

IRS e-file Signature Authorization

Department of the Treasury
Internal Revenue Service

▶ Do not send to the IRS. This is not a tax return.

▶ Keep this form for your records.

▶ Information about Form 8879 and its instructions is at www.irs.gov/form8879.

2013

Submission Identification
Number (SID)

▶ 20075220143470000922

Taxpayer's name
KARL R KENT

Social security number
211-02-0752

Spouse's name
KARA B BRYANT

Spouse's social security number
212-02-0752

Part I Tax Return Information-Tax Year Ending December 31, 2013 (Whole Dollars Only)

1	Adjusted gross income (Form 1040, line 38; Form 1040A, line 22; Form 1040EZ, line 4)	1	73,592.
2	Total tax (Form 1040, line 61; Form 1040A, line 35; Form 1040EZ, line 10)	2	2,281.
3	Federal income tax withheld (Form 1040, line 62; Form 1040A, line 36; Form 1040EZ, line 7)	3	5,603.
4	Refund (Form 1040, line 74a; Form 1040A, line 43a; Form 1040EZ, line 11a; Form 1040-SS, Part I, line 12a)	4	4,647.
5	Amount you owe (Form 1040, line 76; Form 1040A, line 45; Form 1040EZ, line 12)	5	

Part II Taxpayer Declaration and Signature Authorization (Be sure you get and keep a copy of your return)

Under penalties of perjury, I declare that I have examined a copy of my electronic individual income tax return and accompanying schedules and statements for the tax year ending December 31, 2013, and to the best of my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above are the amounts from my electronic income tax return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send my return to the IRS and to receive from the IRS (a) an acknowledgment of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution to debit the entry to this account. This authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate the authorization. To revoke (cancel) a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation requests must be received no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I further acknowledge that the personal identification number (PIN) below is my signature for my electronic income tax return and, if applicable my Electronic Funds Withdrawal Consent.

Taxpayer's PIN: check one box only

I authorize KINNELON PUBLIC LIBRARY to enter or generate my PIN 12345
ERO firm name Enter five numbers, but do not enter all zeros
as my signature on my tax year 2013 electronically filed income tax return.

I will enter my PIN as my signature on my tax year 2013 electronically filed income tax return. Check this box **only** if you are entering your own PIN **and** your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Your signature ▶ _____ Date ▶ 11/14/2014

Spouse's PIN: check one box only

I authorize KINNELON PUBLIC LIBRARY to enter or generate my PIN 12345
ERO firm name Enter five numbers, but do not enter all zeros
as my signature on my tax year 2013 electronically filed income tax return.

I will enter my PIN as my signature on my tax year 2013 electronically filed income tax return. Check this box **only** if you are entering your own PIN **and** your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Spouse's signature ▶ _____ Date ▶ 11/14/2014

Practitioner PIN Method Returns Only-continue below

Part III Certification and Authentication-Practitioner PIN Method Only

ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN. 20075298765
Do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature for the tax year 2013 electronically filed income tax return for the taxpayer(s) indicated above. I confirm that I am submitting this return in accordance with the requirements of the Practitioner PIN method and **Publication 1345**, Handbook for Authorized IRS e-file Providers of Individual Income Tax Returns.

ERO's signature ▶ S24051405 KINNELON PUBLIC LIBRAR Date ▶ 11/14/2014

ERO Must Retain This Form - See Instructions
Do Not Submit This Form to the IRS Unless Requested To Do So

For the year Jan. 1-Dec. 31, 2013, or other tax year beginning _____, 2013, ending _____, 20

Your first name and initial **KARL R KENT** Last name _____ See separate instructions.

Your social security number **211-02-0752**

If a joint return, spouse's first name and initial **KARA B BRYANT** Last name _____ Spouse's social security number **212-02-0752**

Home address (number and street). If you have a P.O. box, see instructions. **1068 RIVERMEADE DR** 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). **DENVILLE NJ 07834-** **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**

Foreign country name _____ Foreign province/county _____ Foreign postal code _____

Filing Status

1 Single **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. ▶ _____

2 Married filing jointly (even if only one had income)

3 Married filing separately. Enter spouse's SSN above and full name here. ▶ _____

5 Qualifying widow(er) with dependent child

Check only one box.

Exemptions

6a **Yourself.** If someone can claim you as a dependent, do not check box 6a

b **Spouse**

Boxes checked on 6a and 6b **2**

c Dependents:

(1) First name	Last name	(2) Dependent's social security number	(3) Dependent's relationship to you	(4) <input checked="" type="checkbox"/> If child under age 17 qualifying for child tax credit (see instr.)	No. of children on 6c who:
TAMARA	THOMAS	214-02-0752	GRANDCHILD	<input checked="" type="checkbox"/>	lived with you 3
KENDRA	KENT	213-02-0752	DAUGHTER	<input type="checkbox"/>	did not live with you due to divorce or separation (see instructions) 0
KERRI	BRYANT	210-02-0752	SISTER	<input type="checkbox"/>	Dependents on 6c not entered above 0

Add numbers on lines above **5**

d Total number of exemptions claimed **5**

Income	7	8a	8b	9a	9b	10	11	12	13	14	15a	15b	16a	16b	17	18	19	20a	20b	21	22	
7 Wages, salaries, tips, etc. Attach Form(s) W-2	41,951.																					
8a Taxable interest. Attach Schedule B if required		5,816.																				
b Tax-exempt interest. Do not include on line 8a			338.																			
9a Ordinary dividends. Attach Schedule B if required				232.																		
b Qualified dividends				232.																		
10 Taxable refunds, credits, or offsets of state and local income taxes						287.																
11 Alimony received																						
12 Business income or (loss). Attach Schedule C or C-EZ								2,369.														
13 Capital gain or (loss). Attach Schedule D if required. If not required, check here <input type="checkbox"/>								(3,000.)														
14 Other gains or (losses). Attach Form 4797																						
15a IRA distributions			12,593.								838.											
b Taxable amount												838.										
16a Pensions and annuities			19,825.										19,490.									
b Taxable amount													19,490.									
17 Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E													1,050.									
18 Farm income or (loss). Attach Schedule F																						
19 Unemployment compensation														2,550.								
20a Social security benefits			13,682.											11,630.								
b Taxable amount														11,630.								
21 Other income. List type and amount GAMBLING WINNINGS														1,200.								
22 Combine the amounts in the far right col for lines 7 through 21. This is your total income														84,413.								

