

Tax Year 2009

OKLAHOMA: TEST SCENARIO # 4

	PATS	ATS
One Test Scenario	400-00-5001	400-00-3501
1 Test Scenario Street		
Oklahoma City Ok 73194		

Taxpayer would like his refund direct deposited in his checking account.

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**Income Tax Return for Single and  
Joint Filers With No Dependents** (99) **2009**

<p><b>Label</b> (See page 9.)</p> <p>Use the IRS label. Otherwise, please print or type.</p> <p>Presidential Election Campaign (see page 9)</p>	<p><b>L</b></p> <p>Your first name and initial <b>ONE TEST</b></p>	<p><b>A</b></p> <p>Last name <b>SCENARIO</b></p>	<p>Your social security number</p>	
	<p><b>B</b></p> <p>If a joint return, spouse's first name and initial</p>	<p><b>E</b></p> <p>Last name</p>	<p>Spouse's social security number</p>	
	<p><b>H</b></p> <p>Home address (number and street). If you have a P.O. box, see page 9. <b>1 TEST SCENARIO ST</b></p>		<p>Apt. no.</p>	<p>▲ You must enter your SSN(s) above. ▲</p>
	<p><b>R</b></p> <p>City, town or post office, state, and ZIP code. If you have a foreign address, see page 9. <b>OKLAHOMA CITY OK 73194</b></p>		<p>Checking a box below will not change your tax or refund.</p>	

Check here if you, or your spouse if a joint return, want \$3 to go to this fund . . . . .  You  Spouse

<p><b>Income</b></p> <p>Attach Form(s) W-2 here.</p> <p>Enclose, but do not attach, any payment.</p> <p>You may benefit from filing Form 1040 or 1040A. See Before You Begin on page 4.</p>	<p><b>1</b> Wages, salaries, and tips. This should be shown in box 1 of your Form(s) W-2. Attach your Form(s) W-2.</p>	1	2,620
	<p><b>2</b> Taxable interest. If the total is over \$1,500, you cannot use Form 1040EZ.</p>	2	
	<p><b>3</b> Unemployment compensation in excess of \$2,400 per recipient and Alaska Permanent Fund dividends (see page 11).</p>	3	
	<p><b>4</b> Add lines 1, 2, and 3. This is your <b>adjusted gross income</b>.</p>	4	2,620
	<p><b>5</b> 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. <input checked="" type="checkbox"/> You <input type="checkbox"/> Spouse If no one can claim you (or your spouse if a joint return), enter \$9,350 if single; \$18,700 if <b>married filing jointly</b>. See page 2 for explanation.</p>	5	2,920
	<p><b>6</b> Subtract line 5 from line 4. If line 5 is larger than line 4, enter -0-. This is your <b>taxable income</b>.</p>	6	0
	<p><b>7</b> Federal income tax withheld from Form(s) W-2 and 1099.</p>	7	400
	<p><b>8</b> Making work pay credit (see worksheet on page 2).</p>	8	0
	<p><b>9a</b> Earned income credit (EIC) (see page 12). <span style="float: right;">NO</span></p>	9a	
	<p><b>b</b> Nontaxable combat pay election. <span style="float: right;">9b</span></p>		
	<p><b>10</b> Add lines 7, 8, and 9a. These are your <b>total payments</b>.</p>	10	400
<p><b>11</b> Tax. Use the amount on line 6 above to find your tax in the tax table on pages 28 through 36 of the instructions. Then, enter the tax from the table on this line.</p>	11	0	

**Refund**

Have it directly deposited! See page 17 and fill in 12b, 12c, and 12d or Form 8888.

