

For the year Jan. 1-Dec. 31, 2013, or other tax year beginning

2013, ending

20

See separate instructions.

Your first name and initial Robert

Last name Shaffron

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.

751 32nd Ave

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

San Francisco, CA 94121

Foreign country name

Foreign province/state/country

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 (checked)
2 Married filing jointly
3 Married filing separately
4 Head of household
5 Qualifying widow(er) with dependent child

Exemptions

Table with columns for dependents: (1) First name, Last name, (2) Social security number, (3) Relationship to you, (4) If child under age 17 qualifying for child tax credit.

If more than four dependents, see instructions and check here

Boxes checked on 6a and 6b. No. of children on 6c who: lived with you, did not live with you due to divorce or separation. Add numbers on lines above.

Income

Table for income reporting with rows 7-22: Wages, Taxable interest, Dividends, Refunds, Alimony, Business income, Capital gain, Other gains, IRA distributions, Pensions, Rental real estate, Farm income, Unemployment compensation, Social security benefits, Other income.

Attach Form(s) W-2 here. Also attach Forms W-2G and 1099-R if tax was withheld.

If you did not get a W-2, see instructions.

Adjusted Gross Income

Table for adjusted gross income with rows 23-37: Educator expenses, Business expenses, Health savings account, Moving expenses, Self-employment tax, SEP/SIMPLE plans, Health insurance, Penalty on early withdrawal, Alimony paid, IRA deduction, Student loan interest, Tuition and fees, Domestic production activities, Add lines 23-35, Subtract line 36 from line 22.

Tax and Credits

38 Amount from line 37 (adjusted gross income) 38

39a Check You were born before January 2, 1949, Blind, Total boxes checked ▶ 39a

it: Spouse was born before January 2, 1949, Blind, 39b

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

41 Subtract line 40 from line 38 41

42 Exemptions. If line 38 is \$150,000 or less, multiply \$3,500 by the number on line 6d. Otherwise, see instructions 42

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

44 Tax (see instructions). Check if any from: a Form(s) 8814 b Form 4872 c 44

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

46 Add lines 44 and 45 ▶ 46

47 Foreign tax credit. Attach Form 1116 if required 47

48 Credit for child and dependent care expenses. Attach Form 2441 48

49 Education credits from Form 8863, line 19 49

50 Retirement savings contributions credit. Attach Form 8880 50

51 Child tax credit. Attach Schedule 8812, if required 51

52 Residential energy credits. Attach Form 5695 52

53 Other credits from Form: a 3500 b 8801 c 53

54 Add lines 47 through 53. These are your total credits 54

55 Subtract line 54 from line 46. If line 54 is more than line 46, enter -0- ▶ 55

Other Taxes

56 Self-employment tax. Attach Schedule SE 56

57 Unreported social security and Medicare tax from Form: a 4137 b 8919 57

58 Additional tax on IRAs, other qualified retirement plans, etc. Attach Form 5329 if required 58

59a Household employment taxes from Schedule H 59a

b First-time homebuyer credit repayment. Attach Form 5405 if required 59b

60 Taxes from: a Form 8959 b Form 8960 c Instructions; enter code(s) 60

61 Add lines 55 through 60. This is your total tax ▶ 61

Payments

62 Federal income tax withheld from Forms W-2 and 1099 62 6363 86

63 2013 estimated tax payments and amount applied from 2012 return 63

64a Earned income credit (EIC) 64a

b Nontaxable combat pay election 64b

65 Additional child tax credit. Attach Schedule 8812 65

66 American opportunity credit from Form 8863, line 8 66

67 Reserved 67

68 Amount paid with request for extension to file 68

69 Excess social security and tier 1 RRTA tax withheld 69

70 Credit for federal tax on fuels. Attach Form 4136 70

71 Credits from Form: a 2439 b 8329 c 8885 d 71

72 Add lines 62, 63, 64a, and 65 through 71. These are your total payments ▶ 72 6363 86

Refund

73 If line 72 is more than line 61, subtract line 61 from line 72. This is the amount you overpaid 73

74a Amount of line 73 you want refunded to you. If Form 8888 is attached, check here ▶ 74a 6363 86

b Routing number ▶ c Type: Checking Savings

d Account number

75 Amount of line 73 you want applied to your 2014 estimated tax ▶ 75 0

76 Amount you owe. Subtract line 72 from line 61. For details on how to pay, see instructions ▶ 76 -0-

77 Estimated tax penalty (see instructions) 77

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

Your signature *Robert A. Shaffner* Date *4/19/14* 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 Notice, enter it here (see inst.)

