

U.S. Certified Mail #7015 0640 0006 3404 5807
Certificate of Mailing

Mario Domínguez [REDACTED]
[REDACTED]
Menomonie, Wisconsin
Non-Domestic

Notice of Refund Due and Payable to Mario Domínguez [REDACTED]

20 March 2017

Department of the Treasury
Internal Revenue Service
Fresno, CA 93888-0002

Re: refund due to Mario Domínguez [REDACTED] for "tax year" 2016; testimonial form 1040 and form 4852 (herein, collectively, also "return")

Reference Number: [REDACTED]

To Whom It May Concern:

My private-sector compensation continues to be mischaracterized and erroneously reported by third-party "payer" (identified in the attached return) as payment made to me in the course of a "trade or business", despite my having notified said payer that such payment is not connected with the performance of the functions of a public office, or otherwise constituted gains, profit or income within the meaning of relevant law. Said payer has also been informed of your agency's acknowledgement of my first-hand testimony concerning these facts, in the form of refunds having been made to me of monies erroneously conveyed to your agency in prior years.

As before, based upon my own first-hand knowledge of all my compensation, and that coincident with the federal "tax year" 2016, I have determined that I have no federal tax liability, as evidenced by my enclosed return. Consequently, I have determined that I am due a refund of \$105.00, erroneously withheld from my private-sector compensation and erroneously conveyed to your agency as a result of incorrect, third-party "tax" statements submitted by payer. I attach one (1) testimonial form 1040, and one (1) supporting form 4852. Together, these forms constitute my return for the federal "tax year" 2016.

All secured Rights, Privileges, Immunities, and Remedies are explicitly reserved to me by my restricted signature, given below. Subscribed, and affirmed on this 20th day of the 3rd month of the 2017th year, reckoned according to the Gregorian calendar.

Respectfully,

Mario Domínguez [REDACTED],
of my own right and without representation,
with explicit reservation of all my rights and without prejudice,

[REDACTED]
Signature

Attachments:

1x- Form 1040 (Mario Domínguez [REDACTED])

1x - Form 4852 (Mario Domínguez [REDACTED])

cc: File

Notice of Refund Due and Payable to Mario Domínguez [REDACTED]
Document ID: [REDACTED]

For the year Jan. 1–Dec. 31, 2016, or other tax year beginning _____, 2016, ending _____, 20 **See separate instructions.**

Your first name and initial Mario	Last name Dominguez	Your social security number [REDACTED]
If a joint return, spouse's first name and initial	Last name	Spouse's social security number

Home address (number and street). If you have a P.O. box, see instructions. [REDACTED] Apt. no. [REDACTED]

City, town or post office, state, and ZIP code. If you have a foreign address, also complete spaces below (see instructions).

Menomonie, Wisconsin [near 54751] [REDACTED]

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

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

Filing Status

1 Single
 2 Married filing jointly (even if only one had income)
 3 Married filing separately. Enter spouse's SSN above and full name here. ▶
 4 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. ▶
 5 Qualifying widow(er) with dependent child

Exemptions

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

c Dependents:		(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)	Boxes checked on 8a and 8b	No. of children on 8c who:
(1) First name	Last name				lived with you	did not live with you due to divorce or separation (see instructions)
				<input type="checkbox"/>		
				<input type="checkbox"/>		
				<input type="checkbox"/>		
				<input type="checkbox"/>		

If more than four dependents, see instructions and check here

d Total number of exemptions claimed **1**

Income

7	Wages, salaries, tips, etc. Attach Form(s) W-2	7	-0-
8a	Taxable interest. Attach Schedule B if required	8a	-0-
b	Tax-exempt interest. Do not include on line 8a	8b	-0-
9a	Ordinary dividends. Attach Schedule B if required	9a	-0-
b	Qualified dividends	9b	-0-
10	Taxable refunds, credits, or offsets of state and local income taxes	10	-0-
11	Alimony received	11	-0-
12	Business income or (loss). Attach Schedule C or C-EZ	12	-0-
13	Capital gain or (loss). Attach Schedule D if required. If not required, check here <input type="checkbox"/>	13	-0-
14	Other gains or (losses). Attach Form 4797	14	-0-
15a	IRA distributions	15a	-0-
b	Taxable amount	15b	-0-
16a	Pensions and annuities	16a	-0-
b	Taxable amount	16b	-0-
17	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E	17	-0-
18	Farm income or (loss). Attach Schedule F	18	-0-
19	Unemployment compensation	19	-0-
20a	Social security benefits	20a	-0-
b	Taxable amount	20b	-0-
21	Other income. List type and amount	21	-0-
22	Combine the amounts in the far right column for lines 7 through 21. This is your total income ▶	22	-0-

Adjusted Gross Income

23	Educator expenses	23	-0-
24	Certain business expenses of reservists, performing artists, and fee-basis government officials. Attach Form 2106 or 2106-EZ	24	-0-
25	Health savings account deduction. Attach Form 8889	25	-0-
26	Moving expenses. Attach Form 3903	26	-0-
27	Deductible part of self-employment tax. Attach Schedule SE	27	-0-
28	Self-employed SEP, SIMPLE, and qualified plans	28	-0-
29	Self-employed health insurance deduction	29	-0-
30	Penalty on early withdrawal of savings	30	-0-
31a	Alimony paid b Recipient's SSN ▶	31a	-0-
32	IRA deduction	32	-0-
33	Student loan interest deduction	33	-0-
34	Tuition and fees. Attach Form 8917	34	-0-
35	Domestic production activities deduction. Attach Form 8903	35	-0-
36	Add lines 23 through 35	36	-0-
37	Subtract line 36 from line 22. This is your adjusted gross income ▶	37	-0-

