

For the year Jan. 1–Dec. 31, 2016, or other tax year beginning . . . 2016, ending . . . 20

Your first name and initial David R Last name Custer See separate instructions. 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. 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). Missouri Presidential Election Campaign

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

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: (1) First name Last name (2) Dependent's social security number (3) Dependent's relationship to you (4) if child under age 17 qualifying for child tax credit (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

Income table with columns for line number, description, and amounts. Includes rows for Wages, Taxable interest, Dividends, Refunds, Alimony, Business income, Capital gain, IRA distributions, Pensions, Rental real estate, Farm income, Unemployment compensation, Social security benefits, and Other income. Total income is 6400.00.

Adjusted Gross Income table with columns for line number, description, and amounts. Includes rows for Educator expenses, Business expenses, Health savings account deduction, Moving expenses, Self-employment tax, SEP/IRA deductions, Student loan interest, Tuition and fees, Domestic production activities deduction, and Adjusted gross income. Adjusted gross income is 6400.00.

Tax and Credits

38 Amount from line 37 (adjusted gross income) 38 6400 00

39a Check You were born before January 2, 1952. Blind. Spouse was born before January 2, 1952. Blind. Total boxes checked **▶** 39a 0

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

Standard Deduction for—

• People who check any box on line 39a or 39b 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, \$9,300

40 Itemized deductions (from Schedule A) or your standard deduction (see left margin) 40 6300 00

41 Subtract line 40 from line 38 41 100 00

42 Exemptions. If line 38 is \$155,650 or less, multiply \$4,050 by the number on line 6d. Otherwise, see instructions 42 4050 00

43 Taxable income. Subtract line 42 from line 41. If line 42 is more than line 41, enter -0- 43 0 00

44 Tax (see instructions). Check if any from: a Form(s) 8814 b Form 4972 c 44 0 00

45 Alternative minimum tax (see instructions). Attach Form 6251 45 0 00

46 Excess advance premium tax credit repayment. Attach Form 8962 46 0 00

47 Add lines 44, 45, and 46 **▶** 47 0 00

48 Foreign tax credit. Attach Form 1116 if required 48 0 00

49 Credit for child and dependent care expenses. Attach Form 2441 49 0 00

50 Education credits from Form 8863, line 19 50 0 00

51 Retirement savings contributions credit. Attach Form 8880 51 0 00

52 Child tax credit. Attach Schedule 8812, if required 52 0 00

53 Residential energy credits. Attach Form 5695 53 0 00

54 Other credits from Form: a 3800 b 8801 c 54 0 00

55 Add lines 48 through 54. These are your total credits 55 0 00

56 Subtract line 55 from line 47. If line 55 is more than line 47, enter -0- **▶** 56 0 00

Other Taxes

57 Self-employment tax. Attach Schedule SE 57 0 00

58 Unreported social security and Medicare tax from Form: a 4137 b 8919 58 0 00

59 Additional tax on IRAs, other qualified retirement plans, etc. Attach Form 5329 if required 59 0 00

60a Household employment taxes from Schedule H 60a 0 00

b First-time homebuyer credit repayment. Attach Form 5405 if required 60b 0 00

61 Health care: individual responsibility (see instructions) Full-year coverage 61 0 00

62 Taxes from: a Form 8959 b Form 8960 c Instructions: enter code(s) 62 0 00

63 Add lines 56 through 62. This is your total tax **▶** 63 0 00

Payments

64 Federal income tax withheld from Forms W-2 and 1099 64 3203 68

65 2016 estimated tax payments and amount applied from 2015 return 65 0 00

66a Earned income credit (EIC) 66a 0 00

b Nontaxable combat pay election 66b 0 00

67 Additional child tax credit. Attach Schedule 8812 67 0 00

68 American opportunity credit from Form 8863, line 8 68 0 00

69 Net premium tax credit. Attach Form 8962 69 0 00

70 Amount paid with request for extension to file 70 0 00

71 Excess social security and tier 1 RRTA tax withheld 71 0 00

72 Credit for federal tax on fuels. Attach Form 4136 72 0 00

73 Credits from Form: a 2439 b Reserve c 8885 d 73 0 00

74 Add lines 64, 65, 66a, and 67 through 73. These are your total payments **▶** 74 3203 68

Refund

75 If line 74 is more than line 63, subtract line 63 from line 74. This is the amount you overpaid 75 3203 68

76a Amount of line 75 you want refunded to you. If Form 8888 is attached, check here **▶** 76a 3203 68

