H&R Block
ADVANTAGE®

H&R BLOCK

Prepared For:
PHILIP A. STUART

04/12/2015

Today's Savings

* Because you qualified for a $67 Earned Income Credit (EIC) this year, you saved: $67.00

* In simple terms, the Marginal Tax Rate is the tax rate that you pay on your last dollar of taxable income. It is the highest federal tax bracket that affects your tax calculation. The Effective Tax Rate is the percentage of your total income that you paid in taxes. For 2014, your Marginal Tax Rate is 0% and your Effective Tax Rate is 0%.

Total Savings. $67.00

Filing, Refund and Balance Due Information

Tax Return	efile	Refund / (Balance Due)	Summary		Message
Federal	No	$86.00	Refund	$86.00	See the Filing Checklist for instructions.
Wisconsin	No	$9.00	Refund	$9.00	See the Filing Checklist for mailing instructions.

This H&R Block Advantage document provides information that could help you improve your tax and financial situation. Its contents should be considered in conjunction with information you receive from other sources that are familiar with your specific circumstances. Tax services offered through subsidiaries of HRB Tax Group, Inc.

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2014 Tax Return Summary

Federal Year over Year Comparison

INCOME	Year 2014	Year 2013	Change($)
Wages, salaries, tips	$891	$0	$891
Total income	$891	$0	$891

ADJUSTED GROSS INCOME			
Total income less total adjustments	$891	$0	$891

PAYMENTS			
Federal withholding	$19	$0	$19
Earned income credit	$67	$0	$67
Total payments	$86	$0	$86

REFUND			
Overpayment	$86	$0	$86
Refund due	$86	$0	$86

OTHER COMPUTATIONS			
Alternative minimum taxable income	$891	$0	$891
Filing status	Single		

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Your 2015 Eligibility:
Potentially Advance Premium Tax Credit
(based on your 2014 tax return)

ACA Tax Impact Analysis: Your Personalized Review

The Affordable Care Act (ACA) is a federal law that says almost everyone must have health insurance or pay a tax penalty.

Your 2014 Status:

You and all members in your household had qualified health insurance for all 12 months in 2014. Therefore, you were not assessed an ACA tax penalty. ACA tax penalties will increase next year for individuals without qualified coverage.

If you or members of your household purchased insurance through the Marketplace, your ACA Premium Tax Credit reconciliation details can be found on your Block Advantage 2014 Tax Return Summary.

2014 ACA Tax Penalty:
$0.00
based on your 2014 tax return.

Your 2015 Eligibility:

Based on your 2014 tax return, **you may be eligible for the Advance Premium Tax** Credit to help pay part of the cost of your health insurance premiums. The Marketplace Open Enrollment Period ended 2/15/15. Outside of Open Enrollment you can enroll only if you qualify for a Special Enrollment Period due to life events such as marriage, birth of child or job changes.

For your Marketplace application, you will need to know:
Household Income: $21,686.00
Household Size: 1
Remember to update your information if anything changes.

For more information about ACA and your taxes, visit hrblock.com/acataximpact.

Potential 2015 ACA Tax Penalty:
$325.00
if you and members of your household do not have qualified health insurance for the year and don't qualify for an exemption.

View your personalized ACA Tax Impact Analysis in your MyBlock account. Visit hrblock.com/myblock to log in.

myBLOCK℠

Need help getting health insurance?

H&R Block offers free, unbiased help enrolling in health insurance. Call 800-HR Block (800-472-5625) or visit healthcare.hrblock.com

The information provided herein is only an estimate for informational purposes only and does not constitute tax or legal advice or an official calculation of your potential ACA tax penalty. Your situation could differ based on other factors.

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2014 Federal Tax Return Filing Instructions

FOR THE YEAR ENDING

December 31, 2014

Prepared for	PHILIP A STUART
Tax Summary	Gross Income $ 891 Adjusted Gross Income $ 891 Total Deductions $ 10,150 Total Taxable Income $ 0 Total Tax $ 0 Total Payments $ 86 Refund Amount $ 86 Amount You Owe $ 0
Make check payable to	United States Treasury
Mailing Address	Department of the Treasury Internal Revenue Service Center Fresno, CA 93888-0002

Instructions

STEP 1 - Sign and date Form 1040EZ

STEP 2 - Assemble what you need to mail

Attach any schedules and forms behind Form 1040EZ in order of the Attachment Sequence Number shown in the upper right corner of the schedule or form. If there are supporting statements, arrange them in the same order as the schedules or forms they support and attach them last. Do not attach correspondence or other items unless required to do so. Attach a copy of each W-2, W-2G, and 2439 to the front of Form 1040EZ. Also attach Form(s) 1099-R or 1099-G if tax was withheld.

