

Filing status: Single Married filing jointly Married filing separately Head of household Qualifying widow(er)

Your first name and initial: Cathryn A. Last name: Cirotto Your social security number: [REDACTED]

Your standard deduction: Someone can claim you as a dependent You were born before January 2, 1954 You are blind

If joint return, spouse's first name and initial: _____ Last name: _____ Spouse's social security number: _____

Spouse standard deduction: Someone can claim your spouse as a dependent Spouse was born before January 2, 1954 Full-year health care coverage or exempt (see inst.)

Home address (number and street). If you have a P.O. box, see instructions. _____ Apt. no. _____ Presidential Election Campaign (see inst.) You Spouse

City, town or post office, state, and ZIP code. If you have a foreign address, attach Schedule 6. Tulsa, OK 74135 If more than four dependents, see inst. and ✓ here


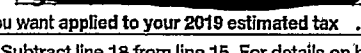
Dependents (see instructions):		(2) Social security number	(3) Relationship to you	(4) ✓ if qualifies for (see inst.):	
(1) First name	Last name			Child tax credit	Credit for other dependents
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

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 complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Joint return? See instructions. Keep a copy for your records. Your signature: [Signature] Date: 1/23/19 Your occupation: [REDACTED] If the IRS sent you an Identity Protection PIN, enter it here (see inst.): [REDACTED]

Preparer's name: _____ Preparer's signature: _____ PTIN: _____ Firm's EIN: _____ Check if: 3rd Party Designee Self-employed

Paid Preparer Use Only Firm's name ▶ _____ Phone no. _____ Firm's address ▶ _____

		1	Wages, salaries, tips, etc. Attach Form(s) W-2	1	0	00
Attach Form(s) W-2. Also attach Form(s) W-2G and 1099-R if tax was withheld.	2a	Tax-exempt interest	2a			
	3a	Qualified dividends	3a			
	4a	IRAs, pensions, and annuities	4a			
	5a	Social security benefits	5a			
		b	Taxable interest	b		
		2b				
		3b				
		4b				
		5b				
	6	Total income. Add lines 1 through 5. Add any amount from Schedule 1, line 22	6			
	7	Adjusted gross income. If you have no adjustments to income, enter the amount from line 6; otherwise, subtract Schedule 1, line 36, from line 6	7		0	00
	8	Standard deduction or itemized deductions (from Schedule A)	8	12,000		
	9	Qualified business income deduction (see instructions)	9			
	10	Taxable income. Subtract lines 8 and 9 from line 7. If zero or less, enter -0-	10		0	00
Standard Deduction for — • Single or married filing separately, \$12,000 • Married filing jointly or Qualifying widow(er), \$24,000 • Head of household, \$18,000 • If you checked any box under Standard deduction, see instructions.	11	a Tax (see inst.) (check if any from: 1 <input type="checkbox"/> Form(s) 8814 2 <input type="checkbox"/> Form 4972 3 <input type="checkbox"/>)	11			
		b Add any amount from Schedule 2 and check here <input type="checkbox"/>	12			
		a Child tax credit/credit for other dependents b Add any amount from Schedule 3 and check here <input type="checkbox"/>	12			
		13 Subtract line 12 from line 11. If zero or less, enter -0-	13			
		14 Other taxes. Attach Schedule 4	14			
		15 Total tax. Add lines 13 and 14	15		0	00
		16 Federal income tax withheld from Forms W-2 and 1099	16	1526		17
		17 Refundable credits: a EIC (see inst.) b Sch. 8812 c Form 8863	17			
		Add any amount from Schedule 5	17			
		18 Add lines 16 and 17. These are your total payments	18	1526		17
Refund	19	If line 18 is more than line 15, subtract line 15 from line 18. This is the amount you overpaid	19	1526		17
	20a	Amount of line 19 you want refunded to you. If Form 8888 is attached, check here <input type="checkbox"/>	20a	1526		17
	b	Routing number  c Type: <input checked="" type="checkbox"/> Checking <input type="checkbox"/> Savings				
	d	Account number 				
	21	Amount of line 19 you want applied to your 2019 estimated tax	21			
Amount You Owe	22	Amount you owe. Subtract line 18 from line 15. For details, on how to pay, see instructions	22			
	23	Estimated tax penalty (see instructions)	23			

Go to www.irs.gov/Form1040 for instructions and the latest information.

**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

▶ Attach to Form 1040 or 1040X.
▶ Go to www.irs.gov/Form4852 for the latest information.

1 Name(s) shown on return Cathryn A. Cirocco 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, 2018,
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
TIN (if known) [REDACTED]

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

a Wages, tips, and other compensation	<u>0</u>	f State income tax withheld	<u>159.00</u>
b Social security wages	<u>0</u>	(Name of state)	<u>OK</u>
c Medicare wages and tips	<u>0</u>	g Local income tax withheld	
d Social security tips	<u>0</u>	(Name of locality)	
e Federal income tax withheld	<u>568.74</u>	h Social security tax withheld	<u>775.97</u>
		i Medicare tax withheld	<u>181.46</u>

8 Form 1099-R. Enter distributions from pensions, annuities, retirement or 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"/>	(Name of state)	
d Total distribution	<input type="checkbox"/>	h Local income tax withheld	
e Capital gain (included in line 8b)		(Name of locality)	
		i Employee contributions	
		j Distribution codes	

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

W-2 Provided by Payer

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. For the latest information about developments related to Form 4852, such as legislation enacted after it was published, go to www.irs.gov/Form4852.

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 doesn't 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 your 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 don't receive the missing or corrected form from your employer or payer by the end of February, you may call the IRS at 800-829-1040 for assistance. You must provide your name, address (including ZIP code), phone number, social security number, and dates of employment. You also must provide 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 don't 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 your 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 you receive indicates that the information reported on your original return is incorrect, you must amend your return by filing Form 1040X, Amended U.S. Individual Income Tax Return. You are responsible for filing your income tax return with accurate information regardless of whether you receive a Form W-2, Form W-2c, or Form 1099-R and regardless of whether the information on any forms received is correct.

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: