

Your first name and initial Joseph A	Last name [REDACTED]	OMB No. 1545-0074
If a joint return, spouse's first name and initial		Your social security number [REDACTED]
Last name		Spouse's social security number [REDACTED]

Home address (number and street). If you have a P.O. box, see instructions. [REDACTED]	Apt. no.	▲ Make sure the SSN(s) above and on line 6c are correct.
City, town or post office, state, and ZIP code. If you have a foreign address, also complete spaces below (see instructions). [REDACTED] IL [REDACTED]		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. <input type="checkbox"/> You <input type="checkbox"/> Spouse
Foreign country name	Foreign province/state/county	

Filing status Check only one box.

1 <input type="checkbox"/> Single	4 <input type="checkbox"/> Head of household (with qualifying person). (See instructions.) If the qualifying person is a child but not your dependent, enter this child's name here. ▶
2 <input type="checkbox"/> Married filing jointly (even if only one had income)	
3 <input checked="" type="checkbox"/> Married filing separately. Enter spouse's SSN above and full name here. ▶ [REDACTED]	5 <input type="checkbox"/> Qualifying widow(er) with dependent child (see instructions)

Exemptions

6a **Yourself.** If someone can claim you as a dependent, **do not check** box 6a.

b **Spouse**

c **Dependents:**

(1) First name	Last name	(2) Dependent's social security number	(3) Dependent's relationship to you	(4) <input checked="" type="checkbox"/> if child under age 17 qualifying for child tax credit (see instructions)
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

If more than six dependents, see instructions.

Boxes checked on 6a and 6b: **1**
 No. of children on 6c who:
 • lived with you: _____
 • did not live with you due to divorce or separation (see instructions): _____
 Dependents on 6c not entered above: _____
 Add numbers on lines above ▶ **1**

d Total number of exemptions claimed.

Income

7 Wages, salaries, tips, etc. Attach Form(s) W-2.	7	0	00
8a Taxable interest. Attach Schedule B if required.	8a		
b Tax-exempt interest. Do not include on line 8a.	8b		
9a Ordinary dividends. Attach Schedule B if required.	9a		
b Qualified dividends (see instructions).	9b		
10 Capital gain distributions (see instructions).	10		
11a IRA distributions.	11a	11b Taxable amount (see instructions).	11b
12a Pensions and annuities.	12a	12b Taxable amount (see instructions).	12b
13 Unemployment compensation and Alaska Permanent Fund dividends.	13		
14a Social security benefits.	14a	14b Taxable amount (see instructions).	14b
15 Add lines 7 through 14b (far right column). This is your total income. ▶	15	0	00

Adjusted gross income

16 Educator expenses (see instructions).	16		
17 IRA deduction (see instructions).	17		
18 Student loan interest deduction (see instructions).	18		
19 Tuition and fees. Attach Form 8917.	19		
20 Add lines 16 through 19. These are your total adjustments.	20	0	00
21 Subtract line 20 from line 15. This is your adjusted gross income. ▶	21	0	00

Tax, credits, and payments **22** Enter the amount from line 21 (adjusted gross income). 22 0 00

23a Check You were born before January 2, 1950, Blind } **Total boxes**
 if: Spouse was born before January 2, 1950, Blind } **checked** ▶ 23a

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

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, \$6,200
 - Married filing jointly or Qualifying widow(er), \$12,400
 - Head of household, \$9,100

24 Enter your **standard deduction**. 24 6200 00

25 Subtract line 24 from line 22. If line 24 is more than line 22, enter -0-. 25 0 00

26 Exemptions. Multiply \$3,950 by the number on line 6d. 26 3950 00

27 Subtract line 26 from line 25. If line 26 is more than line 25, enter -0-. This is your **taxable income**. ▶ 27 0 00

28 Tax, including any alternative minimum tax (see instructions). 28 0 00

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

30 Add lines 28 and 29. 30 0 00

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 00

37 Subtract line 36 from line 30. If line 36 is more than line 30, enter -0-. 37 0 00

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 00

40 Federal income tax withheld from Forms W-2 and 1099. 40 14690

41 2014 estimated tax payments and amount applied from 2013 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 14690 00

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 14690 00

48a Amount of line 47 you want **refunded to you**. If Form 8888 is attached, check here ▶ 48a 14690 00

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

▶ **d** Account number

49 Amount of line 47 you want **applied to your 2015 estimated tax**. 49

Direct deposit? See instructions and fill in 48b, 48c, and 48d or Form 8888.

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

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 sent you an Identity Protection PIN, enter it here (see inst.)

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

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.

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.

1 Name(s) shown on return
Joseph A. [REDACTED]

2 Your social security number
[REDACTED]

3 Address
[REDACTED]

4 Enter year in space provided and check one box. For the tax year ending December 31, 2014,
I have been unable to obtain (or have received an incorrect) Form W-2 **OR** Form 1099-R.
I hereby notify 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
[REDACTED] Company
[REDACTED] IL [REDACTED]

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

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

a Wages, tips, and other compensation	0.00	f State income tax withheld	3704.90
b Social security wages	0.00	(Name of state) <u>Illinois</u>	
c Medicare wages and tips	0.00	g Local income tax withheld	
d Social security tips		(Name of locality)	
e Federal income tax withheld	8578.58	h Social security tax withheld	4953.21
		i Medicare tax withheld	1158.41

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

9 How did you determine the amounts on lines 7 and 8 above?
Line 7 (a) (b) and (c) where corrected as I did not receive any "wages" as defined in section 3401 (a) and section 3121 (a). Line (e),(f),(h) and (i) were derived from w-2 sent to me.

10 Explain your efforts to obtain Form W-2, Form 1099-R, or Form W-2c, Corrected Wage and Tax Statement.
None

General Instructions

Section references are to the Internal Revenue Code.

Future developments. The IRS has created a page on IRS.gov for information about Form 4852, at 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. 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:

- Accuracy-related penalties equal to 20 percent of the amount of taxes that should have been paid,
- Civil fraud penalties equal to 75 percent of the amount of taxes that should have been paid, and