STEP 3 - Mail Form(s)

Mail Form 1040EZ and associated documents to the address above.
Retain the proof of mailing to avoid a late filing penalty.
We recommend you use one of these methods to send your 1040EZ:
- U.S. Postal Service certified mail.

If you are not mailing to an address with a post office box, you may also use:
- Federal Express (FedEx): Priority Overnight, Standard Overnight, 2Day, International Priority, or International First
- United Parcel Service (UPS): Next Day Air, Next Day Air Saver, 2nd Day Air, or Worldwide Express

CONTINUED ON NEXT PAGE

2014 Federal Filing Instructions Continued

Instructions

STEP 4 - Keep a copy
  Print a copy of the return for your records.
  Please attach a copy of each W-2, W-2G, 1099G and 1099R to your return.

Form **1040EZ**

Department of the Treasury - Internal Revenue Service

Income Tax Return for Single and Joint Filers With No Dependents (99) 2014

OMB No. 1545-0074

PHILIP A STUART
2520 HONEY LOU CT APT 103
APPLETON, WI 54915

Your social security number 560-69-4744

Spouse's social security number

▲ Make sure the SSN(s) above are correct.

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

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

Income

Attach Form(s) W-2 here.
Enclose, but do not attach, any payment.

1	Wages, salaries, and tips. This should be shown in box 1 of your Form(s) W-2. Attach your Form(s) W-2.	1	891.
2	Taxable interest. If the total is over $1,500, you cannot use Form 1040EZ.	2	
3	Unemployment compensation and Alaska Permanent Fund dividends (see instructions).	3	
4	Add lines 1, 2, and 3. This is your **adjusted gross income.**	4	891.
5	If someone can claim you (or your spouse if a joint return) as a dependent, check the applicable box(es) below and enter the amount from the worksheet on page 2. ☐ **You** ☐ **Spouse** If no one can claim you (or your spouse if a joint return), enter $10,150 if **single;** $20,300 if **married filing jointly.** See page 2 for explanation.	5	10,150.
6	Subtract line 5 from line 4. If line 5 is larger than line 4, enter - 0- . This is your **taxable income.**	▶ 6	0.

Payments, Credits, and Tax

7	Federal income tax withheld from Form(s) W-2 and 1099.	7	19.
8a	**Earned income credit (EIC)** (see instructions).	8a	67.
b	Nontaxable combat pay election. 8b		
9	Add lines 7 and 8a. These are your **total payments and credits.**	▶ 9	86.
10	**Tax**. Use the amount on **line 6 above** to find your tax in the tax table in the instructions. Then, enter the tax from the table on this line.	10	
11	Health care: individual responsibility (see instructions). Full-year coverage X	11	
12	Add lines 10 through 11. These are your **total tax.**	12	

Refund

Have it directly deposited! See instructions and fill in 13b, 13c, and 13d or Form 8888.

13a	If line 9 is larger than line 12, subtract line 12 from line 9. This is your **refund.** If Form 8888 is attached, check here ▶ ☐	13a	86.
▶ b	Routing number XXXXXXXXX ▶ c Type: ☐ ~~Checking~~ ☐ ~~Savings~~		
▶ d	Account number XXXXXXXXXXXXXXXXX		

Amount You Owe

14	If line 12 is larger than line 9, subtract line 9 from line 12. This is the **amount you owe.** For details on how to pay, see instructions.	▶ 14	

Third Party Designee

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

Designee's name ▶ DOROTHY MATHEWS
Phone no. ▶ (920) 830-1632
Personal ID number (PIN) ▶ 31337

Sign Here

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

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

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

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check ☐ if self-employed	PTIN

Firm's name ▶ | Firm's EIN ▶
Firm's address ▶ | Phone no.