**12a** If line 10 is larger than line 11, subtract line 11 from line 10. This is your **refund**. If Form 8888 is attached, check here

12a 400

▶ **b** Routing number 

1	2	3	4	5	6	7	8	0
---	---	---	---	---	---	---	---	---

 ▶ **c** Type:  Checking  Savings

▶ **d** Account number 

1	2	2	1	2	2	1	2	2	2										
---	---	---	---	---	---	---	---	---	---	--	--	--	--	--	--	--	--	--	--

**Amount you owe** **13** If line 11 is larger than line 10, subtract line 10 from line 11. This is the amount you owe. For details on how to pay, see page 18. ▶ 13

Do you want to allow another person to discuss this return with the IRS (see page 19)?  Yes. Complete the following.  No

**Third party designee**

Designee's name **SUAVE SHAMPOO** Phone no. **212-555-1111** Personal identification number (PIN) **10110**

**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.

<p>Your signature <b>11111</b></p>	<p>Date <b>04-16-2010</b></p>	<p>Your occupation <b>HAIR DRESSER</b></p>	<p>Daytime phone number</p>
<p>Spouse's signature. If a joint return, <b>both</b> must sign.</p>	<p>Date</p>	<p>Spouse's occupation</p>	<p></p>

**Paid preparer's use only**

<p>Preparer's signature</p>	<p>Date</p>	<p>Check if self-employed <input type="checkbox"/></p>	<p>Preparer's SSN or PTIN</p>
<p>Firm's name (or yours if self-employed), address, and ZIP code</p>		<p>EIN</p>	<p>Phone no.</p>

**SCHEDULE L  
(Form 1040A or 1040)**

**Standard Deduction for Certain Filers**

OMB No. 1545-0074

**2009**

Department of the Treasury  
Internal Revenue Service (99)

▶ **Attach to Form 1040A or 1040.**

▶ **See Instructions.**

Attachment  
Sequence No. **57**

Name(s) shown on return

Your social security number

**ONE TEST SCENARIO**

**Caution!** File this form **only** if you are increasing your standard deduction by certain state or local real estate taxes, new motor vehicle taxes, or a net disaster loss.

1	Enter the amount shown below for your filing status. • Single or married filing separately - \$5,700 • Married filing jointly or Qualifying widow(er) - \$11,400 • Head of household - \$8,350	1	5,700	
2	Can you (or your spouse if filing jointly) be claimed as a dependent? <input type="checkbox"/> No. Skip line 3; enter the amount from line 1 on line 4, and go to line 5. <input checked="" type="checkbox"/> Yes. Go to line 3.			
3	Is your earned income (defined on the back) more than \$650? <input checked="" type="checkbox"/> Yes. Add \$300 to your earned income. Enter the total <input type="checkbox"/> No. Enter \$950	3	2,920	
4	Enter the <b>smaller</b> of line 1 or line 3	4		2,920
5	Multiply the number on Form 1040, line 39a, or Form 1040A, line 23a, by \$1,100 (\$1,400 if single or head of household). If blank, enter -0-	5		
6	Form 1040 filers only, enter any net disaster loss from Form 4684, line 18	6		
7	Enter the state and local real estate taxes that would be deductible on Schedule A, line 6, if you were itemizing your deductions. <b>Do not</b> include foreign real estate taxes (see instructions)	7		
8	Enter \$500 (\$1,000 if married filing jointly)	8	500	
9	Enter the smaller of line 7 or line 8	9		
10	Did you (or your spouse if filing jointly) pay any state or local sales or excise taxes in 2009 for the purchase of a new motor vehicle after February 16, 2009 (see instructions)? <input checked="" type="checkbox"/> No. Skip lines 10 through 20 and go to line 21. <input type="checkbox"/> Yes. If Form 1040, line 38, or Form 1040A, line 22, is less than \$135,000 (\$260,000 if married filing jointly), enter the amount of these taxes paid. Otherwise, skip lines 10 through 19, enter -0- on line 20, and go to line 21	10		
11	Enter the purchase price (before taxes) of the new motor vehicles (see instructions)	11		
12	Is the amount on line 11 more than \$49,500? <input type="checkbox"/> No. Enter the amount from line 10. <input type="checkbox"/> Yes. Enter the portion of the tax from line 10 that is attributable to the first \$49,500 of the purchase price of each new motor vehicle (see instructions)	12		
13	Enter the amount from Form 1040, line 38, or Form 1040A, line 22	13		
14	Form 1040 filers only, enter the total of any - • Amounts from Form 2555, lines 45 and 50; Form 2555-EZ, line 18; and Form 4563, line 15, and • Exclusion of income from Puerto Rico	14		
15	Add lines 13 and 14	15		
16	Enter \$125,000 (\$250,000 if married filing jointly)	16		
17	Is the amount on line 15 more than the amount on line 16? <input type="checkbox"/> No. Skip lines 17 through 19, enter the amount from line 12 on line 20, and go to line 21. <input type="checkbox"/> Yes. Subtract line 16 from line 15	17		
18	Divide line 17 by \$10,000. Enter the result as a decimal (rounded to at least three places). If the result is 1.000 or more, enter 1.000	18		
19	Multiply line 12 by line 18	19		
20	Subtract line 19 from line 12	20		
21	Add lines 4, 5, 6, 9, and 20. Enter the total here and on Form 1040, line 40a, or Form 1040A, line 24a. Also check the box on Form 1040, line 40b, or Form 1040A, line 24b	21		2,920

