

TravelTax LLC

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April 18, 2020

Hoang V & Helen Nguyen
4366 S Pine St Apt C
Tacoma, WA 98409

Your privacy is important to us. Read the following privacy policy.

We collect nonpublic personal information about you from various sources, including:

- * Interviews regarding your tax situation
- * Applications, organizers, or other documents that supply such information as your name, address, telephone number, Social Security Number, number of dependents, income, and other tax-related data
- * Tax-related documents you provide that are required for processing tax returns, such as Forms W-2, 1099R, 1099-INT and 1099-DIV, and stock transactions

We do not disclose any nonpublic personal information about our clients or former clients to anyone, except as requested by our clients or as required by law.

We restrict access to personal information concerning you, except to our employees who need such information in order to provide products or services to you. We maintain physical, electronic, and procedural safeguards that comply with federal regulations to guard your personal information.

If you have any questions about our privacy policy, contact our office at (402)379-7818.

Sincerely,

Joseph Smith EA MST
TravelTax LLC

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 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 HOANG V	Last name NGUYEN	Your social security number 795-33-8135
If joint return, spouse's first name and middle initial HELEN	Last name NGUYEN	Spouse's social security number 958-99-6920
Home address (number and street). If you have a P.O. box, see instructions. 4366 S PINE ST		Apt. no. C
City, town or post office, state, and ZIP code. If you have a foreign address, also complete spaces below (see instructions). TACOMA, WA 98409		<div>Presidential Election Campaign</div> <div>Check here if you, or your spouse if filing jointly, want \$3 to go to this fund.</div> <div>Checking a box below will not change your tax or refund. <input type="checkbox"/> You <input type="checkbox"/> Spouse</div>
Foreign country name	Foreign province/state/county	Foreign postal code
If more than four dependents, see inst. & check here ▶ <input type="checkbox"/>		

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, 1955
☐ Are blind

Spouse:

☐ Was born before January 2, 1955
☐ Is blind

Dependents (see instructions):		(2) Social security number	(3) Relationship to you	(4) check if qualifies for (see inst.):	
(1) First name	Last name			Child tax credit	Credit for other dependents
ALBERT	NGUYEN	855-37-2229	SON	<input type="checkbox"/>	<input checked="" type="checkbox"/>
ARTHUR	NGUYEN	321-21-9772	SON	<input checked="" type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

1	Wages, salaries, tips, etc. Attach Form(s) W-2	1	130,176
2a	Tax-exempt interest	2a	
3a	Qualified dividends	3a	2,046
4a	IRA distributions	4a	
5a	Pensions and annuities	4c	
5a	Social security benefits	5a	
6	Capital gain or (loss). Attach Schedule D if required. If not required, check here . . ▶ <input type="checkbox"/>	6	2,248
7a	Other income from Schedule 1, line 9	7a	
b	Add lines 1, 2b, 3b, 4b, 4d, 5b, 6, and 7a. This is your total income ▶	7b	139,272
8a	Adjustments to income from Schedule 1, line 22	8a	0
b	Subtract line 8a from line 7b. This is your adjusted gross income ▶	8b	139,272
9	Standard deduction or itemized deductions (from Schedule A)	9	24,400
10	Qualified business income deduction. Attach Form 8995 or Form 8995-A. . .	10	
11a	Add lines 9 and 10	11a	24,400
b	Taxable income. Subtract line 11a from line 8b. If zero or less, enter -0-	11b	114,872

12a Tax (see instructions). Check if any from:1 ☐ Form(s) 8814 2 ☐ Form 4972 3 ☐ **12a** 16,832**b** Add Schedule 2, line 3, and line 12a and enter the total **12b** 16,832**13a** Child tax credit or credit for other dependents **13a** 2,500**b** Add Schedule 3, line 7, and line 13a and enter the total **13b** 3,270**14** Subtract line 13b from line 12b. If zero or less, enter -0- **14** 13,562**15** Other taxes, including self-employment tax, from Schedule 2, line 10 **15****16** Add lines 14 and 15. This is your **total tax** **16** 13,562**17** Federal income tax withheld from Forms W-2 and 1099 **17** 18,797**18** Other payments and refundable credits:**a** Earned income credit (EIC) **18a****b** Additional child tax credit. Attach Schedule 8812 **18b****c** American opportunity credit from Form 8863, line 8 **18c****d** Schedule 3, line 14. **18d** 608**e** Add lines 18a through 18d. These are your **total other payments and refundable credits** **18e** 608**19** Add lines 17 and 18e. These are your **total payments** **19** 19,405**Refund****20** If line 19 is more than line 16, subtract line 16 from line 19. This is the amount you **overpaid** **20** 5,843**21 a** Amount of line 20 you want **refunded to you**. If Form 8888 is attached, check here ☐ **21a** 5,843Direct deposit?
See
instructions.**b** Routing number 1 2 1 2 0 2 2 1 1 **c** Type: ☒ Checking ☐ Savings**d** Account number 4 4 0 0 2 5 5 0 1 0 9 7**22** Amount of line 20 you want **applied to your 2020 estimated tax** **22****Amount You Owe****23** **Amount you owe**. Subtract line 19 from line 16. For details on how to pay, see instructions **23** 0**24** Estimated tax penalty (see instructions) **24****Third Party Designee**

Do you want to allow another person (other than your paid preparer) to discuss this return with the IRS? See instructions.

☐ **Yes**. Complete below.☐ **No**(Other than
paid preparer)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.

79033

03-02-2020

ACCOUNTANT

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.)

66289

03-02-2020

HOMEMAKER

Phone no. 203-726-1711

Email address

Paid Preparer Use Only

Preparer's signature

Date

PTIN

Check if:

Joseph Smith EA MST

04-18-2020

P00327633

☒ 3rd Party Designee

Preparer's name Joseph Smith EA MST

Phone no. 402-379-7818

☐ Self-employed

Firm's name ▶ TravelTax LLC

Firm's address ▶ 46 St Mark Rd

TAYLORS, SC 29687

Firm's EIN ▶ 20-0124265

SCHEDULE 3
(Form 1040 or 1040-SR)

Department of the Treasury
Internal Revenue Service

Additional Credits and Payments

► **Attach to Form 1040 or 1040-SR.**

► **Go to www.irs.gov/Form1040 for instructions and the latest information.**

OMB No. 1545-0074

2019

Attachment
Sequence No. **03**

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

Your social security number

HOANG V & HELEN NGUYEN

795-33-8135

Part I Nonrefundable Credits

1	Foreign tax credit. Attach Form 1116 if required	1	770
2	Credit for child and dependent care expenses. Attach Form 2441	2	
3	Education credits from Form 8863, line 19	3	
4	Retirement savings contributions credit. Attach Form 8880	4	
5	Residential energy credits. Attach Form 5695	5	
6	Other credits from Form: a <input type="checkbox"/> 3800 b <input type="checkbox"/> 8801 c <input type="checkbox"/>	6	
7	Add lines 1 through 6. Enter here and include on Form 1040 or 1040-SR, line 13b	7	770

Part II Other Payments and Refundable Credits

8	2019 estimated tax payments and amount applied from 2018 return	8	
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	608
12	Credit for federal tax on fuels. Attach Form 4136	12	
13	Credits from Form: a <input type="checkbox"/> 2439 b <input type="checkbox"/> Reserved c <input type="checkbox"/> 8885 d <input type="checkbox"/>	13	
14	Add lines 8 through 13. Enter here and on Form 1040 or 1040-SR, line 18d	14	608

For Paperwork Reduction Act Notice, see your tax return instructions.

Schedule 3 (Form 1040 or 1040-SR) 2019

EEA

SCHEDULE A
(Form 1040 or 1040-SR)
(Rev. January 2020)

Department of the Treasury
Internal Revenue Service (99)

Itemized Deductions

► Go to www.irs.gov/ScheduleA for instructions and the latest information.

► Attach to Form 1040 or 1040-SR.

Caution: If you are claiming a net qualified disaster loss on Form 4684, see the instructions for line 16.

OMB No. 1545-0074

2019

Attachment
Sequence No. **07**

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

Your social security number

HOANG V & HELEN NGUYEN

795-33-8135

Medical and Dental Expenses

Caution: Do not include expenses reimbursed or paid by others.

- | | | | |
|---|---|---|---------|
| 1 | Medical and dental expenses (see instructions) | 1 | 900 |
| 2 | Enter amount from Form 1040 or 1040-SR, line 8b | 2 | 139,272 |
| 3 | Multiply line 2 by 7.5% (0.075) | 3 | 10,445 |
| 4 | Subtract line 3 from line 1. If line 3 is more than line 1, enter -0- | 4 | 0 |

Taxes You Paid

- | | | | |
|---|--|----|--------|
| 5 | State and local taxes. | | |
| a | State and local income taxes or general sales taxes. You may include either income taxes or general sales taxes on line 5a, but not both. If you elect to include general sales taxes instead of income taxes, check this box <input type="checkbox"/> | 5a | 8,376 |
| b | State and local real estate taxes (see instructions) | 5b | 5,482 |
| c | State and local personal property taxes | 5c | |
| d | Add lines 5a through 5c | 5d | 13,858 |
| e | Enter the smaller of line 5d or \$10,000 (\$5,000 if married filing separately) | 5e | 10,000 |
| 6 | Other taxes. List type and amount | 6 | |
| 7 | Add lines 5e and 6 | 7 | 10,000 |

Interest You Paid

Caution: Your mortgage interest deduction may be limited (see instructions).

- | | | | |
|----|---|----|-------|
| 8 | Home mortgage interest and points. If you didn't use all of your home mortgage loan(s) to buy, build, or improve your home, see instructions and check this box <input type="checkbox"/> | | |
| a | Home mortgage interest and points reported to you on Form 1098. See instructions if limited | 8a | 4,908 |
| b | Home mortgage interest not reported to you on Form 1098. See instructions if limited. If paid to the person from whom you bought the home, see instructions and show that person's name, identifying no., and address | 8b | |
| c | Points not reported to you on Form 1098. See instructions for special rules | 8c | |
| d | Mortgage insurance premiums (see instructions) | 8d | |
| e | Add lines 8a through 8d | 8e | 4,908 |
| 9 | Investment interest. Attach Form 4952 if required. See instructions | 9 | |
| 10 | Add lines 8e and 9 | 10 | 4,908 |

Gifts to Charity

Caution: If you made a gift and got a benefit for it, see instructions.

- | | | | |
|----|--|----|-----|
| 11 | Gifts by cash or check. If you made any gift of \$250 or more, see instructions | 11 | 500 |
| 12 | Other than by cash or check. If you made any gift of \$250 or more, see instructions. You must attach Form 8283 if over \$500 | 12 | |
| 13 | Carryover from prior year | 13 | |
| 14 | Add lines 11 through 13 | 14 | 500 |

Casualty and Theft Losses

- | | | | |
|----|--|----|--|
| 15 | Casualty and theft loss(es) from a federally declared disaster (other than net qualified disaster losses). Attach Form 4684 and enter the amount from line 18 of that form. See instructions | 15 | |
|----|--|----|--|

Other Itemized Deductions

- | | | | |
|----|---|----|--|
| 16 | Other - from list in instructions. List type and amount | 16 | |
|----|---|----|--|

Total Itemized Deductions

- | | | | |
|----|--|----|--------|
| 17 | Add the amounts in the far right column for lines 4 through 16. Also, enter this amount on Form 1040 or 1040-SR, line 9 | 17 | 15,408 |
| 18 | If you elect to itemize deductions even though they are less than your standard deduction, check this box <input type="checkbox"/> | | |

For Paperwork Reduction Act Notice, see the Instructions for Forms 1040 and 1040-SR.

Schedule A (Form 1040 or 1040-SR) 2019

SCHEDULE B
(Form 1040 or 1040-SR)Department of the Treasury
Internal Revenue Service (99)**Interest and Ordinary Dividends**► Go to www.irs.gov/ScheduleB for instructions and the latest information.
► Attach to Form 1040 or 1040-SR.

OMB No. 1545-0074

2019Attachment
Sequence No. **08**

Name(s) shown on return

HOANG V & HELEN NGUYEN

Your social security number

795-33-8135**Part I**
Interest(See instructions
and the
instructions for
Forms 1040 and
1040-SR, line 2b.)**Note:** If you
received a Form
1099-INT, Form
1099-OID, or
substitute
statement from
a brokerage firm,
list the firm's
name as the
payer and enter
the total interest
shown on that
form.

- 1 List name of payer. If any interest is from a seller-financed mortgage and the buyer used the property as a personal residence, see the instructions and list this interest first. Also, show that buyer's social security number and address ►

CANADIAN INTEREST RBC**CHARLES SCHWAB 0774****CHARLES SCHWAB 1097****INTEREST SUBTOTAL****360****Amount****164****194****2****1**

- 2 Add the amounts on line 1
- 3 Excludable interest on series EE and I U.S. savings bonds issued after 1989.
Attach Form 8815
- 4 Subtract line 3 from line 2. Enter the result here and on Form 1040 or 1040-SR,
line 2b ►

2**360****3****4****360****Note:** If line 4 is over \$1,500, you must complete Part III.**Amount****Part II**
Ordinary Dividends(See instructions
and the
instructions for
Forms 1040 and
1040-SR, line 3b.)**Note:** If you
received a Form
1099-DIV or
substitute
statement from
a brokerage firm,
list the firm's
name as the
payer and enter
the ordinary
dividends shown
on that form.