Tax and Credits

38 Amount from line 37 (adjusted gross income) 38 -0-

39a Check You were born before January 2, 1952, Blind. Total boxes if: Spouse was born before January 2, 1952, Blind. checked ▶ 39a 1

b If your spouse itemizes on a separate return or you were a dual-status alien, check here ▶ 39b

40 Itemized deductions (from Schedule A) or your standard deduction (see left margin) 40 7,850 00

41 Subtract line 40 from line 38 41 (7,850 00)

42 Exemptions. If line 38 is \$155,650 or less, multiply \$4,050 by the number on line 6d. Otherwise, see instructions 42 4000 00

43 Taxable income. Subtract line 42 from line 41. If line 42 is more than line 41, enter -0- 43 -0-

44 Tax (see instructions). Check if any from: a Form(s) 8814 b Form 4972 c 44 -0-

45 Alternative minimum tax (see instructions). Attach Form 6251 45 -0-

46 Excess advance premium tax credit repayment. Attach Form 8962 46 -0-

47 Add lines 44, 45, and 46 47 -0-

48 Foreign tax credit. Attach Form 1116 if required 48 -0-

49 Credit for child and dependent care expenses. Attach Form 2441 49 -0-

50 Education credits from Form 8863, line 19 50 -0-

51 Retirement savings contributions credit. Attach Form 8880 51 -0-

52 Child tax credit. Attach Schedule 8812, if required 52 -0-

53 Residential energy credits. Attach Form 5695 53 -0-

54 Other credits from Form: a 3800 b 8801 c 54 -0-

55 Add lines 48 through 54. These are your total credits 55 -0-

56 Subtract line 55 from line 47. If line 55 is more than line 47, enter -0- 56 -0-

Other Taxes

57 Self-employment tax. Attach Schedule SE 57 -0-

58 Unreported social security and Medicare tax from Form: a 4137 b 8919 58 -0-

59 Additional tax on IRAs, other qualified retirement plans, etc. Attach Form 5329 if required 59 -0-

60a Household employment taxes from Schedule H 60a -0-

b First-time homebuyer credit repayment. Attach Form 5405 if required 60b -0-

61 Health care: individual responsibility (see instructions) Full-year coverage 61 -0-

62 Taxes from: a Form 8959 b Form 8960 c Instructions; enter code(s) 62 -0-

63 Add lines 56 through 62. This is your total tax 63 -0-

Payments

64 Federal income tax withheld from Forms W-2 and 1099 64 105 00

65 2016 estimated tax payments and amount applied from 2015 return 65 -0-

66a Earned income credit (EIC) 66a -0-

b Nontaxable combat pay election 66b -0-

67 Additional child tax credit. Attach Schedule 8812 67 -0-

68 American opportunity credit from Form 8863, line 8 68 -0-

69 Net premium tax credit. Attach Form 8962 69 -0-

70 Amount paid with request for extension to file 70 -0-

71 Excess social security and tier 1 RRTA tax withheld 71 -0-

72 Credit for federal tax on fuels. Attach Form 4136 72 -0-

73 Credits from Form: a 2439 b Reserved c 8885 d 73 -0-

74 Add lines 64, 65, 66a, and 67 through 73. These are your total payments 74 105 00

Refund

75 If line 74 is more than line 63, subtract line 63 from line 74. This is the amount you overpaid 75 105 00

76a Amount of line 75 you want refunded to you. If Form 8888 is attached, check here ▶ 76a 105 00

b Routing number ▶ c Type: Checking Savings

d Account number

77 Amount of line 75 you want applied to your 2017 estimated tax ▶ 77 -0-

Amount You Owe

78 Amount you owe. Subtract line 74 from line 63. For details on how to pay, see instructions ▶ 78 -0-

79 Estimated tax penalty (see instructions) 79 -0-

Third Party Designee

Do you want to allow another person to discuss this return with the IRS (see instructions)? Yes. Complete below. 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 taxpayer) is based on all information of which preparer has any knowledge.

Your signature Date 5/20/17 Your occupation None 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.) 0 9 1 6 4 2

Paid Preparer Use Only

Print/Type preparer's name Preparer's signature Date

Firm's name ▶ Firm's EIN ▶

Firm's address ▶ Phone no. ▶

Check if self-employed PTIN

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.

OMB No. 1545-0074

Department of the Treasury
Internal Revenue Service

▶ 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 MARIO	2 Your social security number [REDACTED]
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3 Address
[REDACTED] **MENOMONIE, WI 54751**

4 Enter year in space provided and check one box. For the tax year ending December 31, 2016,
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 [REDACTED]	6 Employer's or payer's identification number (if known) [REDACTED]
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7 Form W-2. Enter wages, tips, other compensation, and taxes withheld.

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

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

a Gross distribution [REDACTED]	f Federal income tax withheld <u>105.00</u>
b Taxable amount <u>-0-</u>	g State income tax withheld <u>-0-</u>
c Taxable amount not determined <input type="checkbox"/>	h Local income tax withheld <u>-0-</u>
d Total distribution <input type="checkbox"/>	i Employee contributions <u>-0-</u>
e Capital gain (included in line 8b) <u>-0-</u>	j Distribution codes _____

9 How did you determine the amounts on lines 7 and 8 above?
Personal records. Payer on line 5 erroneously alleges a payment to the party identified above, on line 1, that was connected with the performance of the functions of a public office, or otherwise constituted gains, profit or income within the meaning of relevant law: Payer did NOT make such payment to the party identified above, on line 1.

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

Not Required.

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