



## Tax Return Transcript for: Last Name, First Name

Form:	1040	Transcript #:	XXXXXXXXXXXX
Date Requested:	Month / Day / Year	Date Processed:	Month / Day / Year
SSN Provided:	XXX - XX - XXXX	Tax Period Ending:	Month / Day / Year
Paid Preparer:		Paid Preparer's Firm:	

## 20XX Tax Return Transcript Summary for: Last Name, First Name

Total income:	
Adjusted Gross Income:	
Total Credits	
Total Tax Liability:	
Total Payments:	
Amount of Refund / Amount Owed:	

## Index for 20XX Tax Return Transcript

Personal Information .....	Page 2
Dependents .....	Page 2
Income .....	Page 3
Adjustments to Income .....	Page 3
Taxes and Credits .....	Page 4
Other Taxes .....	Page 4
Payments .....	Page 5
Refunds .....	Page 5



## 20XX 1040 EZ Tax Return Transcript for: Last Name, First Name

Transcript #: XXXXXXXXXX

SSN Provided: XXX - XX - XXXX

Date Processed: Month / Day / Year

Tax Period Ending: Month / Day / Year

Date Requested: Month / Day / Year

Adjusted Gross Income: \$ XX.XX

Adjusted Gross Income is defined as the gross income minus adjustments to income. This can be found on Line X, on your Form 1040EZ.

Taxable Income: \$ XX.XX

Taxable Income is defined as the gross income minus any allowable tax deductions. The Taxable Income can be found on Line X, on your Form 1040EZ.

Total Payments and Credits: \$ XX.XX

Total Payments and Credits can be defined as the amount of Income Taxes that are withheld from Forms W-2 and 1099. This amount can be found on Line X, on your Form 1040EZ.

Total Tax Liability: \$XX.XX

Total Tax Liability can be defined as the total amount of income taxes that you are paying. This amount can be found on Line X, on your 1040 EZ.

Amount of Refund / Amount Owed: \$ XX.XX

Amount of Refund is defined as the overpayment of your income taxes. This amount can be found on Line X on your 1040 EZ. Amount Owed is defined as the underpayment of your income taxes. This amount can be found on Line X, on your 1040 EZ.



## Payments

Federal income tax withheld:	<input type="text"/>
20XX estimated tax payments:	<input type="text"/>
Earned Income Credit (EIC):	<input type="text"/>
Additional Child Tax Credit:	<input type="text"/>
American Opportunity Credit:	<input type="text"/>
Net Premium Tax Credit:	<input type="text"/>
Amount paid w/ Extension request:	<input type="text"/>
Excess Social Security / Tier 1 RRTA tax withheld:	<input type="text"/>
Credit for federal tax on fuels:	<input type="text"/>
Other Credits:	<input type="text"/>

---

Total Payments:

## Refunds

Amount of Refund:

---

Amount You Owe:



## Taxes & Credits

Age 65 or Over:		Taxable Interest Income:	
Blind:		Ordinary Dividend Income:	
Spouse Age 65 or Over:		Refunds of State/Local Taxes:	
Spouse Blind:		Business income/loss:	
Standard Deduction:		IRA distributions:	
Taxable Income:		Rental real estate, royalties Partnerships, S corporations, Trusts, etc.:	
Tentative Tax:		Unemployment Compensation:	
Alternative Minimum Tax:		Other income:	
Excess Advance Premium Tax Credit Repayment:		Retirement Savings Contribution Credit:	
Foreign Tax Credit:		Child Tax Credit:	
Child & Dependent Care Credit:		Residential Energy Credit:	
Credit for Elderly and Disabled:		Other Credits:	
Education Credit:			

---

Total Credits:

## Other / Additional Taxes

Self-employment tax:	
Social Security/ Medicare, Unreported:	
Tax on IRAs, other Qualified Retirement Plans:	
Household Employment Taxes:	
First-time homebuyer repayment:	
Health care: Individual responsibility:	
Other Taxes:	

---

Total Tax Liability:



## Income

Wages, Salaries, Tips, etc: Taxable Interest Income: Tax – Exempt Income: Ordinary Dividend Income: Qualified Dividends: Refunds of State/Local Taxes: Alimony Received: Business income/loss: Capital Gain(s)/Loss(es): IRA distributions: Pensions and annuities: Rental real estate, royalties  
Partnerships, S corporations,  
Trusts, etc.: Farm Income / Loss: Unemployment Compensation: Social Security benefits: Other income: 

---

Total income: 

## Adjustments to Income

Reservist/Other Business Expense: Early Withdrawal of Savings Penalty: Educator Expenses: Alimony Paid: Health Savings Account Deduction: IRA Deduction: Moving Expenses: Student Loan Interest Deduction: Self Employment Tax Deduction: Tuition and Fees Deduction: Self Employ. Health Ins. Deduction: Domestic Production Activities Deduction: SEP Contribution: Total Adjustments: 

---

Adjusted Gross Income



## Personal Information

Social Security Number (SSN): XXX - XX - XXXX

Name (as shown on return):

First Name

Middle

Last Name

Filing Status:

Exemption:

Spouse SSN: XXX - XX - XXXX

Name of Spouse:

First Name

Middle

Last Name

Mailing Address:

## Dependents

Dependent 1 Name:

Dependent 1 SSN:

XXX - XX - XXXX

Dependent 2 Name:

Dependent 2 SSN:

XXX - XX - XXXX

Dependent 3 Name:

Dependent 3 SSN:

XXX - XX - XXXX

Dependent 4 Name:

Dependent 4 SSN:

XXX - XX - XXXX