Adjusted Gross Income	23	24	25	26	27	28	29	30	31a	32	33	34	35	36	37
23 Educator expenses	240.														
24 Certain business expenses of reservists, performing artists, and fee-basis gov. officials. Attach Form 2106 or 2106-EZ															
25 Health savings account deduction. Attach Form 8889															
26 Moving expenses. Attach Form 3903															
27 Deductible part of self-employment tax. Attach Schedule SE					167.										
28 Self-employed SEP, SIMPLE, and qualified plans															
29 Self-employed health insurance deduction															
30 Penalty on early withdrawal of savings					46.										
31a Alimony paid b Recipient's SSN ▶ 215-02-0752					3,600.										
32 IRA deduction					6,500.										
33 Student loan interest deduction					268.										
34 Tuition and fees. Attach Form 8917															
35 Domestic production activities deduction. Attach Form 8903															
36 Add lines 23 through 35														10,821.	
37 Subtract line 36 from line 22. This is your adjusted gross income														73,592.	

Tax and Credits	38	Amount from line 37 (adjusted gross income)	38	73,592.
	39a	Check <input checked="" type="checkbox"/> You were born before Jan. 2, 1949, <input type="checkbox"/> Blind. Total boxes checked ▶ 39a <input type="checkbox"/> 1 if: <input type="checkbox"/> Spouse was born before Jan. 2, 1949, <input type="checkbox"/> Blind. ▶ 39b <input type="checkbox"/>		
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, \$6,100 Married filing jointly or Qualifying widow(er), \$12,200 Head of household, \$8,950	40	Itemized deductions (from Schedule A) or your standard deduction (see left margin)	40	15,629.
	41	Subtract line 40 from line 38	41	57,963.
	42	Exemptions. If line 38 is \$150,000 or less, multiply \$3,900 by the number on line 6d. Otherwise, see instructions	42	19,500.
	43	Taxable income. Subtract line 42 from line 41. If line 42 is more than line 41, enter -0-	43	38,463.
	44	Tax (see instructions). Check if any from: a <input type="checkbox"/> Form(s) 8814 b <input type="checkbox"/> Form 4972 c <input type="checkbox"/>	44	4,841.
	45	Alternative minimum tax (see instructions). Attach Form 6251	45	
	46	Add lines 44 and 45	46	4,841.
	47	Foreign tax credit. Attach Form 1116 if required	47	4.
	48	Credit for child and dependent care expenses. Attach Form 2441	48	220.
	49	Education credits from Form 8863, line 19	49	1,452.
	50	Retirement savings contributions credit. Attach Form 8880	50	
	51	Child tax credit. Attach Schedule 8812, if required	51	1,000.
	52	Residential energy credits. Attach Form 5695	52	218.
	53	Other credits from Form: a <input type="checkbox"/> 3800 b <input type="checkbox"/> 8801 c <input type="checkbox"/>	53	
	54	Add lines 47 through 53. These are your total credits	54	2,894.
55	Subtract line 54 from line 46. If line 54 is more than line 46, enter -0-	55	1,947.	
Other Taxes	56	Self-employment tax. Attach Schedule SE	56	334.
	57	Unreported social security and Medicare tax from Form: a <input type="checkbox"/> 4137 b <input type="checkbox"/> 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	
	59b	First-time homebuyer credit repayment. Attach Form 5405 if required	59b	
	60	Taxes from: a <input type="checkbox"/> Form 8959 b <input type="checkbox"/> Form 8960 c <input type="checkbox"/> Instructions; enter code(s)	60	
	61	Add lines 55 through 60. This is your total tax	61	2,281.
Payments If you have a qualifying child, attach Schedule EIC.	62	Federal income tax withheld from Forms W-2 and 1099	62	5,603.
	63	2013 estimated tax payments and amount applied from 2012 return	63	400.
	64a	Earned income credit (EIC) NO	64a	
	64b	Nontaxable combat pay election	64b	
	65	Additional child tax credit. Attach Form 8812	65	
	66	American opportunity credit from Form 8863, line 8	66	925.
	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 <input type="checkbox"/> 2439 b <input type="checkbox"/> Re-served c <input type="checkbox"/> 8885 d <input type="checkbox"/>	71	
	72	Add lines 62, 63, 64a, and 65 through 71. These are your total payments	72	6,928.
Refund	73	If line 72 is more than line 61, subtract line 61 from line 72. This is the amount you overpaid	73	4,647.
	74a	Amount of line 73 you want refunded to you . If Form 8888 is attached, check here <input type="checkbox"/>	74a	4,647.
	b	Routing number 065502789 c Type: <input checked="" type="checkbox"/> Checking <input type="checkbox"/> Savings		
Direct deposit? <input type="checkbox"/>	d	Account number 12345678		
See instructions <input type="checkbox"/>	75	Amount of line 73 you want applied to your 2014 estimated tax	75	
Amount You Owe	76	Amount you owe. Subtract line 72 from line 61. For details on how to pay, see instructions	76	
	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.

Joint return? <input type="checkbox"/>	Your signature _____	Date _____	Your occupation CLERK	Daytime phone number 973-555-1234
See instructions <input type="checkbox"/>	Spouse's signature. If a joint return, both must sign. _____	Date _____	Spouse's occupation SCHOOL TEACHER	If the IRS sent you an Identity Protection PIN, enter it here (see inst.)

Paid Preparer Use Only

Print/Type preparer's name AARP FOUNDATION TAX-AIDE	Preparer's signature _____	Date _____	Check <input type="checkbox"/> if self-employed	PTIN S24051405
Firm's name ▶ KINNELON PUBLIC LIBRARY	Firm's EIN ▶		Phone no.	
Firm's address ▶				

Name: KARL R KENT & KARA B BRYANT

SSN: 211-02-0752

Interest. List all interest on Schedule B, regardless of the amount.

Unemployment and/or state tax refund. Fill out 1099G worksheet

Additional Earned Income	Taxpayer	Spouse	Total
Scholarship income - no W2			
Household employee income - no W2			
Social Security/Railroad Tier 1 Benefits	Taxpayer	Spouse	Total
Social Security received this year	13,682.		
Railroad tier 1 received this year			
Total	13,682.		13,682.
Medicare to Schedule A	1,985.		
Federal tax withheld	360.		

Married Filing Separately

If the filing status is married filing separately and the taxpayer and spouse lived together at any time during the year, up to 85% of social security and railroad benefits received are taxable. See Main Information Sheet, filing status 3

All others

Modified adjusted gross income for this computation consists of AGI (without social security or railroad benefits) + Form 8815, line 14, + Form 8839, line 30 + Form 2555 (EZ) exclusions + student loan interest adjustment 62,230.

+ tax-exempt interest: 338. and excluded income from American Samoa (Form 4563) or

Puerto Rico: _____ + 50% of the benefits received: 6,841.

If the modified AGI is less than \$25,001 (\$32,001 married filing jointly), none of the Social Security and RR Benefits are taxable.

If the modified AGI is between \$25,000 and \$34,000 (\$32,000 and \$44,000 married filing jointly), 50% of the benefits received is taxable.

If the modified AGI is greater than \$34,000 (\$44,000 married filing jointly):

85% of the social security and railroad benefits received is taxable **A** 11,630.

