

ORIGINAL COPY

Department of the Treasury—Internal Revenue Service

Form 1040EZ

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

2016

OMB No. 1545-0074

Your first name and initial <b>JOHN</b>	Last name <b>GERALDS</b>	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.
City, town or post office, state, and ZIP code. If you have a foreign address, also complete spaces below (see instructions). [REDACTED] OH [REDACTED]		<b>▲ Make sure the SSN(s) above are correct.</b>  <b>Presidential Election Campaign</b> Check here if you, or your spouse if filing jointly, want \$3 to go to this fund. Check in a box below (all or change your tax or refund). <input type="checkbox"/> You <input type="checkbox"/> Spouse
Foreign country name	Foreign province/state/country	

<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</b>	<b>00</b>
	<b>2</b> Taxable interest. If the total is over \$1,500, you cannot use Form 1040EZ.	<b>2</b>	<b>-0</b>	<b>00</b>
	<b>3</b> Unemployment compensation and Alaska Permanent Fund dividends (see instructions)	<b>3</b>	<b>-0</b>	<b>00</b>
	<b>4</b> Add lines 1, 2, and 3. This is your adjusted gross income.	<b>4</b>	<b>-0</b>	<b>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 \$10,350 if single; \$20,700 if married filing jointly. See back for explanation.	<b>5</b>	<b>10350</b>	<b>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</b>	<b>00</b>
	<b>7</b> Federal income tax withheld from Form(s) W-2 and 1099.	<b>7</b>	<b>-0</b>	<b>00</b>
	<b>8a</b> Earned income credit (EIC) (see instructions)	<b>8a</b>	<b>-0</b>	<b>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>-0</b>	<b>00</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</b>	<b>00</b>
	<b>11</b> Health care: individual responsibility (see instructions) Full-year coverage <input checked="" type="checkbox"/>	<b>11</b>	<b>-0</b>	<b>00</b>
<b>12</b> Add lines 10 and 11. This is your total tax.	<b>12</b>	<b>-0</b>	<b>00</b>	
<b>Refund</b>  Has it directly deposited? See instructions and fill in 13b, 13c, and 13d, or Form 8888.	<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>-0</b>	<b>00</b>
<b>b</b> Routing number [REDACTED]	<b>c</b> Type: <input type="checkbox"/> Checking <input type="checkbox"/> Savings			
<b>d</b> Account number [REDACTED]				
<b>Amount You Owe</b>	<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>		

**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)
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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.	Date	Your occupation	Daytime phone number
Keep a copy for your records.	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.)

**Paid Preparer Use Only**

Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PIN
Firm's name	Firm's EIN	Phone no.		
Firm's address				

CORRECTED (if checked)

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no. [REDACTED] SYSTEMS, LLC [REDACTED]		1 Rents \$	OMB No. 1545-0115 <b>2016</b> Form 1099-MISC	Miscellaneous Income	
PAYER'S federal identification number [REDACTED] RECIPIENT'S identification number [REDACTED]		2 Royalties \$	3 Other income \$		
PAYER'S federal identification number [REDACTED] RECIPIENT'S identification number [REDACTED]		4 Federal income tax withheld \$	5 Fishing boat proceeds \$	Copy B For Recipient	
RECIPIENT'S name JOHN GERALDS Street address (including apt. no.) [REDACTED] City or town, state or province, country, and ZIP or foreign postal code [REDACTED] OH [REDACTED]		6 Medical and health care payments \$	7 Nonemployee compensation \$ -0.00-		
Account number (see instructions)		FATCA filing requirement <input checked="" type="checkbox"/>	8 Substitute payments in lieu of dividends or interest \$	This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.	
15a Section 409A deferrals \$		15b Section 409A income \$	9 Payer made direct sales of \$5,000 or more of consumer products to a buyer (recipient) for resale <input checked="" type="checkbox"/> \$		10 Crop insurance proceeds \$
16 State tax withheld \$		13 Excess golden parachute payments \$	11 \$		12 \$
17 State/Payer's state no. \$		14 Gross proceeds paid to an attorney \$	18 State income \$		

Form 1099-MISC (keep for your records) www.irs.gov/form1099misc Department of the Treasury - Internal Revenue Service

This corrected Form is not intended to be mistaken for a Form "produced" by the issuer of the original 1099-MISC.

This corrected 1099-MISC is submitted to REBUT and CORRECT "Bad Payer Data" per IRM 4.2.2.4(E) that was know to have been submitted by the party identified as "Payer", which erroneously alleges payment(s) to the party identified above as the "Recipient" of "Nonemployee compensation" or other taxable activity made in the of "trade or business" as defined in 26 U.S.C. 7701(a)(26).  
*COURSE*

Neither the "Payer" nor the "Recipient" engaged in any transaction(s) with each other that were made in the course of "trade or business" as defined in 26 U.S.C. 7701(a)(26).

Under penalty 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.

*John G. [Signature]* 3-1-19