- 5 List name of payer ►

CANADIAN RESP DIVIDENDS**CHARLES SCHWAB****RBC CANADA****RBC CANADA 2****DIVIDEND SUBTOTAL****3,028****5****957****175****1,864****32**

- 6 Add the amounts on line 5. Enter the total here and on Form 1040 or 1040-SR,
line 3b ►

6**3,028****Note:** If line 6 is over \$1,500, you must complete Part III.**Part III**
Foreign Accounts and Trusts**Caution:** If
required, failure
to file FinCEN
Form 114 may
result in
substantial
penalties. See
instructions.

You must complete this part if you (a) had over \$1,500 of taxable interest or ordinary dividends; (b) had a foreign account; or (c) received a distribution from, or were a grantor of, or a transferor to, a foreign trust.

Yes**No**

- 7a At any time during 2019, did you have a financial interest in or signature authority over a financial account (such as a bank account, securities account, or brokerage account) located in a foreign country? See instructions

X

If "Yes," are you required to file FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR), to report that financial interest or signature authority? See FinCEN Form 114 and its instructions for filing requirements and exceptions to those requirements

X

- b If you are required to file FinCEN Form 114, enter the name of the foreign country where the financial account is located ► **CANADA**

- 8 During 2019, did you receive a distribution from, or were you the grantor of, or transferor to, a foreign trust? If "Yes," you may have to file Form 3520. See instructions

X

For Paperwork Reduction Act Notice, see your tax return instructions.

Schedule B (Form 1040 or 1040-SR) 2019

EEA

SCHEDULE D
(Form 1040 or 1040-SR)Department of the Treasury
Internal Revenue Service (99)**Capital Gains and Losses**

▶ Attach to Form 1040, 1040-SR, or 1040-NR.

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

▶ Use Form 8949 to list your transactions for lines 1b, 2, 3, 8b, 9, and 10.

OMB No. 1545-0074

2019Attachment
Sequence No. **12**

Name(s) shown on return

HOANG V & HELEN NGUYEN

Your social security number

795-33-8135Did you dispose of any investment(s) in a qualified opportunity fund during the tax year? ☐ Yes ☒ No

If "Yes," attach Form 8949 and see its instructions for additional requirements for reporting your gain or loss.

Part I Short-Term Capital Gains and Losses - Generally Assets Held One Year or Less (see instructions)

See instructions for how to figure the amounts to enter on the lines below.

This form may be easier to complete if you round off cents to whole dollars.

	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to gain or loss from Form(s) 8949, Part I, line 2, column (g)	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
1a Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b . . .				
1b Totals for all transactions reported on Form(s) 8949 with Box A checked	5,904	5,815	9	98
2 Totals for all transactions reported on Form(s) 8949 with Box B checked				
3 Totals for all transactions reported on Form(s) 8949 with Box C checked	51,034	49,088		1,946
4 Short-term gain from Form 6252 and short-term gain or (loss) from Forms 4684, 6781, and 8824			4	
5 Net short-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1			5	
6 Short-term capital loss carryover. Enter the amount, if any, from line 8 of your Capital Loss Carryover Worksheet in the instructions			6	()
7 Net short-term capital gain or (loss). Combine lines 1a through 6 in column (h). If you have any long-term capital gains or losses, go to Part II below. Otherwise, go to Part III on page 2			7	2,044

Part II Long-Term Capital Gains and Losses - Generally Assets Held More Than One Year (see instructions)

See instructions for how to figure the amounts to enter on the lines below.

This form may be easier to complete if you round off cents to whole dollars.

	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to gain or loss from Form(s) 8949, Part II, line 2, column (g)	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
8a Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b . . .				
8b Totals for all transactions reported on Form(s) 8949 with Box D checked	2,096	1,910		186
9 Totals for all transactions reported on Form(s) 8949 with Box E checked				
10 Totals for all transactions reported on Form(s) 8949 with Box F checked				
11 Gain from Form 4797, Part I; long-term gain from Forms 2439 and 6252; and long-term gain or (loss) from Forms 4684, 6781, and 8824			11	
12 Net long-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1			12	
13 Capital gain distributions. See the instructions			13	18
14 Long-term capital loss carryover. Enter the amount, if any, from line 13 of your Capital Loss Carryover Worksheet in the instructions			14	()
15 Net long-term capital gain or (loss). Combine lines 8a through 14 in column (h). Then go to Part III on page 2			15	204

For Paperwork Reduction Act Notice, see your tax return instructions.

Schedule D (Form 1040 or 1040-SR) 2019

Part III Summary

16 Combine lines 7 and 15 and enter the result	16	2,248
<ul style="list-style-type: none"> • If line 16 is a gain, enter the amount from line 16 on Form 1040 or 1040-SR, line 6; or Form 1040-NR, line 14. Then go to line 17 below. • If line 16 is a loss, skip lines 17 through 20 below. Then go to line 21. Also be sure to complete line 22. • If line 16 is zero, skip lines 17 through 21 below and enter -0- on Form 1040 or 1040-SR, line 6; or Form 1040-NR, line 14. Then go to line 22. 		
17 Are lines 15 and 16 both gains? <input checked="" type="checkbox"/> Yes. Go to line 18. <input type="checkbox"/> No. Skip lines 18 through 21, and go to line 22.		
18 If you are required to complete the 28% Rate Gain Worksheet (see instructions), enter the amount, if any, from line 7 of that worksheet ▶	18	
19 If you are required to complete the Unrecaptured Section 1250 Gain Worksheet (see instructions), enter the amount, if any, from line 18 of that worksheet ▶	19	
20 Are lines 18 and 19 both zero or blank? <input checked="" type="checkbox"/> Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Forms 1040 and 1040-SR, line 12a (or in the instructions for Form 1040-NR, line 42). Don't complete lines 21 and 22 below. <input type="checkbox"/> No. Complete the Schedule D Tax Worksheet in the instructions. Don't complete lines 21 and 22 below.		
21 If line 16 is a loss, enter here and on Form 1040 or 1040-SR, line 6; or Form 1040-NR, line 14, the smaller of: <div style="display: flex; align-items: center;"> <ul style="list-style-type: none"> • The loss on line 16; or • (\$3,000), or if married filing separately, (\$1,500) <div style="margin-left: 10px;"> <div style="border-left: 1px solid black; height: 40px; width: 100px;"></div> <div style="border-top: 1px solid black; border-left: 1px solid black; width: 100px; height: 10px;"></div> </div> </div>	21	()
Note: When figuring which amount is smaller, treat both amounts as positive numbers.		
22 Do you have qualified dividends on Form 1040 or 1040-SR, line 3a; or Form 1040-NR, line 10b? <input type="checkbox"/> Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Forms 1040 and 1040-SR, line 12a (or in the instructions for Form 1040-NR, line 42). <input type="checkbox"/> No. Complete the rest of Form 1040, 1040-SR, or 1040-NR.		

Department of the Treasury
Internal Revenue Service► Go to www.irs.gov/Form8949 for instructions and the latest information.

► File with your Schedule D to list your transactions for lines 1b, 2, 3, 8b, 9, and 10 of Schedule D.

2019Attachment
Sequence No. **12A**

Name(s) shown on return

Social security number or taxpayer identification number

HOANG V & HELEN NGUYEN**795-33-8135**

Before you check Box A, B, or C below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your broker and may even tell you which box to check.

Part I **Short-Term.** Transactions involving capital assets you held 1 year or less are generally short-term (see instructions). For long-term transactions, see page 2.

Note: You may aggregate all short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 1a; you aren't required to report these transactions on Form 8949 (see instructions).

You must check Box A, B, or C below. Check only one box. If more than one box applies for your short-term transactions, complete a separate Form 8949, page 1, for each applicable box. If you have more short-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

- ☒ **(A)** Short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see **Note** above)
☐ **(B)** Short-term transactions reported on Form(s) 1099-B showing basis **wasn't** reported to the IRS
☐ **(C)** Short-term transactions not reported to you on Form 1099-B

1	(a) Description of property (Example: 100 sh. XYZ Co.)	(b) Date acquired (Mo., day, yr.)	(c) Date sold or disposed of (Mo., day, yr.)	(d) Proceeds (sales price) (see instructions)	(e) Cost or other basis. See the Note below and see <i>Column (e)</i> in the separate instructions	Adjustment, if any, to gain or loss. If you enter an amount in column (g), enter a code in column (f). See the separate instructions.		(h) Gain or (loss). Subtract column (e) from column (d) and combine the result with column (g)
						(f) Code(s) from instructions	(g) Amount of adjustment	
	CHARLES SCHWAB STMT	VARIOUS	12-31-2019	5,904	5,815	W	9	98
2 Totals. Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts). Enter each total here and include on your Schedule D, line 1b (if Box A above is checked), line 2 (if Box B above is checked), or line 3 (if Box C above is checked) ►				5,904	5,815		9	98

Note: If you checked Box A above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See *Column (g)* in the separate instructions for how to figure the amount of the adjustment.

For Paperwork Reduction Act Notice, see your tax return instructions.

Form **8949** (2019)

Social security number or taxpayer identification number

795-33-8135

Part II **Long-Term.** Transactions involving capital assets you held more than 1 year are generally long-term (see instructions). For short-term transactions, see page 1.

Note: You may aggregate all long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 8a; you aren't required to report these transactions on Form 8949 (see instructions).

☒ (D) Long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see **Note** above)

☐ (E) Long-term transactions reported on Form(s) 1099-B showing basis **wasn't** reported to the IRS

☐ (F) Long-term transactions not reported to you on Form 1099-B

1	(a) Description of property (Example: 100 sh. XYZ Co.)	(b) Date acquired (Mo., day, yr.)	(c) Date sold or disposed of (Mo., day, yr.)	(d) Proceeds (sales price) (see instructions)	(e) Cost or other basis. See the Note below and see <i>Column (e)</i> in the separate instructions	Adjustment, if any, to gain or loss. If you enter an amount in column (g), enter a code in column (f). See the separate instructions.		(h) Gain or (loss). Subtract column (e) from column (d) and combine the result with column (g)
						(f) Code(s) from instructions	(g) Amount of adjustment	
	CHARLES SCHWAB STMT	VARIOUS	11-18-2019	2,096	1,910			186
2 Totals. Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts). Enter each total here and include on your Schedule D, line 8b (if Box D above is checked), line 9 (if Box E above is checked), or line 10 (if Box F above is checked) ►				2,096	1,910			186

EEA

Department of the Treasury
Internal Revenue Service► Go to www.irs.gov/Form8949 for instructions and the latest information.

► File with your Schedule D to list your transactions for lines 1b, 2, 3, 8b, 9, and 10 of Schedule D.

2019Attachment
Sequence No. **12A**

Name(s) shown on return

Social security number or taxpayer identification number

HOANG V & HELEN NGUYEN**795-33-8135**

Before you check Box A, B, or C below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your broker and may even tell you which box to check.

Part I **Short-Term.** Transactions involving capital assets you held 1 year or less are generally short-term (see instructions). For long-term transactions, see page 2.

Note: You may aggregate all short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 1a; you aren't required to report these transactions on Form 8949 (see instructions).

You must check Box A, B, or C below. Check only one box. If more than one box applies for your short-term transactions, complete a separate Form 8949, page 1, for each applicable box. If you have more short-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

- ☐ (A) Short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see **Note** above)
- ☐ (B) Short-term transactions reported on Form(s) 1099-B showing basis **wasn't** reported to the IRS
- ☒ (C) Short-term transactions not reported to you on Form 1099-B

1	(a) Description of property (Example: 100 sh. XYZ Co.)	(b) Date acquired (Mo., day, yr.)	(c) Date sold or disposed of (Mo., day, yr.)	(d) Proceeds (sales price) (see instructions)	(e) Cost or other basis. See the Note below and see <i>Column (e)</i> in the separate instructions	Adjustment, if any, to gain or loss. If you enter an amount in column (g), enter a code in column (f). See the separate instructions.		(h) Gain or (loss). Subtract column (e) from column (d) and combine the result with column (g)
						(f) Code(s) from instructions	(g) Amount of adjustment	
	ST UNREPORTED CDN ACCT	VARIOUS	12-31-2019	51,034	49,088			1,946
2 Totals. Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts). Enter each total here and include on your Schedule D, line 1b (if Box A above is checked), line 2 (if Box B above is checked), or line 3 (if Box C above is checked) ►				51,034	49,088			1,946

Note: If you checked Box A above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See *Column (g)* in the separate instructions for how to figure the amount of the adjustment.

For Paperwork Reduction Act Notice, see your tax return instructions.

Form **8949** (2019)

Foreign Tax Credit

OMB No. 1545-0121

Department of the Treasury
Internal Revenue Service (99)

(Individual, Estate, or Trust)
 ▶ Attach to Form 1040, 1040-SR, 1040-NR, 1041, or 990-T.
 ▶ Go to www.irs.gov/Form1116 for instructions and the latest information.

2019
 Attachment
 Sequence No. **19**

Name

Identifying number as shown on page 1 of your tax return

HOANG V & HELEN NGUYEN

795-33-8135

Use a separate Form 1116 for each category of income listed below. See *Categories of Income* in the instructions. Check only one box on each Form 1116. Report all amounts in U.S. dollars except where specified in Part II below.

a ☐ Section 951A category income c ☒ Passive category income e ☐ Section 901(j) income g ☐ Lump-sum distributions
 b ☐ Foreign branch category income d ☐ General category income f ☐ Certain income re-sourced by treaty

h Resident of (name of country) ▶ UNITED STATES

Note: If you paid taxes to only one foreign country or U.S. possession, use column A in Part I and line A in Part II. If you paid taxes to more than one foreign country or U.S. possession, use a separate column and line for each country or possession.