Modified AGI 69,409.

\$34,000 (\$44,000) 44,000.

Subtract 25,409. X 85% = 21,598.

Minimum 50% of the benefits received or \$4,500 (\$6,000 married filing jointly) 6,000.

Add **B** 27,598.

Taxable social security and railroad retirement tier 1. Minimum of A or B 11,630.

Lump Sum Payment of Social Security and Railroad Tier 1 Benefits

	Taxpayer	Spouse	Total
Gross amount received attributable to 2013			
Using the above modified AGI, this is the taxable amount of the 2013 benefit			
Amounts taxable from previous years			
Taxable benefits using the lump-sum election method			

US Student Loan Interest, Coverdell ESA and QTP, Tuition and Fees 2013

Name: KARL R KENT & KARA B BRYANT SSN: 211-02-0752

Student Loan Interest (Postsecondary Education)	Taxpayer	Spouse	Total
1 Amount paid in 2013. See instructions for limitations and definition of qualified student loan interest. Total column is limited to \$2,500.....		268.	268.
Modified AGI for this computation including excluded income from Forms 2555 (EZ) and 4563, excluded income from Puerto Rico, and excluded adoption benefits from Form 8839, line 30 <u>73,860.</u>			
Married filing separately and a dependent of another cannot take this deduction. The interest deduction phases out when modified AGI exceeds \$60,000 (\$125,000 married filing jointly) and is -0- when AGI exceeds \$75,000 (\$155,000 married filing jointly).			
2 Student loan interest deduction		268.	268.
Educator Expenses - Elementary and Secondary	Taxpayer	Spouse	Total
Amount of unreimbursed classroom expenses, such as books, supplies, computer equipment and related software, other equipment, and supplementary materials used by the eligible educator in the classroom, up to \$250. Amounts over \$250 should be listed on Schedule A, Job Expenses, subject to 2% of AGI		240.	240.
Education Savings Accounts (ESAs) and QTPs		Taxpayer	Spouse
1 Excess contributions			
2 Taxable distributions			

Tuition and Fees as an AGI Deduction

In most cases, tuition and fees will create a better income tax result by using Form 8863, Education Credits. The same rules for qualified tuition and fees apply to the credit and the deduction.

No deduction is allowed if filing Form 1040NR or married filing separately.

Some things to consider

Form 8863, Education Credits

- 40% of the American Opportunity Credit is refundable and is reduced once the AGI reaches \$80,000 single (\$160,000, married filing jointly), and is -0- when the AGI reaches \$90,000 single (\$180,000, married filing jointly).
- The nonrefundable education credits are reduced once the AGI reaches \$53,000, single (\$107,000, married filing jointly), and is -0- when the AGI reaches \$63,000, single (\$127,000, married filing jointly).
- The American Opportunity Credit, if not reduced, can be as much as \$2,500 credit per student.
- The Lifetime Learning Credit, if not reduced, is limited to \$2,000.

Tuition and Fees as an AGI Deduction

- The deduction is limited to \$4,000, if AGI does not exceed \$65,000, single (\$130,000 married filing jointly).
- The deduction is limited to \$2,000, if AGI exceeds \$65,000, single (\$130,000 married filing jointly).
- The deduction is -0- when AGI exceeds \$80,000, single (\$160,000 married filing jointly).

Student's name	Social security number	Qualified expenses
KARL KENT	211-02-0752	
KARA BRYANT	212-02-0752	
TAMARA THOMAS	214-02-0752	
KENDRA KENT	213-02-0752	
KERRI BRYANT	210-02-0752	
1 Total qualified expense		
2 Modified AGI	73,592.	
3 Tuition and fees deduction..... (Spouse amount:)		

US Child Tax Credit, Federal Extension Payment, and Carryovers Worksheet 2013

Name: **KARL R KENT & KARA B BRYANT**

SSN: **211-02-0752**

Child Tax Credit (CTC)

1	\$1,000 X <input type="text" value="1"/> qualifying children		1,000.
2	Modified AGI is AGI plus excluded income from Forms 2555 (EZ) and 4563, and excluded income from Puerto Rico	73,592.	
3	Modified AGI limitation \$110,000 married filing jointly; \$55,000 married filing separately; all others \$75,000	110,000.	
4	Subtract line 3 from line 2. If -0-, go to line 7		
5	Round up to next \$1,000		
6	Multiply line 5 by 5%		
7	Maximum child tax credit. Subtract line 6 from line 1. You cannot take the credit if this amount is -0-		1,000.
8	Amount from Form 1040, line 46, Form 1040A, line 28, or Form 1040NR, line 43	4,841.	
9	Credits for foreign tax, dependent care, elderly, education, retirement savings, adoption, mortgage interest, DC first-time homebuyers and residential energy	1,894.	

CTC Worksheet for Forms 8396, Mortgage Interest Credit, Form 8839, Adoption Credit, Form 8859, DC First-time Homebuyers Credit, and Form 5695, Residential Energy Credits

1	Foreign tax credit + dependent care credit + elderly credit + education credit + retirement savings credit		
2	Amount from line 7 above		
3	Social security or RR tier 1 + Medicare		
4	Form 1040, line 27 + line 59; or Form 1040NR, line 54 + uncollected social security and Medicare taxes listed on W2		
5	Add lines 3 and 4		
6	Earned income credit and excess FICA/RRTA		
7	Subtract line 6 from line 5		
8	Maximum child tax credit, line 7 above, minus the larger of line 7 of this worksheet or Form 8812, line 6. This is the child tax credit for the purpose of figuring Forms 5695, 8396, 8839 and 8859. Use this amount in place of the child tax credit amount asked for on these forms		
9	Total of adoption credit, mortgage interest credit, DC first-time homebuyer credit, and residential energy credits as refigured		
10	Add lines 1 and 9		
10	Subtract line 9 from line 8		2,947.
11	Child tax credit		1,000.

