

Form  
**1040EZ**

**Income Tax Return for Single and  
Joint Filers With No Dependents (99)**

**2015**

OMB No. 1545-0074

Your first name and initial <b>Martha</b>	Last name <b>B</b>	Your social security number
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. <b>▲</b> Make sure the SSN(s) above are correct.
City, town or post office, state, and ZIP code. If you have a foreign address, also complete spaces below (see instructions). <b>Granite City, IL 62040</b>		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/country	Foreign postal code

<b>Income</b>  Attach Form(s) W-2 here.  Enclose, but do not attach, any payment.	<b>1</b>	Wages, salaries, and tips. This should be shown in box 1 of your Form(s) W-2. Attach your Form(s) W-2.	<b>1</b>	<b>0 00</b>
	<b>2</b>	Taxable interest. If the total is over \$1,500, you cannot use Form 1040EZ.	<b>2</b>	<b>0 00</b>
	<b>3</b>	Unemployment compensation and Alaska Permanent Fund dividends (see instructions).	<b>3</b>	<b>0 00</b>
	<b>4</b>	Add lines 1, 2, and 3. This is your adjusted gross income.	<b>4</b>	<b>0 00</b>
	<b>5</b>	If someone can claim you (or your spouse if a joint return) as a dependent, check the applicable box(es) below and enter the amount from the worksheet on back. <input type="checkbox"/> You <input type="checkbox"/> Spouse If no one can claim you (or your spouse if a joint return), enter \$10,300 if single; \$20,600 if married filing jointly. See back for explanation.	<b>5</b>	<b>10300 00</b>
	<b>6</b>	Subtract line 5 from line 4. If line 5 is larger than line 4, enter -0-. This is your taxable income.	<b>6</b>	<b>0 00</b>
	<b>7</b>	Federal income tax withheld from Form(s) W-2 and 1099.	<b>7</b>	<b>10180 19</b>
	<b>8a</b>	Earned income credit (EIC) (see instructions)	<b>8a</b>	<b>0 00</b>
	<b>b</b>	Nontaxable combat pay election <b>8b</b>		
	<b>9</b>	Add lines 7 and 8a. These are your total payments and credits.	<b>9</b>	<b>10180 19</b>
	<b>10</b>	Tax. Use the amount on line 6 above to find your tax in the tax table in the instructions. Then, enter the tax from the table on this line.	<b>10</b>	<b>0 00</b>
	<b>11</b>	Health care: individual responsibility (see instructions) Full-year coverage <input checked="" type="checkbox"/>	<b>11</b>	<b>0 00</b>
<b>12</b>	Add lines 10 and 11. This is your total tax.	<b>12</b>	<b>0 00</b>	
<b>13a</b>	If line 9 is larger than line 12, subtract line 12 from line 9. This is your refund. If Form 8888 is attached, check here <input type="checkbox"/>	<b>13a</b>	<b>10180 19</b>	
<b>b</b>	Routing number <input type="text"/>	<b>c</b>	Type: <input type="checkbox"/> Checking <input type="checkbox"/> Savings	
<b>d</b>	Account number <input type="text"/>			
<b>14</b>	If line 12 is larger than line 9, subtract line 9 from line 12. This is the amount you owe. For details on how to pay, see instructions.	<b>14</b>		

**Refund**  
Have it directly deposited! See instructions and fill in 13b, 13c, and 13d, or Form 8888.

**Amount You Owe**

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)
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**Sign Here**  
Under penalties of perjury, I declare that I have examined this return and, to the best of my knowledge and belief, it is true, correct, and accurately lists 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.

Joint return? See instructions.  Yes  No

Keep a copy for your records.

Your signature <i>Martha B</i>	Date <b>4-10-16</b>	Your occupation <i>educator</i>	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.)

**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** \_\_\_\_\_

Form **4852**  
(Rev. September 2014)

**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](http://www.irs.gov/form4852).

1 Name(s) shown on return Martha B 2 Your social security number \_\_\_\_\_

3 Address Granite City, IL 62040

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 Special School District 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	<u>0.00</u>	f State income tax withheld	<u>2474.00</u>
b Social security wages	<u>0.00</u>	(Name of state)	<u>ILLINOIS</u>
c Medicare wages and tips	<u>0.00</u>	g Local income tax withheld	<u>0.00</u>
d Social security tips	<u>0.00</u>	(Name of locality)	_____
e Federal income tax withheld	<u>1038.77</u>	h Social security tax withheld	<u>0.00</u>
		i Medicare tax withheld	<u>1038.77</u>

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?  
Payer listed on line 5 above transmitted bad payer data alleging to be wages. I did not receive wages as defined by IRC section 3401.

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