Part I Taxable Income or Loss From Sources Outside the United States (for category checked above)

i Enter the name of the foreign country or U.S. possession ▶ CANADA	Foreign Country or U.S. Possession			Total (Add cols. A, B, and C.)
	A	B	C	
1a Gross income from sources within country shown above and of the type checked above (see instructions): DIVIDENDS , DIVIDEND	2,853			1a 2,853
b Check if line 1a is compensation for personal services as an employee, your total compensation from all sources is \$250,000 or more, and you used an alternative basis to determine its source (see instructions) ▶ <input type="checkbox"/>				
Deductions and losses (Caution: See instructions.):				
2 Expenses definitely related to the income on line 1a (attach statement)				
3 Pro rata share of other deductions not definitely related:				
a Certain itemized deductions or standard deduction (see instructions)	24,400			
b Other deductions (attach statement)				
c Add lines 3a and 3b	24,400			
d Gross foreign source income (see instructions)	2,853			
e Gross income from all sources (see instructions)	139,272			
f Divide line 3d by line 3e (see instructions)	0.0205			
g Multiply line 3c by line 3f	500			
4 Pro rata share of interest expense (see instructions):				
a Home mortgage interest (use the Worksheet for Home Mortgage Interest in the instructions)				
b Other interest expense				
5 Losses from foreign sources				
6 Add lines 2, 3g, 4a, 4b, and 5	500			6 500
7 Subtract line 6 from line 1a. Enter the result here and on line 15, page 2 ▶				7 2,353

Part II Foreign Taxes Paid or Accrued (see instructions)

Country	Credit is claimed for taxes (you must check one) (j) <input checked="" type="checkbox"/> Paid (k) <input type="checkbox"/> Accrued	Foreign taxes paid or accrued								
		In foreign currency				In U.S. dollars				
		Taxes withheld at source on:			(p) Other foreign taxes paid or accrued	Taxes withheld at source on:			(t) Other foreign taxes paid or accrued	(u) Total foreign taxes paid or accrued (add cols. (q) through (t))
		(l) Date paid or accrued	(m) Dividends	(n) Rents and royalties		(o) Interest	(q) Dividends	(r) Rents and royalties		
A	1099 TAX					282				282
B										
C										

8 Add lines A through C, column (u). Enter the total here and on line 9, page 2 ▶ 8 282

For Paperwork Reduction Act Notice, see instructions.

Form 1116 (2019)

Part III Figuring the Credit

9	Enter the amount from line 8. These are your total foreign taxes paid or accrued for the category of income checked above Part I	9	282	
10	Carryback or carryover (attach detailed computation) Statement #1 (If your income was section 951A category income (box a above Part I), leave line 10 blank.)	10	102	
11	Add lines 9 and 10	11	384	
12	Reduction in foreign taxes (see instructions)	12	()	
13	Taxes reclassified under high tax kickout (see instructions)	13		
14	Combine lines 11, 12, and 13. This is the total amount of foreign taxes available for credit	14		384
15	Enter the amount from line 7. This is your taxable income or (loss) from sources outside the United States (before adjustments) for the category of income checked above Part I (see instructions)	15	2,353	
16	Adjustments to line 15 (see instructions)	16		
17	Combine the amounts on lines 15 and 16. This is your net foreign source taxable income. (If the result is zero or less, you have no foreign tax credit for the category of income you checked above Part I. Skip lines 18 through 22. However, if you are filing more than one Form 1116, you must complete line 20.)	17	2,353	
18	Individuals: Enter the amount from Form 1040 or 1040-SR, line 11b; or Form 1040-NR, line 41. Estates and trusts: Enter your taxable income without the deduction for your exemption Caution: If you figured your tax using the lower rates on qualified dividends or capital gains, see instructions.	18	113,534	
19	Divide line 17 by line 18. If line 17 is more than line 18, enter "1"	19		0.0207
20	Individuals: Enter the total of Form 1040 or 1040-SR, line 12b, and Schedule 2 (Form 1040 or 1040-SR), line 2. If you are a nonresident alien, enter the total of Form 1040-NR, lines 42 and 44. Estates and trusts: Enter the amount from Form 1041, Schedule G, line 1a; or the total of Form 990-T, lines 41, 42, and 44. Foreign estates and trusts should enter the amount from Form 1040-NR, line 42 Caution: If you are completing line 20 for separate category g (lump-sum distributions), see instructions.	20		16,832
21	Multiply line 20 by line 19 (maximum amount of credit)	21		348
22	Enter the smaller of line 14 or line 21. If this is the only Form 1116 you are filing, skip lines 23 through 30 and enter this amount on line 31. Otherwise, complete the appropriate line in Part IV (see instructions) ▶	22		348

Part IV Summary of Credits From Separate Parts III (see instructions)

23	Credit for taxes on section 951A category income	23		
24	Credit for taxes on foreign branch category income	24		
25	Credit for taxes on passive category income	25		
26	Credit for taxes on general category income	26		
27	Credit for taxes on section 901(j) income	27		
28	Credit for taxes on certain income re-sourced by treaty	28		
29	Credit for taxes on lump-sum distributions	29		
30	Add lines 23 through 29	30		
31	Enter the smaller of line 20 or line 30	31		
32	Reduction of credit for international boycott operations. See instructions for line 12	32		
33	Subtract line 32 from line 31. This is your foreign tax credit . Enter here and on Schedule 3 (Form 1040 or 1040-SR), line 1; Form 1040-NR, line 46; Form 1041, Schedule G, line 2a; or Form 990-T, line 46a. ▶	33		

Foreign Tax Credit

Department of the Treasury
Internal Revenue Service (99)

(Individual, Estate, or Trust)
 ▶ Attach to Form 1040, 1040-SR, 1040-NR, 1041, or 990-T.
 ▶ Go to www.irs.gov/Form1116 for instructions and the latest information.

2019
 Attachment
 Sequence No. **19**

Name

Identifying number as shown on page 1 of your tax return

HOANG V & HELEN NGUYEN

795-33-8135

Use a separate Form 1116 for each category of income listed below. See *Categories of Income* in the instructions. Check only one box on each Form 1116. Report all amounts in U.S. dollars except where specified in Part II below.

a ☐ Section 951A category income c ☐ Passive category income e ☐ Section 901(j) income g ☐ Lump-sum distributions
 b ☐ Foreign branch category income d ☒ General category income f ☐ Certain income re-sourced by treaty

h Resident of (name of country) ▶ UNITED STATES

Note: If you paid taxes to only one foreign country or U.S. possession, use column A in Part I and line A in Part II. If you paid taxes to more than one foreign country or U.S. possession, use a separate column and line for each country or possession.

Part I Taxable Income or Loss From Sources Outside the United States (for category checked above)

		Foreign Country or U.S. Possession			Total (Add cols. A, B, and C.)
		A	B	C	
i Enter the name of the foreign country or U.S. possession ▶ CANADA					
1a	Gross income from sources within country shown above and of the type checked above (see instructions): PENSION				
		3,460			1a 3,460
b	Check if line 1a is compensation for personal services as an employee, your total compensation from all sources is \$250,000 or more, and you used an alternative basis to determine its source (see instructions) ▶ <input type="checkbox"/>				
Deductions and losses (Caution: See instructions.):					
2	Expenses definitely related to the income on line 1a (attach statement)				
3	Pro rata share of other deductions not definitely related :				
a	Certain itemized deductions or standard deduction (see instructions)	24,400			
b	Other deductions (attach statement)				
c	Add lines 3a and 3b	24,400			
d	Gross foreign source income (see instructions)	3,460			
e	Gross income from all sources (see instructions)	139,272			
f	Divide line 3d by line 3e (see instructions)	0.0248			
g	Multiply line 3c by line 3f	605			
4	Pro rata share of interest expense (see instructions):				
a	Home mortgage interest (use the Worksheet for Home Mortgage Interest in the instructions)				
b	Other interest expense				
5	Losses from foreign sources				
6	Add lines 2, 3g, 4a, 4b, and 5	605			6 605
7	Subtract line 6 from line 1a. Enter the result here and on line 15, page 2 ▶				7 2,855

Part II Foreign Taxes Paid or Accrued (see instructions)

Country	Credit is claimed for taxes (you must check one) (j) <input checked="" type="checkbox"/> Paid (k) <input type="checkbox"/> Accrued	Foreign taxes paid or accrued								
		In foreign currency				In U.S. dollars				
		Taxes withheld at source on:			(p) Other foreign taxes paid or accrued	Taxes withheld at source on:			(t) Other foreign taxes paid or accrued	(u) Total foreign taxes paid or accrued (add cols. (q) through (t))
		(l) Date paid or accrued	(m) Dividends	(n) Rents and royalties		(o) Interest	(q) Dividends	(r) Rents and royalties		
A	12-31-2019								519	519
B										
C										

8 Add lines A through C, column (u). Enter the total here and on line 9, page 2 ▶ 8 519

For Paperwork Reduction Act Notice, see instructions.

Form 1116 (2019)

Part III Figuring the Credit

9	Enter the amount from line 8. These are your total foreign taxes paid or accrued for the category of income checked above Part I	9	519	
10	Carryback or carryover (attach detailed computation) Statement.#2 (If your income was section 951A category income (box a above Part I), leave line 10 blank.)	10	185	
11	Add lines 9 and 10	11	704	
12	Reduction in foreign taxes (see instructions)	12	()	
13	Taxes reclassified under high tax kickout (see instructions)	13		
14	Combine lines 11, 12, and 13. This is the total amount of foreign taxes available for credit	14		704
15	Enter the amount from line 7. This is your taxable income or (loss) from sources outside the United States (before adjustments) for the category of income checked above Part I (see instructions)	15	2,855	
16	Adjustments to line 15 (see instructions)	16		
17	Combine the amounts on lines 15 and 16. This is your net foreign source taxable income. (If the result is zero or less, you have no foreign tax credit for the category of income you checked above Part I. Skip lines 18 through 22. However, if you are filing more than one Form 1116, you must complete line 20.)	17	2,855	
18	Individuals: Enter the amount from Form 1040 or 1040-SR, line 11b; or Form 1040-NR, line 41. Estates and trusts: Enter your taxable income without the deduction for your exemption Caution: If you figured your tax using the lower rates on qualified dividends or capital gains, see instructions.	18	113,534	
19	Divide line 17 by line 18. If line 17 is more than line 18, enter "1"	19		0.0251
20	Individuals: Enter the total of Form 1040 or 1040-SR, line 12b, and Schedule 2 (Form 1040 or 1040-SR), line 2. If you are a nonresident alien, enter the total of Form 1040-NR, lines 42 and 44. Estates and trusts: Enter the amount from Form 1041, Schedule G, line 1a; or the total of Form 990-T, lines 41, 42, and 44. Foreign estates and trusts should enter the amount from Form 1040-NR, line 42 Caution: If you are completing line 20 for separate category g (lump-sum distributions), see instructions.	20		16,832
21	Multiply line 20 by line 19 (maximum amount of credit)	21		422
22	Enter the smaller of line 14 or line 21. If this is the only Form 1116 you are filing, skip lines 23 through 30 and enter this amount on line 31. Otherwise, complete the appropriate line in Part IV (see instructions) ▶	22		422

Part IV Summary of Credits From Separate Parts III (see instructions)

23	Credit for taxes on section 951A category income	23		
24	Credit for taxes on foreign branch category income	24		
25	Credit for taxes on passive category income	25	348	
26	Credit for taxes on general category income	26	422	
27	Credit for taxes on section 901(j) income	27		
28	Credit for taxes on certain income re-sourced by treaty	28		
29	Credit for taxes on lump-sum distributions	29		
30	Add lines 23 through 29	30		770
31	Enter the smaller of line 20 or line 30	31		770
32	Reduction of credit for international boycott operations. See instructions for line 12	32		
33	Subtract line 32 from line 31. This is your foreign tax credit . Enter here and on Schedule 3 (Form 1040 or 1040-SR), line 1; Form 1040-NR, line 46; Form 1041, Schedule G, line 2a; or Form 990-T, line 46a. ▶	33		770

Statement of Specified Foreign Financial Assets

► Go to www.irs.gov/Form8938 for instructions and the latest information.
► Attach to your tax return.

OMB No. 1545-2195

2019Attachment
Sequence No. 175For calendar year 20 **19** or tax year beginning , 20 and ending , 20If you have attached continuation statements, check here ☒ Number of continuation statements **1**

1 Name(s) shown on return
HOANG V & HELEN NGUYEN

2 Taxpayer Identification Number (TIN)
795-33-8135

3 Type of filer
a ☒ Specified individual **b** ☐ Partnership **c** ☐ Corporation **d** ☐ Trust

4 If you checked box 3a, skip this line 4. If you checked box 3b or 3c, enter the name and TIN of the specified individual who closely holds the partnership or corporation. If you checked box 3d, enter the name and TIN of the specified person who is a current beneficiary of the trust. (See instructions for definitions and what to do if you have more than one specified individual or specified person to list.)

a Name **b** TIN

Part I Foreign Deposit and Custodial Accounts Summary	
1 Number of Deposit Accounts (reported in Part V)	2
2 Maximum Value of All Deposit Accounts	\$ 259,020
3 Number of Custodial Accounts (reported in Part V)	
4 Maximum Value of All Custodial Accounts	\$
5 Were any foreign deposit or custodial accounts closed during the tax year?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

Part II Other Foreign Assets Summary	
1 Number of Foreign Assets (reported in Part VI)	1
2 Maximum Value of All Assets (reported in Part VI)	\$ 42,200
3 Were any foreign assets acquired or sold during the tax year?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

Part III Summary of Tax Items Attributable to Specified Foreign Financial Assets (see instructions)				
(a) Asset Category	(b) Tax item	(c) Amount reported on form or schedule	Where reported	
			(d) Form and line	(e) Schedule and line
1 Foreign Deposit and Custodial Accounts	1a Interest	\$		
	1b Dividends	\$		
	1c Royalties	\$		
	1d Other income	\$		
	1e Gains (losses)	\$		
	1f Deductions	\$		
	1g Credits	\$		
2 Other Foreign Assets	2a Interest	\$		
	2b Dividends	\$		
	2c Royalties	\$		
	2d Other income	\$		
	2e Gains (losses)	\$		
	2f Deductions	\$		
	2g Credits	\$		

Part IV Excepted Specified Foreign Financial Assets (see instructions)

If you reported specified foreign financial assets on one or more of the following forms, enter the number of such forms filed. You do not need to include these assets on Form 8938 for the tax year.

1. Number of Forms 3520 _____ 2. Number of Forms 3520-A _____ 3. Number of Forms 5471 _____
4. Number of Forms 8621 _____ 5. Number of Forms 8865 _____

Part V Detailed Information for Each Foreign Deposit and Custodial Account Included in the Part I Summary (see instructions)

If you have more than one account to report in Part V, attach a continuation statement for each additional account (see instructions).

1 Type of account <input checked="" type="checkbox"/> Deposit <input type="checkbox"/> Custodial	2 Account number or other designation 37524131
3 Check all that apply a <input type="checkbox"/> Account opened during tax year b <input type="checkbox"/> Account closed during tax year c <input type="checkbox"/> Account jointly owned with spouse d <input type="checkbox"/> No tax item reported in Part III with respect to this asset	
4 Maximum value of account during tax year	\$ 156,533
5 Did you use a foreign currency exchange rate to convert the value of the account into U.S. dollars?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
6 If you answered "Yes," to line 5, complete all that apply.	
(a) Foreign currency in which account is maintained	(b) Foreign currency exchange rate used to convert to U.S. dollars
(c) Source of exchange rate used if not from U.S. Treasury Department's Bureau of the Fiscal Service	

Part V Detailed Information for Each Foreign Deposit and Custodial Account Included in the Part I Summary

(see instructions) (continued)

7a Name of financial institution in which account is maintained ROYAL BANK OF CANADA	b Global Intermediary Identification Number (GIIN) (Optional)
8 Mailing address of financial institution in which account is maintained. Number, street, and room or suite no. 180 WELLINGTON ST	
9 City or town, state or province, and country (including postal code) TORONTO, ON Canada M5J 0C2	

Part VI Detailed Information for Each "Other Foreign Asset" Included in the Part II Summary (see instructions)

If you have more than one asset to report in Part VI, attach a continuation statement for each additional asset (see instructions).

1 Description of asset REGISTERED EDUCATIONAL SAVINGS	2 Identifying number or other designation 573967387	
3 Complete all that apply. See instructions for reporting of multiple acquisition or disposition dates. a Date asset acquired during tax year, if applicable b Date asset disposed of during tax year, if applicable c <input type="checkbox"/> Check if asset jointly owned with spouse d <input type="checkbox"/> Check if no tax item reported in Part III with respect to this asset		
4 Maximum value of asset during tax year (check box that applies) a <input checked="" type="checkbox"/> \$0 - \$50,000 b <input type="checkbox"/> \$50,001 - \$100,000 c <input type="checkbox"/> \$100,001 - \$150,000 d <input type="checkbox"/> \$150,001 - \$200,000 e If more than \$200,000, list value \$		
5 Did you use a foreign currency exchange rate to convert the value of the asset into U.S. dollars? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
6 If you answered "Yes" to line 5, complete all that apply.		
(a) Foreign currency in which asset is denominated	(b) Foreign currency exchange rate used to convert to U.S. dollars	(c) Source of exchange rate used if not from U.S. Treasury Department's Bureau of the Fiscal Service
7 If asset reported on line 1 is stock of a foreign entity or an interest in a foreign entity, enter the following information for the asset. a Name of foreign entity b GIIN (Optional) c Type of foreign entity (1) <input type="checkbox"/> Partnership (2) <input type="checkbox"/> Corporation (3) <input type="checkbox"/> Trust (4) <input type="checkbox"/> Estate d Mailing address of foreign entity. Number, street, and room or suite no. e City or town, state or province, and country (including postal code)		
8 If asset reported on line 1 is not stock of a foreign entity or an interest in a foreign entity, enter the following information for the asset. Note: If this asset has more than one issuer or counterparty, attach a continuation statement with the same information for each additional issuer or counterparty (see instructions). a Name of issuer or counterparty Check if information is for <input type="checkbox"/> Issuer <input type="checkbox"/> Counterparty b Type of issuer or counterparty (1) <input type="checkbox"/> Individual (2) <input type="checkbox"/> Partnership (3) <input type="checkbox"/> Corporation (4) <input type="checkbox"/> Trust (5) <input type="checkbox"/> Estate c Check if issuer or counterparty is a <input type="checkbox"/> U.S. person <input type="checkbox"/> Foreign person d Mailing address of issuer or counterparty. Number, street, and room or suite no. e City or town, state or province, and country (including postal code)		

(Continuation Statement)

Name(s) shown on return

TIN

HOANG V & HELEN NGUYEN

795-33-8135

Part V Detailed Information for Each Foreign Deposit and Custodial Account Included in the Part I Summary
(see instructions)

1 Type of account <input checked="" type="checkbox"/> Deposit <input type="checkbox"/> Custodial	2 Account number or other designation 48610055	
3 Check all that apply: <div style="display: flex; justify-content: space-between;"> a <input type="checkbox"/> Account opened during tax year b <input type="checkbox"/> Account closed during tax year </div> <div style="display: flex; justify-content: space-between;"> c <input type="checkbox"/> Account jointly owned with spouse d <input type="checkbox"/> No tax item reported in Part III with respect to this asset </div>		
4 Maximum value of account during tax year \$ 102,487		
5 Did you use a foreign currency exchange rate to convert the value of the account into U.S. dollars? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
6 If you answered "Yes" to line 5, complete all that apply.		
(a) Foreign currency in which account is maintained	(b) Foreign currency exchange rate used to convert to U.S. dollars	(c) Source of exchange rate used if not from U.S. Treasury Department's Bureau of the Fiscal Service
7a Name of financial institution in which account is maintained ROYAL BANK OF CANADA		b GIIN (Optional)
8 Mailing address of financial institution in which account is maintained. Number, street, and room or suite no. 180 WELLINGTON ST		
9 City or town, state or province, and country (including postal code) TORONTO, ON Canada M5J 0C2		

Part VI Detailed Information for Each "Other Foreign Asset" Included in the Part II Summary (see instructions)

1 Description of asset	2 Identifying number or other designation	
3 Complete all that apply. See instructions for reporting of multiple acquisition or disposition dates.		
<div style="display: flex; justify-content: space-between;"> a Date asset acquired during tax year, if applicable b Date asset disposed of during tax year, if applicable </div> <div style="display: flex; justify-content: space-between;"> c <input type="checkbox"/> Check if asset jointly owned with spouse d <input type="checkbox"/> Check if no tax item reported in Part III with respect to this asset </div>		
4 Maximum value of asset during tax year (check box that applies)		
<div style="display: flex; justify-content: space-between;"> a <input type="checkbox"/> \$0 - \$50,000 b <input type="checkbox"/> \$50,001 - \$100,000 c <input type="checkbox"/> \$100,001 - \$150,000 d <input type="checkbox"/> \$150,001 - \$200,000 </div>		
e If more than \$200,000, list value \$		
5 Did you use a foreign currency exchange rate to convert the value of the asset into U.S. dollars? <input type="checkbox"/> Yes <input type="checkbox"/> No		
6 If you answered "Yes" to line 5, complete all that apply.		
(a) Foreign currency in which asset is denominated	(b) Foreign currency exchange rate used to convert to U.S. dollars	(c) Source of exchange rate used if not from U.S. Treasury Department's Bureau of the Fiscal Service
7 If asset reported on line 1 is stock of a foreign entity or an interest in a foreign entity, enter the following information for the asset.		
<div style="display: flex; justify-content: space-between;"> a Name of foreign entity b GIIN (Optional) </div>		
c Type of foreign entity (1) <input type="checkbox"/> Partnership (2) <input type="checkbox"/> Corporation (3) <input type="checkbox"/> Trust (4) <input type="checkbox"/> Estate		
d Mailing address of foreign entity, Number, street, and room or suite no.		
e City or town, state or province, and country (including postal code)		
8 If asset reported on line 1 is not stock of a foreign entity or an interest in a foreign entity, enter the following information for the asset.		
a Name of issuer or counterparty		
Check if information is for <input type="checkbox"/> Issuer <input type="checkbox"/> Counterparty		
b Type of issuer or counterparty		
(1) <input type="checkbox"/> Individual (2) <input type="checkbox"/> Partnership (3) <input type="checkbox"/> Corporation (4) <input type="checkbox"/> Trust (5) <input type="checkbox"/> Estate		
c Check if issuer or counterparty is a <input type="checkbox"/> U.S. person <input type="checkbox"/> Foreign person		
d Mailing address of issuer or counterparty. Number, street, and room or suite no.		
e City or town, state or province, and country (including postal code)		

FinCEN 114

Do NOT file with your Federal Tax Return

Name(s) shown on return HOANG V NGUYEN	Identifying number 795-33-8135
--	--

Part I Filer Information

1 This Report is for Calendar Year Ended 12/31 2019			
<input type="checkbox"/> Amended BSA identifier			
2 Type of Filer			
a <input checked="" type="checkbox"/> Individual b <input type="checkbox"/> Partnership c <input type="checkbox"/> Corporation d <input type="checkbox"/> Consolidated e <input type="checkbox"/> Fiduciary or Other-Enter type			
3 U.S. Taxpayer Identification Number 795-33-8135 If filer has no U.S. Identification Number complete Item 4.		4 Foreign identification (Complete only if item 3 is not applicable.)	
		a Type: <input type="checkbox"/> Passport <input type="checkbox"/> Foreign TIN <input type="checkbox"/> Other	
		b Number: c Country of Issue	
		5 Individual's Date of Birth 03-04-1958	
6 Last Name or Organization Name NGUYEN		7 First Name HOANG	8 M.I. V
9 Address (Number, Street, and Apt. or Suite No.) 4366 S PINE ST APT C			
10 City TACOMA	11 State/Province WA	12 ZIP/Postal Code 98409	13 Country United States
14a Does the filer have a financial interest in 25 or more financial accounts?			
<input type="checkbox"/> Yes If "Yes" enter total number of accounts			
<input checked="" type="checkbox"/> No			
14b Does the filer have signature authority over but no financial interest in 25 or more financial accounts?			
<input type="checkbox"/> Yes If "Yes" enter total number of accounts			
<input checked="" type="checkbox"/> No			

Signature

44a Check here <input checked="" type="checkbox"/> if this report is completed by a third party preparer and complete the third party preparer section.			
44 Filer Signature FinCEN Form 114a		45 Filer Title, if not reporting a personal account	
		46 Date (MM/DD/YYYY) 04-18-2020	
47 Preparer's last name Smith EA MST		48 First name Joseph	49 MI
		50 Check <input type="checkbox"/> if self-employed 51 PTIN P00327633	
52 Contact phone no. 402-379-7818	52a Ext	53 Firm's name TravelTax LLC	54 Firm's TIN 54a <input checked="" type="checkbox"/> EIN Foreign 20-0124265
55 Mailing address (number, street, apartment or suite number) 46 St Mark Rd		56 City TAYLORS	57 State SC
		58 ZIP/Postal Code 29687	59 Country US

Part II Information on Financial Account(s) Owned Separately									
15 Maximum account value 156,533		15a <input type="checkbox"/> Maximum account value unknown		16 Type of account a <input type="checkbox"/> Bank b <input checked="" type="checkbox"/> Securities c <input type="checkbox"/> Other - Enter below		1 of 3			
17 Name of Financial Institution in which account is held ROYAL BANK OF CANADA									
18 Account number or other designation 37524131				19 Mailing Address (Number, Street, and Apt. or Suite No.) 180 WELLINGTON ST					
20 City TORONTO		21 State/Province ON		22 Postal Code M5J0C2		23 Country Canada			
15 Maximum account value 102,487		15a <input type="checkbox"/> Maximum account value unknown		16 Type of account a <input type="checkbox"/> Bank b <input type="checkbox"/> Securities c <input checked="" type="checkbox"/> Other - Enter below		2 of 3			
17 Name of Financial Institution in which account is held ROYAL BANK OF CANADA									
18 Account number or other designation 48610055				19 Mailing Address (Number, Street, and Apt. or Suite No.) 180 WELLINGTON ST					
20 City TORONTO		21 State/Province ON		22 Postal Code M5J0C2		23 Country Canada			
15 Maximum account value 42,200		15a <input type="checkbox"/> Maximum account value unknown		16 Type of account a <input type="checkbox"/> Bank b <input type="checkbox"/> Securities c <input checked="" type="checkbox"/> Other - Enter below		3 of 3			
17 Name of Financial Institution in which account is held RBC DOMINION SECURITIES									
18 Account number or other designation 573967387				19 Mailing Address (Number, Street, and Apt. or Suite No.) 80 WELLINGTON ST W					
20 City TORONTO		21 State/Province ON		22 Postal Code M5J0C2		23 Country Canada			
15 Maximum account value		15a <input type="checkbox"/> Maximum account value unknown		16 Type of account a <input type="checkbox"/> Bank b <input type="checkbox"/> Securities c <input type="checkbox"/> Other - Enter below		of			
17 Name of Financial Institution in which account is held									
18 Account number or other designation				19 Mailing Address (Number, Street, and Apt. or Suite No.)					
20 City		21 State/Province		22 Postal Code		23 Country			
15 Maximum account value		15a <input type="checkbox"/> Maximum account value unknown		16 Type of account a <input type="checkbox"/> Bank b <input type="checkbox"/> Securities c <input type="checkbox"/> Other - Enter below		of			
17 Name of Financial Institution in which account is held									
18 Account number or other designation				19 Mailing Address (Number, Street, and Apt. or Suite No.)					
20 City		21 State/Province		22 Postal Code		23 Country			
15 Maximum account value		15a <input type="checkbox"/> Maximum account value unknown		16 Type of account a <input type="checkbox"/> Bank b <input type="checkbox"/> Securities c <input type="checkbox"/> Other - Enter below		of			
17 Name of Financial Institution in which account is held									
18 Account number or other designation				19 Mailing Address (Number, Street, and Apt. or Suite No.)					
20 City		21 State/Province		22 Postal Code		23 Country			
15 Maximum account value		15a <input type="checkbox"/> Maximum account value unknown		16 Type of account a <input type="checkbox"/> Bank b <input type="checkbox"/> Securities c <input type="checkbox"/> Other - Enter below		of			
17 Name of Financial Institution in which account is held									
18 Account number or other designation				19 Mailing Address (Number, Street, and Apt. or Suite No.)					
20 City		21 State/Province		22 Postal Code		23 Country			