Amount paid with Federal extension (Form 4868 or 2350)

Carryovers from 2013 to 2014

1	Section 179 expense disallowed, Form 4562, accumulative total														
2	Net operating loss from 2013 only, Form 1045 Amt. carried forward from 2012. Listed on Form 1040, line 21, or Form 1040NR, line 21														
3	2013 charitable contributions. Organization limit:														
		<table border="1"> <tr> <th colspan="2">Cash or other property</th> <th colspan="2">Capital Gain</th> </tr> <tr> <td>50%</td> <td>30%</td> <td>30%</td> <td>20%</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> </tr> </table>	Cash or other property		Capital Gain		50%	30%	30%	20%					
Cash or other property		Capital Gain													
50%	30%	30%	20%												
4	Investment interest expense, Form 4952, accumulative total														
5	Foreign tax credit from 2013 only, Form 1116. Enter amount carried back, if any														
6	Mortgage interest credit, Form 8396														
		<table border="1"> <tr> <th>2011</th> <th>2012</th> <th>2013</th> </tr> <tr> <td></td> <td></td> <td></td> </tr> </table>	2011	2012	2013										
2011	2012	2013													
7	DC first-time homebuyer credit, Form 8859														
8	Prior year minimum tax credit, Form 8801, cumulative total														
9	AMT limited qualified electric vehicle credit from 2013 only														
10	Nonrecaptured net section 1231 losses														
		<table border="1"> <tr> <th>2009</th> <th>2010</th> <th>2011</th> <th>2012</th> <th>2013</th> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </table>	2009	2010	2011	2012	2013								
2009	2010	2011	2012	2013											

Name: KARL R KENT & KARA B BRYANT

SSN: 211-02-0752

	TSJ	Amount
1 Gambling winnings from Form W-2G		1,200.
2 Form 1099-MISC, lines 3, 7, and 8		
3 Taxable distributions from education savings accounts (ESAs) and QTPs		
4 Recovery of itemized deductions		
5 Foreign income exclusion from Form 2555, line 45		
6 Foreign income exclusion from Form 2555-EZ, line 18		
7 Income addition from Form 6478, line 2		
8 Income addition from Form 8814, line 12		
9 Taxable Archer MSA distributions from Form 8853, line 8		
10 Taxable Medicare Advantage MSA distributions from Form 8853, line 12		
11 Taxable long-term care insurance contract payments from Form 8853, line 26		
12 Taxable HSA distributions from Form 8889, line 16		
13 Income for failure to maintain HDHP coverage from Form 8889, line 20		
14 Jury duty pay	<input type="checkbox"/>	
15 NOL carried forward - enter as a negative amount	<input type="checkbox"/>	
16 Describe -	<input type="checkbox"/>	
17 Describe -	<input type="checkbox"/>	
18 Describe -	<input type="checkbox"/>	
19 Describe -	<input type="checkbox"/>	
20 Describe -	<input type="checkbox"/>	
21 Describe -	<input type="checkbox"/>	
22 Describe -	<input type="checkbox"/>	
23 Describe -	<input type="checkbox"/>	
24 Describe -	<input type="checkbox"/>	
25 Describe -	<input type="checkbox"/>	
26 Describe -	<input type="checkbox"/>	
27 Describe -	<input type="checkbox"/>	
28 Describe -	<input type="checkbox"/>	
29 Describe -	<input type="checkbox"/>	
30 Describe -	<input type="checkbox"/>	
31 Total other income		1,200.

Child and Dependent Care Expenses

▶ Attach to Form 1040, Form 1040A, or Form 1040NR.
▶ Information about Form 2441 and its separate instructions is at www.irs.gov/form2441.

1040
1040A
1040NR

2441

Name(s) shown on return **KARL R KENT & KARA B BRYANT** Your social security number **211-02-0752**

Part I Persons or Organizations Who Provided the Care - You must complete this part.
(If you have more than two care providers, see the instructions.)

1 (a) Care provider's name	(b) Address (number, street, apt. no., city, state, and ZIP code)	(c) Identifying number (SSN or EIN)	(d) Amount paid (see instructions)
MARYVILLE DAY CARE	128 MENIO ST DENVERVILLE NJ 07834-	26-8990752	1,100.

Did you receive dependent care benefits?

No → Complete only Part II below.

Yes → Complete Part III on page 2.

Caution. If the care was provided in your home, you may owe employment taxes. If you do, you cannot file Form 1040A. For details, see the instructions for Form 1040, line 59a, or Form 1040NR, line 58a.

Part II Credit for Child and Dependent Care Expenses

2 Information about your **qualifying person(s)**. If you have more than two qualifying persons, see the instructions.

(a) Qualifying person's name	(b) Qualifying person's social security number	(c) Qualified expenses you incurred and paid in 2013 for the person listed in column (a)
First Last		
TAMARA THOMAS	214-02-0752	1,100.

3 Add the amounts in column (c) of line 2. Do not enter more than \$3,000 for one qualifying person or \$6,000 for two or more persons. If you completed Part III, enter the amount from line 31	3	1,100.																																																												
4 Enter your earned income . See instructions	4	28,134.																																																												
5 If married filing jointly, enter your spouse's earned income (if you or your spouse was a student or was disabled, see the instructions); all others , enter the amount from line 4	5	16,019.																																																												
6 Enter the smallest of line 3, 4, or 5	6	1,100.																																																												
7 Enter the amount from Form 1040, line 38; Form 1040A, line 22; or Form 1040NR, line 37	7	73,592.																																																												
8 Enter on line 8 the decimal amount shown below that applies to the amount on line 7	8	x . 0.20																																																												
<table border="0"> <tr> <td colspan="3">If line 7 is:</td> <td colspan="3">If line 7 is:</td> </tr> <tr> <td>Over</td> <td>But not over</td> <td>Decimal amount is</td> <td>Over</td> <td>But not over</td> <td>Decimal amount is</td> </tr> <tr> <td></td> <td>\$0-15,000</td> <td>.35</td> <td></td> <td>\$29,000-31,000</td> <td>.27</td> </tr> <tr> <td></td> <td>15,000-17,000</td> <td>.34</td> <td></td> <td>31,000-33,000</td> <td>.26</td> </tr> <tr> <td></td> <td>17,000-19,000</td> <td>.33</td> <td></td> <td>33,000-35,000</td> <td>.25</td> </tr> <tr> <td></td> <td>19,000-21,000</td> <td>.32</td> <td></td> <td>35,000-37,000</td> <td>.24</td> </tr> <tr> <td></td> <td>21,000-23,000</td> <td>.31</td> <td></td> <td>37,000-39,000</td> <td>.23</td> </tr> <tr> <td></td> <td>23,000-25,000</td> <td>.30</td> <td></td> <td>39,000-41,000</td> <td>.22</td> </tr> <tr> <td></td> <td>25,000-27,000</td> <td>.29</td> <td></td> <td>41,000-43,000</td> <td>.21</td> </tr> <tr> <td></td> <td>27,000-29,000</td> <td>.28</td> <td></td> <td>43,000-No limit</td> <td>.20</td> </tr> </table>	If line 7 is:			If line 7 is:			Over	But not over	Decimal amount is	Over	But not over	Decimal amount is		\$0-15,000	.35		\$29,000-31,000	.27		15,000-17,000	.34		31,000-33,000	.26		17,000-19,000	.33		33,000-35,000	.25		19,000-21,000	.32		35,000-37,000	.24		21,000-23,000	.31		37,000-39,000	.23		23,000-25,000	.30		39,000-41,000	.22		25,000-27,000	.29		41,000-43,000	.21		27,000-29,000	.28		43,000-No limit	.20		
If line 7 is:			If line 7 is:																																																											
Over	But not over	Decimal amount is	Over	But not over	Decimal amount is																																																									
	\$0-15,000	.35		\$29,000-31,000	.27																																																									
	15,000-17,000	.34		31,000-33,000	.26																																																									
	17,000-19,000	.33		33,000-35,000	.25																																																									
	19,000-21,000	.32		35,000-37,000	.24																																																									
	21,000-23,000	.31		37,000-39,000	.23																																																									
	23,000-25,000	.30		39,000-41,000	.22																																																									
	25,000-27,000	.29		41,000-43,000	.21																																																									
	27,000-29,000	.28		43,000-No limit	.20																																																									
9 Multiply line 6 by the decimal amount on line 8. If you paid 2012 expenses in 2013, see the instructions	9	220.																																																												
10 Tax liability limit. Enter the amount from the Credit Limit Worksheet in the instructions	10	4,837.																																																												
11 Credit for child and dependent care expenses. Enter the smaller of line 9 or line 10 here and on Form 1040, line 48; Form 1040A, line 29; or Form 1040NR, line 46	11	220.																																																												