**SCHEDULE M**  
(Form 1040A or 1040)

Department of the Treasury  
Internal Revenue Service (99)

**Making work pay and Government  
Retiree Credits**

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

▶ See separate instructions.

**2009**  
Attachment  
Sequence No. **166**

Name(s) shown on return

Your social security number

**ONE TEST SCENARIO**

**1a Important:** See the instructions if you can be claimed as someone else's dependent, you have a net loss from a business, your wages include pay for work performed while an inmate in a penal institution, or you are filing Form 1040NR, 2555, or 2555-EZ. Residents of Puerto Rico or American Samoa, see Pub. 570.

Do you (and your spouse if filing jointly) have 2009 wages of more than \$6,451 (\$12,903 if married filing jointly)?

- Yes. Skip lines 1a through 3. Enter \$400 (\$800 if married filing jointly) on line 4 and go to line 5.  
 No. Enter your earned income (see instructions) . . . . . **1a**

**b** Nontaxable combat pay included on line 1a (see instructions) . . . . . **1b**

**2** Multiply line 1a by 6.2% (.062) . . . . . **2**

**3** Enter \$400 (\$800 if married filing jointly) . . . . . **3** 400

**4** Enter the smaller of line 2 or line 3 (unless you checked "Yes" on line 1a) . . . . . **4**

**5** Enter the amount from Form 1040, line 38\*, or Form 1040A, line 22 . . . . . **5** 2,620

**6** Enter \$75,000 (\$150,000 if married filing jointly) . . . . . **6** 75,000

**7** Is the amount on line 5 more than the amount on line 6?  
 No. Skip line 8. Enter the amount from line 4 on line 9 below.  
 Yes. Subtract line 6 from line 5 . . . . . **7**

**8** Multiply line 7 by 2% (.02) . . . . . **8**

**9** Subtract line 8 from line 4. If zero or less, enter -0- . . . . . **9**

**10** Did you (or your spouse, if filing jointly) receive an economic recovery payment in 2009? You may have received this payment if you received social security benefits, supplemental security income, railroad retirement benefits, or veterans disability compensation or pension benefits (see instructions).  
 No. Enter -0- on line 10 and go to line 11.  
 Yes. Enter the total of the payments received by you (and your spouse, if filing jointly). Do not enter more than \$250 (\$500 if married filing jointly) ▶ . . . . . **10**