Federal Supporting Statements**2019 PG01**

Name(s) as shown on return

HOANG V & HELEN NGUYEN

Tax ID Number

795-33-8135

FORM 1116 - LN10 - CARRYBK/CARRYOVR,PASSIVE

Statement #1

NA

FORM 1116 - LN10 - CARRYBK/CARRYOVR,GENERAL

PG01
Statement #2

NA

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Federal Income Tax Withheld**2019 PG01**

Name(s) as shown on return

Your Social Security Number

HOANG V & HELEN NGUYEN**795-33-8135**

Description	Amount
DIV - CHARLES SCHWAB	46
INT - CHARLES SCHWAB 1097	1
INT - CHARLES SCHWAB 0774	46
W2 - AIG EMPLOYEE SERVICES INC	16,129
W2 - TRUEBLUE INC	2,575
Total Withholdings	18,797

Client Copy

(Keep for your records)

Tax ID Number

795-33-8135

Name(s) as shown on return

HOANG V & HELEN NGUYEN

		FEDERAL		STATE		
T/S	Employer Name	Gross	W/H	State Code	Gross	W/H
T	AIG EMPLOYEE SERVICES INC	120,368	16,129	CT	120,368	8,376
T	TRUEBLUE INC	9,808	2,575			
Totals		130,176	18,704		120,368	8,376
</						

Computation of Regular Tax

(Keep for your records)

2019

Name(s) as shown on return

Tax ID Number

HOANG V & HELEN NGUYEN

795-33-8135

STATEMENT FOR LINE 12A OF FORM 1040

TAX RATE SCHEDULE FOR MARRIED FILING JOINT FILING STATUS

IF TAXABLE INCOME IS				% ON		OF THE
OVER	BUT NOT	PAY	PLUS	EXCESS	OVER	AMOUNT
0	19,400	0.00		10%	0	
19,400	78,950	1,940.00		12%	19,400	
78,950	168,400	9,086.00		22%	78,950	
168,400	321,450	28,765.50		24%	168,400	
321,450	408,200	65,497.50		32%	321,450	
408,200	612,350	93,257.50		35%	408,200	
612,350	164,709.50		37%	612,350	

$\$9,086.00 + ((\$114,872.00 - \$78,950.00) \times 22.0\%) = \$16,989$

TAX FROM TAX RATE SCHEDULE \$ 16,989

TAX FROM QUALIFIED DIVIDENDS/CAPITAL GAIN WORKSHEET \$ 16,832

\$ 16,832 TAX COMPUTED USING THE MOST ADVANTAGEOUS METHOD ALLOWED

Qualified Dividends and Capital Gain Tax Worksheet - Line 12a (Form 1040)

(Keep for your records)

2019

Name(s) as shown on return

Tax ID Number

HOANG V & HELEN NGUYEN

795-33-8135

Before you begin:

- See the earlier instructions for line 12a to see if you can use this worksheet to figure your tax.
- Before completing this worksheet, complete Form 1040 or 1040-SR through line 11b.
- If you don't have to file Schedule D and you received capital gain distributions, be sure you checked the box on Form 1040 or 1040-SR, line 6.

1. Enter the amount from Form 1040 or 1040-SR, line 11b. However, if you are filing Form 2555 (relating to foreign earned income), enter the amount from line 3 of the Foreign Income Tax Worksheet	1.	114,872
2. Enter the amount from Form 1040 or 1040-SR, line 3a*	2.	2,046
3. Are you filing Schedule D?*		
<input checked="" type="checkbox"/> Yes. Enter the smaller of line 15 or 16 of Schedule D. If either line 15 or 16 is blank or a loss, enter -0-	3.	204
<input type="checkbox"/> No. Enter the amount from Form 1040 or 1040-SR, line 6		
4. Add lines 2 and 3	4.	2,250
5. If filing Form 4952 (used to figure investment interest expense deduction), enter any amount from line 4g of that form. Otherwise, enter -0-	5.	
6. Subtract line 5 from line 4. If zero or less, enter -0-	6.	2,250
7. Subtract line 6 from line 1. If zero or less, enter -0-	7.	112,622
8. Enter: \$39,375 if single or married filing separately, \$78,750 if married filing jointly or qualifying widow(er), \$52,750 if head of household.	8.	78,750
9. Enter the smaller of line 1 or line 8	9.	78,750
10. Enter the smaller of line 7 or line 9	10.	78,750
11. Subtract line 10 from line 9. This amount is taxed at 0%	11.	
12. Enter the smaller of line 1 or line 6	12.	2,250
13. Enter the amount from line 11	13.	
14. Subtract line 13 from line 12	14.	2,250
15. Enter: \$434,550 if single, \$244,425 if married filing separately, \$488,850 if married filing jointly or qualifying widow(er), \$461,700 if head of household.	15.	488,850
16. Enter the smaller of line 1 or line 15	16.	114,872
17. Add lines 7 and 11	17.	112,622
18. Subtract line 17 from line 16. If zero or less, enter -0-	18.	2,250
19. Enter the smaller of line 14 or line 18	19.	2,250
20. Multiply line 19 by 15% (0.15)	20.	338
21. Add lines 11 and 19	21.	2,250
22. Subtract line 21 from line 12	22.	
23. Multiply line 22 by 20% (0.20)	23.	
24. Figure the tax on the amount on line 7. If the amount on line 7 is less than \$100,000, use the Tax Table to figure the tax. If the amount on line 7 is \$100,000 or more, use the Tax Computation Worksheet	24.	16,494
25. Add lines 20, 23, and 24	25.	16,832
26. 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 the tax. If the amount on line 1 is \$100,000 or more, use the Tax Computation Worksheet	26.	16,989
27. Tax on all taxable income. Enter the smaller of line 25 or 26. Also include this amount on the entry space on Form 1040 or 1040-SR, line 12a. If you are filing Form 2555, don't enter this amount on the entry space on Form 1040 or 1040-SR, line 12a. Instead, enter it on line 4 of the Foreign Earned Income Tax Worksheet	27.	16,832

* If you are filing Form 2555, see the footnote in the Foreign Earned Income Tax Worksheet before completing this line.

Form 1040 or
1040-SR

Investment Income for the
Earned Income Credit

(Keep for your records)

2019

Name(s) as shown on return

Tax ID Number

HOANG V & HELEN NGUYEN

795-33-8135

Interest and Dividends

1. Enter any amount from Form 1040 or 1040-SR, line 2b 1. 360
2. Enter any amount from Form 1040 or 1040-SR, line 2a, plus any amount on Form 8814, line 1b 2.
3. Enter any amount from Form 1040 or 1040-SR, line 3b 3. 3,028
4. Enter the amount from Schedule 1 (Form 1040 or 1040-SR), line 8, that is from Form 8814 if you are filing that form to report your child's interest and dividend income on your return. (If your child received an Alaska Permanent Fund dividend, use Worksheet 2, on the next page, to figure the amount to enter on this line.) 4.

Capital Gain Net Income

5. Enter the amount from Form 1040 or 1040-SR, line 6. If the amount on that line is a loss, enter -0- 5. 2,248
6. Enter any gain from Form 4797, Sales of Business Property, line 7. If the amount on that line is a loss, enter -0-. (But, if you completed lines 8 and 9 of Form 4797, enter the amount from line 9 instead.) 6.
7. Subtract line 6 of this worksheet from line 5 of this worksheet. (If the result is less than zero, enter -0-.) 7. 2,248

Royalties and Rental Income From Personal Property

8. Enter any royalty income from Schedule E, line 4, plus any income from the rental of personal property shown on Form 1040 or 1040-SR, Schedule 1, line 8, minus any expenses from Schedule E, line 20, related to royalty income, plus any expenses from the rental of personal property deducted on Form 1040, Schedule 1, line 22 (If the result is less than zero, enter -0-.) 8.

Passive Activities

9. Enter the total of any net income from passive activities (such as income included on Schedule E, lines 26, 29a (col. (g)), 34a (col. (d)), or 40) and the total of any losses from passive activities (included on Schedule E, lines 26, 29b (col. (f)), 34b (col. (c)), or 40). (See instructions below for line 9.) (if zero or less, enter -0-.) 9. 0
10. Adjustment from EIC screen 10.
11. Add the amounts on lines 1, 2, 3, 4, 7, 8, 9 and 10. Enter the total. **This is your Investment Income** 11. 5,636
12. Is the amount on line 14 more than **\$3,600**?
☒ **Yes.** You can't take the credit.
☐ **No.** Go to **Step 3** of the Form 1040 and 1040-SR instructions for line 18a to find out if you can take the credit (unless you are using this publication to find out if you can take the credit; in that case, go to **Rule 7**, next).

Instructions for line 9. In figuring the amount to enter on line 9, don't take into account any royalty income (or loss) included on line 26 of Schedule E or any amount included in your earned income. To find out if the income on line 26 or line 40 of Schedule E is from a passive activity, see the Schedule E instructions. If any of the rental real estate income (or loss) included on Schedule E, line 26, isn't from a passive activity, print "NPA" and the amount of that income (or loss) on the dotted line next to line 26.

**Excess Social Security - Nonrailroad Employees
Worksheet - Form 1040, Schedule 3, Line 11**

(Keep for your records)

2019

Name(s) as shown on return

Tax ID Number

HOANG V NGUYEN

795-33-8135

If you are filing a joint return, you must figure any excess tax withheld separately for each spouse. DO NOT combine amount of both husband and wife.

1. Add all social security tax withheld (but not more than \$8,240 for each employer). This tax should be shown in box 4 of your Forms W-2. Enter the total here 1. 8,848
2. Enter any uncollected social security tax on tips or group-term life insurance on Form 1040 or Form 1040-SR, Schedule 2, line 8, identified by "UT" 2. _____
3. Add lines 1 and 2. If \$8,240 or less, **stop** here. You cannot claim the credit 3. 8,848
4. Social security limit 4. \$8,240
5. Excess. Subtract line 4 from line 3 5. 608

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1040**Overflow Statement****2019**

Name(s) as shown on return

HOANG V & HELEN NGUYEN

Your Social Security Number

795-33-8135**SCHEDULE A, LINE 5A - STATE AND LOCAL INCOME TAXES****DESCRIPTION****AMOUNT****FORM W-2 - AIG EMPLOYEE SERVICES INC****\$ 8,376****TOTAL:****\$ 8,376**

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Explanation of Schedule A, line 5e

(Keep for your records)

2019

Name(s) as shown on return

Tax ID Number

HOANG V & HELEN NGUYEN

795-33-8135

This worksheet shows the breakdown of which state and local taxes are actually being deducted on federal Schedule A when the state and local taxes are limited to \$10,000 (\$5,000 if married filing separately.)

	<u>Total paid</u>	<u>Allowed amount</u>
1. Real estate taxes	5,482	5,482
2. Personal property taxes	0	0
3. State and local income taxes.	8,376	4,518
4. Sales tax	0	0
5. Add amounts in right column of lines 1-4. Enter this amount on Schedule A, line 5e		10,000

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Federal Supporting Statements

(Keep for your records)

2019 PG01

Name(s) as shown on return

Tax ID Number

HOANG V & HELEN NGUYEN

795-33-8135

All Source Gross Income

WK_TTLGI

Description	Amount
Wages and tips	130,176
Taxable IRA dist., pensions, and annuities	3,460
Schedule B interest	360
Schedule B dividends	3,028
Capital gain distributions	18
Form 8949 short term gains	2,044
Form 8949 long term gains	<u>186</u>
Total	<u><u>139,272</u></u>

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Worksheet for Line 18
(Worldwide Qualified Dividends and Capital Gains)

(Keep for your records)

2019

Name(s) as shown on return

Tax ID Number

HOANG V & HELEN NGUYEN

795-33-8135

Caution: See the instructions for Line 18 before starting this worksheet.