For Paperwork Reduction Act Notice, see the instructions.

Residential Energy Credits

2013

Department of the Treasury
Internal Revenue Service

▶ Information about Form 5695 and its instructions is at www.irs.gov/form5695.
▶ Attach to Form 1040 or Form 1040NR.

Attachment
Sequence No. **158**

Name(s) shown on return

KARL R KENT & KARA B BRYANT

Your social security number

211-02-0752

Part I Residential Energy Efficient Property Credit (See instructions before completing this part.)

Note. Skip lines 1 through 11 if you only have a **credit carryforward from 2012.**

<p>1 Qualified solar electric property costs</p> <p>2 Qualified solar water heating property costs</p> <p>3 Qualified small wind energy property costs</p> <p>4 Qualified geothermal heat pump property costs</p> <p>5 Add lines 1 through 4</p> <p>6 Multiply line 5 by 30% (.30)</p> <p>7 a Qualified fuel cell property. Was qualified fuel cell property installed on or in connection with your main home located in the United States? (See instructions) ▶</p> <p style="margin-left: 20px;">Caution: If you checked the "No" box, you cannot take a credit for qualified fuel cell property. Skip lines 7b through 11.</p> <p>b Print the complete address of the main home where you installed the fuel cell property.</p> <p style="margin-left: 40px;">_____ Number and street Unit No.</p> <p style="margin-left: 40px;">_____ City, State, and ZIP code</p>	<p>1</p> <p>2</p> <p>3</p> <p>4</p> <p>5</p> <p>6</p> <p>7a</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>
<p>8 Qualified fuel cell property costs</p> <p>9 Multiply line 8 by 30% (.30)</p> <p>10 Kilowatt capacity of property on line 8 above ▶ <u>0.0</u> X \$1,000</p> <p>11 Enter the smaller of line 9 or line 10</p> <p>12 Credit carryforward from 2012. Enter the amount, if any, from your 2012 Form 5695, line 18</p> <p>13 Add lines 6, 11, and 12</p> <p>14 Limitation based on tax liability. Enter the amount from the Residential Energy Efficient Property Credit Limit Worksheet (see instructions)</p> <p>15 Residential energy efficient property credit. Enter the smaller of line 13 or line 14. Also include this amount on Form 1040, line 52, or Form 1040NR, line 49</p> <p>16 Credit carryforward to 2014. If line 15 is less than line 13, subtract line 15 from line 13</p>	<p>8</p> <p>9</p> <p>10</p> <p>11</p> <p>12</p> <p>13</p> <p>14</p> <p>15</p> <p>16</p>	<p>0</p>

For Paperwork Reduction Act Notice, see your tax return instructions.

Part II Nonbusiness Energy Property Credit

<p>17 a Were the qualified energy efficiency improvements or residential energy property costs for your main home located in the United States? (see instructions) ▶</p> <p>Caution: If you checked the "No" box, you cannot claim the nonbusiness energy property credit. Do not complete Part II.</p> <p>b Print the complete address of the main home where you made the qualifying improvements. Caution: You can only have one main home at a time.</p> <p style="margin-left: 40px;">1068 RIVERMEADE DR <small>Number and street</small> <small>Unit No.</small></p> <p style="margin-left: 40px;">DENVERVILLE NJ 07834- <small>City, State, and ZIP code</small></p>	17a	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<p>c Were any of these improvements related to the construction of this main home? ▶</p> <p>Caution: If you checked the "Yes" box, you can only claim the nonbusiness energy property credit for qualifying improvements that were not related to the construction of the home. Do not include expenses related to the construction of your main home, even if the improvements were made after you moved into the home.</p>	17c	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<p>18 Lifetime limitation. Enter the amount from the Lifetime Limitation Worksheet (see instructions)</p>	18	
<p>19 Qualified energy efficiency improvements (original use must begin with you and the component must reasonably be expected to last for at least 5 years; do not include labor costs) (see instructions).</p> <p>a Insulation material or system specifically and primarily designed to reduce the heat loss or gain of your home that meets the prescriptive criteria established by the 2009 IECC</p>	19a	175.
<p>b Exterior doors that meet or exceed the Energy Star program requirements</p>	19b	
<p>c Metal or asphalt roof that meets or exceeds the Energy Star program requirements and has appropriate pigmented coatings or cooling granules which are specifically and primarily designed to reduce the heat gain of your home</p>	19c	
<p>d Exterior windows and skylights that meet or exceed the Energy Star program requirements</p>	19d	7,450.
<p>e Maximum amount of cost on which the credit can be figured</p>	19e	\$2,000
<p>f If you claimed window expenses on your Form 5695 for 2006, 2007, 2009, 2010, 2011, or 2012 enter the amount from the Window Expense Worksheet (see instructions); otherwise enter -0-</p>	19f	
<p>g Subtract line 19f from line 19e. If zero or less, enter -0-</p>	19g	2,000.
<p>h Enter the smaller of line 19d or line 19g</p>	19h	2,000.
<p>20 Add lines 19a, 19b, 19c, and 19h</p>	20	2,175.
<p>21 Multiply line 20 by 10% (.10)</p>	21	218.
<p>22 Residential energy property costs (must be placed in service by you; include labor costs for onsite preparation, assembly, and original installation) (see instructions).</p> <p>a Energy-efficient building property. Do not enter more than \$300</p>	22a	
<p>b Qualified natural gas, propane, or oil furnace or hot water boiler. Do not enter more than \$150</p>	22b	
<p>c Advanced main air circulating fan used in a natural gas, propane, or oil furnace. Do not enter more than \$50</p>	22c	
<p>23 Add lines 22a through 22c</p>	23	
<p>24 Add lines 21 and 23</p>	24	218.
<p>25 Maximum credit amount. (If you jointly occupied the home, see instructions)</p>	25	500.
<p>26 Enter the amount, if any, from line 18</p>	26	
<p>27 Subtract line 26 from line 25. If zero or less, stop; you cannot take the nonbusiness energy property credit</p>	27	500.
<p>28 Enter the smaller of line 24 or line 27</p>	28	218.
<p>29 Limitation based on tax liability. Enter the amount from the Nonbusiness Energy Property Credit Limit Worksheet (see instructions)</p>	29	3,165.
<p>30 Nonbusiness energy property credit. Enter the smaller of line 28 or line 29. Also include this amount on Form 1040, line 52, or Form 1040NR, line 49</p>	30	218.