KBA **For Disclosure, Privacy Act, and Paperwork Reduction Act Notice, see instructions.** Form **1040EZ** (2014)

H&R BLOCK

2014 STATE TAX RETURN FILING INSTRUCTIONS

WISCONSIN

FOR THE YEAR ENDING
December 31, 2014

Prepared for	PHILIP A STUART
Tax Summary	Gross Income .... $ 891 Adjusted Gross Income .... $ 891 Total Deductions .... $ 10,080 Total Taxable Income .... $ 0 Total Tax .... $ 0 Total Payments .... $ 9 Refund Amount .... $ 9 Amount You Owe .... $ 0
Make check payable to	Not Applicable
Mailing Address	Wisconsin Department of Revenue PO Box 59 Madison, WI 53785-0001

Special Instructions

SIGN AND DATE YOUR RETURN
Please sign and date Form WI 1.
ASSEMBLE WHAT YOU NEED TO MAIL
Attach any schedules and forms behind Form WI 1. If there are supporting statements, arrange them in the same order as the schedules and forms they support and attach them last.
Attach a copy of each W-2, W-2G, 1099R and 1099G for which WI tax has been withheld.

MAIL FORM WI 1 & OTHER DOCUMENTS TO:
Mailing Address listed above.
To retain the proof of mailing, we recommend using certified mail to send your form(s). When mailing to an address without a P.O. box, you may also use:
Airborne Express, DHL Worldwide Express, FedEx, or UPS.

KEEP A COPY
Click on Main Menu and then E-File or Print to print your return. Attach your copy of each W-2, W-2G, 1099R or 1099G with withholding. Keep with your records for three years.

WI-Z Wisconsin income tax 2014

Complete form using BLACK INK

Note ▼ DO NOT STAPLE

Your legal last name	Legal first name	M.I.	Your social security number
STUART	PHILIP	A	560694744
If a joint return, spouse's legal last name	Spouse's legal first name	M.I.	Spouse's social security number

Home address (number and street). If you have a PO Box, see page 6.	Apt. No.
2520 HONEY LOU CT	103

City or post office	State	Zip code
APPLETON	WI	54915

Tax district Check below then fill in either the name of city, village, or town and the county in which you lived at the end of 2014.

[X] City [ ] Village [ ] Town

City, village, or town ▶ APPLETON

County of ▶ WINNEBAGO

School district number (see page 23) 0147

Special conditions

Filing status (check below)

[X] Single

[ ] Married filing joint return (even if only one had income)

ENCLOSE WITHHOLDING STATEMENTS

NO COMMAS; NO CENTS

1	Adjusted gross income from line 4 of federal Form 1040EZ	1	891.00
2	If your parent (or someone else) can claim you (or your spouse) as a dependent, check here	2	[ ]
3	Fill in the **standard deduction** for your filing status from table, page 31. **But** if you checked line 2, fill in the amount from separate worksheet	3	10080.00
4	Subtract line 3 from line 1. If line 3 is larger than line 1, fill in 0	4	.00
5	Deduction for exemptions. Fill in $700 ($1,400 if married, or 0 if you checked line 2 - see separate instructions)	5	700.00
6	Subtract line 5 from line 4. If line 5 is larger than line 4, fill in 0. This is your taxable income	6	.00
7	Tax. Use amount on line 6 to find your tax using table, page 24	7	.00

8 School property tax credit

8a	Rent paid in 2014-heat included	.00	Find credit from table page 12	8a	.00
	Rent paid in 2014-heat not included	.00			
8b	Property taxes paid on home in 2014	.00 ▶	Find credit from table page 13	8b	.00

9 Married couple credit. Wages (see separate instructions)

9a	Yourself	.00
9b	Spouse	.00

9c Fill in smaller of 9a or 9b but no more than $16,000 .00 x .03 = 9c .00

10	Add credits on lines 8a, 8b, and 9c	10	.00
11	Subtract line 10 from line 7. If line 10 is larger than line 7, fill in 0. This is your net tax	11	.00
12	Sales and use tax due on Internet, mail order, or other out-of-state purchases (see page 14)	12	.00
	If you certify that no sales or use tax is due, check here ▶ [X]		

13 Donations (decreases refund or increases amount owed)

a	Endangered resources	.00	f	Firefighters memorial	.00
b	Packers football stadium	.00	g	Military family relief	.00
c	Cancer research	.00	h	Second Harvest/Feeding Amer.	.00
d	Veterans trust fund	.00	i	Red Cross WI Disaster Relief	.00
e	Multiple sclerosis	.00	j	Special Olympics Wisconsin	.00