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 Robert Shafron 2 Your social security number [REDACTED]

3 Address 751 32nd Ave San Francisco, Ca

4 Enter year in space provided and check one box. For the tax year ending December 31, 2013.
I have been unable to obtain (or have received an incorrect) Form W-2 OR Form 1099-R.
before 10/1/14
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 Cupertino Electric Inc, 1132 North Seventh St, San Jose, Ca 6 Employer's or payer's identification number (if known) 94-1403967

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

a Wages, tips, and other compensation	<u>-0-</u>	g State income tax withheld	<u>467.24</u>
b Social security wages	<u>-0-</u>	(Name of state)	<u>California</u>
c Medicare wages and tips	<u>-0-</u>	h Local income tax withheld	
d Advance EIC payment	<u>-0-</u>	(Name of locality)	
e Social security tips	<u>-0-</u>	i Social security tax withheld	<u>380.74</u>
f Federal income tax withheld	<u>1312.66</u>	j Medicare tax withheld	<u>89.05</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?
Records provided by the payer listed on line 5

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

Sign Here
Under penalties of perjury, I declare that I have examined this statement, and to the best of my knowledge and belief, it is true, correct, and complete.
Signature ▶ _____ Date ▶ _____

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.

Department of the Treasury
Internal Revenue Service

1 Name(s) shown on return

Robert Shaffron

2 Your social security number

[REDACTED]

3 Address

751 32nd Ave San Francisco, Ca 94121

4 Enter year in space provided and check one box. For the tax year ending December 31, 2013.

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

Freeman Decorating Svcs Inc, PO Box 660613, Dallas, TX

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 —</u>	g State income tax withheld	<u>1.16</u>
b Social security wages	<u>— 0 —</u>	(Name of state)	
c Medicare wages and tips	<u>— 0 —</u>	h Local income tax withheld	1.16
d Advance EIC payment	<u>— 0 —</u>	(Name of locality)	
e Social security tips	<u>— 0 —</u>	i Social security tax withheld	<u>24.70</u>
f Federal income tax withheld	<u>22.34</u>	j Medicare tax withheld	<u>5.78</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?

Records provided by payer listed on line 5

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

None

Sign Here

Under penalties of perjury, I declare that I have examined this statement, and to the best of my knowledge and belief, it is true, correct, and complete.

Signature ▶

Robert Shaffron

Date ▶

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

Robert Shaffron

2 Your social security number

[REDACTED]

3 Address

751 30th Ave, San Francisco, Ca

4 Enter year in space provided and check one box. For the tax year ending December 31, _____.

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

Alight Electric, 263 Crown Circle, So. San Francisco Ca

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

94-3153280

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

a Wages, tips, and other compensation

-0-

b Social security wages

-0-

c Medicare wages and tips

-0-

d Advance EIC payment

-0-

e Social security tips

-0-

f Federal income tax withheld

3248.46

g State income tax withheld

(Name of state) California

1167.78

h Local income tax withheld

(Name of locality)

i Social security tax withheld

1037.54

Medicare tax withheld

242.63

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

a Gross distribution

b Taxable amount

c Taxable amount not determined

d Total distribution

e Capital gain (included in line 8b)

f Federal income tax withheld

g State income tax withheld

h Local income tax withheld

i Employee contributions

j Distribution codes

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

Records provided by Payer listed on line 5

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

None

Sign Here

Under penalties of perjury, I declare that I have examined this statement, and to the best of my knowledge and belief, it is true, correct, and complete.

Robert Shaffron