.2	35		
36	Deductible amount. Enter the smallest of line 2, 31, 33, 34, or 35	36		
37	Carryover. Subtract line 36 from line 2	37		

F Qualified contributions subject to limit based on 100% of AGI

(If line 1 is zero, leave lines 38 through 42 blank)

38	Enter the amount from line 8	38		
39	Add lines 10, 14, 21, 27, and 36	39		
40	Subtract line 39 from line 38	40		
41	Deductible amount. Enter the smaller of line 1 or line 40	41		
42	Carryover. Subtract line 41 from line 1	42		

G Deduction for the year

43	Add lines 10, 14, 21, 27, 36 and 41. Enter the total here and include the deductible amounts on Schedule A (Form 1040), line 11 or line 12 whichever is appropriate.	43		
44	Carryover to next year. Add lines 11, 15, 22, 28 and 37	44		

Note: Any amounts in the carryover column are not deductible this year but can be carried over to next year. See Carryovers, later, for more information about how you will use them next year.

Charitable Deduction Limits Worksheet For Carryover Contributions

2021

► Keep for your records

Name(s) Shown on Return Liam J Hughes	Social Security Number 385-21-6981
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Step 1 — Enter your other charitable contributions made during the year.

1	Enter your cash contributions to 100% limit organizations	1	
2	Enter your contributions of capital gain property "for the use of" any qualified organization	2	
3	Enter your other contributions "for the use of" any qualified organization. Don't include any contributions you entered on a previous line	3	
4	Enter your other contributions to qualified organizations that aren't 50% limit organizations. Don't include any contributions you entered on a previous line	4	
5	Enter your contributions of capital gain property to 50% limit organizations deducted at fair market value. Don't include any contributions you entered on a previous line	5	
6	Enter your noncash contributions to 50% limit organizations other than capital gain property you deducted at fair market value. Be sure to include contributions of capital gain property to 50% limit organizations if you reduced the property's fair market value. Don't include any contributions you entered on a previous line	6	
7	Enter your cash contributions to 50% limit organizations. Don't include any contributions you entered on a previous line	7	

Step 2 — Figure your deduction for the year (if any result is zero or less, enter -0-)

8	Enter your adjusted gross income (AGI)	8	29,947.
	Percentage of line 8	Used in Current Year	
a	60% AGI limit to line 9	17,968. Less 0.	a 17,968.
b	50% AGI limit to line 12	14,974. Less 0.	b 14,974.
c	30% AGI limit, Section C to line 19	8,984. Less 0.	c 8,984.
d	30% AGI limit, Section D to line 26	8,984. Less 0.	d 8,984.
e	20% AGI limit to line 35	5,989. Less 0.	e 5,989.

A Cash contributions subject to the limit based on 60% of AGI

(If line 7 is zero, leave lines 9 through 11 blank)

9	Multiply line 8 by 0.6	9	
10	Deductible amount. Enter the smaller of line 7 or line 9	10	
11	Carryover. Subtract line 10 from line 7	11	

B Noncash contributions subject to the limit based on 50% of AGI

(If line 6 is zero, leave lines 12 through 15 blank)

12	Multiply line 8 by 0.5	12	
13	Subtract line 10 from line 12	13	
14	Deductible amount. Enter the smaller of line 6 or line 13	14	
15	Carryover. Subtract line 14 from line 6	15	

C Contributions (other than capital gain property) subject to limit based on 30% of AGI

(If lines 3 and 4 are both zero, leave lines 16 through 22 blank)

16	Multiply line 8 by 0.5	16	
17	Add lines 5, 6, and 7	17	
18	Subtract line 17 from line 16	18	
19	Multiply line 8 by 0.3	19	
20	Add lines 3 and 4	20	
21	Deductible amount. Enter the smallest of line 18, 19, or 20	21	
a	Cash portion of deductible amount - for Sch A line 11	a	
b	Non-cash portion of deductible amount - for Sch A line 12	b	
22	Carryover. Subtract line 21 from line 20	22	

D Contributions of capital gain property subject to limit based on 30% of AGI

(If line 5 is zero, leave lines 23 through 28 blank)

23	Multiply line 8 by 0.5	23	
24	Add lines 6 and 7	24	
25	Subtract line 24 from line 23	25	
26	Multiply line 8 by 0.3	26	
27	Deductible amount. Enter the smallest of line 5, 25, or 26	27	
28	Carryover. Subtract line 27 from line 5	28	

E Contributions subject to the limit based on 20% of AGI

(If line 2 is zero, leave lines 29 through 37 blank)

29	Multiply line 8 by 0.5	29		
30	Add lines 10, 14, 21, and 27	30		
31	Subtract line 30 from line 29	31		
32	Multiply line 8 by 0.3	32		
33	Subtract line 21 from line 32	33		
34	Subtract line 27 from line 32	34		
35	Multiply line 8 by 0.2	35		
36	Deductible amount. Enter the smallest of line 2, 31, 33, 34, or 35	36		
37	Carryover. Subtract line 36 from line 2	37		

F Qualified contributions for certain disaster relief efforts (Not applicable for carryovers)

(If line 1 is zero, leave lines 38 through 42 blank)

38	Enter the amount from line 8	38		
39	Add lines 10, 14, 21, 27, and 36	39		
40	Subtract line 39 from line 38	40		
41	Deductible amount. Enter the smaller of line 1 or line 40	41		
42	Carryover. Subtract line 41 from line 1	42		

G Deduction for the year

43	Add lines 10, 14, 21, 27, 36 and 41. Enter the total here and include the deductible amounts on Schedule A (Form 1040), line 11 or line 12 whichever is appropriate.	43		
44	Carryover to next year. Add lines 11, 15, 22, 28 and 37	44		

Note: Any amounts in the carryover column are not deductible this year but can be carried over to next year. See Carryovers, later, for more information about how you will use them next year.

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Name of Charitable Organization	(a) Total	(b) 60% Limit	(c) 30% Limit	(d) 100% Limit
Totals: _____				

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

	Total	Cash and Other Non-Capital Gain Property				Capital Gain Property	
	(a) Total	(b) 100% Limit	(c) 60% Limit	(d) 50% Limit	(e) 30% Limit	(f) 30% Limit	(g) 20% Limit
1 2021 contributions							
2 2021 contributions allowed							
3 Carryovers from:							
a 2020 tax year		N/A					
b 2019 tax year		N/A					
c 2018 tax year		N/A					
d 2017 tax year		N/A					
e 2016 tax year		N/A					
4 Carryovers allowed in 2021		N/A					
5 Carryovers disallowed in 2021		N/A					
6 Carryovers to 2022:							
a From 2021.							
b From 2020.		N/A					
c From 2019.		N/A					
d From 2018.		N/A					
e From 2017.		N/A					
f From 2016.		N/A					

1	Was the entire interest given for all property donated to all charities?	<input checked="" type="checkbox"/>	Yes	<input type="checkbox"/>	No
2	Were restrictions attached to any charities's right to use or dispose of any property donated to any charity?	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
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?	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
4	Was any charity other than a 60%/50% charity?	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No

Schedule A
Lines 16

Miscellaneous Itemized Deductions Worksheet

2021

► Keep for your records

Name(s) Shown on Return

Liam J Hughes

Social Security Number

385-21-6981

FOR STATE USE ONLY: Employee Business Expenses — Subject to 2% Limitation

1	Deductible expenses from Form 2106, line 10 less deductions for performing artists and armed forces reservists claimed elsewhere	1	
2 a	Qualified Educator Expenses (from Educator Expenses Worksheet)	2a	
b	Educator Expense Deduction (from 1040, line 23)	2b	
c	Excess Educator Expenses (line 2a less line 2b).	2c	
3	Union and professional dues	3	
4	Professional subscriptions	4	
5	Uniforms and protective clothing	5	
6	Job search costs	6	
7	Tax preparation fees	7	
8	Entertainment expenses	8	
9	Other:	9	
10	Combine lines 1 through 9	10	

FOR STATE USE ONLY:
Miscellaneous Expenses — Subject to 2% Limitation

Check the box in investment column if an investment expense

Investment
Expense ↓

11	Depreciation and amortization deductions	<input checked="" type="checkbox"/>	11	
12	Casualty/theft losses of property used in services as an employee		12	
13	REMIC expenses, from Schedule E	<input checked="" type="checkbox"/>	13	
14	Investment expenses related to interest and dividend income	<input checked="" type="checkbox"/>	14	
15	Expenses related to portfolio income, from Schedule(s) K-1	<input checked="" type="checkbox"/>	15	
16	Miscellaneous deductions, from Schedule(s) K-1		16	
17	RESERVED		17	
18	Investment counsel and advisory fees	<input checked="" type="checkbox"/>	18	
19	Certain attorney and accounting fees	<input checked="" type="checkbox"/>	19	
20	Safe deposit box rental fees	<input checked="" type="checkbox"/>	20	
21	IRA custodial fees	<input checked="" type="checkbox"/>	21	
22	Loss incurred from total distribution of all traditional IRAs		22	
23	Loss incurred from total distribution of all Roth IRAs		23	
24	Loss incurred from final distribution of a QTP investment		24	
25	Hobby expense (limited to hobby income)		25	
26	Other:			
a	Prior year government unemployment benefits repaid in 2021		26	
b				
27	Combine lines 11 through 26		27	

FOR FEDERAL AND STATE USE:**Other Miscellaneous Deductions — Not Subject to 2% Limitation**

28	Expenses related to portfolio income, from Schedule(s) K-1	<input checked="" type="checkbox"/>	28	
29	Federal estate tax paid on decedent's income reported on this return		29	
30	Impairment-related expenses of a handicapped employee, from Form 2106		30	
31	Amortizable bond premiums on bonds acquired before 10/23/86		31	
32	Gambling losses		32	
33	Deduction for repayment of amounts under claim of right if over \$3,000		33	
34	Casualty/theft losses of income-producing property		34	
35	Unrecovered investment in annuity		35	
36	Ordinary loss attributable to certain debt instruments		36	
37	Net Qualified Disaster Loss		37	
38	Combine lines 28 through 37 (to Schedule A, line 16)		38	

- Keep for your records

Name(s) Shown on Return Liam J Hughes	Social Security Number 385-21-6981
--	---------------------------------------

Use this worksheet **only** if someone can claim you, or your spouse if filing jointly, as a dependent.

1	Is your earned income* more than \$750? <input type="checkbox"/> Yes. Add \$350 to your earned income. Enter the total <input type="checkbox"/> No. Enter \$1,100		1	
2	Enter the amount shown below for your filing status. • Single or married filing separately — \$12,550 • Married filing jointly — \$25,100 • Head of household — \$18,800		2	12,550.
3	Standard deduction.			
3 a	Enter the smaller of line 1 or line 2. If born after January 1, 1956, and not blind, stop here and enter this amount on Form 1040 or 1040-SR, line 12. Otherwise, go to line 3b		3 a	
3 b	If born before January 2, 1956, or blind, multiply the number claimed on top of page 2 of Form 1040 Wkst by \$1,350 (\$1,700 if single or head of household)		3 b	
3 c	Add lines 3a and 3b. Enter the total here and on Form 1040 or 1040-SR, line 12		3 c	

***Earned income** includes wages, salaries, tips, professional fees, and other compensation received for personal services you performed. It also includes any taxable scholarship or fellowship grant. Generally, your earned income is the total of the amount(s) you reported on Form 1040 or 1040-SR, line 1, and Schedule 1, lines 3 and 6, minus the amount, if any, on Schedule 1, line 14. Earned income, for the purpose of figuring your standard deduction, doesn't include qualified disability trust distributions.

Earned Income Worksheet**2021**

► Keep for your records

Name(s) Shown on Return

Liam J Hughes

Social Security Number

385-21-6981

Part I – Earned Income Credit Worksheet 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 as a statutory employee, enter the amount from line 1 of that Schedule C			
4 Add lines 1e, 2c and 3. To EIC Wks, line 5			

Part II – Form 2441 and Standard Deduction Worksheet Computations

5 Net self-employment earnings (line 4 above)			
6 Wages, salaries, and tips less distributions from nonqualified or section 457 plans, etc	29,947.		29,947.
7 a Taxable employer-provided adoption benefits			
b Foreign earned income exclusion			
8 Add lines 5 through 7b. To Form 2441, lines 18 and 19	29,947.		29,947.
9 a Taxable dependent care benefits			
b Nontaxable combat pay			
10 Add lines 8, 9a & 9b. To Form 2441, lines 4 and 5	29,947.		29,947.
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 5, 6, 7a, 9a and 11 through 13. To Standard Deduction Worksheet	29,947.		29,947.

Part III – IRA Deduction Worksheet Computation

15 Net self-employment income or (loss)			
16 Wages, salaries, tips, etc	29,947.		29,947.
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.	29,947.		29,947.

Part IV – Schedule 8812 and Child Tax Credit Line 14 Worksheet Computations

23 Self-employed, church and statutory employees			
24 Wages, salaries, tips, etc	29,947.		29,947.
25 Nontaxable combat pay			
26 Combine lines 23 through 25. To Schedule 8812, line 6a & Line 14 Wks, line 2.	29,947.		29,947.

► Keep for your records

Name(s) Shown on Return

Liam J Hughes

Social Security Number

385-21-6981

Investment Interest Expense (Form 4952, line 1)

1	Investment interest expense, from Schedule K-1	1	
2	Investment interest expense from royalties	2	
3	Other investment interest expense:	3 a	
a	-----	b	
b	-----	c	
c	-----	d	
d	-----		
4	Total investment interest expense. Add lines 1 through 3.	4	

Gross Income from Property Held for Investment (Form 4952, line 4a)

5	Taxable investment income:		
a	From Schedule B, Interest and Dividend Income	5 a	
b	From Schedules K-1, Partnerships, S Corporations, Estates and Trusts	b	
c	From Form 8814, Parents' Election to Report Child's Interest and Dividends	c	
d	Total	d	
6	Royalty income, from Schedule E	6	
7	Net passive income from publicly traded partnerships	7	
8	Income from nonpassive trade or business without material participation	8	
9	Other investment income:	9 a	
a	-----	b	
b	-----	c	
c	-----	d	
d	-----		
10	Total investment income. Add lines 5d through 9.	10	

Net Capital Gain Income (Form 4952, lines 4d and 4e)

		Regular Tax	Alt Min Tax
11 a	Net gains from Schedule D, line 16	11 a	
b	Less net gains from property not held for investment	b	
c	Net gains from property held for investment.	c	
12 a	Net capital gains from Schedule D, lesser of ln 15 or ln 16.	12 a	
b	Less net capital gains from property not held for investment.	b	
c	Net capital gains from property held for investment.	c	

Investment Expenses (Form 4952, line 5)

13	Royalty expenses	13	
14	Investment expenses reported on schedule K-1 partnership or S-corp	14	
15	Expenses from nonpassive trade or business without material participation	15	
16	Other investment expenses:	16 a	
a	-----	b	
b	-----	c	
c	-----	d	
d	-----		
17	Total investment expenses. Add lines 13 through 17.	17	

Allocation of Investment Interest Expense (Schedule A, line 14)

		Regular Tax	Alt Min Tax
18	Allowed investment interest expense, Form 4952, line 8	18	
19	Less amount deducted on other forms and schedules:	19	
a	Deducted on Schedule E, page 2 for passthru entities	a	
b	Deducted on Schedule E, page 1 for royalties	b	
c	Other amounts deducted on other forms and schedules	c	
d	Total amount deducted on other forms and schedules	d	
20	Investment interest expense.	20	

Form 1040
Line 27

Earned Income Credit Worksheet

2021

► Keep for your records

Name(s) Shown on Return
Liam J Hughes

Social Security Number
385-21-6981

QuickZoom to Schedule EIC ►

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

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

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

1	Enter the amount from Form 1040 line 1 less amounts considered not earned for EIC purposes	1	29,947.
2	Adjustments to line 1 amount:		
a	Income reported as wages and as self-employment income.	2 a	
b	Other income entered as wages that is not considered earned income	b	
c	Distributions from section 457 and other nonqualified plans reported on W-2	c	
3	Subtract lines 2a, 2b and 2c from line 1	3	29,947.
4 a	Taxpayer's nontaxable combat pay election for EIC	4 a	
b	Spouse's nontaxable combat pay election for EIC	b	
c	Total nontaxable combat pay election	4 c	
5	If you were self-employed or used Schedule C as a statutory employee, enter the amount from the Earned Income Worksheet, line 4	5	
6	Medicaid Waiver Payments reported as nontaxable	6	
7	Earned income. Add lines 3, 4, 5, and 6	7	29,947.
8	Enter the credit, from the EIC Table , for the amount on line 7. Be sure to use the correct column for filing status and number of children.	8	0.
	If line 8 is zero, stop . You cannot take the credit. Enter "No" on the dotted line next to Form 1040, line 27.		
9	Enter your AGI from Form 1040, line 11	9	
10	If you have:		
	• No qualifying children, is the amount on line 9 less than \$11,650 (\$17,600 if married filing jointly)?		
	• 1 or more qualifying children, is the amount on line 9 less than \$19,550 (\$25,500 if married filing jointly)?		
	<input checked="" type="checkbox"/> Yes. Go to line 11 now.		
	<input type="checkbox"/> No. Enter the credit, from the EIC Table , for the amount on line 9. Be sure to use the correct column for filing status and number of children	10	
11	Earned income credit.		
	• If 'Yes' on line 10, enter the amount from line 8		
	• If 'No' on line 10, enter the smaller of line 8 or line 10	11	

Enter line 11 amount on Form 1040, line 27.

If one or more of the boxes below are checked, the earned income credit is not allowed.

- 1 The total taxable earned income (line 7 above) is equal to or more than:
- | | |
|--|---|
| <input checked="checked" type="checkbox"/> | \$21,430 (\$27,380 if married filing jointly) without a qualifying child. |
| <input type="checkbox"/> | \$42,158 (\$48,108 if married filing jointly) with one qualifying child. |
| <input type="checkbox"/> | \$47,915 (\$53,865 if married filing jointly) with two qualifying children. |
| <input type="checkbox"/> | \$51,464 (\$57,414 if married filing jointly) with more than two qualifying children. |
- 2 The Adjusted Gross Income (line 9 above) is equal to or more than:
- | | |
|--|---|
| <input checked="checked" type="checkbox"/> | \$21,430 (\$27,380 if married filing jointly) without a qualifying child. |
| <input type="checkbox"/> | \$42,158 (\$48,108 if married filing jointly) with one qualifying child. |
| <input type="checkbox"/> | \$47,915 (\$53,865 if married filing jointly) with two qualifying children. |
| <input type="checkbox"/> | \$51,464 (\$57,414 if married filing jointly) with more than two qualifying children. |
- 3 ☐ Investment income is more than \$10,000.
(Investment Income Smart Worksheet, item H above)
- 4 ☐ **Without a qualifying child** - The married filing separate filing status is checked.
With a qualifying child - The married filing separate filing status is checked and taxpayer/spouse had the same principal residence for the last 6 months of 2021, and they did not live apart on 12/31 or had no written separation agreement or decree of separate maintenance.
(Information Worksheet, Part II)
- 5 ☐ Taxpayer (or spouse if filing joint) is a qualifying child of another person.
(Information Worksheet, Part IV)
- 6 ☐ Without a qualifying child, and your (or your spouse's, if married filing jointly) main home is in the U.S. less than half the year.
(Information Worksheet, Part IV)
- 7 ☐ Without a qualifying child, taxpayer (and spouse if filing joint) are under the minimum age to qualify for EIC.
(Information Worksheet, Part I)
- 8 ☐ Without a qualifying child, and taxpayer (or spouse if filing joint) is eligible to be claimed as a dependent on someone else's return.
(Information Worksheet, Part I)
- 9 ☐ Social Security Number is invalid for EIC purposes, for taxpayer, (or spouse, if married filing joint).
(Information Worksheet, Part I)
- 10 ☐ Have qualifying children, but all are qualifying children of another person.
(Information Worksheet, Part III)
- 11 ☐ Disallowed by IRS to claim Earned Income Credit in 2021.
(Information Worksheet, Part IV)
- 12 ☐ Filing Form 2555, Foreign Earned Income.
- 13 ☐ Not a citizen or resident alien for the entire year, claiming dual status.
(Information Worksheet, Part VI)
- 14 ☐ Head of household filing status and lived with nonresident alien spouse during the last six months of the year.
(Information Worksheet, Part IV)

Compliance and Due Diligence Information

1 Is this how long your dependents lived with you in the U.S in 2021?

☐ **Yes**, all of the above is correct.