Total (add lines a through j) ▶ 13k .00

14 Add lines 11, 12, and 13k 14 .00

PAPER CLIP CHECK OR MONEY ORDER HERE

15	Amount from line 14	15	.00
16	Wisconsin income tax withheld. Enclose readable withholding statements	16	9.00
17	If line 16 is larger than line 15, subtract line 15 from line 16. This is **YOUR REFUND**	17	9.00
18	If line 15 is larger than line 16, subtract line 16 from line 15. This is the **AMOUNT YOU OWE**	18	.00

Third Party Designee Do you want to allow another person to discuss this return with the department (see page 19)? X **Yes** Complete the following. **No**

Designee's name ► DOROTHY MATHEWS Phone no. ► (920) 830-1632 Personal identification number (PIN) ► 31337

Sign below Under penalties of law, I declare that this return is true, correct, and complete to the best of my knowledge and belief.

Your signature | Spouse's signature (if filing jointly, BOTH must sign) | Date | Daytime phone

Mail your return to: Wisconsin Department of Revenue
If refund or no tax due ..... PO Box 59, Madison WI 53785-0001
If tax due .... PO Box 268, Madison WI 53790-0001

Name **PHILIP A STUART** SSN **560-69-4744**

Worksheet 1. Investment Income If You Are Filing Form 1040

Use this worksheet to figure investment income for the earned income credit when you file Form 1040. Keep for Your Records

Interest and Dividends

1. Enter any amount from Form 1040, line 8a		1.	0
2. Enter any amount from Form 1040, line 8b, plus any amount on Form 8814, line 1b		2.	0
3. Enter any amount from Form 1040, line 9a		3.	0
4. Enter the amount from Form 1040, line 21, 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.	0
Capital Gain Net Income			
5. Enter the amount from Form 1040, line 13. If the amount on that line is a loss, enter -0-	5. 0		
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 complete lines 8 and 9 of Form 4797, enter the amount from line 9 instead.)	6. 0		
7. Subtract line 6 of this worksheet from line 5 of this worksheet. (If the result is less than zero, enter -0-.)		7.	0
Royalties and Rental Income from Personal Property			
8. Enter any royalty income from Schedule E, line 23d, plus any income from the rental of personal property shown on Form 1040, line 21	8. 0		
9. Enter any expenses from Schedule E, line 20, related to royalty income, plus any expenses from the rental of personal property deducted on Form 1040, line 36	9. 0		
10. Subtract the amount on line 9 of this worksheet from the amount on line 8. (If the result is less than zero, enter zero.)		10.	0
Passive Activities			
11. 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). (See instructions below for lines 11 and 12.)	11. 0		
12. Enter the total of any losses from passive activities (such as losses included on Schedule E, lines 26, 29b (col. (f)), 34b (col. (c)), or 40). (See instructions below for lines 11 and 12.)	12. 0		
13. Combine the amounts on lines 11 and 12 of this worksheet. (If the result is less than zero, enter -0-.)		13.	0
14 Add the amounts on lines 1, 2, 3, 4, 7, 10, and 13. Enter the total. This is your Investment Income		14.	0

15. Is the amount on line 14 more than $3,350?

- [ ] Yes. You cannot take the credit.
- [x] No. Go to Step 3 of the Form 1040 instructions for lines 64a and 64b to find out if you can take the credit (unless you are using this publication to find out if the you can take the credit; in that case, go to Rule 7, next.)

Instructions for lines 11 and 12. In figuring the amount to enter on lines 11 and 12, do not 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, is not from a passive activity, print "NPA" and the amount of that income (or loss) on the dotted line next to line 26.

DO NOT FILE

Worksheet 2. Earned Income

1. Enter amount from Form 1040, line 7* . . . 1. **891**
2. Subtract, if included on line 7, any:
   - Taxable scholarship or fellowship grant not reported on a Form W-2.
   - Amount paid to an inmate in a penal institution for work (put "PRI" and the amount subtracted on the dotted line next to line 7 of Form 1040).
   - Amount received as a pension or annuity from a non qualified deferred compensation plan or a nongovernmental section 457 plan (put "DFC" and the amount subtracted on the dotted line next to line 7 of Form 1040). This amount may be shown in box 11 of the Form W-2. If taxpayer received such an amount but box 11 is blank, contact the employer for the amount received as a pension or annuity.
   - Amount included on Form 1040, line 7, that is a Medicaid waiver payment excluded from income.