1. **Individuals:** Enter the amount from Form 1040 or 1040-SR, line 11b. If you are a nonresident alien, enter the amount from Form 1040-NR, line 41.
Estates and trusts: Enter taxable income without the deduction for your exemption 1. 114,872

2. Enter your worldwide 28% gains (see instructions) 2. _____

3. Multiply line 2 by 0.2432 3. _____

4. Enter your worldwide 25% gains (see instructions) 4. _____

5. Multiply line 4 by 0.3243 5. _____

6. Enter your worldwide 20% gains and qualified dividends (see instructions) 6. _____

7. Multiply line 6 by 0.4595 7. _____

8. Enter your worldwide 15% gains and qualified dividends (see instructions) 8. 2,250

9. Multiply line 8 by 0.5946 9. 1,338

10. Enter your worldwide 0% gains and qualified dividends (see instructions) 10. _____

11. Add lines 3, 5, 7, 9, and 10 11. 1,338

12. Subtract line 11 from line 1. Enter the result here and on Form 1116, line 18 12. 113,534

Child Tax Credit and Credit for Other
Dependents Worksheet

(Keep for your records)

2019

Name(s) as shown on return

Tax ID Number

HOANG V & HELEN NGUYEN

795-33-8135

Before you begin:

- Figure the amount of any credits you are claiming on Schedule 3, lines 1 through 4; Form 5695, line 30; Form 8910, line 15; Form 8936, line 23; or Schedule R.

Part 1

1. Number of qualifying children under 17 with the required social security number:

1 x \$2,000. Enter the result 1. 2,000

2. Number of other dependents, including qualifying children who are not under 17 or

who do not have the required social security number: 1 x \$500. Enter the result 2. 500**Caution:** Do not include yourself, your spouse, or anyone who is not a U.S. citizen, U.S. national, or U.S. resident alien. Also, do not include anyone you included on line 1.

3. Add lines 1 and 2 3.
- 2,500

4. Enter the amount from Form 1040 or 1040-SR, line 8b, or Form 1040-NR, line 35 4.
- 139,272

- 5.
- 1040 and 1040-SR Filers.**
- Enter the total of any -

- Exclusion of income from Puerto Rico; and
- Amounts from Form 2555, lines 45 and 50, and Form 4563, line 15.

1040-NR filers. Enter -0-.5.

6. Add lines 4 and 5. Enter the total 6.
- 139,272

7. Enter the amount shown below for your filing status.

- Married filing jointly - \$400,000
- All other filing statuses - \$200,000

7. 400,000

8. Is the amount on line 6 more than the amount on line 7?

☒ **No.** Leave line 8 blank. Enter -0- on line 9.☐ **Yes.** Subtract line 7 from line 6 8.

If the result is not a multiple of \$1,000, increase it to the next multiple of \$1,000.

For example, increase \$425 to \$1,000, increase \$1,025 to \$2,000, etc.

9. Multiply the amount on line 8 by 5% (0.05). Enter the result 9.
- 0

10. Is the amount on line 3 more than the amount on line 9?

☐ **No. STOP**

You cannot take the child tax credit or credit for other dependents on Form 1040 or 1040-SR, line 13a, or Form 1040-NR, line 49. You also cannot take the additional child tax credit on Form 1040 or 1040-SR, line 18b, or Form 1040-NR, line 64. Complete the rest of your Form 1040, Form 1040-SR, or Form 1040-NR.

☒ **Yes.** Subtract line 9 from line 3. Enter the result 10. 2,500

Go to Part 2 on the next page.

Name(s) as shown on return

Tax ID Number

HOANG V & HELEN NGUYEN

795-33-8135

Before you begin Part 2: Figure the amount of any credits you are claiming on Schedule 3, lines 1 through 4;
Form 5695, line 30; Form 8910, line 15; Form 8936, line 23; or Schedule R.

Part 211. Enter the amount from Form 1040 or 1040-SR, line 12b, or Form 1040-NR, line 45 **11.** 16,832

12. Add the following amounts from:

Form 1040 or 1040-SR or **Form 1040-NR**

Schedule 3, Line 1	Line 46	+	<u>770</u>
Schedule 3, Line 2	Line 47	+	<u> </u>
Schedule 3, Line 3	-----	+	<u> </u>
Schedule 3, Line 4	Line 48	+	<u> </u>
Form 5695, line 30		+	<u> </u>
Form 8910, line 15		+	<u> </u>
Form 8936, line 23		+	<u> </u>
Schedule R, line 22		+	<u> </u>

Enter the total. **12.** 77013. Subtract line 12 from line 11 **13.** 16,062

14. Are you claiming any of the following credits?

- Mortgage interest credit, Form 8396.
- Adoption credit, Form 8839.
- Residential energy efficient property credit, Form 5695, Part I.
- District of Columbia first-time homebuyer credit, Form 8859.

☒ **No.** Enter -0-.☐ **Yes.** If you are filing Form 2555, enter -0-.Otherwise, complete the Line 14 Worksheet, later, to figure
the amount to enter here.**14.** 015. Subtract line 14 from line 13. Enter the result **15.** 16,062

16. Is the amount on line 10 of this worksheet more than the amount on line 15?

☒ **No.** Enter the amount from line 10.☐ **Yes.** Enter the amount from line 15.See the **TIP** below.**This is your child tax
credit and credit for
other dependents.****16.** 2,500Enter this amount on
Form 1040, line 13a;
Form 1040-SR, line 13a;
or Form 1040-NR, line 49.**TIP**

You may be able to take the **additional child tax** credit on Form 1040 or 1040-SR, line 18b, or Form 1040-NR, line 64, only if you answered "Yes" on line 16 and line 1 is more than zero.

- First, complete your Form 1040 or Form 1040-SR through line 18a (also complete Schedule 3, line 11) or Form 1040-NR through line 63 (also, complete line 67).
- Then, use Schedule 8812 to figure any additional child tax credit.

Adjusted Qualified Education Expenses Worksheet

Form 8863

(Keep for your records)

2019

Name(s) as shown on return

Tax ID Number

HOANG V & HELEN NGUYEN

795-33-8135

Student name

Student Tax ID Number

ALBERT NGUYEN

855-37-2229

1. Total qualified education expenses paid for or on behalf of the student in 2019 for the academic period **65,284**
2. Less adjustments:
 - a. Tax-free educational assistance received in 2019 allocable to the academic period
 - b. Tax-free educational assistance received in 2020 (and before you file your 2019 tax return) allocable to the academic period
 - c. Refunds of qualified education expenses paid in 2019 if the refund is received in 2019 or in 2020 before you file your 2019 tax return
3. Total adjustments (add lines 2a, 2b, and 2c)
4. Adjusted qualified education expenses. Subtract line 3 from line 1. If zero or less, enter -0- **65,284**

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Carryover Worksheet
List of items that will carryover to the 2020 tax return

(Keep for your records)

2019

Name(s) as shown on return

Tax ID Number

HOANG V & HELEN NGUYEN

795-33-8135

Itemized Deductions

Carryover Amount

Contributions subject to 100% of AGI limitations
Contributions subject to 60% of AGI limitations
Contributions subject to 30% of AGI limitations (50% capital gains appreciated property)
Contributions subject to 30% of AGI limitations
Contributions subject to 20% of AGI limitations (30% capital gains appreciated property)
Taxable state and local refunds to Form 1040, line 10
State/local taxes paid in 2020 to flow to the Schedule A
State donations and contributions carryover
State overpayment applied to next year

Expenses

Office in home operating expenses
Office in home excess casualty losses and depreciation
Disallowed investment interest expense AMT _____ Reg. Tax _____
Section 179 expense
Operating expenses, from Form WK_E, Sch E - Rental limitation on deductions when used for personal use
Excess depreciation, from Form WK_E, Sch E - Rental limitation on deductions when used for personal use

Losses

Short-term capital loss AMT _____ Reg. Tax _____
Long-term capital loss AMT _____ Reg. Tax _____
Net operating loss AMT _____ Reg. Tax _____
Excess business loss from Form 461 (becomes part of NOL next year) AMT _____ Reg. Tax _____
Qualified REIT and PTP loss carryover
QBI loss carryover
Nonrecaptured net section 1231 losses from WK_1231C AMT _____ Reg. Tax _____

Credits

Mortgage interest credit
Credit for prior year minimum tax
Foreign Tax credit AMT _____ 485 Reg. Tax _____ 318
District of Columbia first time home owner's credit
Res. energy efficient property credit

Other

Preparer Fee 341
Overpayment applied to next year's estimates
Estimated Tax Payment 1 _____ Estimated Tax Payment 2 _____
Estimated Tax Payment 3 _____ Estimated Tax Payment 4 _____
Federal tax liability for 2210 calculation 13,562
State tax liability for state 2210 calculation
IRA basis Taxpayer _____ Spouse _____

Passive Activity

At Risk Limitations

FOR ALT MIN TAX PURPOSES ONLY
Worksheet for Line 18
(Worldwide Qualified Dividends and Capital Gains)

(Keep for your records)

2019

Name(s) as shown on return

Tax ID Number

HOANG V & HELEN NGUYEN

795-33-8135

Caution: See the instructions for Line 18 before starting this worksheet.

- 1. Individuals:** Enter the amount from Form 1040 or 1040-SR, line 11b. If you are a nonresident alien, enter the amount from Form 1040-NR, line 41. 139,272
Estates and trusts: Enter taxable income without the deduction for your exemption **1.** _____
- 2.** Enter your worldwide 28% gains (see instructions) **2.** _____
- 3.** Multiply line 2 by 0.2432 **3.** _____
- 4.** Enter your worldwide 25% gains (see instructions) **4.** _____
- 5.** Multiply line 4 by 0.3243 **5.** _____
- 6.** Enter your worldwide 20% gains and qualified dividends (see instructions) **6.** _____
- 7.** Multiply line 6 by 0.4595 **7.** _____ 2,250
- 8.** Enter your worldwide 15% gains and qualified dividends (see instructions) **8.** _____ 1,045
- 9.** Multiply line 8 by 0.5946 **9.** _____
- 10.** Enter your worldwide 0% gains and qualified dividends (see instructions) **10.** _____ 1,045
- 11.** Add lines 3, 5, 7, 9, and 10 **11.** _____ 138,227
- 12.** Subtract line 11 from line 1. Enter the result here and on Form 1116, line 18 **12.** _____

TAX RETURN COMPARISON
2017 / 2018 / 2019

2019

Name(s) as shown on return
HOANG V & HELEN NGUYEN

Identifying number
795-33-8135

	2017	2018	2019	Difference 2018-2019
Filing Status	Married Joint	Married Joint	Married Joint	
Number of Exemptions	4	N/A	N/A	N/A
Number of Dependents	N/A	2	2	
Income				
Wages, salaries, tips, etc.	117,492	105,739	130,176	24,437
Taxable interest and dividends	5,551	2,562	3,388	826
Taxable state and local refunds	1,192			
Alimony				
Business income (loss)				
Gains (losses)	3,021	131	2,248	2,117
Pensions and IRA distributions			3,460	3,460
Rent and royalty income (loss)				
Part, S-corps, trusts income (loss) . . .				
Farm income (loss)				
Unemployment compensation				
Total SS benefits received				
Taxable SS benefits				
Other income (loss)				
Total Income	127,256	108,432	139,272	30,840
Adjusted Gross Income				
Half of self-employment tax				
IRA deduction				
Other adjustments				
Total Adjusted Gross Income	127,256	108,432	139,272	30,840
Deductions				
Medical deductions				
State and local taxes				
Interest				
Contributions				
Employee business expenses				
Standard or other deductions	12,700	24,000	24,400	400
Total Itemized or Standard Ded	12,700	24,000	24,400	400
Exemption Amount	16,200	N/A	N/A	N/A
Qualified Business Income Deduction .	N/A			
Tax and Credits				
Taxable Income	98,356	84,432	114,872	30,440
Tax	15,580	10,321	16,832	6,511
Credits	443	4,141	3,270	(871)
Self-employment tax				
Other taxes				
Total Tax	15,137	6,180	13,562	7,382
Payments				
Withholdings	19,053	13,248	19,405	6,157
Estimated tax payments				
Earned income credit				
Other payments and credits		1,000		(1,000)
Overpayment	3,916	8,068	5,843	(2,225)
Overpayment Applied				
Refund	3,916	8,068	5,843	(2,225)
Balance Due				
Marginal tax rate	25.00	22.00	22.00	
Effective tax rate	16.00	12.00	14.65	2.65

NRPY1219V011024



Form CT-1040NR/PY - 2019

Connecticut Nonresident and Part-Year
Resident Income Tax Return (Rev. 12/19)

Page 1 of 4

Other taxable year, beginning:

and ending:

N S Y FJ

N MFS

N HOH N QW

795 - 33 - 8135 958 - 99 - 6920

HOANG V NGUYEN
HELEN NGUYEN

N Dec. Y P
N Dec. N N

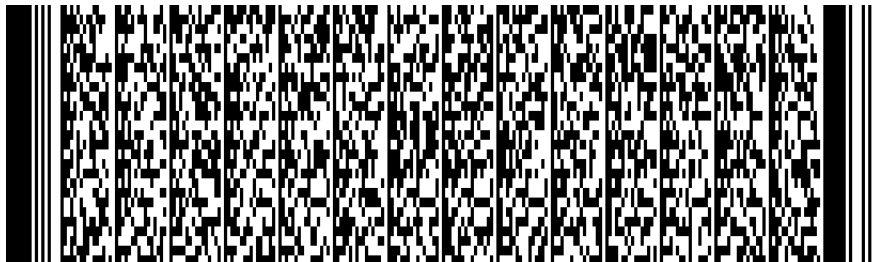
4366 S PINE ST APT C

N CT-8379 N CT-2210

N CT-1040CRC

TACOMA WA 98409 -

1. Federal adjusted gross income (from federal Form 1040, Line 8b, or federal Form 1040-SR, Line 8b)	1.	139272
2. Additions to federal adjusted gross income (from Schedule 1, Line 40)	2.	0
3. Add Line 1 and Line 2	3.	139272
4. Subtractions from federal adjusted gross income (from Schedule 1, Line 52)	4.	41
5. Connecticut adjusted gross income: Line 4 subtracted from Line 3.	5.	139231
6. Income from Connecticut sources (from Schedule CT-SI, Line 30)	6.	125799
7. Greater of Line 5 or Line 6. If less than zero, "0" is entered on Line 12.	7.	139231
8. Income tax	8.	7078
9. Line 6 divided by Line 5. If Line 6 is equal to or greater than Line 5, 1.0000 is entered.	9.	0.9035
10. Line 9 multiplied by Line 8	10.	6395
11. Credit for income taxes paid to qualifying jurisdictions (from Schedule 2, Line 61)	11.	0
12. Line 11 subtracted from Line 10. If Line 11 is greater than Line 10, "0" is entered.	12.	6395
13. Connecticut alternative minimum tax (from Form CT-6251)	13.	0
14. Add Line 12 and Line 13.	14.	6395
15. Total allowable credits (from Schedule CT-IT Credit, Part 1, Line 11)	15.	0
16. Connecticut income tax: Line 15 subtracted from Line 14. If less than zero, "0" is entered.	16.	6395
17. Individual use tax (from Schedule 3, Line 62) If no tax is due, "0" is entered.	17.	0
18. Total tax: Add Line 16 and Line 17.	18.	6395



Clip check here. Do not use staples.
Do not send Forms W-2 or 1099, or Schedules CT K-1.