☐ **No**, I'll go back and review my dependent information.

The IRS may ask you for documents to prove you lived with anyone you're claiming for the Earned Income Credit.

Is this where you lived with your dependents the longest in 2021?

2 ☐ **Yes**, my dependents lived with me at this address.

☐ **No**, I'd like to add an additional address where I lived with my dependents. Use the Interview to add an additional address where you lived with your dependents the longest in 2021.

Compliance and Due Diligence Indicator	<input checked="" type="checkbox"/>
Disqualified from Earned Income Credit.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

Potential qualifying child count	▶	<u>0</u>
Non dependent potential qualifying child count	▶	<u>0</u>
Qualifying child count (max 3)	▶	<u>0</u>

Schedule SE Adjustments Worksheet

2021

► Keep for your records

Name(s) Shown on Return Liam J Hughes		Social Security Number 385-21-6981	
	(a) Taxpayer	(b) Spouse	
QuickZoom to the Long Schedule SE ►	<input type="checkbox"/>	<input type="checkbox"/>	
A Approved Form 4029. Exempt from SE tax on all income	<input type="checkbox"/>	<input type="checkbox"/>	
B Chapter 11 bankruptcy net profit or loss for Schedule SE, line 3 . . .			
C QuickZoom to the Explanation statement for any adjustment to SE income/loss shown on a partnership K-1. (See Help).			
Part I Farm Profit or (Loss) Schedule SE, line 1			
1 Total Schedules F			
2 Farm partnerships, Schedules K-1			
3 Other SE farm profit or (loss) (See Help)			
4 Less SE exempt farm profit or (loss) (See Help)			
5 Total for Schedule SE, line 1			
6 Conservation Reserve Program payments not subject to self-employment tax reported on:			
a Schedule F, line 4b			
b Schedule K-1 (Form 1065), box 20, code AH			
c Total CRP payments not subject to SE tax			
Part II Nonfarm Profit or (Loss) Schedule SE, line 2			
1 a Total Schedules C			
b Less SE exempt Schedules C (approved Form 4361)			
2 Nonfarm partnerships, Schedules K-1			
3 Forms 6781			
4 Other SE income reported as income on Form 1040, line 7			
5 a Clergy Form W-2 wages			
b Clergy housing allowance			
c Less clergy business deductions			
d QuickZoom to the Explanation statement for entry on line 5c.			
6 Other SE nonfarm profit or (loss) (See Help)			
7 Less other SE exempt nonfarm profit or (loss) (See Help)			
8 Total for Schedule SE, line 2			
9 Exempt Notary Public income for Schedule SE, line 3 (See Help). . .			
Part III Farm Optional Method Schedule SE, page 2, Part II			
1 Use Farm Optional Method	<input type="checkbox"/>	<input type="checkbox"/>	
2 Gross farm income from Schedules F			
3 Gross farming or fishing income from partnership Schedules K-1 . .			
4 Other gross farming or fishing self-employment income			
5 Total gross income for Farm Optional Method			
Part IV Nonfarm Optional Method Schedule SE, page 2, Part II			
1 Use Nonfarm Optional Method (Must have had net SE earnings of \$400 or more in 2 of prior 3 years and used the Nonfarm Optional Method less than 5 times)	<input type="checkbox"/>	<input type="checkbox"/>	
2 Gross nonfarm income from Schedules C			
3 Gross nonfarm income from partnership Schedules K-1			
4 Other gross nonfarm self-employment income			
5 Total gross income for Nonfarm Optional Method			

Name(s) Shown on Return
Liam J HughesSocial Security Number
385-21-6981**Part I Information from Form(s) 1098-E, Student Loan Interest Statement**

(a) Lender's name	(b) Borrower (Taxpayer, Spouse)	(c) Borrower's social security number	(d) Prior Year Student Loan Interest	(e) Student loan interest (Box 1)
Additional fields for use by Step-by-Step and Import only (See help)				
Total student loan interest.				
Less total student loan interest used for QTP (Section 529 plan)				
Total adjusted student loan interest				

Part II Computation of Student Loan Interest Deduction

1	Enter the total interest you paid in 2021 on qualified student loans (see Form 1040 instructions).	1	
2	Enter the smaller of line 1 or \$2,500.	2	
3	Modified AGI Note: If line 3 is \$85,000 or more if single, head of household, or qualifying widow(er) or \$170,000 or more if married filing jointly, stop here . You cannot take the deduction.	3	29,947.
4	Enter: \$70,000 if single, head of household, or qualifying widow(er); \$140,000 if married filing jointly.	4	70,000.
5	Subtract line 4 from line 3. If zero or less, enter -0- here and on line 7, skip line 6, and go on to line 8	5	0.
6	Divide line 5 by \$15,000 or \$30,000 if married filing jointly. Enter the result as a decimal (rounded to at least three places)	6	0.0000
7	Multiply line 2 by line 6	7	
8	Student loan interest deduction. Subtract line 7 from line 2. Enter the result here and on Form 1040, Sch 1, line 21. Do not include this amount in figuring any other deduction on your return (such as on Schedule A, C, E, etc.)	8	

* **Modified AGI** is the amount from Form 1040, line 9, increased by any excludable income from Puerto Rico, or of bona fide residents of American Samoa, Guam, or the Commonwealth of the Northern Mariana Islands, and foreign earned income/housing exclusion, and decreased by amounts on not Schedule 1 (Form 1040), lines 11 through 20, 23, 25, and any write-in amount next to line 26, including the foreign housing deduction on line A of the Other Adjustments to Income Smart Worksheet.

Education Tuition and Fees Summary

2021

► Keep for your records

Name(s) Shown on Return

Liam J Hughes

Your Social Security No.

385-21-6981

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 if manual	(e) Elected Credit if automatic
Liam J	610.	Amer Opp Cr . . . ► <input type="checkbox"/> <input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Hughes	610.	Lifetime Cr . . . ► <input checked="" type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
385-21-6981	610.	Reserved . . . ► <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		Total Qualified Expenses		
		Amer Opp Cr . . . ► <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		Lifetime Cr . . . ► <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		Reserved . . . ► <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		Total Qualified Expenses		
		Amer Opp Cr . . . ► <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		Lifetime Cr . . . ► <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		Reserved . . . ► <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		Total Qualified Expenses		
Total qualified expenses	610. 610.	American Opportunity Credit Lifetime Learning Credit		

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 choices calculated in Part I, column (e) above ► ☒
- or
- 3 **Manual** - Check to use the choices you entered in Part I, column (d) above ► ☐

Part III - Summary of Credits

Reserved		
1	Reserved	1 <input type="text"/>
2	Reserved	2 <input type="text"/>
3	Reserved	3 <input type="text"/>
4	Reserved	4 <input type="text"/>

American Opportunity, Lifetime Learning Credits Summary		
1	Tentative American Opportunity Credit	1 <input type="text"/>
2	Tentative Lifetime Learning Credit	2 <input type="text" value="122."/>
3	Total Education Credits (after limitations)	3 <input type="text" value="122."/>

Schedule D Tax Worksheet
as refigured for the
Alternative Minimum Tax

2021

► Keep for your records

Name(s) Shown on Return Liam J Hughes		Social Security Number 385-21-6981	
	(a) Before Allocation of Capital Gain Excess *	(b) Allocation of Capital Gain Excess *	(c) After Allocation of Capital Gain Excess
1 Not applicable			
2 Enter your total qualified dividends as refigured for the Alternative Minimum Tax (AMT):			
a Total qualified dividends.			
b Adjustment from Schedules K-1			
c Other adjustments to qualified dividends			
d Total. Combine lines 2a, 2b, and 2c.		0.	0.
3 Enter the amount from Form 4952 for AMT, line 4g.			
4 Enter the amount from Form 4952 for AMT, line 4e.			
5 Subtract line 4 from line 3. If zero or less, enter -0-	0.		0.
6 Subtract line 5 from line 2. If zero or less, enter -0-	0.		0.
7 Net long-term capital gain:			
a Enter the gain from line 15 of Schedule D as refigured for the AMT	0.		
b Enter the gain from line 16 of Schedule D as refigured for the AMT	0.		
c Enter the smaller of line 7a or line 7b	0.		0.
8 Enter the smaller of line 3 or line 4			
9 Subtract line 8 from line 7c. If zero or less, enter -0-	0.	0.	0.
10 Add lines 6 and 9	0.		0.
A Enter the amount from Form 6251, line 6.	0.		
B Capital gain excess. Subtract line A from line 10. *	0.		
11 Total 28% rate and unrecaptured section 1250 gain:			
a Enter the gain from line 18 of Schedule D as refigured for the AMT	0.		
b Enter the gain from line 19 of Schedule D as refigured for the AMT			
c Add lines 11a and 11b.			0.
12 Enter the smaller of line 9 or line 11c			0.
13 Subtract line 12 from line 10. Also enter this amount on Form 6251, line 13.			0.

* Capital gain excess applies only if filing Form 2555, Foreign Earned Income.

► Keep for your records

Name(s) Shown on Return

Liam J Hughes

Social Security Number

385-21-6981

Taxable Income – Line 1

1	Enter the amount from Form 1040 or 1040-SR, line 15, if more than zero. If Form 1040 or 1040-SR, line 15, is zero, subtract line 14 of Form 1040 or 1040-SR from line 11 of Form 1040 or 1040-SR and enter the result here. (If less than zero, enter as a negative amount.)	1	17,347.
2	Additions to income	2	
3	Add lines 1 and 2	3	17,347.
4	Subtractions from income	4	
5	Subtract line 4 from line 3. Enter on Form 6251, line 1	5	17,347.

Taxes – Line 2a

1	Generation skipping transfer taxes included on Schedule A, line 6	1	
---	---	---	--

Refund of Taxes – Line 2b

1	Taxable refund of state and local income tax	1	0.
2	Amount and description of any refund of state and local personal property taxes, foreign income or real property taxes.	2	
3	Total tax refund adjustment. Enter on Form 6251, line 2b.	3	0.

Alternative Tax Net Operating Loss Deduction (ATNOLD) – Line 2f

1	Alternative minimum taxable income (AMTI) without ATNOLD	1	29,897.
2	Enter adjustments	2	
3	Adjustment for domestic production activities deduction	3	
4	Adjusted AMTI without ATNOLD. Add lines 1-3	4	29,897.
5	ATNOLD limitation. Multiply line 4 by 90%.	5	26,907.
6	Enter ATNOL carried to 2020 from other year(s)	6	
7	Enter ATNOL included above attributable to qualified disaster losses	7	
8	ATNOL above not attributable to qualified disaster losses. Line 6 minus 7	8	
9	ATNOL deduction other than qualified disaster losses. Lesser of line 5 or 8	9	
10	ATNOL Disaster Deduction. Lesser of line 7 or (line 4 minus line 9)	10	
11	ATNOLD. Add lines 9 and 10. Enter on Form 6251, line 2f, as neg	11	

Incentive Stock Options – Line 2i

1	Incentive stock options adjustment from Schedule K-1 worksheets	1	
2	Incentive stock options from Employer Stock Transaction Worksheets	2	
3	Incentive stock options from Exercise of Stock Options Worksheets	3	
4	Other incentive stock options	4	
5	Total incentive stock options. Enter on Form 6251, line 2i.	5	

Alternative Minimum Taxable Income – Line 4

If married filing separately and Form 6251, line 4, is more than \$752,800:		
1	Alternative minimum taxable income, Form 6251	1
2	Threshold amount	2
3	Subtract line 2 from line 1	3
4	Multiply line 3 by 25% (.25)	4
5	Smaller of line 4 or \$57,300	5
6	Add line 1 and line 5. Enter on Form 6251, line 4	6

Exemption – Line 5

1	Enter \$73,600 if single or head of household, \$114,600 if married filing jointly or qualifying widow(er), \$57,300 if married filing separately	1	73,600.
2	Enter your alternative minimum taxable income from Form 6251, line 4	2	29,897.
3	Enter \$523,600 if single or head of household, \$1,047,200 if married filing jointly or qualifying widow(er), \$523,600 if married filing separately	3	523,600.
4	Subtract line 3 from line 2. If zero or less, enter -0-	4	0.
5	Multiply line 4 by 25% (.25)	5	0.
6	Subtract line 5 from line 1. If zero or less, enter -0-. Enter on 6251, line 5	6	73,600.

- Keep for your records

Name(s) Shown on Return		Social Security Number
Liam J Hughes		385-21-6981
1	Enter the amount from Form 6251, line 6	1
2 a	Enter the amount from your (and your spouse's if filing jointly) Form 2555, lines 45 and 50.	2a
b	Enter the total amount of any itemized deductions or exclusions you couldn't claim because they are related to excluded income	2b
c	Subtract line 2b from line 2a. If zero or less, enter 0	2c
3	Add line 1 and line 2c	3
4	Tax on the amount on line 3. • If you reported capital gain distributions directly on Form 1040 or 1040-SR, line 7; or you reported qualified dividends on Form 1040 or 1040-SR, line 3a; or you had a gain on both lines 15 and 16 of Schedule D (Form 1040 or 1040-SR) (as refigured for the AMT, if necessary), enter the amount from line 3 of this worksheet on Form 6251, line 12. Complete the rest of Part III of Form 6251. However, before completing Part III, see <i>Form 2555</i> , later, to see if you must complete Part III with certain modifications. Then enter the amount from Form 6251, line 40, here. • All Others: If line 3 is \$199,900 or less (\$99,950 or less if married filing separately), multiply line 3 by 26% (0.26). Otherwise, multiply line 3 by 28% (0.28) and subtract \$3,998 (\$1,999 if married filing separately) from the result.	4
5	Tax on amount on line 2c. If line 2c is \$199,900 or less (\$99,950 or less if married filing separately), multiply line 2c by 26% (0.26). Otherwise, multiply line 2c by 28% (0.28) and subtract \$3,998 (\$1,999 if married filing separately) from the result	5
6	Subtract line 5 from line 4. Enter the result here and on Form 6251, line 7.	6

Federal Carryover Worksheet

2021

► Keep for your records

Name(s) Shown on Return Liam J Hughes	Social Security Number 385-21-6981
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2020 State and Local Income Tax Information

(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
MI			913.		202.	
Totals . .			913.		202.	

2020 State Extension Information

(a) State	(b) Paid With Extension

2020 Locality Extension Information

(a) Locality	(b) Paid With Extension

2020 State Estimates Information

(a) State	(c) Estimates Paid After 12/31

2020 Locality Estimates Information

(a) Locality	(c) Estimates Paid After 12/31

2020 State Taxes Due Information

(a) State	(e) Paid With Return

2020 Locality Taxes Due Information

(a) Locality	(e) Paid With Return

2020 State Refund Applied Information

(a) State	(g) Applied Amount

2020 Locality Refund Applied Information

(a) Locality	(g) Applied Amount

2020 State Tax Refund Information

(a) State	(d) Total Withheld/Pmts	(f) Total Overpayment
MI	913.	202.

2020 Locality Tax Refund Information

(a) Locality	(d) Total Withheld/Pmts	(f) Total Overpayment

Liam J Hughes

385-21-6981

Other Tax and Income Information			2020	2021
1	Filing status	1	1 Single	1 Single
2	Number of exemptions for blind or over 65 (0 - 4)	2		
3	Itemized deductions	3	913.	1,273.
4	Check box if required to itemize deductions	4	<input type="checkbox"/>	<input type="checkbox"/>
5	Adjusted gross income	5	21,487.	29,947.
6	Tax liability for Form 2210 or Form 2210-F	6	0.	358.
7	Alternative minimum tax	7		
8 a	Federal overpayment applied to next year estimated tax	8 a		
b	Federal extension payment for 2020 return	b		

QuickZoom to the IRA Information Worksheet for IRA information ►

Excess Contributions			2020	2021
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

Loss and Expense Carryovers			2020	2021
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:	16 a		
	a 2021	a		
	b 2020	b		
	c 2019	c		
	d 2018	d		
	e 2017	e		
	f 2016	f		
17	AMT Nonrecap'd net Sec 1231 losses from:	17 a		
	a 2021	a		
	b 2020	b		
	c 2019	c		
	d 2018	d		
	e 2017	e		
	f 2016	f		

Credit Carryovers				2020	2021
18	General business credit			18	
19	Adoption credit from:	a	2021	19 a	
		b	2020	b	
		c	2019	c	
		d	2018	d	
		e	2017	e	
		f	2016	f	
20	Mortgage interest credit from:	a	2021	20 a	
		b	2020	b	
		c	2019	c	
		d	2018	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				2020	2021
24	Section 179 expense deduction disallowed			24	
25	Excess	a	Taxpayer (Form 2555, line 46)	25 a	
	foreign	b	Taxpayer (Form 2555, line 48)	b	
	housing	c	Spouse (Form 2555, line 46)	c	
	deduction:	d	Spouse (Form 2555, line 48)	d	

Charitable Contribution Carryovers

26	2020 Carryover of charitable contributions from:	Other Property		Capital Gain		Cash
		(a) 50%	(b) 30%	(c) 30%	(d) 20%	(e) 60/100%
a	2020					
b	2019					
c	2018					
d	2017					
e	2016					
27	2021 Carryover of charitable contributions from:	Other Property		Capital Gain		Cash
		(a) 50%	(b) 30%	(c) 30%	(d) 20%	(e) 60/100%
a	2021					
b	2020					
c	2019					
d	2018					
e	2017					

28 Amount overpaid less earned income credit 1,993.

Qualified Business Income Deduction (Section 199A) carryovers				2020	2021
29	Qualified business loss carryforward			29	
30	Qualified PTP loss carryforward			30	
31	Applicable percentage	2018	31 a		
		2019	b		
		2020	b		

2020 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

Form 8582
Line 7

Modified Adjusted Gross Income Worksheet

2021

► Keep for your records

Name(s) Shown on Return
Liam J Hughes

Social Security Number
385-21-6981

Description	Amount
Income	
Wages	29,947.
Interest income before Series EE bond exclusion	
Dividend income	
Tax refund	0.
Alimony received	
Nonpassive business income or loss	
Royalty and nonpassive rental activities income or loss	
Nonpassive partnership income or loss	
Nonpassive S corporation income or loss	
Nonpassive farm rental income or loss	
Nonpassive farm income or loss	
Nonpassive estate and trust income or loss	
Real estate mortgage investment conduits	
Business gains and losses from nonpassive activities	
Capital gains and losses	
Taxable IRA distributions	
Taxable pension distributions	
Unemployment compensation	
Other income	
Total income	29,947.
Adjustments	
Educator expenses	
Certain business expenses of reservists, performing artists, and government officials	
Health savings account deduction	
Moving expenses	
Self-employed SEP, SIMPLE, and qualified plans	
Self-employed health insurance deduction	
Penalty on early withdrawals of savings	
Alimony paid	
Other adjustments	
Total adjustments	
Modified adjusted gross income	29,947.

Two-Year Comparison

2021

Name(s) Shown on Return Liam J Hughes			Social Security Number	
Income	2020	2021	Difference	%
Wages, salaries, tips, etc	21,487.	29,947.	8,460.	39.37
Interest and dividend income				
State tax refund	0.	0.	0.	
Business income (loss)				
Capital and other gains (losses)				
IRA distributions				
Pensions and annuities				
Rents and royalties				
Partnerships, S Corps, etc				
Farm income (loss)				
Social security benefits				
Income other than the above				
Total Income	21,487.	29,947.	8,460.	39.37
Adjustments to Income				
Adjusted Gross Income	21,487.	29,947.	8,460.	39.37
Itemized Deductions				
Medical and dental				
Income or sales tax	913.	1,273.	360.	39.43
Real estate taxes				
Personal property and other taxes				
Interest paid				
Gifts to charity				
Casualty and theft losses				
Miscellaneous				
Total Itemized Deductions	913.	1,273.	360.	39.43
Standard or Itemized Deduction	12,400.	12,600.	200.	1.61
Qualified Business Income Deduction				
Taxable Income	9,087.	17,347.	8,260.	90.90
Income tax	908.	1,880.	972.	107.05
Additional income taxes				
Alternative minimum tax				
Total Income Taxes	908.	1,880.	972.	107.05
Nonbusiness credits	908.	122.	-786.	-86.56
Business credits				
Total Credits	908.	122.	-786.	-86.56
Self-employment tax				
Other taxes				
Total Tax After Credits	0.	1,758.	1,758.	
Withholding	993.	1,929.	936.	94.26
Estimated and extension payments				
Earned income credit				
Additional child tax credit				
Other payments	1,000.	1,400.	400.	40.00
Total Payments	1,993.	3,329.	1,336.	67.03
Form 2210 penalty				
Applied to next year's estimated tax				
Refund	1,993.	1,571.	-422.	-21.17
Balance Due				

Current year effective tax rate 5.87 %

Tax Summary
► Keep for your records

2021

Name (s)

Liam J Hughes

Total income	29,947.
Adjustments to income	
Adjusted gross income	29,947.
Itemized/standard deduction	12,600.
Qualified business income deduction	
Taxable income	17,347.
Tentative tax	1,880.
Additional taxes	
Alternative minimum tax	
Total credits	122.
Other taxes	
Total tax	1,758.
Total payments	3,329.
Estimated tax penalty	
Amount Overpaid	1,571.
Refund	1,571.
Amount Applied to Estimate	
Balance due	0.

Recovery Rebate Credit Worksheet

2021

Name(s) Shown on Return
Liam J Hughes

Social Security No.
385-21-6981

This worksheet is used to compute the allowed recovery rebate credit for line 30 of Form 1040 or 1040-SR after accounting for any economic stimulus payment previously received.

<p>1 Can you be claimed as a dependent on another person's 2021 return? <input checked="" type="checkbox"/> No. Go to line 2 <input type="checkbox"/> Yes. Stop. You can't take the credit. Don't complete the rest of this worksheet</p> <p>2 Does your 2021 return include a social security number that was issued on or before the due date of your 2021 return (including extensions) for you and, if filing a joint return, your spouse? <input checked="" type="checkbox"/> Yes. Go to line 6 <input type="checkbox"/> No. If you are filing a joint return, go to line 3. If you aren't filing a joint return, go to line 5.</p> <p>3 Was at least one of you a member of the U.S. Armed Forces at any time during 2020, and does at least one of you have a social security number that was issued on or before the due date of your 2021 return (including extensions)? <input type="checkbox"/> Yes. Your credit is not limited. Go to line 6. <input type="checkbox"/> No. Go to line 4.</p> <p>4 Does one of you have a social security number that was issued on or before the due date of your 2021 return (including extensions)? <input type="checkbox"/> Yes. Your credit is limited. Go to line 6. <input type="checkbox"/> No. Go to line 5</p> <p>5 Do you have any dependents listed in the Dependents section on page 1 of Form 1040 or 1040-SR for whom you entered a social security number that was issued on or before the due date of your 2021 return (including extensions) or an adoption taxpayer identification number? <input type="checkbox"/> Yes. Enter 0 on line 6 and go to line 7. <input type="checkbox"/> No. Stop. You can't take the credit. Don't complete the rest of this worksheet and don't enter any amount on Form 1040, line 30.</p> <p>6 Enter: • \$1,400 if single, head of household, married filing separately, qualifying widow(er). • \$1,400 if married filing jointly and you answered "Yes" to question 4, or • \$2,800 if married filing jointly and you answered "Yes" to question 2 or 3</p> <p>7 Multiply \$1,400 by the number of dependents listed in the Dependents section on page 1 of Form 1040 or 1040-SR for whom you entered a social security number that was issued on or before the due date of your 2021 return (including identification number</p> <p>8 Add lines 6 and 7</p> <p>9 Is the amount on line 11 of Form 1040 or 1040-SR more than the amount shown below for your filing status? • Single or married filing separately-\$75,000 • Married filing jointly or qualifying widow(er)-\$150,000 • Head of household-\$112,500 <input type="checkbox"/> Yes. Enter the amount from line 11 of Form 1040 or 1040-SR and go to line 10 <input checked="" type="checkbox"/> No. Enter the amount from line 8 on line 12 and skip lines 10 and 11</p> <p>10 Is line 9 more than the amount shown below for your filing status? • Single or married filing separately-\$80,000 • Married filing jointly or qualifying widow(er)-\$160,000 • Head of household-\$120,000 <input type="checkbox"/> Yes. Stop. You can't take the credit. Don't complete the rest of this worksheet and don't enter any amount on Form 1040, line 30. <input type="checkbox"/> No. Subtract line 9 from the amount shown above for your filing status.</p> <p>11 Divide line 10 by the amount shown below for your filing status. Enter the result as a decimal (rounded to at least 2 places). • Single or married filing separately-\$5,000 • Married filing jointly or qualifying widow(er)-\$10,000 • Head of household-\$7,500</p> <p>12 Multiply line 8 by line 11.</p> <p>13 Enter the amount, if any, of EIP 3 that was issued to you. If filing a joint return, include the amount, if any, of your spouse's EIP 3. You may refer to Notice 1444-C or your tax account information at IRS.gov/Account for the amount to enter here</p> <p>14 Recovery rebate credit. Subtract line 13 from line 12. If zero or less, enter -0-. If line 13 is more than line 12, you don't have to pay back the difference. Enter the result here and, if more than zero, on line 30 of Form 1040 or 1040-SR.</p>	<p>6</p> <p>7</p> <p>8</p> <p>9</p> <p>10</p> <p>11</p> <p>12</p> <p>13</p> <p>14</p>	<p>1,400.</p> <p>1,400.</p> <p>1,400.</p> <p></p> <p></p> <p></p> <p>1,400.</p> <p>0.</p> <p>1,400.</p>
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Compare to U. S. Averages

► Keep for your records

2021

Name(s) Shown on Return Liam J Hughes	Social Security No 385-21-6981
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Your 2021 adjusted gross income (AGI) 29,947.
National adjusted gross income range used below from 15,000. to 29,999.

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	29,947.	22,825.
Taxable interest		756.
Tax-exempt interest		4,071.
Dividends		2,558.
Business net income less loss		13,888.
Net capital gain		3,999.
Net capital loss		2,312.
Taxable IRAs pensions and annuities		9,052.
Rent and royalty net income less loss		6,967.
Partnership and S corporation net income less loss		12,294.
Taxable social security benefits		2,658.
Medical and dental expenses deduction		9,735.
Taxes paid deduction	1,273.	3,656.
Interest paid deduction		6,881.
Charitable contributions deduction		2,636.
Total itemized deductions	1,273.	17,031.
Child care credit		444.
Education tax credits	122.	788.
Child tax credit		489.
Retirement savings contributions credit		184.
Earned income credit		4,092.
Other Information	Actual Per Return	National Average
Adjusted gross income	29,947.	23,450.
Taxable income	17,347.	10,016.
Income tax	1,880.	1,233.
Alternative minimum tax		2,149.
Total tax liability	1,758.	1,439.

Santa Barbara Tax Products Group, LLC, a division of Green Dot Corporation, a Delaware corporation, and Green Dot Bank Refund Processing Service Agreement ("Agreement")Name: Liam J HughesSocial Security No.: 385-21-6981

This Agreement contains important terms, conditions and disclosures about the processing of your refund(s) (the "Refund Processing Service" or "RPS") by Santa Barbara Tax Products Group, LLC, a division of Green Dot Corporation, a Delaware corporation, ("Processor"), a third party processor using banking services of Green Dot Bank ("Bank"). Read this Agreement carefully before accepting its terms and conditions, and print a copy and/or retain this information electronically for future reference. As used in this Agreement, the words "you" and "your" refer to the applicant or both the applicant and joint applicant if the 2021 federal income tax return(s) is a joint return (individually and collectively, "Applicant"). The words "we," "us" and "our" refer to Bank and Processor.

1. NOTICE: No Requirement To Use the Refund Processing Service In Order To File Electronically.

YOU UNDERSTAND THAT A REFUND PROCESSING FEE OF \$39.00 ("REFUND PROCESSING FEE") IS CHARGED BY PROCESSOR TO ESTABLISH A TEMPORARY ACCOUNT TO RECEIVE YOUR FEDERAL TAX REFUND(S), TO PROCESS IT, TO DEDUCT YOUR TURBOTAX FEES, AND OTHER AUTHORIZED FEES FROM THAT ACCOUNT, AND TO FORWARD FUNDS TO YOU. THE REFUND PROCESSING FEE IS NOT A LOAN; IT IS DUE TO PROCESSOR WHETHER OR NOT THE FEDERAL TAX REFUND(S) OCCURS BUT PROCESSOR WILL NOT PURSUE COLLECTION OF THE REFUND PROCESSING FEE IF YOUR FEDERAL TAX REFUND(S) DOES NOT OCCUR. THIS FEE IS COLLECTED ONLY AT THE TIME THE REFUND(S) OCCURS. YOU CAN AVOID THIS FEE AND NOT USE THE REFUND PROCESSING SERVICE BY INSTEAD PAYING THE APPLICABLE TURBOTAX FEES TO INTUIT INC. BY CREDIT OR DEBIT CARD AT THE TIME YOU FILE YOUR 2021 FEDERAL INCOME TAX RETURN(S) AND ELECTING TO HAVE YOUR REFUND(S) DIRECTLY DEPOSITED IN YOUR OWN BANK ACCOUNT OR MAILED TO YOU. IF YOU DO USE THE REFUND PROCESSING SERVICE, YOU CAN EXPECT TO RECEIVE THE PROCEEDS FROM YOUR FEDERAL TAX REFUND(S) WITHIN 21 DAYS FROM WHEN THE INTERNAL REVENUE SERVICE ("IRS") ACCEPTS YOUR RETURN(S) UNLESS THERE ARE PROCESSING DELAYS (OR UNLESS YOUR RETURN(S) CONTAINS EARNED INCOME TAX CREDIT OR ADDITIONAL CHILD TAX CREDIT, IN WHICH CASE THE IRS WILL ISSUE YOUR REFUND(S) NO EARLIER THAN FEBRUARY 15, 2022). THE REFUND PROCESSING SERVICE WILL NEITHER SPEED UP NOR DELAY YOUR FEDERAL TAX REFUND(S). THE COST OF PREPARING YOUR TAX RETURN(S) IS NOT ANY MORE OR LESS IF YOU PURCHASE THE REFUND PROCESSING SERVICE.

2. Authorization to Release Personal Information. You authorize the IRS to disclose any information to Bank and Processor related to the funding of your 2021 federal tax refund(s). You also authorize Intuit Inc., as the transmitter of your electronically filed tax return(s), Bank and Processor to disclose to each other certain information about you and your tax return(s) for the purpose of providing the services contemplated under this Agreement. You also represent that any authorizations you have made in this Section 2 have also been obtained from and are made with respect to your spouse, if this is a jointly filed return. Please see the Privacy Policy at the end of this Agreement describing how Bank may use or share your personal information.

3. Summary of Terms

Expected Federal Refund	\$ 1,571.00
Less Processor Refund Processing Fee	\$ 39.00
Less TurboTax Fees	\$ 108.00
Less Fees for Additional Products and Services Purchased	\$
Expected Proceeds*	\$ 1,424.00

* These amounts are itemized. This is only an estimate. The amount will be reduced by any applicable sales taxes, and if applicable, a Return Item Fee and an Account Research and Processing Fee paid to Processor as set forth in Sections 4, 6 and 7 below.

4. Temporary Deposit Account Authorization. You hereby authorize Bank to establish a temporary deposit account ("Deposit Account") for the purpose of receiving your tax year 2021 federal tax refund(s) from the IRS. Bank or Processor must receive an acknowledgement from the IRS that your return(s) has been electronically filed and accepted for processing before the Deposit Account can be opened. You authorize Processor to deduct from your Deposit Account the following amounts: (i) the Refund Processing Fee; (ii) the fees and charges related to the preparation, processing and transmission of your tax return(s) ("TurboTax Fees"); and (iii) fees for Additional Products and Services Purchased, plus applicable taxes. You also authorize Processor

to deduct thirty dollars (\$30.00) as a returned item processing fee (the "Return Item Fee") from your Deposit Account for the additional processing required in the event that your deposit is returned or cannot be delivered as directed in Section 7 below. A fee of \$30.00 (the "Account Research and Processing Fee") may be charged if we are required to provide additional processing to return the funds to the IRS. These fees will be deducted from the Deposit Account and will be retained by Processor. You authorize Processor to disburse the balance of the Deposit Account to you after making all authorized deductions or payments. If the Deposit Account does not have sufficient funds to pay the TurboTax Fees and the fees for Additional Products and Services Purchased as set forth in Section 3, and any sales tax, or if your refund proceeds are delayed (a) you authorize Processor to automatically deduct such fees (or any portion thereof) via ACH, electronic check, or wire transfer directly from the account into which you authorized Processor to deposit your expected tax refund proceeds as set forth in Section 7, and (b) if you made alternative arrangements with TurboTax for payment of such fees, those arrangements will be attempted prior to any automatic deduction. To make alternative payment arrangements or revoke your consent to automatic deduction, you must contact Intuit Inc. according to the instructions on the notices e-mailed to you by Intuit Inc. regarding outstanding amounts owed under this Agreement. You also authorize any amounts outstanding pursuant to this Agreement to be deducted from refunds that you may receive up to 24 months after the date of this Agreement and process through the Processor.

5. Acknowledgements. (a) You understand that: (i) neither Bank nor Processor can guarantee the amount of your tax year 2021 federal tax refund(s) or the date it will be issued, and (ii) neither Bank nor Processor is affiliated with the transmitter of the tax return(s) (Intuit Inc.) and neither warrants the accuracy of the software used to prepare the tax return(s). (b) You agree that Intuit Inc. is not acting as your agent and is not under any fiduciary duty with respect to the processing of your refund(s) by Bank and Processor. (c) Your refund(s) may be held or returned to the IRS if it is suspected of fraud or identity theft.

6. Truth in Savings Disclosure. The Deposit Account is being opened for the purpose of receiving your (or both spouses if this is a jointly filed return) tax year 2021 federal tax refund(s). Processor and Bank will deduct from the Deposit Account the amounts set forth in Section 3, including the \$39.00 Refund Processing Fee for opening and maintaining the Deposit Account and processing your tax refund(s). No other deposits may be made to the Deposit Account. No withdrawals will be allowed from the Deposit Account except to collect the amounts stated in this Section, Section 3, Section 7, and Section 4. No interest is payable on the deposit; thus, the annual percentage yield and interest rate are 0%. The Deposit Account will be closed after all authorized deductions have been made and any remaining balance has been disbursed to you. We will also charge a Return Item Fee of \$30.00 if the refund(s) cannot be delivered as directed in Section 7 of this Agreement. A \$30.00 Account Research and Processing Fee may be charged if we are required to provide additional processing to return the funds to the IRS. These fees will be deducted from the Deposit Account and will be retained by Processor. Questions or concerns about the Deposit Account should be directed to Santa Barbara Tax Products Group, LLC, PO Box 70010, Pasadena, CA 91117 or via the Internet at <http://sbtpg.com>.

7. Disbursement Method: You agree that the disbursement method selected below will be used by Processor to disburse funds to you.

By using the Direct Deposit method of disbursement, the balance of your Deposit Account will be disbursed to you electronically by ACH direct deposit to your personal bank account designated below. If a joint return is filed, the bank account may be a joint account or the individual account of either spouse.

DIRECT DEPOSIT ACCOUNT TYPE:

☒ Checking
☐ Savings

RTN # 272484470

Account # 02546723707

Note: To ensure that there are no delays in receiving your refund(s), please contact your financial institution to confirm that you are using the correct RTN (routing) and account number. If you or your representative enter your account information incorrectly and your deposit is returned to Bank, the Deposit Account balance minus a \$30.00 Return Item Fee will be disbursed to you via a cashier's check mailed to your physical address of record. Bank, Processor and Intuit Inc. are not responsible for the misapplication of a direct deposit that results from error, negligence or malfeasance on the part of you or your representative. In cases where Bank has received your federal tax refund(s) but is unable to deliver the funds directly to you, funds may be held at Bank until claimed, or returned to the IRS. An Account Research and Processing Fee of \$30.00 may be charged if we are required to

provide additional processing to return the funds to the IRS. Return Item and Account Research and Processing Fees will not exceed \$60.00 in the aggregate, and will be deducted from the Deposit Account for federal refunds that continue to be undeliverable and unclaimed and must be returned to the IRS. These fees will be retained by Processor. Due to the risk of fraudulent diversion of tax refunds, we will not process any address or account changes for purposes of disbursing your tax refund(s). If we become aware that your address or checking or savings account has changed after you sign this Agreement but before your federal tax refund(s) is received by us, upon receipt of your federal tax refund(s) from the IRS we will return your tax refund(s) to the IRS after deducting our Refund Processing Fee, TurboTax Fees and other applicable fees. We will do our best to escalate the return of your federal tax refunds to the IRS and you will need to work with the IRS directly for disbursement.

8. FEDERAL ELECTRONIC FUND TRANSFER ACT DISCLOSURES: In case of errors or questions about electronic transfers to or from the Deposit Account, write to Santa Barbara Tax Products Group, LLC, PO Box 70010, Pasadena, CA 91117 or telephone (877) 908-7228 and provide your name, a description or explanation of the error, and the dollar amount of the suspected error. We will determine whether an error occurred within 10 business days after we hear from you and will correct any error promptly. If we need more time, however, we may take up to 45 business days to investigate your complaint or question. If we decide to do this, we will credit your Deposit Account within 10 business days for the amount you think is in error, although in most circumstances you won't have use of the money until we complete our investigation. If we ask you to put your complaint or question in writing and we do not receive it within 10 business days, we may not credit your Deposit Account. For errors involving transfers of funds to or from the Deposit Account within 30 business days after the first deposit to the Deposit Account was made, (i) we may take up to 90 business days to investigate your complaint or question, and (ii) we may take up to 20 business days to credit your Deposit Account for the amount you think is in error. We will tell you the results within three business days after completing our investigation. If we decide that there was no error, we will send you a written explanation. You may ask for copies of the documents that we used in our investigation.

Business Days: Our business days are Monday through Friday, excluding federal holidays. Saturday, Sunday, and federal holidays are not considered business days, even if we are open.

Confidentiality: We will disclose information to third parties about your account or the transfers you make:

- To complete transfers as necessary;
- To verify the existence and condition of your account upon the request of a third party, such as a credit bureau or merchant;
- To comply with government agency or court orders;
- If you give us your written permission; or
- As explained in the Privacy Policy following this Agreement.

Our Liability: If we do not complete a transfer to your account on time or in the correct amount according to this Agreement, we may be liable for your losses or damages. In addition to all other limitations of liability set forth in this Agreement, we will not be liable to you if, among other things:

- Circumstances beyond our control (such as fire, flood, water damage, power failure, strike, labor dispute, pandemic, computer breakdown, telephone line disruption, or a natural disaster) prevent the transfer, despite reasonable precautions that have been taken.
- The funds in your account are subject to legal process or other claim restricting such transfer.
- You, your representative or a third party provide us with inaccurate or untimely information.

9. Compensation. In addition to any fees paid directly by you to Intuit Inc., Processor will pay compensation to Intuit Inc. in consideration of Intuit Inc.'s provision of various programming, testing, data processing, transmission, systems maintenance, status reporting and other software, technical and communications services. The Refund Processing Fee will be retained by Processor for its Refund Processing Service. Processor shall pay Bank for its banking services.

10. Governing Law. The enforcement and interpretation of this Agreement and the transactions contemplated herein shall be governed by the laws of the United States, including the Electronic Signatures in Global and National Commerce Act, and, to the extent state law applies, the substantive laws of Ohio.

11. Arbitration Provision. You acknowledge that the services set forth in this Agreement are being made available and priced by Processor on the basis of your acceptance of the following arbitration provision ("Arbitration Provision"). By entering into this Agreement, you acknowledge that you are giving up the right to litigate Claims (as defined below) if you, Bank or Processor elects arbitration of the Claims pursuant to this provision, except as otherwise expressly provided herein, and you hereby knowingly and voluntarily waive the right to trial of all Claims subject to this Agreement. You further acknowledge that you have read this Arbitration Provision carefully, agree to its terms, and are entering into this Agreement voluntarily and not in reliance on any promises or representations whatsoever except those contained in this Agreement.

ARBITRATION NOTICE

THIS AGREEMENT CONTAINS AN ARBITRATION PROVISION. PLEASE READ THIS PROVISION CAREFULLY, AS IT AFFECTS YOUR LEGAL RIGHTS.

11.1. Arbitration of Claims: Except as expressly provided herein, any claim, dispute or controversy (whether based upon contract; tort, intentional or otherwise; constitution; statute; common law; or equity and whether pre-existing, present or future), including initial claims, counter-claims, cross-claims and third-party claims, arising from or relating directly or indirectly to this Agreement, including the validity, enforceability, interpretation, scope, or application of the Agreement and this Arbitration Provision (except for the prohibition on class or other non-individual claims, which shall be for a court to decide) ("Claim") shall be decided, upon the election of you, Bank or Processor (or our agents, employees, successors, representatives, affiliated companies, or assigns), by binding arbitration before the American Arbitration Association ("AAA"). Arbitration replaces the right to litigate a claim in court or to have a jury trial. The AAA's phone number is 800-778-7879 and website is <http://www.adr.org>. You may obtain copies of the current rules, forms, and instructions for initiating an arbitration using the above information.

11.2. Other Claims Subject to Arbitration: In addition to Claims brought by you, Claims made by anyone connected with you or anyone making a Claim through you (including a taxpayer filing jointly, employee, agent, representative, affiliated company, predecessor or successor, heir, assignee, or trustee in bankruptcy) against us shall be subject to arbitration as described herein.

11.3. Exceptions: We agree not to invoke our right to arbitrate any individual Claim you bring in small claims court or an equivalent court so long as the Claim is pending only in that court. This Arbitration Provision also does not limit or constrain our right to interplead funds in the event of claims to the Account by several parties.

11.4. Individual Claims Only: Claims may be submitted to arbitration on an individual basis only. Claims subject to this Arbitration Provision may not be joined or consolidated in arbitration with any Claim of any other person or be arbitrated on a class basis, in a representative capacity on behalf of the general public or on behalf of any other person, unless otherwise agreed to by the parties in writing. However, taxpayers filing jointly and party to this Agreement are considered as one person; Processor and its officers, directors, employees, agents, and affiliates are considered as one person; and Bank and its officers, directors, employees, agents, and affiliates are considered as one person.

11.5. Arbitration Fees: If you initiate arbitration, we will advance any arbitration fees, including any required deposit. If we initiate or elect arbitration, we will pay the entire amount of the arbitration fees, including any required deposit. We will also be responsible for payment and/or reimbursement of any arbitration fees to the extent that such fees exceed the amount of the filing fees you would have incurred if your Claim had been brought in the state or federal court nearest your residence with jurisdiction over the Claims.

11.6. Procedure: A single arbitrator will resolve the Claims. The arbitrator will be a lawyer with at least ten years' experience or who is a former or retired judge. The arbitration shall follow the rules and procedures of the arbitration administrator in effect on the date the arbitration is filed, except when there is a conflict or inconsistency between the rules and procedures of the arbitration administrator and this Arbitration Provision, in which case this Arbitration Provision shall govern. Any in-person arbitration hearing for a Claim shall take place within the federal judicial district in which you live or at such other reasonably convenient location as agreed by the parties. The arbitrator shall apply applicable substantive law consistent with the Federal Arbitration Act, 9 U.S.C. § 1 et seq. (the "FAA") and shall honor all claims of privilege and confidentiality recognized at law. All statutes of limitations that would otherwise be applicable shall apply to any arbitration proceeding. The arbitrator shall be empowered to grant whatever relief would be available in court under law or in equity. Any appropriate court may enter judgment upon the arbitrator's award. This Arbitration Provision is made pursuant to a transaction involving interstate commerce, and shall be governed by the FAA.

12. Taxpayer Identity Validation Disclosure. To help Bank, Processor and the government identify and fight tax refund fraud, as well as fight the funding of terrorism and money laundering activities, Bank and Processor obtain, verify, and record information that identifies each Refund Processing Service taxpayer. What this means for you: When you apply to use the Refund Processing Service for the purpose of receiving your federal tax refund(s), we will ask for your name, address, date of birth, and other information that will allow us to identify you. We may also ask to see your driver's license or other identifying documents if we need to perform additional due diligence on your account.

YOUR AGREEMENT

Bank and Processor agree to all of the terms of this Agreement. By selecting the "I Agree" button in TurboTax: (i) You authorize Bank to receive your 2021 federal tax refund(s) from the IRS and Processor to make the deductions from your refund(s) described in the Agreement, (ii) You agree to receive all communications electronically in accordance with the "Communications" section of the Tax Year 2021 TurboTax^(Registered Trademark) User Agreement, (iii) You consent to the release of your 2021 federal tax refund(s) deposit information and application information as described in Section 2 of this Agreement; (iv) You consent to the automatic debiting of your personal bank account as set forth in Section 4, as applicable, and the Arbitration Provision in Section 11; and (v) You acknowledge that you have reviewed, and agree to be bound by, the Agreement's terms and conditions. If this is a joint return, selecting "I Agree" indicates that both spouses agree to be bound by the terms and conditions of the Agreement.

Rev. 11/2021

FACTS WHAT DOES GREEN DOT BANK DO WITH YOUR PERSONAL INFORMATION?

Why?	Financial companies choose how they share your personal information. Federal law gives consumers the right to limit some but not all sharing. Federal law also requires us to tell you how we collect, share, and protect your personal information. Please read this notice carefully to understand what we do	
What?	<p>The types of personal information we collect and share depend on the product or service you have with us. This information can include:</p> <ul style="list-style-type: none"> • Social Security number and account balances • account transactions and checking account information • transaction history and payment history <p>When you are no longer our customer, we continue to share your information as described in this notice.</p>	
How?	All financial companies need to share customers' personal information to run their everyday business. In the section below, we list the reasons financial companies can share their customers' personal information; the reasons Green Dot Bank chooses to share; and whether you can limit this sharing.	
	Reasons we can share your personal information	Does Green Dot Bank share?
	For our everyday business purposes — such as to process your transactions, maintain your account(s), respond to court orders and legal investigations, or report to credit bureaus.	Yes
	For our marketing purposes — to offer our products and services to you.	Yes
	For joint marketing with other financial companies.	Yes
	For our affiliates' everyday business purposes — information about your transactions and experiences.	Yes
	For our affiliates' everyday business purposes — information about your creditworthiness.	No
	For our affiliates to market to you.	No
	For nonaffiliates to market to you.	No
Questions?	Call 1-800-901-6663	

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What we do	
How does Green Dot Bank protect my personal information?	To protect your personal information from unauthorized access and use, we use security measures that comply with federal law. These measures include computer safeguards and secured files and buildings.
How does Green Dot Bank collect my personal information?	<p>We collect your personal information, for example, when you</p> <ul style="list-style-type: none"> • open an account or make deposits or withdrawals from your account • tell us where to send the money or provide account information • give us your contact information <p>We also collect your personal information from others, such as credit bureaus, affiliates, or other companies.</p>
Why can't I limit all sharing?	<p>Federal law gives you the right to limit only</p> <ul style="list-style-type: none"> • sharing for affiliates' everyday business purposes — information about your creditworthiness • affiliates from using your information to market to you • sharing for nonaffiliates to market to you <p>State laws and individual companies may give you additional rights to limit sharing.</p>
Definitions	
Affiliates	<p>Companies related by common ownership or control. They can be financial and nonfinancial companies.</p> <ul style="list-style-type: none"> • <i>Our affiliates include companies with a common corporate identity of Green Dot (such as our parent bank holding company Green Dot Corporation) and tax processing services companies, such as Santa Barbara Tax Products Group, LLC.</i>
Nonaffiliates	<p>Companies not related by common ownership or control. They can be financial and nonfinancial companies.</p> <ul style="list-style-type: none"> • <i>Green Dot Bank does not share with nonaffiliates so they can market to you.</i>
Joint marketing	<p>A formal agreement between nonaffiliated financial companies that together market financial products or services to you.</p> <ul style="list-style-type: none"> • <i>The only joint marketing partners we share with are Intuit Inc. and its affiliates and subsidiaries.</i>

**Santa Barbara Tax Products Group, LLC, a division of Green Dot Corporation,
a Delaware corporation, and Civista Bank Refund Processing Service Agreement ("Agreement")**Name: Liam J HughesSocial Security No.: 385-21-6981

This Agreement contains important terms, conditions and disclosures about the processing of your refund(s) (the "Refund Processing Service" or "RPS") by Santa Barbara Tax Products Group, LLC, a division of Green Dot Corporation, a Delaware corporation ("Processor"), a third party processor using banking services of Civista Bank ("Bank"). Read this Agreement carefully before accepting its terms and conditions, and print a copy and/or retain this information electronically for future reference. As used in this Agreement, the words "you" and "your" refer to the applicant or both the applicant and joint applicant if the 2021 federal income tax return(s) is a joint return (individually and collectively, "Applicant"). The words "we," "us" and "our" refer to Bank and Processor.

1. NOTICE: No Requirement To Use the Refund Processing Service In Order To File Electronically.

YOU UNDERSTAND THAT A REFUND PROCESSING FEE OF \$39.00 ("REFUND PROCESSING FEE") IS CHARGED BY PROCESSOR TO ESTABLISH A TEMPORARY ACCOUNT TO RECEIVE YOUR FEDERAL TAX REFUND(S), TO PROCESS IT, TO DEDUCT YOUR TURBOTAX FEES, AND OTHER AUTHORIZED FEES FROM THAT ACCOUNT, AND TO FORWARD FUNDS TO YOU. THE REFUND PROCESSING FEE IS NOT A LOAN; IT IS DUE TO PROCESSOR WHETHER OR NOT THE FEDERAL TAX REFUND(S) OCCURS BUT PROCESSOR WILL NOT PURSUE COLLECTION OF THE REFUND PROCESSING FEE IF YOUR FEDERAL TAX REFUND(S) DOES NOT OCCUR. THIS FEE IS COLLECTED ONLY AT THE TIME THE REFUND(S) OCCURS. YOU CAN AVOID THIS FEE AND NOT USE THE REFUND PROCESSING SERVICE BY INSTEAD PAYING THE APPLICABLE TURBOTAX FEES TO INTUIT INC. BY CREDIT OR DEBIT CARD AT THE TIME YOU FILE YOUR 2021 FEDERAL INCOME TAX RETURN(S) AND ELECTING TO HAVE YOUR REFUND(S) DIRECTLY DEPOSITED IN YOUR OWN BANK ACCOUNT OR MAILED TO YOU. IF YOU DO USE THE REFUND PROCESSING SERVICE, YOU CAN EXPECT TO RECEIVE THE PROCEEDS FROM YOUR FEDERAL TAX REFUND(S) WITHIN 21 DAYS FROM WHEN THE INTERNAL REVENUE SERVICE ("IRS") ACCEPTS YOUR RETURN(S) UNLESS THERE ARE PROCESSING DELAYS (OR UNLESS YOUR RETURN(S) CONTAINS EARNED INCOME TAX CREDIT OR ADDITIONAL CHILD TAX CREDIT, IN WHICH CASE THE IRS WILL ISSUE YOUR REFUND(S) NO EARLIER THAN FEBRUARY 15, 2022). THE REFUND PROCESSING SERVICE WILL NEITHER SPEED UP NOR DELAY YOUR FEDERAL TAX REFUND(S). THE COST OF PREPARING YOUR TAX RETURN(S) IS NOT ANY MORE OR LESS IF YOU PURCHASE THE REFUND PROCESSING SERVICE.

2. Authorization to Release Personal Information. You authorize the IRS to disclose any information to Bank and Processor related to the funding of your 2021 federal tax refund(s). You also authorize Intuit Inc., as the transmitter of your electronically filed tax return(s), Bank and Processor to disclose to each other certain information about you and your tax return(s) for the purpose of providing the services contemplated under this Agreement. You also represent that any authorizations you have made in this Section 2 have also been obtained from and are made with respect to your spouse, if this is a jointly filed return. Please see the Privacy Policy at the end of this Agreement describing how Bank may use or share your personal information.

3. Summary of Terms

Expected Federal Refund	\$ 1,571.00
Less Processor Refund Processing Fee	\$ 39.00
Less TurboTax Fees	\$ 108.00
Less Fees for Additional Products and Services Purchased	\$
Expected Proceeds*	\$ 1,424.00

* These amounts are itemized. This is only an estimate. The amount will be reduced by any applicable sales taxes, and if applicable, a Return Item Fee and an Account Research and Processing Fee paid to Processor as set forth in Sections 4, 6 and 7 below.

4. Temporary Deposit Account Authorization. You hereby authorize Bank to establish a temporary deposit account ("Deposit Account") for the purpose of receiving your tax year 2021 federal tax refund(s) from the IRS. Bank or Processor must receive an acknowledgement from the IRS that your return(s) has been electronically filed and accepted for processing before the Deposit Account can be opened. You authorize Processor to deduct from your Deposit Account the following amounts: (i) the Refund Processing Fee; (ii) the fees and charges related to the preparation, processing and transmission of your tax return(s) ("TurboTax Fees"); and (iii) fees for Additional Products and Services Purchased, plus applicable taxes. You also authorize Processor to deduct thirty dollars (\$30.00) as a returned item processing fee (the "Return Item Fee") from your Deposit Account for the additional processing required in the event that your deposit is returned or cannot be delivered as directed in Section 7 below. A fee of \$30.00 (the "Account Research and Processing Fee") may be charged if we are required to provide additional processing to return the funds to the IRS. These fees will be deducted from the Deposit Account and will be retained by Processor. You authorize Processor to disburse the balance of the Deposit Account to you after making all authorized deductions or payments. If the Deposit Account does not have sufficient funds to pay the TurboTax Fees and the fees for Additional Products and Services Purchased as set forth in Section 3, and any sales tax, or if your refund proceeds are

delayed (a) you authorize Processor to automatically deduct such fees (or any portion thereof) via ACH, electronic check, or wire transfer directly from the account into which you authorized Processor to deposit your expected tax refund proceeds as set forth in Section 7, and (b) if you made alternative arrangements with TurboTax for payment of such fees, those arrangements will be attempted prior to any automatic deduction. To make alternative payment arrangements or revoke your consent to automatic deduction, you must contact Intuit Inc. according to the instructions on the notices e-mailed to you by Intuit Inc. regarding outstanding amounts owed under this Agreement. You also authorize any amounts outstanding pursuant to this Agreement to be deducted from refunds that you may receive up to 24 months after the date of this Agreement and process through the Processor.

5. Acknowledgements. (a) You understand that: (i) neither Bank nor Processor can guarantee the amount of your tax year 2021 federal tax refund(s) or the date it will be issued, and (ii) neither Bank nor Processor is affiliated with the transmitter of the tax return(s) (Intuit Inc.) and neither warrants the accuracy of the software used to prepare the tax return(s). (b) You agree that Intuit Inc. is not acting as your agent and is not under any fiduciary duty with respect to the processing of your refund(s) by Bank and Processor. (c) Your refund(s) may be held or returned to the IRS if it is suspected of fraud or identity theft.

6. Truth in Savings Disclosure. The Deposit Account is being opened for the purpose of receiving your (or both spouses if this is a jointly filed return) tax year 2021 federal tax refund(s). Processor and Bank will deduct from the Deposit Account the amounts set forth in Section 3, including the \$ 39.00 Refund Processing Fee for opening and maintaining the Deposit Account and processing your tax refund(s). No other deposits may be made to the Deposit Account. No withdrawals will be allowed from the Deposit Account except to collect the amounts stated in this Section, Section 3, Section 7, and Section 4. No interest is payable on the deposit; thus, the annual percentage yield and interest rate are 0%. The Deposit Account will be closed after all authorized deductions have been made and any remaining balance has been disbursed to you. We will also charge a Return Item Fee of \$30.00 if the refund(s) cannot be delivered as directed in Section 7 of this Agreement. A \$30.00 Account Research and Processing Fee may be charged if we are required to provide additional processing to return the funds to the IRS. These fees will be deducted from the Deposit Account and will be retained by Processor. Questions or concerns about the Deposit Account should be directed to Santa Barbara Tax Products Group, LLC, PO Box 70010, Pasadena, CA 91117 or via the Internet at <http://sbtpg.com>.

7. Disbursement Method: You agree that the disbursement method selected below will be used by Processor to disburse funds to you.

By using the Direct Deposit method of disbursement, the balance of your Deposit Account will be disbursed to you electronically by ACH direct deposit to your personal bank account designated below. If a joint return is filed, the bank account may be a joint account or the individual account of either spouse.

DIRECT DEPOSIT ACCOUNT TYPE:

☒ Checking
☐ Savings

RTN # 272484470

Account # 02546723707

Note: To ensure that there are no delays in receiving your refund(s), please contact your financial institution to confirm that you are using the correct RTN (routing) and account number. If you or your representative enter your account information incorrectly and your deposit is returned to Bank, the Deposit Account balance minus a \$30.00 Return Item Fee will be disbursed to you via a cashier's check mailed to your physical address of record. Bank, Processor and Intuit Inc. are **not** responsible for the misapplication of a direct deposit that results from error, negligence or malfeasance on the part of you or your representative. In cases where Bank has received your federal tax refund(s) but is unable to deliver the funds directly to you, funds may be held at Bank until claimed, or returned to the IRS. An Account Research and Processing Fee of \$30.00 may be charged if we are required to provide additional processing to return the funds to the IRS. Return Item and Account Research and Processing Fees will not exceed \$60.00 in the aggregate, and will be deducted from the Deposit Account for federal refunds that continue to be undeliverable and unclaimed and must be returned to the IRS. These fees will be retained by Processor. Due to the risk of fraudulent diversion of tax refunds, we will not process any address or account changes for purposes of disbursing your tax refund(s). If we become aware that your address or checking or savings account has changed after you sign this Agreement but before your federal tax refund(s) is received by us, upon receipt of your federal tax refund(s) from the IRS we will return your tax refund(s) to the IRS after deducting our Refund Processing Fee, TurboTax Fees and other applicable fees. We will do our best to escalate the return of your federal tax refund(s) to the IRS and you will need to work with the IRS directly for disbursement.

8. **FEDERAL ELECTRONIC FUND TRANSFER ACT DISCLOSURES:** In case of errors or questions about electronic transfers to or from the Deposit Account, write to Santa Barbara Tax Products Group, LLC, PO Box 70010, Pasadena, CA 91117 or telephone (877) 908-7228 and provide your name, a description or explanation of the error, and the dollar amount of the suspected error. We will determine whether an error occurred within 10 business days after we hear from you and will correct any error promptly. If we need more time, however, we may take up to 45 business days to investigate your complaint or question. If we decide to do this, we will credit your Deposit Account within 10 business days for the amount you think is in error, although in most circumstances you won't have use of the money until we complete our investigation. If we ask you to put your complaint or question in writing and we do not receive it within 10 business days, we may not credit your Deposit Account. For errors involving transfers of funds to or from the Deposit Account within 30 business days after the first deposit to the Deposit Account was made, (i) we may take up to 90 business days to investigate your complaint or question, and (ii) we may take up to 20 business days to credit your Deposit Account for the amount you think is in error. We will tell you the results within three business days after completing our investigation. If we decide that there was no error, we will send you a written explanation. You may ask for copies of the documents that we used in our investigation.

Business Days: Our business days are Monday through Friday, excluding federal holidays. Saturday, Sunday, and federal holidays are not considered business days, even if we are open.

Confidentiality: We will disclose information to third parties about your account or the transfers you make:

- To complete transfers as necessary;
- To verify the existence and condition of your account upon the request of a third party, such as a credit bureau or merchant;
- To comply with government agency or court orders;
- If you give us your written permission; or
- As explained in the Privacy Policy following this Agreement.