   2. **0**
3. Add all of your nontaxable combat pay (and your spouse's if filing jointly) if you elect to include it in earned income.** Also enter this amount on Form 1040, line 66b. See Combat pay, Nontaxable on this page . . . 3.
4. EARNED INCOME . . . 4. **891**

*Church Employees. Determine how much of the amount on Form 1040, line 7, was also reported on Schedule SE, line 5a. Subtract that amount from the amount on Form 1040, line 7, and enter the result on line 1.

** The election cannot be made on the return of a taxpayer whose tax year ended before October 5, 2005, due to his or her death.

Clergy. The following instructions apply to ministers, members of religious orders who have not taken a vow of poverty, and Christian Science practitioners. If you are filing Schedule SE and the amount on line 2 of that schedule includes an amount that was also reported on Form 1040, line 7:

1. Determine how much of the amount on Form 1040, line 7, was also reported on Schedule SE, line 2.
2. Subtract that amount from the amount on Form 1040, line 7. Enter the result on line 1.

Name **PHILIP A STUART** SSN **560-69-4744**

Worksheet B. - Earned Income Credit (EIC) - Lines 64a and 64b

PART 1 Self-Employed and People With Church Employee Income Filing Schedule SE

1a.	Enter the amount from Schedule SE, Section A, line 3, or Section B, line 3, whichever applies	1a.	
b.	Enter any amount from Schedule SE, Section B, line 4b, and line 5a	b.	
c.	Combine lines 1a and 1b	c.	
d.	Enter the amount from Schedule SE, Section A, line 6, or Section B, line 13, whichever applies	d.	
e.	Subtract line 1d from 1c	e.	

PART 2 Self-Employed NOT Required to File Schedule SE

2a.	Enter any net farm profit (or loss) from Schedule F, line 34, and from farm partnerships, Schedule K-1 (Form 1065), box 14, code A*	2a.	
b.	Enter any net profit (or loss) from Schedule C, line 31; Schedule C-EZ, line 3; Schedule K-1 (Form 1065), box 14, code A (other than farming); and Schedule K-1 (Form 1065-B), box 9, code J1*	b.	
c.	Combine lines 2a and 2b	c.	

PART 3 Statutory Employees Filing Schedule C or C-EZ

3.	Enter the amount from Schedule C, line 1, or Schedule C-EZ, line 1, that you are filing as a statutory employee	3.	

PART 4 All Filers Using EIC Worksheet B

DO NOT

4a.	Enter your earned income from Worksheet 2, line 4	4a.	891
b.	Combine lines 1e, 2c, 3, and 4a. **This is the total earned income**	4b.	891

If line 4b is zero or less, **STOP** You cannot take the credit.

5. If you have:
- 3 or more qualifying children, is line 4b less than $46,997 ($52,427 if married filing jointly)?
- 2 qualifying children, is line 4b less than $43,756 ($49,186 if married filing jointly)?
- 1 qualifying child, is line 4b less than $38,511 ($43,941 if married filing jointly)?
- No qualifying children, is line 4b less than $14,590 ($20,020 if married filing jointly)?

[X] **Yes.** Enter the amount from line 4b on line 6. [ ] **No. STOP** You cannot take the credit.

PART 5 All Filers Using Worksheet B

6.	Enter the total earned income from Part 4, line 4b, of this worksheet	6.	891		
7.	Look up the amount on line 6 above in the EIC Table in the Appendix to find the credit. Enter the credit here			7.	67
	If line 7 is zero, **STOP** You cannot take the credit.				
8.	Enter the amount from Form 1040, line 38	8.	891		

FILE

9. Are the amounts on lines 8 and 6 the same?

[X] **Yes.** Skip line 10; enter the amount from line 7 on line 11. [ ] **No.** Go to line 10.

PART 6 Filers Who Answered "No" on Line 9

10. If you have:
- No qualifying children, is the amount on line 8 less than $8,150 ($13,550 if married filing jointly)?
- 1 or more qualifying children, is the amount on line 8 less than $17,850 ($23,300 if married filing jointly)?