NRPY1219V011024

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19. Amount from Line 18

19. • 6395

Forms W-2, W-2G, 1099, and Schedule CT K-1 Information

Col. A - Employer's Federal ID #	Col. B - CT Wages, Tips, etc.	Sch. CT K-1	Col. C - CT Income Tax Withheld
20a. 84 - 1697731	• 120368	•	8376
20b. -	• 0	•	0
20c. -	• 0	•	0
20d. -	• 0	•	0
20e. -	• 0	•	0

20f. Additional Connecticut withholding (from Supplemental Schedule CT-1040WH, Line 3) 20f. 0

20. **Total Connecticut income tax withheld:** Amounts in Column C. 20. 8376

21. All 2019 estimated tax payments and any overpayments applied from a prior year 21. 0

22. Payments made with Form CT-1040 EXT 22. 0

22a. Claim of right credit (from Form CT-1040CRC, Line 6) 22a. 0

22b. Pass-through entity tax credit (from Schedule CT-PE, Line 1). Schedule must be attached. 22b. 0

23. **Total payments and refundable credits:** Add Lines 20, 21, 22, 22a and 22b. 23. 8376

24. Overpayment: If Line 23 is more than Line 19, Line 19 subtracted from Line 23. 24. 1981

25. Amount of Line 24 you want **applied to your 2020 estimated tax** 25. 0

26. Amount of Line 22 you want applied as a CHET contribution (from Schedule CT-CHET, Line 4) 26. 0

26a. Total contributions of refund to designated charities (from Schedule 4, Line 63) 26a. 0

27. **Refund:** Lines 25, 26, and 26a subtracted from Line 24. 27. 1981**If you have not elected to direct deposit, a refund check will be issued and processing may be delayed.**

27a. Acct. type Y Ck. N Sv. 27b. Rout. # 121202211 27c. Acct. # 440025501097

27d. Refund going to a bank account outside the U.S. 27d. N

28. **Tax due:** If Line 19 is more than Line 23, Line 23 subtracted from Line 19. 28. 0

29. If late: Penalty entered. Line 28 multiplied by 10% (.10). 29. 0

30. If late: Interest entered. 30. 0

Line 28 multiplied by number of months or fraction of a month late, then by 1% (.01). 30. 0

31. Interest on underpayment of estimated tax (from Form CT-2210.) 31. 0

32. **Total amount due:** Add Lines 28 through 31. 32. 0 .00

Declaration: I declare under penalty of law that I have examined this return and all accompanying schedules and statements, including reporting and payment of any use tax due, and, to the best of my knowledge and belief, it is true, complete, and correct. I understand the penalty for willfully delivering a false return or document to DRS is a fine of not more than \$5,000, or imprisonment for not more than five years, or both. The declaration of a paid preparer other than the taxpayer is based on all information of which the preparer has any knowledge.

Your signature •		Date • 04-18-2020	Home/cell telephone number 2037261711
Spouse's signature (if joint return) 66289 •		Date • 04-18-2020	Daytime telephone number • 6479746269
Paid preparer's signature •	Date • 04-18-2020	Telephone number • 402-379-7818	Paid Preparer's PTIN P00327633
Paid preparer's name JOSEPH SMITH EA M			FEIN 200124265
Firm's name, address, and ZIP code TRAVELTAX LLC 46 ST MARK RD TAYLORS SC,			Self-employed

Third Party Designee - Complete the following to authorize DRS to contact another person about this return.

Designee's name • JOSEPH SMITH EA MST	Telephone number • 402-379-7818	Personal identification number (PIN) • 16110
--	------------------------------------	---

NRPY1219V021024

Sign Here

Keep a copy for your records.

NRPY1219V031024



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Schedule 1 - Modifications to Federal Adjusted Gross Income

33. Interest on state and local government obligations other than Connecticut	33.	0
34. Mutual fund exempt-interest dividends from non-Connecticut state or municipal government obligations	34.	0
35. Taxable amount of lump-sum distributions from qualified plans not included in federal adjusted gross income	35.	0
36. Beneficiary's share of Connecticut fiduciary adjustment: Entered only if greater than zero.	36.	0
37. Loss on sale of Connecticut state and local government bonds	37.	0
38. Section 168(k) federal bonus depreciation deduction allowed for property placed in service during this year.	38.	0
38a. 80% of Section 179 federal deduction.	38a.	0
39. Other-specify •	39.	0
40. Total additions: Add Lines 33 through 39.	40.	0
41. Interest on U.S. government obligations	41.	41
42. Exempt dividends from certain qualifying mutual funds derived from U.S. government obligations	42.	0
43. Social Security benefit adjustment (from Social Security Benefit Adjustment Worksheet)	43.	0
44. Refunds of state and local income taxes	44.	0
45. Tier 1 and Tier 2 railroad retirement benefits and supplemental annuities	45.	0
46. Military retirement pay	46.	0
47. 25% of Connecticut teacher's retirement pay	47.	0
48. Beneficiary's share of Connecticut fiduciary adjustment: Entered only if less than zero.	48.	0
49. Gain on sale of Connecticut state and local government bonds	49.	0
50. CHET contributions made in 2019 or an excess carried forward from a prior year Acct. #:	50.	0
50a. 25% of Section 168(k) federal bonus depreciation deduction added back in preceding two years.	50a.	0
50b. 14% of pension or annuity income	50b.	0
51. Other-specify •	51.	0
52. Total subtractions: Add Lines 41 through 51.	52.	41

Schedule 2 - Credit for Income Taxes Paid to Qualifying Jurisdictions

53. Connecticut AGI during residency portion of taxable year	53.	0
	Col. A	Col. B
54. Qualifying jurisdiction's name and two-letter code 54. •	•	
55. Non-Connecticut income included on Line 53 and reported on a qualifying jurisdiction's income tax return (from Schedule 2 Worksheet)	55.	0
56. Line 55 divided by Line 53. May not exceed 1.0000.	56.	0.0000
57. Apportioned income tax	57.	0
58. Line 56 multiplied by Line 57	58.	0
59. Allowable income tax paid to a qualifying jurisdiction	59.	0
60. Lesser of Line 58 or Line 59	60.	0
61. Total credit: Add Line 60, all columns.	61.	0

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Schedule 3 - Individual Use Tax

62a. Use tax at 1% (from Connecticut Individual Use Tax Worksheet, Section A, Column 7)	62a.	0
62b. Use tax at 6.35% (from Connecticut Individual Use Tax Worksheet, Section B, Column 7)	62b.	0
62c. Use tax at 7.75% (from Connecticut Individual Use Tax Worksheet, Section C, Column 7)	62c.	0
62d. Use tax at 2.99% (from Connecticut Individual Use Tax Worksheet, Section D, Column 7)	62d.	0
62. Individual use tax: Add Lines 62a, 62b, 62c, and 62d.	62. •	0

Schedule 4 - Contributions to Designated Charities

63a. AR	63a.	0
63b. OT	63b.	0
63c. ES/W	63c.	0
63d. BCR	63d.	0
63e. SNS	63e.	0
63f. MR	63f.	0
63g. CBS	63g.	0
63h. MHCIA	63h.	0
63. Total Contributions: Add Lines 63a through 63h.	63.	0

Taxpayer email

NGUYEN_H_VINH@YAHOO.COM

NRPY1219V041024

Form CT-1040NR/PY Required Fields

The following fields are required to be automatically populated or completed for taxpayers to continue filing, or must be completed in response to the selection of other fields.

Required to be Automatically-Populated Fields

Each page of each form submitted to DRS must include the following automatically populated fields:

1. **Document Identification Numbers** - Three occurrences of the Document Identification Number (DIN) must be on each page. The QR Code and two DINs must be on each scannable page. (See Document Identification Number and Quick Reference (QR) Code, on Page 4.)
2. **Social Security Number** - The Social Security Number must appear at the top of Form CT-1040NR/PY, Pages 2, 3, and 4; Schedule CT-CHET; Supplemental Schedule CT-1040WH; Schedule CT-IT Credit, Pages 1 and 2; Schedule CT-PE; and Form CT-6251, Pages 1 and 2.
3. In addition, the following **Checklist for filing your Connecticut income tax return** must be included when hard copies of the form are printed. Taxpayers should not send the checklist to DRS with the return.

Do not send this sheet with your return.

Checklist for filing your Connecticut income tax return:

1. Do not send this sheet with your return. Be sure that Page 1 of your return is not printed on the back of this sheet.
2. Verify that the address lines on the return are correct and proper abbreviations are used.
3. If the Employer or Payer's Federal ID # is not listed on Page 2, Lines 20a through 20e, Column A, **all** withholding claimed will be disallowed and your return will not be successfully processed.
4. Do not attempt to remove or modify the solid boxes that print out on your return. Altering target marks may affect the processing of your return.
5. Do not send "Draft" or "Unapproved" versions of your return. This will delay or stop the processing of your return.
6. Do not make manual (hand written or typed) corrections to your return; this is a machine readable return. Changes may only be made by reentering information in your software and re-printing the return.
7. Do not use this return to change or amend previously filed returns. You must use Form CT-1040X to change or amend a previously filed Connecticut income tax return. (File Form CT-1040X electronically at **www.ct.gov/TSC** using the Taxpayer Service Center.)
8. **Do not attach or send copies of forms W-2 or 1099.**
9. Send **all** completed pages of CT-1040 NR/PY, Schedule CT-CHET, Supplemental Schedule CT-1040WH, Schedule CT-IT Credit, Schedule CT-PE, and Form CT-6251.
10. Make check payable to: Commissioner of Revenue Services
11. To ensure proper posting, write your SSN(s) (optional) and "2019 Form CT-1040NR/PY" on your check.
12. To mail your return, use the following addresses:
For all tax returns with payment:
Department of Revenue Services
PO Box 2969
Hartford CT 06104-2969
For refunds and tax returns without payment:
Department of Revenue Services
PO Box 2968
Hartford CT 06104-2968
13. Verify that all fields print completely and any preparer information is filled out and legible before filing this return. If you find any errors, do not make manual changes. Re-enter information in your software and re-print the return.
14. If you wish to directly deposit a refund into a checking or savings bank account, confirm that Lines 27a through 27d have been completed. You **must** enter bank information on both the federal and Connecticut returns for each to be correctly deposited.
15. When making payment using Form CT-1040V, **DO NOT** attach copies of your previously filed Form CT-1040NR/PY.

Do not send this sheet with your return.

Schedule CT-SI
Nonresident or Part-Year Resident
Schedule of Income From Connecticut Sources

2019

Complete this schedule if you were a nonresident or part-year resident of Connecticut and attach it to Form CT-1040NR/PY. Do not use staples. Complete in blue or black ink only. Please note that each form is year specific. To prevent any delay in processing your return, the correct year's form **must** be submitted to the Department of Revenue Services (DRS).