Alternative Minimum Tax - Individuals

Department of the Treasury
Internal Revenue Service (99)

► Information about Form 6251 and its separate instructions is at www.irs.gov/form6251.

2013
Attachment
Sequence No. **32**

► Attach to Form 1040 or Form 1040NR.

Name(s) shown on Form 1040 or Form 1040NR: **KARL R KENT & KARA B BRYANT**
Your social security number: **211-02-0752**

Part I Alternative Minimum Taxable Income (See instructions for how to complete each line.)

1 If filing Schedule A (Form 1040), enter the amount from Form 1040, line 41, and go to line 2. Otherwise, enter the amount from Form 1040, line 38 and go to line 7. (If less than zero, enter as a negative amount.)	1	57,963.
2 Medical and dental. If you or your spouse was 65 or older, enter the smaller of Schedule A (Form 1040), line 4, or 2.5% (.025) of Form 1040, line 38. If zero or less, enter -0-	2	1,840.
3 Taxes from Schedule A (Form 1040), line 9	3	4,999.
4 Enter the home mortgage interest adjustment, if any, from line 6 of the worksheet in the instructions for this line	4	
5 Miscellaneous deductions from Schedule A (Form 1040), line 27	5	
6 If Form 1040, line 38, is \$150,000 or less, enter -0-. Otherwise, see instructions	6	
7 Tax refund from Form 1040, line 10 or line 21	7	(287.)
8 Investment interest expense (difference between regular tax and AMT)	8	
9 Depletion (difference between regular tax and AMT)	9	
10 Net operating loss deduction from Form 1040, line 21. Enter as a positive amount	10	
11 Alternative tax net operating loss deduction	11	()
12 Interest from specified private activity bonds exempt from the regular tax	12	
13 Qualified small business stock (7% of gain excluded under section 1202)	13	
14 Exercise of incentive stock options (excess of AMT income over regular tax income)	14	
15 Estates and trusts (amount from Schedule K-1 (Form 1041), box 12, code A)	15	
16 Electing large partnerships (amount from Schedule K-1 (Form 1065-B), box 6)	16	
17 Disposition of property (difference between AMT and regular tax gain or loss)	17	
18 Depreciation on assets placed in service after 1986 (difference between regular tax and AMT)	18	
19 Passive activities (difference between AMT and regular tax income or loss)	19	
20 Loss limitations (difference between AMT and regular tax income or loss)	20	
21 Circulation costs (difference between regular tax and AMT)	21	
22 Long-term contracts (difference between AMT and regular tax income)	22	
23 Mining costs (difference between regular tax and AMT)	23	
24 Research and experimental costs (difference between regular tax and AMT)	24	
25 Income from certain installment sales before January 1, 1987	25	()
26 Intangible drilling costs preference	26	
27 Other adjustments, including income-based related adjustments	27	
28 Alternative minimum taxable income. Combine lines 1 through 27. (If married filing separately and line 28 is more than \$238,550, see instructions.)	28	64,515.

Part II Alternative Minimum Tax (AMT)

29 Exemption. (If you were under age 24 at the end of 2013, see instructions.)																
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 30%;">If your filing status is...</td> <td style="width: 30%;">AND line 28 is not over...</td> <td style="width: 30%;">THEN enter on line 29...</td> <td style="width: 10%;"></td> </tr> <tr> <td>Single or head of household</td> <td>\$115,400</td> <td>\$51,900</td> <td rowspan="3" style="text-align: center; vertical-align: middle;">} →</td> </tr> <tr> <td>Married filing jointly or qualifying widow(er)</td> <td>153,900</td> <td>80,800</td> </tr> <tr> <td>Married filing separately</td> <td>76,900</td> <td>40,400</td> </tr> </table>	If your filing status is...	AND line 28 is not over...	THEN enter on line 29...		Single or head of household	\$115,400	\$51,900	} →	Married filing jointly or qualifying widow(er)	153,900	80,800	Married filing separately	76,900	40,400	29	80,800.
If your filing status is...	AND line 28 is not over...	THEN enter on line 29...														
Single or head of household	\$115,400	\$51,900	} →													
Married filing jointly or qualifying widow(er)	153,900	80,800														
Married filing separately	76,900	40,400														
30 Subtract line 29 from line 28. If more than zero, go to line 31. If zero or less, enter -0- here and on lines 31, 33, and 35, and go to line 34	30															
31 <ul style="list-style-type: none"> • If you are filing Form 2555 or 2555-EZ, see instructions for the amount to enter. • If you reported capital gain distributions directly on Form 1040, line 13; you reported qualified dividends on Form 1040, line 9b; or you had a gain on both lines 15 and 16 of Schedule D (Form 1040) (as refigured for the AMT, if necessary), complete Part III on page 2 and enter the amount from line 60 here. • All others : If line 30 is \$179,500 or less (\$89,750 or less if married filing separately), multiply line 30 by 26% (.26). Otherwise, multiply line 30 by 28% (.28) and subtract \$3,590 (\$1,795 if married filing separately) from the result. 	31															
32 Alternative minimum tax foreign tax credit (see instructions)	32	4.														
33 Tentative minimum tax. Subtract line 32 from line 31	33															
34 Tax from Form 1040, line 44 (minus any tax from Form 4972 and any foreign tax credit from Form 1040, line 47). If you used Schedule J to figure your tax, the amount from line 44 of Form 1040 must be refigured without using Schedule J (see instructions)	34	4,837.														
35 AMT. Subtract line 34 from line 33. If zero or less, enter -0-. Enter here and on Form 1040, line 45	35															

Education Credits
(American Opportunity and Lifetime Learning Credits)

▶ Information about form 8863 and its separate instructions is at www.irs.gov/form8863.
 ▶ Attach to Form 1040 or Form 1040A.

2013

Attachment
 Sequence No. **50**

Name(s) shown on return
KARL R KENT & KARA B BRYANT

Your social security number
211-02-0752



Complete a separate Part III on page 2 for each student for whom you are claiming either credit before you complete Parts I and II.