Our Liability: If we do not complete a transfer to your account on time or in the correct amount according to this Agreement, we may be liable for your losses or damages. In addition to all other limitations of liability set forth in this Agreement, we will not be liable to you if, among other things:

- Circumstances beyond our control (such as fire, flood, water damage, power failure, strike, labor dispute, pandemic, computer breakdown, telephone line disruption, or a natural disaster) prevent the transfer, despite reasonable precautions that have been taken.
- The funds in your account are subject to legal process or other claim restricting such transfer.
- You, your representative or a third party provide us with inaccurate or untimely information.

9. **Compensation.** In addition to any fees paid directly by you to Intuit Inc., Processor will pay compensation to Intuit Inc. in consideration of Intuit Inc.'s provision of various programming, testing, data processing, transmission, systems maintenance, status reporting and other software, technical and communications services. The Refund Processing Fee will be retained by Processor for its Refund Processing Service. Processor shall pay Bank for its banking services.

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ARBITRATION NOTICE

THIS AGREEMENT CONTAINS AN ARBITRATION PROVISION. PLEASE READ THIS PROVISION CAREFULLY, AS IT AFFECTS YOUR LEGAL RIGHTS.

11.1. Arbitration of Claims: Except as expressly provided herein, any claim, dispute or controversy (whether based upon contract; tort, intentional or otherwise; constitution; statute; common law; or equity and whether pre-existing, present or future), including initial claims, counter-claims, cross-claims and third-party claims, arising from or relating directly or indirectly to this Agreement, including the validity, enforceability, interpretation, scope, or application of the Agreement and this Arbitration Provision (except for the prohibition on class or other non-individual claims, which shall be for a court to decide) ("Claim") shall be decided, upon the election of you, Bank or Processor (or our agents, employees, successors, representatives, affiliated companies, or assigns), by binding arbitration before the American Arbitration Association ("AAA"). Arbitration replaces the right to litigate a claim in court or to have a jury trial. The AAA's phone number is 800-778-7879 and website is <http://www.adr.org>. You may obtain copies of the current rules, forms, and instructions for initiating an arbitration using the above information.

11.2. Other Claims Subject to Arbitration: In addition to Claims brought by you, Claims made by anyone connected with you or anyone making a Claim through you (including a taxpayer filing jointly, employee, agent, representative, affiliated company, predecessor or successor, heir, assignee, or trustee in bankruptcy) against us shall be subject to arbitration as described herein.

11.3. Exceptions: We agree not to invoke our right to arbitrate any individual Claim you bring in small claims court or an equivalent court so long as the Claim is pending only in that court. This Arbitration Provision also does not limit or constrain our right to interplead funds in the event of claims to the Account by several parties.

11.4. Individual Claims Only: Claims may be submitted to arbitration on an individual basis only. Claims subject to this Arbitration Provision may not be joined or consolidated in arbitration with any Claim of any other person or be arbitrated on a class basis, in a representative capacity on behalf of the general public or on behalf of any other person, unless otherwise agreed to by the parties in writing. However, taxpayers filing jointly and party to this Agreement are considered as one person; Processor and its officers, directors, employees, agents, and affiliates are considered as one person; and Bank and its officers, directors, employees, agents, and affiliates are considered as one person.

11.5. Arbitration Fees: If you initiate arbitration, we will advance any arbitration fees, including any required deposit. If we initiate or elect arbitration, we will pay the entire amount of the arbitration fees, including any required deposit. We will also be responsible for payment and/or reimbursement of any arbitration fees to the extent that such fees exceed the amount of the filing fees you would have incurred if your Claim had been brought in the state or federal court nearest your residence with jurisdiction over the Claims.

11.6. Procedure: A single arbitrator will resolve the Claims. The arbitrator will be a lawyer with at least ten years' experience or who is a former or retired judge. The arbitration shall follow the rules and procedures of the arbitration administrator in effect on the date the arbitration is filed, except when there is a conflict or inconsistency between the rules and procedures of the arbitration administrator and this Arbitration Provision, in which case this Arbitration Provision shall govern. Any in-person arbitration hearing for a Claim shall take place within the federal judicial district in which you live or at such other reasonably convenient location as agreed by the parties. The arbitrator shall apply applicable substantive law consistent with the Federal Arbitration Act, 9 U.S.C. § 1 et seq. (the "FAA") and shall honor all claims of privilege and confidentiality recognized at law. All statutes of limitations that would otherwise be applicable shall apply to any arbitration proceeding. The arbitrator shall be empowered to grant whatever relief would be available in court under law or in equity. Any appropriate court may enter judgment upon the arbitrator's award. This Arbitration Provision is made pursuant to a transaction involving interstate commerce, and shall be governed by the FAA.

12. Taxpayer Identity Validation Disclosure. To help Bank, Processor and the government identify and fight tax refund fraud, as well as fight the funding of terrorism and money laundering activities, Bank and Processor obtain, verify, and record information that identifies each Refund Processing Service taxpayer. What this means for you: When you apply to use the Refund Processing Service for the purpose of receiving your federal tax refund(s), we will ask for your name, address, date of birth, and other information that will allow us to identify you. We may also ask to see your driver's license or other identifying documents if we need to perform additional due diligence on your account.

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Rev. 09/2021

Civista Bank Tax Product Privacy Policy**FACTS** What does Civista Bank do with your Personal Information?

Why?	Financial Companies choose how they share your personal information. Federal law gives consumers the right to limit some but not all sharing. Federal law also requires us to tell you how we collect, share and protect your personal information. Please read this notice carefully to understand what we do.	
What?	<p>The types of personal information that we collect and share depend on the product or service you have with us. This can include:</p> <ul style="list-style-type: none">• Social Security number and account balances• payment history and transaction history• overdraft history and account transactions <p>When you are no longer our customer, we continue to share your information as described in this notice.</p>	
How?	All Financial Companies need to share customers' personal information to run their everyday business. In the section below we list the reasons financial companies can share their customers' personal information; the reasons Civista Bank chooses to share and whether you can limit the sharing.	
Reasons we can share your personal information	Does Civista Bank Share?	Can you limit this sharing?
For our everyday business purposes — such as to process your transaction, maintain your account(s), respond to court orders and legal investigations, or report to credit bureaus.	Yes	No
For our marketing purposes — to offer our products and services to you.	Yes	No
For joint marketing with other financial companies.	Yes	No
For our affiliates' everyday business purposes — information about your transactions and experiences.	No	We don't share
For our affiliates' everyday business purposes — information about your creditworthiness.	No	We don't share
For our affiliates to market to you.	No	We don't share
For non affiliates to market to you.	No	We don't share
Questions?	Call Toll Free: 800-901-6663 or go to www.civista.bank	

Who we are	
Who is providing this notice?	Civista Bank
What we do	
How does Civista Bank protect my personal information?	To protect your personal information from unauthorized access and use, we use security measures that comply with federal law. These measures include computer safeguards and secured files and buildings.
How does Civista Bank collect my personal information?	We collect personal information about you when you apply for a tax related product. This includes information in your application, such as your name, address, social security number, income, deductions, refund and the like. We also collect information about your transactions with us, tax preparers and similar providers, such as payment histories, balances due, and tax information. We may also collect information concerning your credit history from a consumer reporting agency.
Why can't I limit all sharing?	<p>Federal law gives you the right to limit only:</p> <ul style="list-style-type: none"> • Sharing for affiliates everyday business purposes — information about your creditworthiness, • Affiliates from using your information to market to you, • Sharing for non affiliates to market to you. <p>State laws and individual companies may give you additional rights to limit sharing.</p>
Definitions	
Affiliates	<p>Companies related by common ownership or control. They can be financial and nonfinancial companies.</p> <ul style="list-style-type: none"> • Civista Bank does not share with our affiliates.
Non affiliates	<p>Companies not related by common ownership or control. They can be financial or nonfinancial companies.</p> <ul style="list-style-type: none"> • Civista Bank does not share with non affiliates so they can market to you.
Joint Marketing	<p>A formal joint marketing agreement between non affiliated financial companies that together market financial products or services to you.</p> <ul style="list-style-type: none"> • Our joint marketing providers include: financial service providers that offer additional payment products.
Other Important Information	
This Notice is adopted in recognition of our obligations under Title V of Gramm-Leach Bliley Act of 1999.	
This Notice applies only to individuals who have applied for a tax-related bank product.	

ELECTRONIC POSTMARK - CERTIFICATION OF ELECTRONIC FILING

Taxpayer: Liam J Hughes

Primary SSN: 385-21-6981

Federal Return Submitted: _____

Federal Return Acceptance Date: _____

Your return has not been electronically transmitted yet

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 . 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 , your Intuit electronic postmark will indicate , 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 , and a corrected return is submitted and accepted before . If your return is submitted after , 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 . If your federal tax return is rejected, the IRS will still consider it filed on time if the electronic postmark is on or before , and the corrected return is submitted and accepted by .

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.

We need your consent - Early Access

This is an IRS requirement

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.

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) at <https://www.treasury.gov/tigta/>.

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

<hr/> <hr/> <hr/> <hr/>

First Name

Last Name

Please type the date below:

Date

F7216U01 SBIA5001

Read and accept this Disclosure Consent

This is an IRS requirement

IRS regulations require the following statements:

"Federal law requires this consent form be provided to you. Unless authorized by law, we cannot disclose your tax return information to third parties 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. If you agree to the disclosure of your tax return information, 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."

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

--

Sign this agreement by entering your name:

Please type the date below:

Date

Read and accept this Disclosure Consent

This is an IRS requirement

To, enable the Tax Identity restoration protection service that you purchased as part of a bundle, we need your consent to send some of your personal information to our partner, ID Notify.

Entering your name and date below allows us to disclose the data below to IDNotify, provided by CSIdentity Corp., an Experian company. With your consent, we will send the following: First Name, Middle Initial, Last Name, Date of Birth, Phone Number, Street Address, City, State, Zip, Social Security Number, Email Address, Username, and a randomly generated Subscriber Number.

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

I authorize Intuit to send my information listed above to CSIdentity Corporation.

Sign this agreement by entering your name:

Please type the date below:

Date

IMPORTANT DISCLOSURES

If you are owed federal tax refund(s), you have a right to choose how you will receive the refund(s). There are several options available to you. Please read about these options below.

You can file your federal tax return(s) electronically or by paper and obtain your federal tax refund(s) directly from the Internal Revenue Service ("IRS") for free. If you file your tax return(s) electronically, you can receive refund checks directly from the IRS through the U.S. Postal Service in 21 to 28 days from the time you file your tax return(s) or the IRS can deposit your refund(s) directly into your bank account in less than 21 days from the time you file your tax return(s) unless there are delays by the IRS. If you file a paper return through the U.S. Postal Service, you can receive refund checks directly from the IRS through the U.S. Postal Service in 6 to 8 weeks from the time the IRS receives your return(s) or the IRS can deposit your refund(s) directly into your bank account in 6 to 8 weeks from the time the IRS receives your return(s). However, if your return(s) contains Earned Income Tax Credit or Additional Child Tax Credit, the IRS will issue your refund(s) no earlier than February 15, 2022.

You can file your federal tax return(s) electronically, select the Refund Processing Service ("RPS"), and have your federal tax refund(s) processed through a processor using banking services of a financial institution. The RPS allows your refund(s) to be deposited into a bank account at Green Dot Bank ("Bank") and deducts your TurboTax fees and other amounts that you authorize from your federal refund(s). The balance of your federal refund(s) is delivered to you via the disbursement method you select. If you file your tax return(s) electronically and select the RPS, the IRS will deposit your refund(s) with Bank. Upon Bank's receipt of your refund(s), Santa Barbara Tax Products Group, LLC, a division of Green Dot Corporation, a Delaware corporation, a processor, will deduct from your federal refund(s) any fees charged by TurboTax for the preparation and filing of your tax return(s) and any other amounts authorized by you and disburse the balance of your refund proceeds to you. Unless there are unexpected delays, federal refunds are received in less than 21 days from the time you file your tax return(s) electronically. However, if your return(s) contains Earned Income Tax Credit or Additional Child Tax Credit, the IRS will issue your refund(s) no earlier than February 15, 2022.

The RPS is not necessary to obtain your refund(s). If you have an existing bank account, you do not need to use the RPS in order to receive a direct deposit from the IRS. You may consult the IRS website (IRS.gov) for information about tax refund processing.

If you select the RPS, no prior debt you may owe to Bank will be deducted from your refund(s).

You can change your income tax withholdings which might result in you receiving additional funds throughout the year rather than waiting to receive these funds potentially in tax refund(s) next year. Please consult your employer or tax advisor for additional details.

This Agreement requires all disputes to be resolved by way of binding arbitration.
The terms of the arbitration provision appear in Section 10.

Information regarding low-cost deposit accounts may be available at www.mymoney.gov

The chart below shows the options for filing your federal tax returns (e-file or paper returns), the RPS product, refund disbursement options, estimated timing for obtaining your federal tax refund proceeds, and costs associated with the various options.

WHAT TYPE OF FILING METHOD?	WHAT ARE YOUR DISBURSEMENT OPTIONS?	WHAT IS THE ESTIMATED TIME TO RECEIVE REFUND(S)?	WHAT COSTS DO YOU INCUR IN ADDITION TO TAX PREPARATION FEES?
PAPER RETURN No Refund Processing Service	IRS direct deposit to your personal bank account.	Approximately 6 to 8 weeks ¹	Free
	Check mailed by IRS to address on tax return(s).	Approximately 6 to 8 weeks ¹	
ELECTRONIC FILING (E-FILE) No Refund Processing Service	IRS direct deposit to your personal bank account.	Usually within 21 days ¹	Free
	Check mailed by IRS to address on tax return(s).	Approximately 21 to 28 days ¹	
ELECTRONIC FILING (E-FILE) Refund Processing Service	Direct deposit to your personal bank account.	Usually within 21 days ¹	Free option with your purchase of a Tax Product ²

¹You may experience delays with your tax refund(s) if, for example, you enter incorrect bank account or contact information, you enter a bank account in someone else's name, or if possible suspicious activity is detected. If your return(s) contains Earned Income Tax Credit or Additional Child Tax Credit, the IRS will issue your refund(s) no earlier than February 15, 2022.

²The charges here consist of a TurboTax Fee, the cost of the Tax Product, and any fees for additional products and services purchased. Note that the cost of the Tax Product may vary depending on the edition of TurboTax purchased. See Section 3 of the Refund Processing Service Agreement for the cost of the service you have chosen.

Questions? Call 877-908-7228

Pro Delegation Worksheet

2021

Check this box if you are preparing this return as a PRO preparer ☐

Preparer / Electronic Return Originator (ERO) Information

Preparer Name _____ Print name in signature area? ☐

Preparer Tax ID # (PTIN) _____

NY Tax Preparer Registration # _____ or NY Exclusion Code _____

For NM, OR Preparers Only: State ID# _____

Preparer E-mail _____ Print date on return? ☐

Preparer Phone _____ CAF # _____

Electronic Filing Only: ERO Practitioner PIN _____

Electronic Filing and Printing of Tax Return Information

Electronic Filing:

- ☐ File **federal** return electronically
- ☐ File **state** returns electronically
- ☐ File **other** returns electronically

Select state returns to file electronically:

State(s)

Select other returns to file electronically:

Other Return(s)

Print and Mail Selections (use only if e-file ineligible):

- ☐ Federal return printed and mailed to IRS
- ☐ State return printed and mailed to state agency
- ☐ Other return printed and mailed

Select state returns to file by mail:

State(s)

Select other returns to file by mail:

Other Return(s)

Electronic Filing and Printing of Amended Return Information

Electronic Filing:

- ☐ File **federal** amended return(s) electronically
- ☐ File **state** amended return(s) electronically

Select state amended return(s) to file electronically:

State(s)

Print and Mail Selections (use only if e-file ineligible):

- ☐ Federal amended return printed and mailed
- ☐ State amended return printed and mailed

Select state amended return(s) to file by mail:

State(s)

By using a computer system and software to prepare and transmit my client's return electronically, I consent to the disclosure of all information pertaining to my use of the system and software to create my client's return and to the electronic transmission of my client's return to the state Department of Revenue, as applicable by law.

☐ Sign return electronically using Practitioner PIN

☐ Automatically generate PIN equal to last 5 digits of taxpayer(s) SSN (See help)

☐ Taxpayer(s) entered own PIN(s)

☐ Preparer entered PIN(s) on behalf of taxpayer(s)

Date PIN entered.

Taxpayer and Spouse (if applicable) driver's license and/or state identification must be completed on the federal information worksheet prior to e-filing the return.

	Driver's license
	State issued identification card
	Passport
	Account statement from financial institution
	Utility billing statement
	Credit card billing statement

	To indicate a client return download in FnF
	New Finish and File enabled

[illegible]

Loan Agreement

See the PDF version of this

☐ Show form in forms mode - developer option

Liam J Hughes	NAME
385-21-6981	SSN

<input type="checkbox"/>	Agree
<input type="checkbox"/>	Not Agree

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39.00 FEE - paragraph 1	
1,571.00 L1 - para 3 - expected fed refund	
39.00 L2 - para 3 - processor refund processing fee - rtfee	
108.00 L3 - para 3 - TurboTax Fees	
ADDPKDS - para 3 - Additional products	
1,424.00 L4 - para 3 - expected proceeds	
39.00 FEE2 - para 6	

<input type="checkbox"/>	Agree
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L2 - para 3 - Additional products & services	
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<input type="checkbox"/>	Agree
<input type="checkbox"/>	Not Agree

Smart Worksheets From 2021 Federal Tax Return

SMART WORKSHEET FOR: Form 8863: Education Credits Nonrefundable Credit -- Form 8863, Line 19

1	Enter amount from line 18, Form 8863	1	122.
2	Enter amount from line 9, Form 8863	2	
3	Add lines 1 and 2	3	122.
4	Enter the amount from Form 1040 or 1040-SR, line 18.	4	1,880.
5	Enter the amount from Schedule 3 (Form 1040 or 1040-SR), lines 1 and 2, 6d, and 6l	5	
6	Subtract line 5 from line 4	6	1,880.
7	Enter the smaller of line 3 or line 6 here and on Form 8863, line 19.	7	122.

SMART WORKSHEET FOR: 1040/1040SR Wks: Form 1040 or Form 1040-SR Worksheet

Tax Smart Worksheet	
A	Tax 1,880.
Check if from:	
1	Tax table <input checked="checked" type="checkbox"/>
2	Tax Computation Worksheet (see instructions) <input type="checkbox"/>
3	Schedule D Tax Worksheet <input type="checkbox"/>
4	Qualified Dividends and Capital Gain Tax Worksheet <input type="checkbox"/>
5	Schedule J <input type="checkbox"/>
6	Form 8615 <input type="checkbox"/>
7	Foreign Earned Income Tax Worksheet <input type="checkbox"/>
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	Health Coverage Tax Credit Recovery, Form 8885, Line 5, if negative
H	Additional tax from Form 8621
I	Tax. Add lines A through G. Enter the result here and include in tax below. 1,880.
J	Form 8621 tax deferral from line 9c (to line 24)

SMART WORKSHEET FOR: 1040/1040SR Wks: Form 1040 or Form 1040-SR Worksheet

Excess Social Security and Tier I RRTA Tax Withheld Smart Worksheet	
<p>The calculated amount for Excess social security and tier 1 RRTA tax withheld could include a portion that needs to be removed. When a taxpayer has multiple W-2's, each with the same EIN, excess withholding can only be claimed if the Employer's Name's in box c of the W-2's reflect separate business entities. This could occur when a parent company has multiple subsidiaries, or when a temp agency issues W-2's for distinctly different jobs. If you have multiple W-2's with the same EIN, for the same taxpayer, and for the same job, reduce the amount calculated on Line A below by the excess withholdings from only those W-2's.</p>	
A	Total Excess Social Security or Tier I RRTA tax withheld claimed as a credit . . . 0.