[ ] **Yes.** Leave line 10 blank; enter the amount from line 7 on line 11.

[ ] **No.** Look up the amount on line 8 in the EIC Table in the Appendix to find the credit. Enter the credit here . . 10. ______

Look at the amounts on lines 10 and 7. Then, enter the **smaller** amount on line 11.

PART 7 Your Earned Income Credit

11.	**This is the earned income credit**	11.	67

Enter this amount on Form 1040, line 64a.

Reminder -
If you have a qualifying child, complete and attach Schedule EIC.

CAUTION

If your EIC for a year after 1996 was reduced or disallowed, see Form 8862, who must file, earlier, to find out if you must file Form 8862 to take the credit for 2014.

Worksheets for Social Security Recipients - 2014

Name **PHILIP A STUART** SSN **560-69-4744**

If you receive social security benefits, have taxable compensation, contribute to your traditional IRA, and you or your spouse are covered by an employer retirement plan, complete the following worksheets.

Use Worksheet 1 to figure your modified adjusted gross income. This amount is needed in the computation of your IRA deduction, if any, which is figured using the IRA Contribution and Deduction Worksheet.

The IRA deduction figured using the IRA Contribution and Deduction Worksheet is entered on your tax return.

Worksheet 1
Computation of Modified AGI
(For use only by taxpayers who receive social security benefits)

Filing Status - Check only one box:

- [ ] **A.** Married filing jointly
- [X] **B.** Single, Head of Household, Qualifying Widow(er), or Married filing separately and **lived apart** from your spouse during the **entire year**
- [ ] **C.** Married filing separately and **lived with** your spouse at **any time** during the year

1.	Adjusted gross income (AGI) from Form 1040 or Form 1040A (not taking into account any social security benefits from Form SSA-1099 or RRB-1099, any deduction for contributions to a traditional IRA, any student loan interest deduction, any tuition and fees deduction, or any exclusion of interest from savings bonds to be reported on Form 8815)	**1.**	891
2.	Enter the amount in box 5 of all Forms SSA-1099 and Forms RRB-1099	**2.**	20,795
3.	Enter one half of line 2	**3.**	10,398
4.	Enter the amount of any foreign earned income exclusion, foreign housing exclusion, U.S. possessions income exclusion, exclusion of income from Puerto Rico you claimed as a bona fide resident of Puerto Rico, or exclusion of employer-paid adoption expenses	**4.**	0
5.	Enter the amount of any tax-exempt interest reported on line 8b of Form 1040 or 1040A	**5.**	0
6.	Add lines 1, 3, 4 and 5	**6.**	11,289
7.	Enter the amount listed below for your filing status. ● **$32,000** if you checked box **A** above ● **$25,000** if you checked box **B** above ● **$0** if you checked box **C** above	**7.**	25,000
8.	Subtract line 7 from line 6. If zero or less, enter 0 on this line	**8.**	0
9.	~~If line 8 is zero, skip to line 1~~7, enter - 0 - , and continue with line 18. If line 8 is more than zero, enter the amount listed below for your filing status. ● **$12,000** if you checked box **A** above ● **$9,000** if you checked box **B** above ● **$0** if you checked box **C** above	**9.**	
10.	Subtract line 9 from line 8. If zero or less, enter 0	**10.**	
11.	Enter the smaller of line 8 or line 9	**11.**	
12.	Enter one half of line 11	**12.**	
13.	Enter the smaller of line 3 or line 12	**13.**	
14.	Multiply line 10 by .85. If line 10 is zero, enter 0	**14.**	
15.	Add lines 13 and 14	**15.**	
16.	Multiply line 2 by .85	**16.**	
17.	**Taxable benefits** to be included in **Modified AGI** for traditional IRA deduction purposes. Enter the smaller of line 15 or line 16	**17.**	0
18.	Enter the amount of any employer-paid adoption expenses exclusion and any foreign earned income exclusion and foreign housing exclusion or deduction that you claimed	**18.**	0
19.	**Modified AGI** for determining your reduced traditional IRA deduction - add lines 1, 17 and 18. Enter here and on line 11 of the IRA Contribution and Deduction Worksheet	**19.**	891