**11** Did you (or your spouse, if filing jointly) receive a pension or annuity in 2009 for services performed as an employee of the U.S. Government or any U.S. state or local government from work not covered by social security? Do not include any pension or annuity reported on Form W-2.  
 No. Enter -0- on line 11 and go to line 12.  
 Yes. ● If you checked "No" on line 10, enter \$250 (\$500 if married filing jointly and the answer on line 11 is "Yes" for both spouses)  
 ● If you checked "Yes" on line 10, enter -0- (exception: enter \$250 if filing jointly and the spouse who received the pension or annuity did not receive an economic recovery payment described on line 10) ▶ . . . . . **11**

**12** Add lines 10 and 11 . . . . . **12**

**13** Subtract line 12 from line 9. If zero or less, enter -0- . . . . . **13**

**14 Making work pay and government retiree credits.** Add lines 11 and 13. Enter the result here and on Form 1040, line 63; Form 1040A, line 40; or Form 1040NR, line 60 . . . . . **14**

\*If you are filing Form 2555, 2555-EZ, or 4563 or you are excluding income from Puerto Rico, see instructions.

Void <input type="checkbox"/>		Employee's social security number		For Official Use Only OMB No. 1545-0008	
b Employer identification number (EIN) 11-0110011			1 Wages, tips, other compensation 2,620		2 Federal income tax withheld 400
c Employer's name, address, and ZIP code ONE BEAUTY SALON 1 WASHCURL AVE OKLAHOMA CITY OK 73194			3 Social security wages 2,620		4 Social security tax withheld 162
			5 Medicare wages and tips 2,620		6 Medicare tax withheld 38
			7 Social security tips		8 Allocated tips
d Control number			9 Advance EIC payment		10 Dependent care benefits
e Employee's first name and initial ONE T		Last name SCENARIO	Suff.	11 Nonqualified plans	
1 TEST SCENARIO ST OKLAHOMA CITY OK 73194			13 Statutory employee <input type="checkbox"/> Retmnt. plan <input type="checkbox"/> Third-party sick pay <input type="checkbox"/>		12a See instructions for box 12
			14 Other		12b
					12c
					12d
f Employee's address and ZIP code			15 State Employer's state ID no. OK 122176	16 State wages, tips, etc. 2,620	17 State income tax 320
				18 Local wages, tips, etc.	19 Local income tax
				20 Locality name	

Form **W-2 Wage and Tax Statement** EEA **2009** Department of the Treasury-Internal Revenue Service  
 Copy B - To Be Filed With Employee's FEDERAL Tax Return. For Privacy Act and Paperwork Reduction Act Notice, see back of Copy D.  
 This information is being furnished to the Internal Revenue Service.

The information on the Form W-2 was used to prepare the taxpayer's 2009 Federal tax return by .  
**Do Not Cut, Fold, or Staple Forms on This Page - Do Not Cut, Fold, or Staple on This Page**

Void <input type="checkbox"/>		Employee's social security number		For Official Use Only OMB No. 1545-0008	
b Employer identification number (EIN)			1 Wages, tips, other compensation		2 Federal income tax withheld
c Employer's name, address, and ZIP code			3 Social security wages		4 Social security tax withheld
			5 Medicare wages and tips		6 Medicare tax withheld
			7 Social security tips		8 Allocated tips
d Control number			9 Advance EIC payment		10 Dependent care benefits
e Employee's first name and initial		Last name	Suff.	11 Nonqualified plans	
			13 Statutory employee <input type="checkbox"/> Retmnt. plan <input type="checkbox"/> Third-party sick pay <input type="checkbox"/>		12a See instructions for box 12
			14 Other		12b
					12c
					12d
f Employee's address and ZIP code			15 State Employer's state ID no.	16 State wages, tips, etc.	17 State income tax
				18 Local wages, tips, etc.	19 Local income tax
				20 Locality name	

Form **W-2 Wage and Tax Statement** EEA **2009** Department of the Treasury-Internal Revenue Service  
 Copy B - To Be Filed With Employee's FEDERAL Tax Return. For Privacy Act and Paperwork Reduction Act Notice, see back of Copy D.  
 This information is being furnished to the Internal Revenue Service.