SMART WORKSHEET FOR: Federal Information Worksheet

TurboTax for the Web Filing Status Smart Worksheet	
Check this box to override the filing status selected thru Interview . . .	<input type="checkbox"/>
Marital Status	_____
Filing Status Selected	_____

SMART WORKSHEET FOR: Personal Worksheet (Liam) -- Student Info Worksheet

Apprenticeship and Education Loan Smart Worksheet	
A	Enter the amount of qualified expenses for tuition, fees, books, supplies and equipment required for participation of the designated beneficiary in a registered apprenticeship program _____
B	Enter the amount of principal or interest payments on any qualified education loans of the designated beneficiary (or a sibling) not to exceed \$10,000 each
1	Principal. _____
2	Interest _____
3	Is the interest payment on line 2 included in Part I of the Student Loan Interest Deduction Worksheet? <input type="checkbox"/> Yes <input type="checkbox"/> No
	QuickZoom to Student Loan Interest Deduction Worksheet ► _____

SMART WORKSHEET FOR: Part-Year State Allocation Worksheet

Additional Other Income Allocation Smart Worksheet						
<i>* Enter the state of source for this income (See Tax Help) ▼</i>						
	Federal Amount	Residency Info			*	Allocated Amount
		From mm/dd	To mm/dd	Res St	Src St	
Y Not-for-profit (hobby) income . . T						
Not-for-profit (hobby) income . . S						
Z Stock options T						
Stock options S						
AA Miscellaneous other income . . T						
Miscellaneous other income . . S						

SMART WORKSHEET FOR: Form W-2 : Wage & Tax Statement (Copy 1)

Qualified Business Income Deduction Smart Worksheet			
<i>Completing this worksheet is only necessary if Statutory Employee (Box 13) has been checked and expenses will not be deducted on Schedule C ("No" checked in Part III, line 3).</i>			
A	Is this activity a qualified trade or business under Section 199A?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
B	QBI worksheet to report ▶		
C	Specified Service Trade or Business (SSTB)?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
D	I am not a statutory employee	<input type="checkbox"/>	

SMART WORKSHEET FOR: Form W-2 : Wage & Tax Statement (Copy 1)

Substitute Form W-2 Smart Worksheet	
A	Treat as a substitute W-2 and generate a form 4852 <input type="checkbox"/>
B	Linked substitute W-2 Form 4852 ▶ _____
C	Enter Form 4852, Line 9 information. "How did you determine amounts on line 7 of Form 4852?"

D	Form 4852, Line 10 information. "Explain your efforts to obtain Form W-2?"

E	QuickZoom to completed Form 4852 for reference ▶ _____

SMART WORKSHEET FOR: Tax and Interest Deduction Worksheet

Mortgage Interest Limited Smart Worksheet	
If your mortgage interest deduction needs to be limited for one of the following reasons, use the Deductible Home Mortgage Interest Worksheet to determine the amount to be reported on lines A , B , and C below:	
— The principal amount of your mortgage and home equity debt is over \$750,000 (\$375,000 if married filing separate), or	
— You had home debt that was not used to buy, build or substantially improve your home that secures the loan	
QuickZoom to Deductible Home Mortgage Interest Worksheet ▶	
Does your mortgage interest need to be limited: Yes . . . <input type="checkbox"/> No . . . <input checked="" type="checkbox"/>	
A	Home mortgage interest and points reported on Form 1098:
1	Sum of lines 5a through 5d below _____
2	Limited amount to report on line 5a below _____
B	Home mortgage interest not reported on Form 1098:
1	Sum of lines 6a and 6b below _____
2	Limited amount to report on line 6a below _____
C	Points not reported on Form 1098:
1	Sum of lines 7a through 7c below _____
2	Limited amount to report on line 7a below _____

SMART WORKSHEET FOR: Misc Itemized Deductions Wks

Depreciation Smart Worksheet	
A	Enter Section 179 carryover from prior year _____
B	QuickZoom to the Asset Entry Worksheet ►
C	QuickZoom to the Depreciation/Amortization Reports ►
D	QuickZoom to Form 4562 for Schedule A ►
E	Treat all MACRS assets for activity as qualified Indian reservation property? . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
F	Treat all assets acquired after Aug. 27, 2005 as qualified GO Zone property? <input type="checkbox"/> Regular <input type="checkbox"/> Extension <input checked="" type="checkbox"/> No
G	Treat all assets acquired after May 4, 2007 as qualified Kansas Disaster Zone property? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
H	Was this property located in a Qualified Disaster Area? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

SMART WORKSHEET FOR: Earned Income Credit Worksheet

Nontaxable Combat Pay Election Smart Worksheet	
QuickZoom to enter nontaxable combat pay on Form W-2 ►	
A Taxpayer:	
1	Taxpayer, nontaxable combat pay _____
1a	Taxpayer, prior year nontaxable combat pay from 2019 _____
2 Election for earned income credit (EIC):	
Elect taxpayer's nontaxable combat pay as earned income for EIC? ► <input type="checkbox"/> Yes <input type="checkbox"/> No	
3 Election for dependent care benefits (DCB):	
Elect taxpayer's nontaxable combat pay as earned income for DCB? ► <input type="checkbox"/> Yes <input type="checkbox"/> No	
4 Election for child and dependent care credit:	
Elect taxpayer's nontaxable combat pay as earned income for child and dependent care credit? ► <input type="checkbox"/> Yes <input type="checkbox"/> No	
B Spouse:	
1	Spouse, nontaxable combat pay _____
1a	Spouse, prior year nontaxable combat pay from 2019 _____
2 Election for earned income credit (EIC):	
Elect spouse's nontaxable combat pay as earned income for EIC? ► <input type="checkbox"/> Yes <input type="checkbox"/> No	
3 Election for dependent care benefits (DCB):	
Elect spouse's nontaxable combat pay as earned income for DCB? ► <input type="checkbox"/> Yes <input type="checkbox"/> No	
4 Election for child and dependent care credit:	
Elect spouse's nontaxable combat pay as earned income for child and dependent care credit? ► <input type="checkbox"/> Yes <input type="checkbox"/> No	
C You may compare the tax benefit of electing or not electing by checking a box on line A or line B and reviewing the overpayment or amount due below:	
Overpayment	_____ 1,571. _____ Amount due _____

SMART WORKSHEET FOR: Earned Income Credit Worksheet

Prior Year Earned Income Election Smart Worksheet Election to use 2019 earned income for Earned Income Credit	
The "Yes" box must be marked on Line A for 2019 earned income to be used for EIC calculations.	
A Elect to use 2019 earned income for EIC	<input type="checkbox"/> Yes <input type="checkbox"/> No
B Earned income for EIC from your 2019 return	<u>16,596.</u>
C Current year earned income for EIC	<u>29,947.</u>
If Line C is equal to or greater than Line B the taxpayer is not eligible to use 2019 earned income for EIC calculations.	
D You may compare the tax benefit of electing to use 2021 Earned Income by checking the boxes on line A	
Overpayment <u>1,571.</u>	Amount due _____

SMART WORKSHEET FOR: Earned Income Credit Worksheet

Investment Income Smart Worksheet	
A Taxable and tax exempt interest	_____
B Dividend income	_____
C Capital gain net income	_____
D Royalty and rental of personal property net income	_____
E Passive activity net income :	
1 Rental real estate net income or loss	_____
2 Farm rental net income or loss	_____
3 Partnerships and S corporations net income or loss	_____
4 Estates and trusts net income or loss	_____
5 Total of lines 1 through 4	_____
6 Total passive activity net income , line 5 if greater than zero	_____
F Interest and dividends from Forms 8814	_____
G Adjustments	_____
H Total investment income , add lines A through G	<u>0.</u>
Is line H, total investment income over \$10,000?	
<input checked="" type="checkbox"/> No. You may take the credit.	
<input type="checkbox"/> Yes. Stop. You cannot take the credit.	

SMART WORKSHEET FOR: Earned Income Credit Worksheet

Age Requirements Smart Worksheet

Filers without a qualifying child have certain age requirements. Answer the questions below:

- ☐ Taxpayer is a qualified former foster youth, or a qualified homeless youth
☐ Spouse is a qualified former foster youth, or a qualified homeless youth

You qualify as a specified student if you were enrolled in a program that leads to a degree, certificate, or other recognized educational credential and carried at least one-half the normal workload for your course of study during at least 5 calendar months of the year. For purposes of determining whether you were enrolled during at least 5 calendar months, count any month during which you were enrolled for at least part of the month. The 5 months do not need to be consecutive.

- ☐ Taxpayer qualifies as a specified student for EIC purposes when filing without a qualifying child
☐ Spouse qualifies as a specified student for EIC purposes when filing without a qualifying child

SMART WORKSHEET FOR: Earned Income Credit Worksheet

Married Filing Separately Smart Worksheet (with one or more qualifying child)

MFS filers with a qualifying child have additional requirements. Answer the questions below:

- Did you and your spouse have the same principal residence for the last 6 months of 2021? ☐ **Yes** ☐ **No**
Are you legally separated according to your state law under a written separation agreement or a decree of separate maintenance and you lived apart from your spouse at the end of 2021? ☐ **Yes** ☐ **No**

2021 MICHIGAN Individual Income Tax Return MI-1040**Amended Return** ☐
(Include Schedule AMD)**Return is due April 18, 2022.** Type or print in blue or black ink.

1. Filer's First Name LIAM	M.I. J	Last Name HUGHES	2. Filer's Full Social Security No. (Example: 123-45-6789) 385 — 21 — 6981
If a Joint Return, Spouse's First Name	M.I.	Last Name	3. Spouse's Full Social Security No. (Example: 123-45-6789) — —
Home Address (Number, Street, or P.O. Box) 1123 S VAN BUREN ST			4. School District Code (5 digits – see page 60) 09010
City or Town BAY CITY		State MI	
5. STATE CAMPAIGN FUND Check if you (and/or your spouse, if filing a joint return) want \$3 of your taxes to go to this fund. This will not increase your tax or reduce your refund. <div style="display: flex; justify-content: space-between; margin-top: 5px;"> a. <input type="checkbox"/> Filer b. <input type="checkbox"/> Spouse </div>			6. FARMERS, FISHERMEN, OR SEAFARERS <input type="checkbox"/> Check this box if 2/3 of your income is from farming, fishing, or seafaring.
7. 2021 FILING STATUS. Check one. a. <input checked="" type="checkbox"/> Single * If you check box "c," complete line 3 and enter spouse's full name below: <div style="border: 1px solid black; height: 20px; width: 150px; margin-top: 5px;"></div> b. <input type="checkbox"/> Married filing jointly c. <input type="checkbox"/> Married filing separately*			8. 2021 RESIDENCY STATUS. Check all that apply. a. <input checked="" type="checkbox"/> Resident * If you check box "b" or "c," you must complete and include Schedule NR. b. <input type="checkbox"/> Nonresident * c. <input type="checkbox"/> Part-Year Resident *

9. EXEMPTIONS. NOTE: If someone else can claim you as a dependent, check box 9e, enter 0 on line 9a and enter \$1,500 on line 9e (see instr.).

a. Number of exemptions (see instructions).....	9a.	<div style="border: 1px solid black; padding: 2px 5px;">1</div>	x	\$4,900	9a.	4900	00
b. Number of individuals who qualify for one of the following special exemptions: deaf, blind, hemiplegic, paraplegic, quadriplegic, or totally and permanently disabled.....	9b.		x	\$2,800	9b.		00
c. Number of qualified disabled veterans.....	9c.		x	\$400	9c.		00
d. Number of Certificates of Stillbirth from MDHHS (see instructions).....	9d.		x	\$4,900	9d.		00
e. Claimed as dependent, see line 9 NOTE above.....	9e.	<input type="checkbox"/>			9e.		00
f. Add lines 9a, 9b, 9c, 9d and 9e. Enter here and on line 15.....	9f.				9f.	4900	00
10. Adjusted Gross Income from your U.S. Form 1040 (see instructions).....	10.				10.	29947	00
11. Additions from Schedule 1, line 9. Include Schedule 1	11.				11.		00
12. Total. Add lines 10 and 11.....	12.				12.	29947	00
13. Subtractions from Schedule 1, line 29. Include Schedule 1	13.				13.	0	00
14. Income subject to tax. Subtract line 13 from line 12. If line 13 is greater than line 12, enter "0".....	14.				14.	29947	00
15. Exemption allowance. Enter amount from line 9f or Schedule NR, line 19.....	15.				15.	4900	00
16. Taxable income. Subtract line 15 from line 14. If line 15 is greater than line 14, enter "0".....	16.				16.	25047	00
17. Tax. Multiply line 16 by 4.25% (0.0425).....	17.				17.	1064	00

NON-REFUNDABLE CREDITS

	AMOUNT		CREDIT		
18. Income Tax Imposed by government units outside Michigan. Include a copy of the return (see instructions).....	18a.	<div style="border: 1px solid black; padding: 2px 5px;">00</div>	18b.	<div style="border: 1px solid black; padding: 2px 5px;">00</div>	
19. Michigan Historic Preservation Tax Credit carryforward (see instructions).....	19a.	<div style="border: 1px solid black; padding: 2px 5px;">00</div>	19b.	<div style="border: 1px solid black; padding: 2px 5px;">00</div>	
20. Income Tax. Subtract the sum of lines 18b and 19b from line 17. If the sum of lines 18b and 19b is greater than line 17, enter "0".....	20.		20.	1064	00

Filer's Full Social Security Number

385 — 21 — 6981

21. Enter amount of Income Tax from line 20.....	21.	1064	00
22. Voluntary Contributions from Form 4642, line 6. Include Form 4642	22.		00
23. USE TAX. Use tax due on Internet, mail order or other out-of-state purchases from Worksheet 1 (see instructions).....	23.	0	00
24. Total Tax Liability. Add lines 21, 22 and 23	24.	1064	00

REFUNDABLE CREDITS AND PAYMENTS

25. Property Tax Credit. Include MI-1040CR or MI-1040CR-2	25.		00
26. Farmland Preservation Tax Credit. Include MI-1040CR-5	26.		00
27. Earned Income Tax Credit. Multiply line 27a by 6% (0.06) and enter result on line 27b.	27a.		00
28. Michigan Historic Preservation Tax Credit (refundable). Include Form 3581	28.		00
29. Credit for allocated share of tax paid by an electing flow-through entity (see instructions).....	29.		00
30. Michigan tax withheld from Schedule W, line 6. Include Schedule W (do not submit W-2s)	30.	1273	00
31. Estimated tax, extension payments and 2020 credit forward	31.		00
32. 2021 AMENDED RETURNS ONLY. Taxpayers completing an original 2021 return should skip to line 33. Amended returns must include Schedule AMD (see instructions) .			
32a. <input type="checkbox"/> If you had a refund and/or credit forward on the original return, check box 32a and enter this amount as a negative number on line 32c.			
32b. <input type="checkbox"/> If you paid with the original return, check box 32b and enter the amount paid with the original return, plus any additional tax paid after filing, as a positive number on line 32c. Do not include interest or penalty.			
33. Total refundable credits and payments. Add lines 25, 26, 27b, 28, 29, 30, 31 and 32c	33.	1273	00

REFUND OR TAX DUE

34. If line 33 is less than line 24, subtract line 33 from line 24. If applicable, see instructions.			
Include interest <input type="text"/> and penalty <input type="text"/>	YOU OWE		
35. Overpayment. If line 33 is greater than line 24, subtract line 24 from line 33	35.	209	00
36. Credit Forward. Amount of line 35 to be credited to your 2022 estimated tax for your 2022 tax return ...	36.		00
37. Subtract line 36 from line 35.	REFUND	209	00

DIRECT DEPOSIT

Deposit your refund directly to your financial institution! See instructions and complete a, b and c.

a. Routing Transit Number

272484470

b. Account Number

02546723707

c. Type of Account1. ☒ Checking 2. ☐ Savings**Deceased Taxpayer.** If Filer and/or Spouse died after December 31, 2020, enter dates below.
ENTER DATE OF DEATH ONLY. Example: 04-15-2021 (MM-DD-YYYY)

Filer

— —

Spouse

— —

Preparer Certification. I declare under penalty of perjury that this return is based on all information of which I have any knowledge.

Preparer's PTIN, FEIN or SSN

Preparer's Name (print or type)

Preparer's Signature

SELF-PREPARED

Preparer's Business Name, Address and Telephone Number

Taxpayer Certification. I declare under penalty of perjury that the information in this return and attachments is true and complete to the best of my knowledge.

Filer's Signature

Date

Spouse's Signature

Date

☐ By checking this box, I authorize Treasury to discuss my return with my preparer.

Refund, credit, or zero returns. Mail your return to:

Michigan Department of Treasury, Lansing, MI 48956

Pay amount on line 34 (see instructions). Mail your check and return to:

Michigan Department of Treasury, Lansing, MI 48929

2021 MICHIGAN Withholding Tax Schedule

Issued under authority of Public Act 281 of 1967, as amended.

Type or print in blue or black ink.

Attachment 13

INSTRUCTIONS: If you had Michigan income tax withheld in 2021, you must complete a *Withholding Tax Schedule* (Schedule W) to claim the withholding on your *Individual Income Tax Return* (MI-1040, line 30). Report military pay in Table 1 and military retirement benefits and taxable railroad retirement benefits (both Tier 1 and Tier 2) in Table 2 even if no Michigan tax was withheld. Include your completed Schedule W with Form MI-1040. See complete instructions on page 2 of this form. If you need additional space, include another Schedule W.

1. Filer's First Name LIAM	M.I. J	Last Name HUGHES	2. Filer's Full Social Security No. (Example: 123-45-6789) 385 — 21 — 6981
If a Joint Return, Spouse's First Name	M.I.	Last Name	3. Spouse's Full Social Security No. (Example: 123-45-6789) — —

TABLE 1: MICHIGAN TAX WITHHELD OR MILITARY PAY REPORTED ON W-2, W-2G or CORRECTED W-2 FORMS

A Enter "X" for: Filer or Spouse		B Employer's identification number (Example: 38-1234567)	C Box c — Employer's name	D Box 1 — Wages, tips, other compensation		E Box 17 — Michigan income tax withheld	
X		38-2687736	MORLEY COMPANIES	29947	00	1273	00
					00		00
					00		00
					00		00
					00		00
					00		00
Enter Table 1 Subtotal from additional Schedule W forms (if applicable).....							00
4. SUBTOTAL. Enter total of Table 1, column E.						4.	1273 00

TABLE 2: MICHIGAN TAX WITHHELD OR MILITARY RETIREMENT BENEFITS AND RAILROAD RETIREMENT BENEFITS (BOTH TIER 1 AND TIER 2) REPORTED ON 1099 FORMS

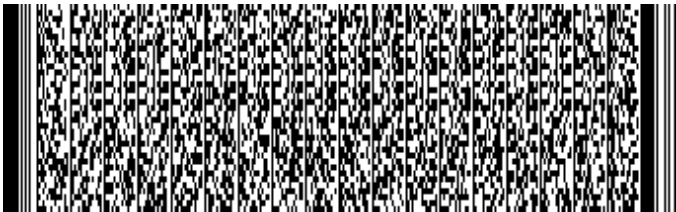
A Enter "X" for: Filer or Spouse		B Payer's federal identification number (Example: 38-1234567)	C Payer's name	D Taxable pension distribution, misc. income, etc. (see inst.)		E Michigan income tax withheld	
					00		00
					00		00
					00		00
					00		00
					00		00
					00		00
Enter Table 2 Subtotal from additional Schedule W forms (if applicable).....							00
5. SUBTOTAL. Enter total of Table 2, column E.						5.	00
6. TOTAL. Add lines 4 and 5. Enter here and carry to MI-1040, line 30.....						6.	1273 00

REV 04/02/22 INTUIT.CG.CFP.SP

SAGINAW

2021 INDIVIDUAL CITY INCOME TAX
BARCODE DATASHEET

This datasheet is the cover sheet of your return. If the software generates this form please send this with your individual income tax return and all required attachments. Please do not staple your return.