Part I Refundable American Opportunity Credit

1	After completing Part III for each student, enter the total of all amounts from all Parts III, line 30 . . .	1	2,313.
2	Enter: \$180,000 if married filing jointly; \$90,000 if single, head of household, or qualifying widow(er)	2	180,000.
3	Enter the amount from Form 1040, line 38, or Form 1040A, line 22. If you are filing Form 2555, 2555-EZ, or 4563, or you are excluding income from Puerto Rico, see Pub. 970 for the amount to enter	3	73,592.
4	Subtract line 3 from line 2. If zero or less, stop you cannot take any education credit	4	106,408.
5	Enter: \$20,000 if married filing jointly; \$10,000 if single, head of household, or qualifying widow(er)	5	20,000.
6	If line 4 is: • Equal to or more than line 5, enter 1.000 on line 6. • Less than line 5, divide line 4 by line 5. Enter the result as a decimal (rounded to at least three places)	6	1.000
7	Multiply line 1 by line 6. Caution: If you were under age 24 at the end of the year and meet the conditions described in the instructions, you cannot take the refundable American opportunity credit; skip line 8, enter the amount from line 7 on line 9, and check this box <input type="checkbox"/>	7	2,313.
8	Refundable American opportunity credit. Multiply line 7 by 40% (.40). Enter the amount here and on Form 1040, line 66, or Form 1040A, line 40. Then go to line 9 below	8	925.

Part II Nonrefundable Education Credits

9	Subtract line 8 from line 7. Enter here and on line 2 of the Credit Limit Worksheet (see instructions)	9	1,388.
10	After completing Part III for each student, enter the total of all amounts from all Parts III, line 31. If zero skip lines 11 through 17, enter -0- on line 18, and go to line 19	10	318.
11	Enter the smaller of line 10 or \$10,000	11	318.
12	Multiply line 11 by 20% (.20)	12	64.
13	Enter: \$127,000 if married filing jointly; \$63,000 if single, head of household, or qualifying widow(er)	13	127,000.
14	Enter the amount from Form 1040, line 38, or Form 1040A, line 22. If you are filing Form 2555, 2555-EZ, or 4563, or you are excluding income from Puerto Rico, see Pub. 970 for the amount to enter	14	73,592.
15	Subtract line 14 from line 13. If zero or less, skip lines 16 and 17, enter -0- on line 18, and go to line 19	15	53,408.
16	Enter: \$20,000 if married filing jointly; \$10,000 if single, head of household, or qualifying widow(er)	16	20,000.
17	If line 15 is: • Equal to or more than line 16, enter 1.000 on line 17 and go to line 18 • Less than line 16, divide line 15 by line 16. Enter the result as a decimal (rounded to at least three places)	17	1.000
18	Multiply line 12 by line 17. Enter here and on line 1 of the Credit Limit Worksheet (see instructions) ▶	18	64.
19	Nonrefundable education credits. Enter the amount from line 7 of the Credit Limit Worksheet (see instructions) here and on Form 1040, line 49, or Form 1040A, line 31	19	1,452.

For Paperwork Reduction Act Notice, see your tax return instructions.

Name(s) shown on return
KARL R KENT & KARA B BRYANT

Your social security number
211-02-0752



Complete Part III for each student for whom you are claiming either the American opportunity credit or lifetime learning credit. Use additional copies of Page 2 as needed for each student.

Part III Student and Educational Institution Information

See instructions.

20 Student name (as shown on page 1 of your tax return) KARA BRYANT	21 Student social security no. (as shown on page 1 of your tax return) 212-02-0752
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22 Educational institution information (see instructions)	
a. Name of first educational institution BOONTON COLLEGE	b. Name of second educational institution (if any)
(1) Address, Number and street (or P.O. box). City, town or post office, state, and ZIP code. If a foreign address, see instructions. 123 MAIN BOONTON NJ 07005-	(1) Address, Number and street (or P.O. box). City, town or post office, state, and ZIP code. If a foreign address, see instructions.
(2) Did the student receive Form 1098-T from this institution for 2013? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	(2) Did the student receive Form 1098-T from this institution for 2013? <input type="checkbox"/> Yes <input type="checkbox"/> No
(3) Did the student receive Form 1098-T from this institution for 2012 with Box 2 filed in and Box 7 checked? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	(3) Did the student receive Form 1098-T from this institution for 2012 with Box 2 filed in and Box 7 checked? <input type="checkbox"/> Yes <input type="checkbox"/> No
If you checked "No" in both (2) and (3), skip (4). (4) If you checked "Yes" in (2) or (3), enter the institution's federal identification number (from Form 1098-T).	If you checked "No" in both (2) and (3), skip (4). (4) If you checked "Yes" in (2) or (3), enter the institution's federal identification number (from Form 1098-T).

23 Has the Hope Scholarship Credit or American opportunity credit been claimed for this student for any 4 tax years before 2013?	<input type="checkbox"/> Yes - Stop! Go to line 31 for this student.	<input checked="" type="checkbox"/> No - Go to line 24.
24 Was the student enrolled at least half-time for at least one academic period that began in 2013 at an eligible educational institution in a program leading towards a postsecondary degree, certificate, or other recognized postsecondary educational credential? (see instructions)	<input type="checkbox"/> Yes - Go to line 25.	<input checked="" type="checkbox"/> No - Stop! Go to line 31 for this student.
25 Did the student complete the first 4 years of post-secondary education before 2013?	<input type="checkbox"/> Yes - Stop! Go to line 31 for this student.	<input type="checkbox"/> No - Go to line 26.
26 Was the student convicted, before the end of 2013, of a felony for possession or distribution of a controlled substance?	<input type="checkbox"/> Yes - Stop! Go to line 31 for this student.	<input type="checkbox"/> No - See <i>Tip</i> below and complete either lines 27-30 or line 31 for this student.

TIP When you figure your taxes, you may want to compare the American opportunity credit and lifetime learning credits, and choose the credit for each student that gives you the lower tax liability. You **cannot** take the American opportunity credit and the lifetime learning credit for the **same student** in the same year. If you complete lines 27 through 30 for this student, do not complete line 31.

American Opportunity Credit

27 Adjusted qualified education expenses (see instructions). Do not enter more than \$4,000	27	
28 Subtract \$2,000 from line 27. If zero or less enter -0-	28	
29 Multiply line 28 by 25% (.25)	29	
30 If line 28 is zero, enter the amount from line 27. Otherwise, add \$2,000 to the amount on line 29 and enter the result. Skip line 31. Include the total of all amounts from all Parts III, line 30 on Part I, line 1	30	

Lifetime Learning Credit

31 Adjusted qualified education expenses (see instructions). Include the total of all amounts from all Parts III, line 31, on Part II, line 10	31	318.
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Name(s) shown on return
KARL R KENT & KARA B BRYANT

Your social security number
211-02-0752



Complete Part III for each student for whom you are claiming either the American opportunity credit or lifetime learning credit. Use additional copies of Page 2 as needed for each student.

Part III Student and Educational Institution Information

See instructions.