Direct deposit? **▶** b Routing number **▶** c Type: Checking Savings See instructions. **▶** d Account number **▶**

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

Amount You Owe

78 Amount you owe. Subtract line 74 from line 63. For details on how to pay, see instructions **▶** 78 0 00

79 Estimated tax penalty (see instructions) 79

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 **▶** 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.) **▶** PTIN **▶**

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.

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 **2** Your social security number
David R Custer [REDACTED]

3 Address
[REDACTED] Street [REDACTED] Missouri [REDACTED]

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 **6** Employer's or payer's identification number (if known)
[REDACTED] [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>470.00</u>
b Social security wages	<u>0</u>	(Name of state) <u>Missouri</u>	
c Medicare wages and tips	<u>0</u>	g Local income tax withheld	<u>0.00</u>
d Social security tips	<u>0</u>	(Name of locality) <u>NA</u>	
e Federal income tax withheld	<u>1136.61</u>	h Social security tax withheld	<u>971.55</u>
		i Medicare tax withheld	<u>227.22</u>

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

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

9 How did you determine the amounts on lines 7 and 8 above?
The party identified as "payer" on line 5 provided a W-2 that erroneously alleged payment of IRC 26 Section 3121(a) and 3401(a) "wages" - Hereby Disputed. I also deny that said "payer" and I had any IRC 26 Section 3121 (b),(e),(h) or 3401(c),(d) "employment" relationship. "Payer" is a private for-profit company, geographically located in one of the 50 union States.

10 Explain your efforts to obtain Form W-2, Form 1099-R, or Form W-2c, Corrected Wage and Tax Statement.
None. W-2 was issued before "wages" error was noted. Line 7 (e),(f),(h) and (i) were derived from the W-2 sent to me.

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

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.
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1 Name(s) shown on return David R Custer		2 Your social security number [REDACTED]	
3 Address [REDACTED] Street [REDACTED], Missouri [REDACTED]			
4 Enter year in space provided and check one box. For the tax year ending December 31, <u>2016</u> , I have been unable to obtain (or have received an incorrect) <input checked="" type="checkbox"/> Form W-2 OR <input type="checkbox"/> 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]	
7 Form W-2. Enter wages, tips, other compensation, and taxes withheld.			
a Wages, tips, and other compensation	0	f State income tax withheld	155.00
b Social security wages	0	(Name of state) <u>Missouri</u>	
c Medicare wages and tips	0	g Local income tax withheld	0.00
d Social security tips	0	(Name of locality) <u>NA</u>	
e Federal income tax withheld	377.76	h Social security tax withheld	347.31
		i Medicare tax withheld	81.23
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?
The party identified as "payer" on line 5 provided a W-2 that erroneously alleged payment of IRC 26 Section 3121(a) and 3401(a) "wages" - Hereby Disputed. I also deny that said "payer" and I had any IRC 26 Section 3121 (b),(e),(h) or 3401(c),(d) "employment" relationship. "Payer" is a private for-profit company, geographically located in one of the 50 union States.

10 Explain your efforts to obtain Form W-2, Form 1099-R, or Form W-2c, Corrected Wage and Tax Statement.
None. W-2 was issued before "wages" error was noted. Line 7 (e),(f),(h) and (i) were derived from the W-2 sent to me.

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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.

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OMB No. 1545-0074

Department of the Treasury
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--	---

3 Address
[REDACTED] Street [REDACTED] Missouri [REDACTED]

4 Enter year in space provided and check one box. For the tax year ending December 31, 2016,
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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	0	f State income tax withheld	26.00
b Social security wages	0	(Name of state) <u>Missouri</u>	
c Medicare wages and tips	0	g Local income tax withheld	0.00
d Social security tips	0	(Name of locality) <u>NA</u>	
e Federal income tax withheld	4.62	h Social security tax withheld	46.50
		i Medicare tax withheld	10.88

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	_____

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