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Form 1040A Department of the Treasury—Internal Revenue Service U.S. Individual Income Tax Return 2015 IRS Use Only—Do not write or staple in this space.

Personal information section including name (GLENN R), social security numbers, home address, and filing status options.

Filing status section with options: 1 Single, 2 Married filing jointly, 3 Married filing separately, 4 Head of household, 5 Qualifying widow(er).

Exemptions section including dependent table with columns for name, social security number, relationship, and age. Total exemptions claimed: 2.

Income section with lines 7 through 15. Includes wages, interest, dividends, IRA distributions, and unemployment compensation. Total income: 0.

Adjusted gross income section with lines 16 through 21. Includes educator expenses, IRA deduction, student loan interest, and tuition fees. Adjusted gross income: 0.

**Tax, credits, and payments**

**22** Enter the amount from line 21 (adjusted gross income). **22** 0

**23a** Check  You were born before January 2, 1951.  Blind  Spouse was born before January 2, 1951.  Blind Total boxes checked  **23a**

**b** If you are married filing separately and your spouse itemizes deductions, check here  **23b**

**24** Enter your standard deduction. **24** 12,000

**25** Subtract line 24 from line 22. If line 24 is more than line 22, enter -0-. **25** 0

**26** Exemptions. Multiply \$4,000 by the number on line 6d. **26** 8,000

**27** Subtract line 26 from line 25. If line 26 is more than line 25, enter -0-. This is your taxable income. **27** 0

**28** Tax, including any alternative minimum tax (see instructions). **28**

**29** Excess advance premium tax credit repayment. Attach Form 8962. **29**

**30** Add lines 28 and 29. **30**

**31** Credit for child and dependent care expenses. Attach Form 2441. **31**

**32** Credit for the elderly or the disabled. Attach Schedule R. **32**

**33** Education credits from Form 8863, line 19. **33**

**34** Retirement savings contributions credit. Attach Form 8880. **34**

**35** Child tax credit. Attach Schedule 8812, if required. **35**

**36** Add lines 31 through 35. These are your total credits. **36** 0

**37** Subtract line 36 from line 30. If line 36 is more than line 30, enter -0-. **37**

**38** Health care: individual responsibility (see instructions). Full-year coverage  **38**

**39** Add line 37 and line 38. This is your total tax. **39** 0

**40** Federal income tax withheld from Forms W-2 and 1099. **40**

**41** 2015 estimated tax payments and amount applied from 2014 return. **41**

**42a** Earned income credit (EIC). **42a**

**b** Nontaxable combat pay election. **42b**

**43** Additional child tax credit. Attach Schedule 8812. **43**

**44** American opportunity credit from Form 8863, line 8. **44**

**45** Net premium tax credit. Attach Form 8962. **45**

**46** Add lines 40, 41, 42a, 43, 44, and 45. These are your total payments. **46** 0

**Standard Deduction for --**

- People who check any box on line 23a or 23b or who can be claimed as a dependent, see instructions.
- All others:
  - Single or Married filing separately, \$6,300
  - Married filing jointly or Qualifying widow(er), \$12,600
  - Head of household, \$9,250

If you have a qualifying child, attach Schedule EIC.

**Refund**

**47** If line 46 is more than line 39, subtract line 39 from line 46. This is the amount you overpaid. **47**

**48a** Amount of line 47 you want refunded to you. If Form 8888 is attached, check here  **48a**

**b** Routing number  **c** Type:  Checking  Savings

**d** Account number

**49** Amount of line 47 you want applied to your 2016 estimated tax. **49**

**Amount you owe**

**50** Amount you owe. Subtract line 46 from line 39. For details on how to pay, see instructions. **50** 0

**51** Estimated tax penalty (see instructions). **51**

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

Designee's name  Phone 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 accurately list 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.

Your signature  Date  Your occupation  Daytime phone number

Spouse's signature, if a joint return, both must sign.  Date  Spouse's occupation  If the IRS asks you for identity 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.

Form **4852**

(Rev. September 2014)

Department of the Treasury  
Internal Revenue Service

Substitute for Form W-2, Wage and Tax Statement, or Form 1099-R, Distributions From Pensions, Annuities, Retirement or Profit-Sharing Plans, IRAs, Insurance Contracts, etc.

▶ Attach to Form 1040, 1040A, 1040-EZ, or 1040X.

▶ Information about Form 4852 is available at [www.irs.gov/form4852](http://www.irs.gov/form4852).

OMB No. 1545-0074

1 Name(s) shown on return

**GLENN R.**

2 Your social security number

3 Address

4 Enter year in space provided and check one box. For the tax year ending December 31, **2015**  
I have been unable to obtain (or have received an incorrect)  Form W-2 OR  Form 1099-R.  
I have notified the IRS of this fact. The amounts shown on line 7 or line 8 are my best estimates for all wages or payments made to me and tax withheld by my employer or payer named on line 5.

5 Employer's or payer's name, address, and ZIP code

**FIDELITY INVESTMENTS INSTITUTIONAL OPERATIONS CO.  
100 MAGELLAN WAY KNOX COVINGTON KY 41015-1987**

6 Employer's or payer's identification number (if known)

7 Form W-2. Enter wages, tips, other compensation, and taxes withheld.

a Wages, tips, and other compensation	_____	f State income tax withheld (Name of state)	_____
b Social security wages	_____	g Local income tax withheld (Name of locality)	_____
c Medicare wages and tips	_____	h Social security tax withheld	_____
d Social security tips	_____	i Medicare tax withheld	_____
e Federal income tax withheld	_____		

8 Form 1099-R. Enter distributions from pensions, annuities, retirement/profit-sharing plans, IRAs, insurance contracts, etc.

a Gross distribution	_____	f Federal income tax withheld	_____
b Taxable amount	<b>-6-</b>	g State income tax withheld	_____
c Taxable amount not determined	<input type="checkbox"/>	h Local income tax withheld	_____
d Total distribution	<b>0-</b>	i Employee contributions	_____
e Capital gain (included in line 8b)	<input type="checkbox"/>	j Distribution codes	<b>2</b>

9 How did you determine the amounts on lines 7 and 8 above?

**RECORDS PROVIDED BY PAYER (S) ABOVE.  
WAGES DEFINED BY 3401 (a) AND 3121 (a)**

10 Explain your efforts to obtain Form W-2, Form 1099-R, or Form W-2c, Corrected Wage and Tax Statement.

**LETTERS TO PAYER DTD JAN 23, 2015**

**General Instructions**

Section references are to the Internal Revenue Code.

**Future developments.** The IRS has created a page on [IRS.gov](http://IRS.gov) for information about Form 4852, at [www.irs.gov/form4852](http://www.irs.gov/form4852). Information about any future developments affecting Form 4852 (such as legislation enacted after we release it) will be posted on that page.

**Purpose of form.** Form 4852 serves as a substitute for Forms W-2, W-2c, and 1099-R and is completed by you or your representatives when (a) your employer or payer does not issue you a Form W-2 or Form 1099-R or (b) an employer or payer has issued an incorrect Form W-2 or Form 1099-R. Attach this form to the back of your income tax return, before any supporting forms or schedules.

You should always attempt to get Form W-2, Form W-2c, or Form 1099-R from your employer or payer before contacting the IRS or filing Form 4852. If you do not receive the missing or corrected form from your employer or payer by February 14, you may call the IRS at 1-800-829-1040 for assistance. You must provide your name, address (including ZIP code), phone number, social security number, and dates of employment, and your employer's or payer's name, address (including ZIP code), and phone number. The IRS will contact your employer or payer and request the missing form. The IRS also will send you a Form 4852. If you do not receive the missing form in sufficient time to file your income tax return timely, you may use the Form 4852 that the IRS sent you.

If you received an incorrect Form W-2 or Form 1099-R, you should always attempt to have your employer or payer issue a corrected form before filing Form 4852.

**Note.** Retain a copy of Form 4852 for your records. To help protect your social security benefits, keep a copy of Form 4852 until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year. After September 30 following the date shown on line 4, you may use a my Social Security online account to verify wages reported by your employers. Please visit [www.ssa.gov/myaccount](http://www.ssa.gov/myaccount). Or, you may contact your local SSA office to verify wages reported by your employer.

**Will I need to amend my return?** If you receive a Form W-2, Form W-2c, or Form 1099-R after your return is filed with Form 4852, and the information differs from the information reported on your return, you must amend your return by filing Form 1040X, Amended U.S. Individual Income Tax Return.

**Penalties.** The IRS will challenge the claims of individuals who attempt to avoid or evade their federal tax liability by using Form 4852 in a manner other than as prescribed. Potential penalties for the improper use of Form 4852 include:

L Accuracy-related penalties equal to 20 percent of the amount of taxes that should have been paid,

L Civil fraud penalties equal to 75 percent of the amount of taxes that should have been paid, and

CORRECTED (if checked)

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no. <b>NATIONAL WRITE YOUR CONGRESSMAN, INC</b> <b>2435 N. CENTRAL EXPT STE 300</b> <b>RICHARDSON TX 75080-2753</b>		1 Fees \$	2 Royalties \$	OMB No. 1545-0118 <b>2015</b> Form 1099-MISC	<b>Miscellaneous Income</b>
PAYER'S federal identification number <del>XXXXXXXXXX</del>	RECIPIENT'S identification number <del>XXXXXXXXXX</del>	3 Other income \$	4 Federal income tax withheld \$	<b>Copy B For Recipient</b>	
RECIPIENT'S name <b>GLENN R. [REDACTED]</b> Street address (including apt. no.) <del>XXXXXXXXXX</del> City or town, state or province, country, and ZIP or foreign postal code <del>XXXXXXXXXX</del>		5 Fishing boat proceeds \$	6 Medical and health care payments \$		This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.
Account number (see instructions)	FATCA filing requirement <input type="checkbox"/>	7 Nonemployee compensation \$ <b>0.00</b>	8 Substitute payments in lieu of dividends or interest \$		
15a Section 408A deferrals \$	15b Section 408A income \$	9 Payer made direct sales of \$5,000 or more of consumer products to a buyer (checkbox) for resale <input type="checkbox"/>	10 Crop insurance proceeds \$		
16 State tax withheld \$	17 State/Payer's state no. 	13 Excess golden parachute payments \$	14 Gross proceeds paid to an attorney \$		
18 State income \$	19 State income \$	20 State income \$	21 State income \$	22 State income \$	

Form 1099-MISC

(keep for your records)

www.irs.gov/form1099misc

Department of the Treasury - Internal Revenue Service

This corrected Form 1099-MISC is submitted to rebut a document known to have been submitted by the party identified above as "Payer" which erroneously alleges a payment to the party identified above as the "Recipient" of gains, profits, or income made in the course of a "trade or business".

Under penalty of perjury, I declare that I have examined this statement and to the best of my knowledge and belief. It is true, correct and complete.

*[Signature]*  
~~XXXXXXXXXX~~ 2/24/2016  
dated