Taxpayer's SSN	Taxpayer's first name	Initial	Last name
385-21-6981	LIAM	J	HUGHES
Spouse's SSN	If joint return spouse's first name	Initial	Last name
Present home address (Number and street)			Apt. no.
1123 S VAN BUREN ST			
Address line 2 (P.O. Box address for mailing use only)			
City, town or post office		State	Zip code
BAY CITY		MI	48708-8037
Foreign country name	Foreign province/county		Foreign postal code



MAIL TO ADDRESS:
{CITY NAME} INCOME TAX DEPARTMENT, ADDRESS, CITY, ST ZIP CODE
CITY OF SAGINAW INCOME TAX OFFICE
1315 S WASHINGTON AVE
SAGINAW, MI 48601

Revised 10/15/2020

INDIVIDUAL RETURN DUE APRIL 30, 2022

Taxpayer's SSN 385-21-6981		Taxpayer's first name Initial Last name LIAM J HUGHES		RESIDENCE STATUS Resident <input type="checkbox"/> Nonresident <input checked="" type="checkbox"/> Part-year resident <input type="checkbox"/>	
Spouse's SSN		If joint return spouse's first name Initial Last name		Part-year resident - dates of residency (mm/dd/yyyy) From <input type="text"/> To <input type="text"/>	
Mark (X) box if deceased <input type="checkbox"/> Taxpayer <input type="checkbox"/> Spouse		Present home address (Number and street) Apt. no. 1123 S VAN BUREN ST		FILING STATUS <input checked="" type="checkbox"/> Single <input type="checkbox"/> Married filing jointly	
Enter date of death on page 2, right side of the signature area		Address line 2 (P.O. Box address for mailing use only)		<input type="checkbox"/> Married filing separately. Enter spouse's SSN in Spouse's SSN box and Spouse's full name here.	
Mark box (X) below if: <input type="checkbox"/> Federal Form 1310 attached		City, town or post office State Zip code BAY CITY MI 48708-8037		Spouse's full name if married filing separately	
<input type="checkbox"/> Itemized deductions on your Federal tax return for 2021		Foreign country name Foreign province/county Foreign postal code			

ROUND ALL FIGURES TO NEAREST DOLLAR (Drop amounts under \$0.50 and increase amounts from \$.50 to \$0.99 to next dollar)		Column A Federal Return Data	Column B Exclusions/Adjustments	Column C Taxable Income
SEND COPY OF PAGE 1 OF FEDERAL RETURN	1. Wages, salaries, tips, etc. (W-2 forms must be attached)	29947.00	29947.00	0.00
	2. Taxable interest	.00	.00	.00
	3. Ordinary dividends	.00	.00	.00
	4. Taxable refunds, credits or offsets of state and local income taxes	0.00	0.00	NOT TAXABLE
	5. Alimony received	.00	.00	.00
	6. Business income or (loss) (Attach copy of federal Schedule C)	.00	.00	.00
	7. Capital gain or (loss) (Attach copy of fed. Sch. D) 7a. <input type="checkbox"/> Mark if federal Sch. D not required	.00	.00	.00
	8. Other gains or (losses) (Attach copy of federal Form 4797)	.00	.00	.00
	9. Taxable IRA distributions (Attach copy of Form(s) 1099-R)	.00	.00	.00
	10. Taxable pensions and annuities (Attach copy of Form(s) 1099-R)	.00	.00	.00
SEND W-2 FORMS	11. Rental real estate, royalties, partnerships, S corporations, trusts, etc. (Attach copy of federal Schedule E)	.00	.00	.00
	12. Subchapter S corporation distributions (Att. copy of fed. Sch. K-1)	NOT APPLICABLE	.00	.00
	13. Farm income or (loss) (Attach copy of federal Schedule F)	.00	.00	.00
	14. Unemployment compensation	.00	.00	NOT TAXABLE
	15. Social security benefits	.00	.00	NOT TAXABLE
	16. Other income (Attach statement listing type and amount)	.00	.00	.00
	17. Total additions (Add lines 2 through 16)	0.00	0.00	.00
	18. Total income (Add lines 1 through 16)	29947.00	29947.00	0.00
	19. Total deductions (Subtractions) (Total from page 2, Deductions schedule, line 7)			.00
	20. Total income after deductions (Subtract line 19 from line 18)			0.00
ENCLOSE CHECK OR MONEY ORDER	21. Exemptions (Enter the total exemptions, from Form CF-1040, page 2, box 1h, on line 21a and multiply this number by the value of an exemption and enter on line 21b)	21a <input type="text" value="1"/>	21b	750.00
	22. Total income subject to tax (Subtract line 21b from line 20)			0.00
	23. Tax at 0075 (Multiply line 22 by resident or nonresident tax rate for city and enter tax on line 23b, or if using Schedule TC to compute tax, check box 23a and enter tax from Schedule TC, line 23d)	23a <input type="checkbox"/>	23b	0.00
	24. Payments and credits 24a <input type="text" value="0.00"/> SAGINAW tax withheld 24b <input type="text" value="0.00"/> Other tax payments (est, extension, or fwd, partnership & tax option corp) 24c <input type="text" value="0.00"/> Credit for tax paid to another city			Total payments & credits 24d <input type="text" value="0.00"/>
	25. Interest and penalty for: failure to make estimated tax payments; underpayment of estimated tax; or late payment of tax 25a <input type="text" value="0.00"/> Interest 25b <input type="text" value="0.00"/> Penalty			Total interest & penalty 25c <input type="text" value="0.00"/>
	TAX DUE 26. PAYABLE TO: CITY OF SAGINAW, OR TO PAY WITH A DIRECT WITHDRAWAL (for cities accepting this type of payment) mark (X) pay tax due, line 31b, and complete lines 31c, d & e)			PAY WITH RETURN 26 <input type="text" value="0.00"/>
	OVERPAYMENT 27. Tax overpayment (Subtract lines 23b and 25c from line 24d; choose overpayment options on lines 28 - 30)			27 <input type="text" value="0.00"/>
	28. Amount of overpayment donated 28a <input type="text" value="0.00"/> Donation 1 28b <input type="text" value="0.00"/> Donation 2 28c <input type="text" value="0.00"/> Donation 3			Total donation s 28d <input type="text" value="0.00"/>
	29. Amount of overpayment credited forward to 2022			Amount of credit to 2022 >> 29 <input type="text" value="0.00"/>
	30. Amount of overpayment refunded (Line 27 less lines 28d and 29) (For refund to be directly deposited to your bank account, mark refund box, line 31a, and complete line 31 c, d & e)			Refund amount >> 30 <input type="text" value="0.00"/>

31. (Mark (X) appropriate box 31a or 31b and complete lines 31c, 31d and 31e)	31a <input type="checkbox"/> Direct deposit refund or direct withdrawal payment	31b <input type="checkbox"/> Pay tax due (direct withdrawal)	31c <input type="text"/> Refund (direct deposit) Routing number	31d <input type="text"/> Account number	31e Account Type: <input type="text"/>
	<div style="display: flex; justify-content: space-between;"> 31e1. Checking <input type="checkbox"/> 31e2. Savings <input type="checkbox"/> </div>				

EXEMPTIONS SCHEDULE	Date of birth (mm/dd/yyyy)					Regular	65 or over	Blind	Deaf	Disabled			
	1a. You	12/17/1997					<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1e. Enter the number of boxes checked on lines 1a and 1b	1
	1b. Spouse						<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
1d. List Dependents	1c.	Check box if you can be claimed as a dependent on another person's tax return											
#	First Name	Last Name	Social Security Number	Relationship	Date of Birth	1f. Enter number of dependent children listed on line 1d							
1.													
2.													
3.								1g. Enter number of other dependents listed on line 1d					
4.													
5.													
6.								1h. Total exemptions (Add lines 1e, 1f and 1g; enter here and also on page 1, line 21a)					
7.													
8.								1					

EXCLUDED WAGES AND TAX WITHHELD SCHEDULE (See instructions. Resident wages generally not excluded)							
W-2 #	Col. A T or S	COLUMN B SOCIAL SECURITY NUMBER (Form W-2, box a)	COLUMN C EMPLOYER'S ID NUMBER (Form W-2, box b)	COLUMN D EXCLUDED WAGES (Attach Excluded Wages Sch)	FAILURE TO ATTACH W-2 FORMS TO PAGE 1 WILL DELAY PROCESSING OF RETURN. WAGE INFORMATION STATEMENTS PRINTED FROM TAX PREPARATION SOFTWARE ARE NOT ACCEPTABLE	COLUMN E TAX WITHHELD (Form W-2, box 19)	COLUMN F LOCALITY NAME (Form W-2, box 20)
1.	T	385-21-6981	38-2687736	29947 .00		0 .00	
2.				.00		.00	
3.				.00		.00	
4.				.00		.00	
5.				.00		.00	
6.				.00		.00	
7.				.00		.00	
8.				.00		.00	
9.				.00		.00	
10.				.00		.00	
11.	Totals (Enter here and on page 1; part-yr residents on Sch TC)			29947 .00	<< Enter on pg 1, ln 1, col B	0 .00	<< Enter on pg 1, ln 24a

DEDUCTIONS SCHEDULE (See instructions; deductions allocated on the same basis as related income)							DEDUCTIONS	
1.	IRA deduction (Attach copy of Schedule 1 of federal return & evidence of payment)						1	.00
2.	Self-employed SEP, SIMPLE and qualified plans (Attach copy of Schedule 1 of federal return)						2	.00
3.	Employee business expenses (Attach copy of CF-2106 and detailed list)						3	.00
4.	Moving expenses (Into city area only, Military ONLY) (Attach copy of federal Form 3903)						4	.00
5.	Alimony paid (DO NOT INCLUDE CHILD SUPPORT. Attach copy of Schedule 1 of federal return)						5	.00
6.	Renaissance Zone deduction (Attach Schedule RZ OF 1040)						6	.00
7.	Total deductions (Add line 1 through line 6, enter total here and on page 1, line 19)						7	.00

ADDRESS SCHEDULE (Where taxpayer (T), spouse (S) or both (B) resided during year and dates of residency)								
MARK T, S, B	List all residence (domicile) addresses (Include city, state & zip code). Start with address used on last year's return. If the address on page 1 of this return is the same as listed on last year's return, print "Same." If no return filed last year, list reason. Continue listing this tax year's residence addresses. If address listed on page 1 of this return is in care of another person, enter current residence (domicile) address.				FROM		TO	
					MONTH	DAY	MONTH	DAY
	Not required to file in 2020							

THIRD PARTY DESIGNEE				
Do you want to allow another person to discuss this return with the Income Tax Office?		Yes, complete the following		<input checked="" type="checkbox"/> No
Designee's name		Phone No.	Personal identification number (PIN)	
Under the penalty of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief it is true, correct and complete. If I am a resident claiming a credit for taxes paid to another city, I acknowledge and consent to the City's verification of unrefunded payment to that city. If prepared by a person other than taxpayer, the preparer's declaration is based on all information of which preparer has any knowledge.				
SIGN HERE ==>	TAXPAYER'S SIGNATURE - If joint return, both spouses must sign	Date (MM/DD/YY)	Taxpayer's occupation	Daytime phone number
			FULL TIME TRAINER	(810) 201-0357
	SPOUSE'S SIGNATURE	Date (MM/DD/YY)	Spouse's occupation	If deceased, date of death
PREPARER'S SIGNATURE	SIGNATURE OF PREPARER OTHER THAN TAXPAYER		Date (MM/DD/YY)	PTIN, EIN or SSN
	SELF-PREPARED		Preparer's phone no.	
	FIRM'S NAME (or yours if self-employed), ADDRESS AND ZIP CODE		NACTP software number	1555

Taxpayer's name LIAM J HUGHES	Taxpayer's SSN 385-21-6981	2021 SAGINAW	
WAGES AND EXCLUDIBLE WAGES SCHEDULE - CF-1040, PAGE 1, LINE 1, COLUMN B			Attachment 2-1
All W-2 forms must be attached to page 1 of the return		1555	REV 04/02/22 INTUIT.CS.CFP.SP Revised 06/15/2017
<p>Use this form to provide details for all Forms W-2 and all other wage income reported on federal Forms 1040 (line 7), 1040A (line 7), or 1040EZ (line 1) such as: wages received as a household employee for which you did not receive a W-2; tips reported on federal Form 4137; taxable dependent care benefits; employer-provided adoption benefits; scholarship and fellowship grants not reported on Form W-2; disability pensions shown on Form 1099-R if the taxpayer has not reached the minimum retirement age set by the employer; corrective distributions from a retirement plan shown on Form 1099-R from excess salary deferrals and/or excess contributions (plus earnings); wages from Form 8919, line 6; and other wage items not included in a Form W-2.</p> <p>Use this form to calculate excludible (nontaxable) wages included in total wages reported on your federal tax return (Forms 1040, line 7; 1040A, line 7; or 1040EZ, line 1). Excludible wages for each employer are also reported on Form CF-1040, page 2, Excluded Wages and Tax Withheld Schedule and the total amount of excludible wages is reported on Form CF-1040, page 1, line 1, col. B.</p>			
WAGES, ETC.	Employer (or source) 1	Employer (or source) 2	Employer (or source) 3
1. Employer's ID number (W-2, box b) or source's ID Number if available	38-2687736		
2. Employer's name (Form W-2, box c) or source's name	MORLEY COMPANIES INC		
3. SSN from Form W-2, box a	385-21-6981		
4. Enter T for taxpayer or S for spouse	T	<input type="checkbox"/>	<input type="checkbox"/>
5. Dates of employment during tax year	From 01/01/2021 To 12/31/2021	From <input type="checkbox"/> To <input type="checkbox"/>	From <input type="checkbox"/> To <input type="checkbox"/>
6. Mark (X) box if you work at multiple locations in and out of SAGINAW	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Address of work station (Where you actually work, not address on Form W-2 unless you work there: include street number and street name, city, state and ZIP code; if line 6 is checked enter primary work location)	4075 BAY ROAD SAGINAW MI 48603		
8. Wages, tips, other compensation (Form W-2, Box 1); report statutory employee wages as zero	29947		
9. Wages not included in Form W-2, box 1 (See instructions)			
10. Code for wage type reported on line 9			
NONRESIDENT WAGE ALLOCATION	Employer (or source) 1	Employer (or source) 2	Employer (or source) 3
<p>For use by nonresidents or part-year residents who worked both in and outside of the city for the employer while a nonresident. Part-year residents working both in and outside while a nonresident must use the wage allocation to determine wages earned in city while a nonresident (use only wages and days worked while a nonresident for computations.) Nonresidents working all of their work time for an employer in the city should skip this Nonresident Wage Allocation section for that employer as all of their wages are taxable.</p>			
11. Enter actual number of days or hours on job for employer during period (Do not include weekends you did not work)			
12. Vacation, holiday and sick days or hours included in line 11, only if work performed in and outside the city			
13. Actual number of days or hours worked (Line 11 less line 12)			
14. Enter actual number of days or hours worked in city			
15. Percentage of days or hours worked in city (Line 14 divided by line 13; default is 100%)	%	%	%
16. Wages earned in city (Total of lines 8 and 9 multiplied by line 15; part-year residents use only the portion of wages earned while a nonresident)			
EXCLUDIBLE WAGES	Employer (or source) 1	Employer (or source) 2	Employer (or source) 3
17. Enter nonresident excludible wages (Total of lines 8 & 9 less line 16)	29947		
18. Enter resident excludible wages			
19. Enter reason excludible wages reported on lines 17 and/or 18 are not taxable by SAGINAW	EARNED OUTSIDE SAGINAW		
20. Total excludible wages (Line 17 plus line 18; Enter here and on CF-1040, page 2, Excluded Wages schedule)	29947		
21. Total taxable wages (Line 8 plus line 9 less line 20)	0		
22. Total wages (Add lines 8 and 9 for all employers and other sources; must equal amount reported on Form CF-1040, page 1, line 1, column A; Part-year residents must equal amount reported on Schedule TC, line 1, column A)		29947	
23. Total excludible wages from all employers and other sources (Add line 20 for all columns; enter here and also on Form CF-1040, page 1, line 1, column B; part-year residents enter here and on Schedule TC, line 1, column B)			29947
24. Total taxable wages from all employers and other sources (Line 22 less line 23); enter here and also on Form CF-1040, page 1, line 1, column C; part-year residents enter here and allocate on Schedule TC, line 1, between columns C and D)			0

FAILURE TO ATTACH ALL FORMS W-2 OR PROPERLY COMPLETE AND ATTACH THIS SCHEDULE WILL DELAY PROCESSING OF RETURN.

Michigan Information Worksheet

2021

► Keep for your records

Part I – Personal Information

Taxpayer:

Last Name Hughes
 First Name Liam
 Middle Initial J Suffix _____
 Social Security No. 385-21-6981
 Date of Birth 12/17/1997 (mm/dd/yyyy)
 Age as of 12/31/2021 24
 Date of death _____
 Occupation Full time Trainer
 Work Phone (810) 201-0357
 Home Phone _____

Spouse:

Last Name _____
 First Name _____
 Middle Initial _____ Suffix _____
 Social Security No. _____
 Date of Birth _____ (mm/dd/yyyy)
 Age as of 12/31/2021 _____
 Date of death _____
 Occupation _____
 Work Phone _____

Print phone number on city returns ☐ Home ☒ TP work ☐ Spouse work

c/o Name _____
 Address 1123 S Van Buren St Apt No. _____
 City Bay City State . . MI ZIP Code . . 48708-8037
 Foreign province/county _____ Foreign postal code _____
 Foreign country _____
 School District Code ► 09010

Part II – Main Form

Taxpayer Spouse (if different)

☒ ☐ Form MI-1040: Full-Year Resident ► _____
☐ ☐ Form MI-1040: Nonresident ► _____
☐ ☐ Form MI-1040: Part-Year Resident ► _____
 Enter Nonresident and Part-Year Resident allocations on Schedule NR. ► _____
 Taxpayer residency dates From _____ To _____
 Spouse residency dates From _____ To _____

City Resident Status (complete if filing a city income tax return):

Detroit	Full-year resident	Nonresident	Part-year resident
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Spouse's residency if different	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Other cities:

Caution: Turbotax does not support filing of Hudson city returns (see tax help)

Important: Complete the table below to indicate the residency status and activate the income tax return(s) for any of the following cities: (The program will prepare **Form(s) CF-1040** for you)

- Albion • Battle Creek • Benton Harbor • Big Rapids • East Lansing • Flint
- Grand Rapids • Grayling • Hamtramck • Highland Park • Ionia • Jackson
- Lansing • Lapeer • Muskegon • Muskegon Heights • Pontiac • Portland
- Port Huron • Saginaw • Springfield • Walker

City name _____	Residency Status				Part-year residents only:		
	Full year	Non res	Part-year	Do Not File	Taxpayer's Former address	Dates of residency	
					Spouse's Former address	From	To
Saginaw	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			

Part III – Filing Status

- ☒ Single
☐ Married, filing jointly
☐ Married, filing separately

Part IV – Dependent Information

Full Name	Relationship	Age	Disabled Veteran	Special exemption code	Filing a 2021 Michigan tax return
_____	_____	_____	<input type="checkbox"/>	_____	<input type="checkbox"/>
_____	_____	_____	<input type="checkbox"/>	_____	<input type="checkbox"/>
_____	_____	_____	<input type="checkbox"/>	_____	<input type="checkbox"/>
_____	_____	_____	<input type="checkbox"/>	_____	<input type="checkbox"/>

Stillbirth Exemption

A stillbirth exemption is available if you are a parent of a stillborn delivered during 2021 and have been issued a Certificate of Stillbirth from the Michigan Department of Health and Human Services.

Enter number of Certificates of Stillbirth from MDHHS if any _____

(If claiming this exemption include a copy of the MDHHS certificate with the return.)

Schedule NR: If one spouse is a full-year resident while the other is a part-year or nonresident,

enter number of certificates attributable to the full-year resident spouse _____

enter number of certificates attributable to the part-year or nonresident spouse _____

Part V – Homeowner/Renter Information**Taxpayer's status:**

- ☐ Homeowner who paid property tax
☐ Renter (including alternate housing facilities)
☐ Mobile home park resident

QuickZoom to Property Tax Information Worksheet ► _____

Part VI – Electronic Filing Information**Fed/State (F/S) Return:**

- Yes No**
☒ ☐ Use Federal Signature (PIN) in place of MI-8453 (See Help)

State-Only (SO) Return:

- Yes No**
☐ ☐ Use Electronic Signature Alternative, (ESA) (Shared Secrets) in place of MI-8453 (See Help)

Michigan EF Signature:

TP's Prior Year Adjusted Gross Income or Household Income (See Help) _____

TP's Prior Year Refund or Tax Due Amount (See Help) _____

Spouse's Prior Year Adjusted Gross Income or Household Income (See Help) _____

Spouse's Prior Year Refund or Tax Due Amount (See Help) _____

Detroit EF Signature:

TP's Prior Year Adjusted Gross Income (See Help) _____

TP's Prior Year Refund or Tax Due Amount (See Help) _____

Spouse's Prior Year Adjusted Gross Income (See Help) _____

Spouse's Prior Year Refund or Tax Due Amount (See Help) _____

Part VII – Direct Deposit Information or Direct Debit Information

Note: Direct Deposit or Direct Debit is only available on an original return and may not be used to issue a refund or a payment on an amended return.