Your first name and middle initial HOANG V NGUYEN	Last name NGUYEN	Your Social Security Number 795338135
If joint return, spouse's first name and middle initial HELEN NGUYEN	Last name NGUYEN	Spouse's Social Security Number 958996920
See 2019 Connecticut Nonresident and Part-Year Resident Income Tax Return Instructions online before completing this schedule.		
Part 1 - Connecticut Income - Part-Year Residents: Complete Schedule CT-1040AW , <i>Part-Year Resident Income Allocation</i> . Add Columns B and D for each line of Schedule CT-1040AW and enter the totals on Lines 1 through 30 below. Nonresidents: Enter the income received from Connecticut sources.		
1. Wages, salaries, tips, etc.	▶	1. 120,368
2. Taxable interest	▶	2. 155
3. Ordinary dividends	▶	3. 3,028
4. Alimony received	▶	4.
5. Business income or (loss)	▶	5.
6. Capital gain or (loss)	▶	6. 2,248
7. Other gains or (losses)	▶	7.
8. Taxable amount of IRA distributions	▶	8.
9. Taxable amounts of pension and annuities	▶	9.
10. Rental real estate, royalties, partnerships, S corporations, trusts, etc.	▶	10.
11. Farm income or (loss)	▶	11.
12. Unemployment compensation	▶	12.
13. Taxable amount of social security benefits	▶	13.
14. Other income: See instructions	▶	14.
15. Gross income from Connecticut sources: Add Lines 1 through 14	▶	15. 125,799 00
Part 2 - Adjustments to Connecticut Income - Enter adjustments directly related to income reported above.		
16. Educator expenses	▶	16.
17. Certain business expenses of reservists, performing artists, and fee-basis government officials	▶	17.
18. Health savings account deduction	▶	18.
19. Moving expenses for members of the armed forces	▶	19.
20. Deductible part of self-employment tax	▶	20.
21. Self-employed SEP, SIMPLE, and qualified plans	▶	21.
22. Self-employed health insurance deduction	▶	22.
23. Penalty on early withdrawal of savings	▶	23.
24. Alimony paid. Recipient's last name ▶ SSN ▶	▶	24.
25. IRA deduction	▶	25.
26. Student loan interest deduction	▶	26.
27. Tuition and fees	▶	27.
28. <i>Reserved for future use</i>	▶	28.
29. Total adjustments: Add Lines 16 through 27	▶	29.
30. Income from Connecticut sources: Subtract Line 29 from Line 15. Enter the amount here and on Form CT-1040NR/PY , Line 6	▶	30. 125,799 00

Employee Apportionment Worksheet - Complete Lines A through G only when the income from employment is earned both inside and outside Connecticut and the exact amount of Connecticut income is not known. Do not complete Lines A through G if you know the exact amount of your Connecticut-sourced income.		
A. Working days (or other basis) outside Connecticut	A	
B. Working days (or other basis) inside Connecticut	B	
C. Total working days: Add Line A and Line B	C	
D. Nonworking days (Holidays, weekends, etc.)	D	
E. Connecticut ratio: Divide Line B by Line C. Round to four decimal places	E	.
F. Total income being apportioned	F	
G. Connecticut income: Multiply Line E by Line F. Enter here and on Schedule CT-SI, Line 1	G	
Basis, if other than working days: _____		

Schedule CT-1040AW

Part-Year Resident Income Allocation

2019

Part-year residents must complete this schedule before completing Schedule CT-SI and attach it to Form CT-1040NR/PY. Do not use staples. Complete in blue or black ink only. Please note that each form is year specific. To prevent any delay in processing your return, the correct year's form **must** be submitted to the Department of Revenue Services (DRS).

Your first name and middle initial HOANG V NGUYEN	Last name NGUYEN	Your Social Security Number 795338135
If joint return, spouse's first name and middle initial HELEN NGUYEN	Last name NGUYEN	Spouse's Social Security Number 958996920

Part 1 - Adjusted Gross Income

		Federal Income as Modified See instructions.	Connecticut Resident Period	Connecticut Nonresident Period	
		Column A Income from federal return	Column B Income from Column A for this period	Column C Income from Column A for this period	Column D Income from Column C from Connecticut sources
1. Wages, salaries, tips, etc.	1.	130,176	120,368	9,808	
2. Taxable interest	2.	319	155	164	
3. Ordinary dividends	3.	3,028	3,028		
4. Alimony received	4.				
5. Business income or (loss)	5.				
6. Capital gain or (loss)	6.	2,248	2,248		
7. Other gains or (losses)	7.				
8. Taxable amount of IRA distributions	8.				
9. Taxable amounts of pension and annuities	9.	3,460		3,460	
10. Rental real estate, royalties, partnerships, S corporations, trusts, etc	10.				
11. Farm income or (loss)	11.				
12. Unemployment compensation	12.				
13. Taxable amount of social security benefits	13.				
14. Other income: See instructions	14.				
15. Add Lines 1 through 14 ▶	15.	139,231 00	125,799 00	13,432 00	0 00

Part 2 - Adjustments to Income

16. Educator expenses	16.				
17. Certain business expenses of reservists, performing artists, and fee-basis government officials	17.				
18. Health savings account deduction	18.				
19. Moving expenses for members of the armed forces	19.				
20. Deductible part of self-employment tax	20.				
21. Self-employed SEP, SIMPLE, and qualified plans	21.				
22. Self-employed health insurance deduction	22.				
23. Penalty on early withdrawal of savings	23.				
24. Alimony paid	24.				
25. IRA deduction	25.				
26. Student loan interest deduction	26.				
27. Tuition and fees	27.				
28. Reserved for future use	28.				
29. Total adjustments: Add Lines 16 through 27	29.	0	0	0	0
30. Subtract Line 29 from Line 15 ▶	30.	139,231 00	125,799 00	13,432 00	0 00

Line 30, Column A, must equal the amount on Form CT-1040NR/PY, Line 5.
Add Columns B and D for each line and enter the totals on Lines 1 through 30 on Schedule CT-SI.

Part 3 - Part-Year Resident Information

Moved Into Connecticut

1. Date **you** moved into Connecticut _____ and state of **prior** residence: _____
2. Date **your spouse** moved into Connecticut _____ and state of **prior** residence: _____

Moved Out of Connecticut

1. Date **you** moved out of Connecticut 12-07-2019 and state of **new** residence: WA
2. Date **your spouse** moved out of Connecticut 12-07-2019 and state of **new** residence: WA

Income From Connecticut Sources During Nonresident Period

1. Did **you** receive income from Connecticut sources during your nonresident period? ☐ Yes ☒ No
2. Did **your spouse** receive income from Connecticut sources during his or her nonresident period? ☐ Yes ☒ No

Form CT-1040 TCS

2019 Tax Calculation Schedule

Name(s)	Social Security No.
HOANG V & HELEN NGUYEN	795-33-8135

Tax Calculation Schedule

Complete Lines 2, 4, 5, 6, and 8, using *Tables A through E*.

1. Enter Connecticut adjusted gross income (AGI) from Form CT-1040 , Line 5, or Form CT-1040NR/PY , Line 7. Form CT-1040NR/PY filers must enter income from Connecticut sources if it exceeds Connecticut AGI.	1.	139,231	00
2. Enter the exemption amount from <i>Table A, Personal Exemptions</i> . If zero, enter "0."	2.	0	00
3. Connecticut Taxable Income: Subtract Line 2 from Line 1. If less than zero, enter "0."	3.	139,231	00
4. Enter amount from <i>Table B, Initial Tax Calculation</i> .	4.	6,758	00
5. Enter amount from <i>Table C, 3% Tax Rate Phase-Out Add-Back</i> . If zero, enter "0."	5.	320	00
6. Enter amount from <i>Table D, Tax Recapture</i> . If zero, enter "0."	6.	0	00
7. Add Lines 4, 5, and 6.	7.	7,078	00
8. Enter the decimal amount from <i>Table E, Personal Tax Credits</i> . If zero, enter "0."	8.	0.00	
9. Multiply the amount on Line 7 by the decimal amount on Line 8.	9.	0	00
10. Connecticut Income Tax: Subtract Line 9 from Line 7. Enter here and on Form CT-1040 , Line 6, or Form CT-1040NR/PY , Line 8.	10.	7,078	00

CTWK_D	For your records only. Capital Gains and Losses Worksheet	2019 STATE D Summary	
Name(s) as shown on state return HOANG V & HELEN NGUYEN		Social Security Number 795-33-8135	

Part I Short-Term Capital Gains and Losses		Taxpayer	Spouse	Total
Line 1a	Totals for all ST 1099-B transactions reported to the IRS			
Line 1b	Transactions reported on 8949 with Box A checked	98		98
Line 2	Transactions reported on 8949 with Box B checked			
Line 3	Transactions reported on 8949 with Box C checked	1,946		1,946
Line 4	Federal 6252 Short Term			
	Federal 4684 Short Term			
	Federal 6781 Short Term			
	Federal 8824 Short Term			
	Fed D2 ST Ln 4 (6252,4684,6781& 8824)			
Line 5	Partnership, S-Corporation, Fiduciary			
	Fiduciary Final Year Deductions			
Line 6	Federal Schedule D ST carryover amounts			
Subtotal:		2,044		2,044

Part II Long-Term Capital Gains and Losses		Taxpayer	Spouse	
Line 8a	Totals for all LT 1099-B transactions reported to the IRS			
Line 8b	Transactions reported on 8949 with Box D checked	186		186
Line 9	Transactions reported on 8949 with Box E checked			
Line 10	Transactions reported on 8949 with Box F checked			
Line 11	Federal 4797 Long Term			
	Federal 4797 Prior Year Unallowed Passive			
	Federal 4797 Sec 1231 from 6252			
	Federal 4797 Sec 1231 from 8824			
	Federal 2439 Long Term			
	Federal 6252 Long Term			
	Federal 4684 Long Term			
	Federal 6781 Long Term			
	Federal 8824 Long Term			
Line 12	Partnership, S-Corporation, Fiduciary			
	Final Year Deductions from Fiduciary			
Line 13	Capital Gain Distributions	18		18
Line 14	Federal Schedule D LT carryover amounts			
Subtotal:		204		204

State's Computation				
Total Capital Gain or Loss		2,248		2,248
Limited Capital Gain or Loss (Amount carrying to the State)		2,248		2,248

Special Note 1

When multiple Federal 6252s & 8824s are entered for business **and** personal properties, Overrides **will** be required.

You may enter individual Overrides on state Sch D screen. Please review the following lines to determine if an Override is necessary.

- * Line 4 - Federal 6252 Short Term
- * Line 4 - Federal 8824 Short Term
- * Line 11 - Federal 4797 Sec 1231 from 6252
- * Line 11 - Federal 4797 Sec 1231 from 8824
- * Line 11 - Federal 6252 Long Term
- * Line 11 - Federal 8824 Long Term

CTWK_D	For your records only. Capital Gains and Losses Worksheet	2019 FEDERAL D Summary	
Name(s) as shown on state return HOANG V & HELEN NGUYEN		Social Security Number 795-33-8135	

Part I Short-Term Capital Gains and Losses		Taxpayer	Spouse	Total
Line 1a	Totals for all ST 1099-B transactions reported to the IRS			
Line 1b	Transactions reported on 8949 with Box A checked	98		98
Line 2	Transactions reported on 8949 with Box B checked			
Line 3	Transactions reported on 8949 with Box C checked	1,946		1,946
Line 4	Federal 6252 Short Term			
	Federal 4684 Short Term			
	Federal 6781 Short Term			
	Federal 8824 Short Term			
	Fed D2 ST Ln 4 (6252,4684,6781& 8824)			
Line 5	Partnership, S-Corporation, Fiduciary			
	Fiduciary Final Year Deductions			
Line 6	Federal Schedule D ST carryover amounts			
Subtotal:		2,044		2,044

Part II Long-Term Capital Gains and Losses		Taxpayer	Spouse	
Line 8a	Totals for all LT 1099-B transactions reported to the IRS			
Line 8b	Transactions reported on 8949 with Box D checked	186		186
Line 9	Transactions reported on 8949 with Box E checked			
Line 10	Transactions reported on 8949 with Box F checked			
Line 11	Federal 4797 Long Term			
	Federal 4797 Prior Year Unallowed Passive			
	Federal 4797 Sec 1231 from 6252			
	Federal 4797 Sec 1231 from 8824			
	Federal 2439 Long Term			
	Federal 6252 Long Term			
	Federal 4684 Long Term			
	Federal 6781 Long Term			
	Federal 8824 Long Term			
Line 12	Partnership, S-Corporation, Fiduciary			
	Final Year Deductions from Fiduciary			
Line 13	Capital Gain Distributions	18		18
Line 14	Federal Schedule D LT carryover amounts			
Subtotal:		204		204

State's Computation				
Total Capital Gain or Loss		2,248		2,248
Limited Capital Gain or Loss (Amount carrying to the State)		2,248		2,248

Special Note 1

When multiple Federal 6252s & 8824s are entered for business **and** personal properties, Overrides **will** be required.

You may enter individual Overrides on state Sch D screen. Please review the following lines to determine if an Override is necessary.

- * Line 4 - Federal 6252 Short Term
- * Line 4 - Federal 8824 Short Term
- * Line 11 - Federal 4797 Sec 1231 from 6252
- * Line 11 - Federal 4797 Sec 1231 from 8824
- * Line 11 - Federal 6252 Long Term
- * Line 11 - Federal 8824 Long Term

CT-COMP	Three-year State Tax Return Comparison			2019
Name(s) as shown on return HOANG V & HELEN NGUYEN				Taxpayer ID Number 795-33-8135
[State] Income Tax Return	2017	2018	2019	Difference 2018-2019
Filing Status	MFJ	MFJ	MFJ	
Gross Income	127,256	108,432	139,272	30,840
Deductions			41	41
Taxable Income	126,064	108,432	139,231	30,799
Actual State Income	126,064	108,432	125,799	17,367
State Income Tax	6,274	5,144	6,395	1,251
Local Taxes				
Use Tax				
Contributions				
Income Tax Withheld	8,188	7,352	8,376	1,024
Estimates and Extension payments . . .				
Underpayment Penalty				
Overpayment Applied to Next Year . . .				
Refund	1,914	2,208	1,981	(227)
Balance Due				
Marginal tax rate			5.500000	5.500000
Effective tax rate	4.980000	4.740000	4.590000	(0.150000)