State Information:

- Yes No**
☒ ☐ Use **direct deposit** for any **state tax refund**
☐ ☐ Use **direct debit** for **state tax payment** (Electronic Filing Only)?

State balance due amount from this return _____

Enter the payment date to withdraw from the account below _____

City Information:

- ☒ ☐ Use **direct deposit** for any **city tax refund** (see help)
☐ ☒ Use **direct debit** for any **city tax due** (see help)

Enter the payment date to withdraw from the account below _____

Liam J Hughes

385-21-6981

Page 3

Bank Information (State and City):

For any of the above options, fill out information below:

For direct deposit or electronic funds withdrawal, fill out information below:

Name of financial institution . . Team One
Account type Checking ☒ Savings ☐
Routing number 272484470
Account number 02546723707

International ACH Transactions

Yes No

☐ ☒ Will the funds for this refund (or payment) go to (or come from) an account outside the U.S.?

Part VIII – Additional Return Information

Exemptions:

Taxpayer

☐
☐
☐
☐
☐
☐

Spouse

☐
☐
☐
☐
☐
☐

Blind
Deaf
Paraplegic/Hemiplegic/Quadriplegic
Totally and Permanently Disabled
Disabled Veteran
Can be claimed as a dependent on someone else's return

Person Filing on Behalf of Deceased:

☐ Use federal Form 1310 in place of Form MI-1310
☐ Personal Representative
☐ Claimant

First Name Middle Initial Last Name

Address

City State ZIP Code

Address Change for CF-1040 city returns only (excludes Detroit):

☒ Address is same as last year

State Campaign Fund:

Yes No

☐ ☒ Does taxpayer want \$3 to go to State Campaign Fund?

☐ ☐ Does spouse want \$3 to go to State Campaign Fund?

Third Party Designee (See Help):

Yes No

☐ ☒ TP authorizes another person (designee) to discuss return with city Income Tax Department (**CF-1040 only**)?

Designee's name (other than preparer)

Designee's phone number (other than preparer)

Personal identification number

Part IX – Extension Status

State Extension:

Yes No

☐ ☒ Tax return due date extended?

Extended due date . . . _____

QuickZoom to Form 4: Application for extension to file tax returns ▶ _____

Liam J Hughes

385-21-6981

Page 4

City Extensions (excludes Detroit):

Yes No

☐ ☒ Tax return due date extended?

Extended due date . . . _____

QuickZoom to Form CF-4868: Application for extension to file **Michigan city** tax returns ▶ _____

QuickZoom to Form CF-4868-EFT: Application for extension to file **Michigan city** tax returns. ▶ _____

Detroit City Extensions:

Yes No

☐ ☒ Tax return due date extended?

Extended due date . . . _____

QuickZoom to Form 5209: Application for extension to file **Detroit city** tax return ▶ _____

Spouse, if
different

Yes No

☐ ☒ Tax return due date extended?

residency

Extended due date . . . _____

QuickZoom to Form 5209: Application for extension to file spouse's **Detroit city** tax return ▶ _____

Part X – Amended Return

☐ Filing a Michigan amended return

Enter the tax year you are amending . . . _____

Payment with original return _____ NOTE: Do not include penalties or interest

Overpayment from original return _____

QuickZoom to Schedule AMD: Amended Return Explanation of Changes ▶ _____

QuickZoom to Form MI-1040: Individual Income Tax Return ▶ _____

Total Household Resources Worksheet

2021

► Keep for your records

Name as Shown on Return Liam J Hughes	Social Security Number 385-21-6981
--	---------------------------------------

Household Income Computation (for full year and part-year residents)

	Column A Total Amount	Column B Received during Michigan residency
Full year residents: Complete column A only. Part-year residents: Complete columns A and B. QuickZoom to Schedule NR before completing column B . . . ► _____		
1 Wages, salaries, tips, sick, strike and SUB pay ► 1	29,947.	
Interest and dividends: 2 a Taxable interest and dividend income less: interest and dividend income from Schedules K-1 b Nontaxable interest Interest and dividends (including nontaxable interest) ► 2		
Net business and farm income: 3 a U.S. Schedule C income or loss b Net farm income or loss c Other gains or losses d Income from Schedules K-1 Net business and farm income ► 3		
Net royalty and rent income: 4 U.S. Schedule E income (if negative, enter 0) ► 4		
Retirement pension and annuity benefits: 5 a Pension and IRA distributions b Lump-sum distribution Name of payer: _____ Retirement pension and annuity benefits ► 5		
Capital gains or (losses): 6 a Capital gains less capital losses b Excluded gain on sale of residence Combine lines 6a and 6b ► 6		
Alimony and other taxable income: 7 a Gambling/lottery winnings b Prizes and awards c Combine lines 7a and 7b d Line 7c minus \$300 e Other income from Form 1099-MISC f Alimony received if due to divorce granted prior to 2019 g Other taxable income h Combine lines 7d through 7g less: prior year Michigan Property Tax Credit (see tax help) Total. Describe: _____ ► 7		
Social security, SSI and railroad retirement benefits: 8 a Social security or railroad retirement benefits b Less deductions for medicare premiums c Supplemental security income d Death benefits and amounts received for minor children or other dependent adults who live with you Combine lines 8a through 8d ► 8		
9 Child support and foster parent payments ► 9		
10 Unemployment compensation ► 10		
11 Cash or merchandise received or expenses paid on your behalf (rents, taxes, utilities, food, medical care, etc.) by parents, relatives or friends in excess of \$300 ► 11		

Other nontaxable income:			
12 a	Compensation for damages to character or for personal injury or sickness		
b	An inheritance or life insurance proceeds (from other than spouse)		
c	Death benefits paid by or on behalf of an employer.		
d	Minister's housing allowance		
e	Forgiveness of debt to the extent not included in income less: exception for 'workout' loan modification		
f	Adoption subsidies.		
g	Combat pay from W-2, box 12 code Q.		
h	Nongovernmental scholarship, stipend, grant, or GI bill benefits and payments made directly to an educational institution		
i	Reimbursement from dependent care and/or medical care spending accounts.		
j	If you are married, filing separately include your spouse's income unless you maintained separate homesteads. Complete and attach Form 5049		
k	Other (see <i>Tax Help</i>). Enter description:		
	Total. Describe: ► 12		
13	Workers' compensation, veterans' disability compensation ► 13		
14	FIP and other MDHHS benefits. ► 14		
15	Subtotal. Add lines 1 through 14. ► 15	29,947.	
Adjustments:			
16 a	IRA deduction		
b	Moving expenses		
c	One half of self-employment tax		
d	Self-employment health insurance deduction		
e	SEP, SIMPLE or qualified plans		
f	Penalty for early withdrawal.		
g	Alimony paid if deductible on U.S. Form 1040.		
h	Student loan interest deduction.		
i	Health savings account deduction		
j	Net operating loss deduction: (1) Federal net operating loss deduction. (2) Federal modified taxable income (see <i>Help</i>). (3) Enter the smaller of (1) or (2). If less than zero, enter -0-.		
k	Educator expenses		
m	Certain business expenses of reservists, performing artists, and fee-basis government officials		
o	Archer MSA deduction		
p	Jury duty pay given to employer		
q	Other adjustments		
16	Total adjustments. Describe: ► 16		
17 a	Medical insurance or HMO premiums you paid for you and your family (after tax premiums only).		
b	Automobile insurance premiums (medical care portion only)		
17	Total medical insurance (line 17a plus line 17b) ► 17		
18	Add lines 16 and 17 ► 18		
19	Total Household Resources. Subtract line 18 from line 15. . . ► 19	29,947.	
QuickZoom to Form MI-1040CR (Homestead Property Tax Credit) ►			
QuickZoom to Form MI-1040CR2 (Property Tax Credit for Veterans and Blind People) ►			
QuickZoom to Form MI-1040CR7 (Home Heating Credit) ►			

Name(s) Shown on Return
Liam J HughesYour Social Security Number
385-21-6981**Part I 2022 Estimated Tax Amount Options****1 Select One of Six Ways to Calculate the Required Annual Payment for 2022 Estimates:**

- a 100% (110%) of 2021 taxes (default, see Tax Help) ☒ 1,064.
- b 100% of tax on **2022** estimated taxable income ☐ 1,064.
- c 90% of tax on **2022** estimated taxable income ☐ 958.
- d 66-2/3% of tax on 2022 estimated taxable income (farmers and fishermen) ☐ 710.
- e Equal to 100% of overpayment (no vouchers) ☐ 209.
- f Enter total amount you want to use for estimates and check box ☐ ►

2 Selected estimated tax amount:

- a 2022 Required Annual Payment based on your choice above 1,064.
- b Estimated amount of 2022 income tax withholding 1,273.
- c **Total of estimated tax payments required for 2022** (line 2a less line 2b) 0.

3 Select Estimated Tax Payment option:

- a Calculate estimates if \$ 501 or more (default) ☒
- b Calculate estimates if _____ (specify amount) or more. ☐
- c Calculate estimates regardless of amount ☐
- d Do **not** calculate estimates ☐

Part II Overpayment Application Options

- 1 Amount of overpayment available (Form MI-1040, line 33) 209.

2 Select Overpayment Application Amount Option:

- a Apply none (refund entire overpayment) ☒
- b Apply all (increase estimate if required) ☐
- c Apply to extent of total estimated tax and refund excess ☐
- d Apply to extent of first quarter amount and refund excess ☐
- e Enter amount you want to apply ☐ ►
- f Amount applied to 2022 estimated tax 0.
- g Overpayment to be refunded (line 1 less line 2f) 209.

3 Select Overpayment Application Sequence:

- a ☒ ◀ Consecutively b ☐ ◀ Evenly

Part III Rounding and Printing Options**1 Select Rounding Option:**

- a ☒ ◀ Round up to next \$1 b ☐ ◀ Round up to next \$10 c ☐ ◀ Round up to next \$100 d ☐ ◀ Round to nearest \$1

2 Select Voucher Printing Option:

- a ☒ ◀ Print (per Part I, lines 3a - c) b ☐ ◀ Print only name, etc. c ☐ ◀ Do **not** print vouchers

Part IV Estimated Tax Payment Summary

	1 Apr 18, 2022	2 Jun 15, 2022	3 Sep 15, 2022	4 Jan 17, 2023	Total
1 If you have already made payments, enter amounts. . .					
2 Indicate which payment is due next. (e.g. if it is now July 26, 2022, check col. 3) . .	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3 Required payment.					
4 Overpayment applied					
5 Net payment due					
6 Voucher amounts					
QuickZoom to voucher. . . ►					

Part V Changes to Income, Credits and Withholding for 2022

2021 income and deductions are shown in the '2021 Actual' column below.

***Caution:** For each line in the '2022 Estimated' column, enter the estimated 2022 amount **if different** from 2021. Otherwise, the '2021 Actual' amount will be used for that line. If zero, you **must** enter zero.

	2021 Actual	*2022 Estimated
1 Federal adjusted gross income	29,947.	
2 Additions		
3 Subtractions	0.	0.
4 Exemption allowance amount	4,900.	
5 Credits:		
a Credit for income tax paid to another jurisdiction		
b Other nonrefundable credits		
c Property tax credit		
d Farmland preservation tax credit		
e Michigan earned income tax credit		
f Michigan Historic Preservation Tax Credit		
g Pass-Through Entity Tax Credit		
6 Income tax withheld	1,273.	

Part VI 2022 Estimated Taxable Income and Tax

1 Estimated 2022 income subject to tax	1	29,947.
2 Exemption allowance amount	2	4,900.
3 Balance. Subtract line 2 from line 1	3	25,047.
4 Estimated tax. Multiply line 3 by 4.25% (.0425)	4	1,064.
5 All estimated credits	5	
6 Subtract line 5 from line 4. This is your 2022 tax based on your estimate of 2022 income	6	1,064.

Pension Deduction Worksheet

2021

► Keep for your records

Name as Shown on Return <u>Liam J Hughes</u>	Social Security Number <u>385-21-6981</u>
---	--

* T y p e	** 4 5 7 P l a n	*** D e c e a s e d	If Roth conversion		**** T S	1 0 9 9 R C o d e	Payer/Description	Federal Amount	Michigan amount (Part-year residents only)
			Date of conversion from Regular to Roth IRA (mm/dd/yy)	Age 59-1/2 or older as of conversion date Yes No			Payer/EIN		
	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/> <input type="checkbox"/>					
	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/> <input type="checkbox"/>					
	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/> <input type="checkbox"/>					
	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/> <input type="checkbox"/>					

a Deceased Spouse Name **b** Deceased Spouse Social Security Number **c** Deceased Spouse Year of Birth (ex. 19XX)

d Deceased Spouse Received retirement benefits from employment exempt from Social Security in the year they died ☐ **e** Deceased Spouse Retired as of 1/1/2013 ☐

Note: If you are an unremarried surviving spouse who was born after 1945 and has reached the age of 67, and claimed a subtraction for retirement and pension benefits on a return jointly filed with the decedent in the year they died, see Form 4884 for more details on claiming your deduction.

<p>* Enter pension type:</p> <p>M – Military</p> <p>R – Railroad</p> <p>G – Government or Public</p> <p>P – Private (including IRAs)</p> <p>C – 2021 Roth IRA conversion</p> <p>N – Other distributions (subject to Michigan income tax)</p>	<p>** Check if Distribution is from a 457 plan (subject to Michigan income tax) (Automatically changes pension type to "N")</p>	<p>*** Check if Distribution was received from a deceased spouse who died prior to 2021</p>	<p>**** Enter pension ownership:</p> <p>T – Taxpayer</p> <p>S – Spouse</p>
--	---	---	--

QuickZoom to Form 4884. ➡ _____

QuickZoom to Form 4973. ➡ _____

Property Tax Information Worksheet

► Keep for your records

2021

Name as Shown on Return Liam J Hughes	Social Security Number 385-21-6981
--	---------------------------------------

☐ The homestead referenced on this worksheet was **NOT** located in Michigan
*** Caution:** marking this box disables the Homestead Property Tax Credit and the Home Heating Credit

MI-1040CR-2 eligibility:

- 1 ☐ Blind and own your homestead.
☐ Veteran with service-connected disability. Enter percent of disability. %
☐ Surviving spouse of veteran deceased in service
☐ Veteran of wars before World War I, pensioned veteran, his/her surviving spouse, or an active military
☐ Surviving spouse of a veteran of the Korean War, World War II or World War I

Homeowners:

	A	B	C
	Lived in same residence all year ▼	If you bought or sold your home in 2021 Bought ▼ Sold ▼	
* Caution: the amount calculated on line 2b, column A is the amount paid. If the amount billed is different, enter the amount billed or mark the box below to prevent calculation of property taxes levied. Do not calculate line 2b, column A <input type="checkbox"/>			
2a	Number of days occupied 365		
b	Property taxes levied in 2021		

Home Office Worksheet

lines c, d and e only apply if part of the home was used for business - all others continue with line f

c	Percent of home used for business *	%	%	%
d	Business portion of taxes (Line 2b X line 2c) * . .			
e	Personal portion of taxes (Line 2b - line 2d)			

f Taxable value of homestead

3 Address on December 31, 2021, if different from your current address:
 Address State ZIP Code

4 Address of homestead sold during 2021:
 Address State ZIP Code

Renters or Mobile Home Park Residents

(Do not include Alternate Housing Facility information, see line 6 below):

5 a Enter information below:

Address of mobile home park or homestead rented		Landowner's name and address	Veterans only - Millage rate
Number of months /days rented	Number of months paid \$3 mobile home tax	Monthly rent	Do not transfer to 2022
Address _____ City State Zip code Months _____ Months _____ Days _____		Name Address _____ City State Zip code Monthly Rent	<input type="checkbox"/>
Address _____ City State Zip code Months _____ Months _____ Days _____		Name Address _____ City State Zip code Monthly Rent	<input type="checkbox"/>

b **Renters age 65 and older:** If you moved from one rental homestead to another during the last two years, enter the final month's rent on your **previous** rented homestead

Alternate Housing Facilities

6 Name of housing project or landowner _____
Address _____
City _____ State ZIP Code _____

a *Subsidized housing or Service-fee housing residents:*

If you lived in one of these types of facilities for all or part of 2021, check the appropriate box below

☐ Subsidized Housing
☐ Service Fee Housing

Number of months rented _____

Number of days rented _____

Total rent paid in 2021 _____

Percentage attributed to property (Service Fee Housing only) (defaults to 10%) _____ %

b *Special housing:*

If you lived in one of these types of facilities for all or part of 2021, check the appropriate box below

☐ Cooperative Housing
☐ Home for the Aged
☐ Nursing Home
☐ Adult Foster Care Home
☐ Paid Room and Board

Your prorated share of taxes paid by the landowner _____

Tax Payments Worksheet

2021

► Keep for your records

Name Liam J Hughes	Social Security Number 385-21-6981
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Tax Payments for the Current Year

		State	
		Date	Payment
1	First Payment		
2	Second Payment		
3	Third Payment		
4	Fourth Payment		
Additional Payments			
5	Payment		
	Payment		
	Payment		
	Payment		
	Payment		
6	Overpayment from previous year applied to current year	6	
7	Amount paid with current year extension	7	
8	Total tax payments	8	

Income Taxes Withheld for the Current Year

9	State withholding on Forms W-2	9	1,273.
10	State withholding on Forms W-2G	10	
11	State withholding on Forms 1099-R	11	
12 a	State withholding on Forms 1099-MISC	12 a	
b	State withholding on Forms 1099-NEC	b	
c	State withholding on Forms 1099-G	c	
d	State withholding on Forms 1099-K	d	
13	Other state tax withholding	13	
14	Total income tax withheld	14	1,273.
15	Date return will be filed and balance paid	15	

► Keep for your records

Name as Shown on Return Liam J Hughes	Social Security Number 385-21-6981
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Use the table below to list your purchases or

☒ check here if no purchases were made requiring Use Tax

Description of Item Purchased	Date of Purchase	Purchase Price

1	<input type="checkbox"/> Itemized purchases of \$0 to \$1,000 x 6 percent (.06) OR <input type="checkbox"/> Use Tax Table amount	1	
2	Single purchases \$1,000 or more x 6 percent (.06)	2	
3	Sales Tax Paid to Another State on These Purchases	3	
4	Total Use Tax Due (Line 1 plus Line 2 minus Line 3)	4	

Enter amount from line 4 above on your 2021 MI-1040, line 23. If the amount on line 4 is 0, enter 0 on your 2021 MI-1040, line 23.

Tax Summary
► Keep for your records

2021

Name(s) Liam J Hughes	
Federal Adjusted Gross Income	29,947.
Michigan Additions	
Michigan Subtractions	0.
Exemptions	4,900.
Michigan Taxable Income	25,047.
Tax	1,064.
Non-refundable Credits	
Use Tax	0.
Total Tax	1,064.
Refundable Credits	
Michigan Tax Withheld	1,273.
Total Payments and Credits	1,273.
Interest and/or Penalty	
Amount Due	
Overpayment	209.
Amount applied to 2022 estimated tax	
Refund	209.

Detroit Tax Payments Worksheet

2021

► Keep for your records

Name Liam J Hughes	Social Security Number 385-21-6981
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Tax Payments for the Current Year

		Detroit	
		Date	Payment
1	First Payment		
2	Second Payment		
3	Third Payment		
4	Fourth Payment		
Additional Payments			
5	Payment		
	Payment		
	Payment		
	Payment		
	Payment		
6	Overpayment from previous year applied to current year	6	
7	Amount paid with current year extension	7	
8	Total tax payments	8	

Income Taxes Withheld for the Current Year

9	Date return will be filed and balance paid	15	
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