20 Student name (as shown on page 1 of your tax return) KENDRA KENT	21 Student social security no. (as shown on page 1 of your tax return) 213-02-0752
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22 Educational institution information (see instructions)	
a. Name of first educational institution NORTHER KENTUCKY UNIVERSITY	b. Name of second educational institution (if any)
(1) Address, Number and street (or P.O. box). City, town or post office, state, and ZIP code. If a foreign address, see instructions. NUNN DRIVE FOUNDERS HALL 500 HIGHLAND HEIGHTS KY 41076-	(1) Address, Number and street (or P.O. box). City, town or post office, state, and ZIP code. If a foreign address, see instructions.
(2) Did the student receive Form 1098-T from this institution for 2013? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	(2) Did the student receive Form 1098-T from this institution for 2013? <input type="checkbox"/> Yes <input type="checkbox"/> No
(3) Did the student receive Form 1098-T from this institution for 2012 with Box 2 filed in and Box 7 checked? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	(3) Did the student receive Form 1098-T from this institution for 2012 with Box 2 filed in and Box 7 checked? <input type="checkbox"/> Yes <input type="checkbox"/> No
If you checked "No" in both (2) and (3), skip (4). (4) If you checked "Yes" in (2) or (3), enter the institution's federal identification number (from Form 1098-T). 26-7990752	If you checked "No" in both (2) and (3), skip (4). (4) If you checked "Yes" in (2) or (3), enter the institution's federal identification number (from Form 1098-T).

23 Has the Hope Scholarship Credit or American opportunity credit been claimed for this student for any 4 tax years before 2013?	<input type="checkbox"/> Yes - Stop! Go to line 31 for this student.	<input checked="" type="checkbox"/> No - Go to line 24.
24 Was the student enrolled at least half-time for at least one academic period that began in 2013 at an eligible educational institution in a program leading towards a postsecondary degree, certificate, or other recognized postsecondary educational credential? (see instructions)	<input checked="" type="checkbox"/> Yes - Go to line 25.	<input type="checkbox"/> No - Stop! Go to line 31 for this student.
25 Did the student complete the first 4 years of post-secondary education before 2013?	<input type="checkbox"/> Yes - Stop! Go to line 31 for this student.	<input checked="" type="checkbox"/> No - Go to line 26.
26 Was the student convicted, before the end of 2013, of a felony for possession or distribution of a controlled substance?	<input type="checkbox"/> Yes - Stop! Go to line 31 for this student.	<input checked="" type="checkbox"/> No - See <i>Tip</i> below and complete either lines 27-30 or line 31 for this student.

TIP When you figure your taxes, you may want to compare the American opportunity credit and lifetime learning credits, and choose the credit for each student that gives you the lower tax liability. You **cannot** take the American opportunity credit and the lifetime learning credit for the **same student** in the same year. If you complete lines 27 through 30 for this student, do not complete line 31.

American Opportunity Credit

27 Adjusted qualified education expenses (see instructions). Do not enter more than \$4,000	27	3,250.
28 Subtract \$2,000 from line 27. If zero or less enter -0-	28	1,250.
29 Multiply line 28 by 25% (.25)	29	313.
30 If line 28 is zero, enter the amount from line 27. Otherwise, add \$2,000 to the amount on line 29 and enter the result. Skip line 31. Include the total of all amounts from all Parts III, line 30 on Part I, line 1	30	2,313.

Lifetime Learning Credit

31 Adjusted qualified education expenses (see instructions). Include the total of all amounts from all Parts III, line 31, on Part II, line 10	31	
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Name(s) shown on return. (Name and SSN or taxpayer identification no. not required if shown on other side.)

Social security number or taxpayer identification number

KARL R KENT & KARA B BRYANT

211-02-0752

Most brokers issue their own substitute statement instead of using Form 1099-B. They also may provide basis information (usually your cost) to you on the statement even if it is not reported to the IRS. Before you check Box D, E, or F below, determine whether you received any statement(s) and, if so, the transactions for which basis was reported to the IRS. Brokers are required to report basis to the IRS for most stock you bought in 2011 or later.

Part II

Long-Term. Transactions involving capital assets you held one year or less are long term. For short-term transactions, see page 1.

Note: You may aggregate all long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the total directly on Schedule D, line 8a; you are not required to report these transactions on Form 8949 (see instructions).

You must check Box D, E, or F below. Check only one box. If more than one box applies for your long-term transactions, complete a separate Form 8949, page 1, for each applicable box. If you have more long-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

- (D) Long-term transactions reported on Form(s) 1099-B showing basis **was** reported to the IRS (see **Note** above)
- (E) Long-term transactions reported on Form(s) 1099-B showing basis **was not** reported to the IRS
- (F) Long-term transactions not reported to you on Form 1099-B

1	(a) Description of property (Example: 100 sh. XYZ Co.)	(b) Date acquired (Mo., day, yr.)	(c) Date sold or disposed (Mo., day, yr.)	(d) Proceeds (sales price) (see instructions)	(e) Cost or other basis See the Note below and see <i>Column (e)</i> in the separate instructions	Adjustment, if any, to gain or loss. If you enter an amount in column (g), enter a code in column (f). See the separate instructions.		(h) Gain or (loss). Subtract column (e) from column (d) and combine the result with column (g)
						(f) Code(s) from instr.	(g) Amount of adjustment	
	65 RIDER CORP	IN/HE/RIT	12/30/2013	5663.	7222.			-1559.
2 Totals. Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts). Enter each total here and include on your Schedule D, line 8b (if Box D above is checked), line 9 (if Box E above is checked), or line 10 (if Box F above is checked) ▶								
				5663.	7222.			-1559.

Note. If you checked Box D above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See *Column (g)* in the separate instructions for how to figure the amount of the adjustment.

US Schedule A

Itemized Deduction Detail Worksheet

2013

Name: **KARL R KENT & KARA B BRYANT**

SSN: **211-02-0752**

Medical Expenses		Medical miles: 1236	Deduction: 297.
Insurance premiums paid (not pre-tax)		Medicare from 1040 worksheet	1,985.
Taxpayer	1,200.	Remainder from worksheets	
Spouse	1,200.	Taxpayer	
Qualified long term care contracts		Spouse	
Taxpayer		Self-employed health insurance	
Spouse		Taxpayer	
Other medical expenses		Spouse	
DOCTORS	1,653.		
HOSPITALS	3,200.		
DRUGS	965.		
GLASSES	210.	Amount from additional worksheets	
		Total	9,510.

Cash Contributions		Other Charitable miles:	X .14 =
50% Limit Organizations			
CHURCH	1,650.		
MISC	225.		
MILLSAP ELEMENTARY	250.		
		From Schedules K-1	
		Amount from additional worksheets	
		Total	2,125.

30% Limit Organizations		Charitable miles:	X .14 =
		Schedules K-1	
		Amount from additional worksheets	
		Total	

Other Than Cash Contributions		50% Limit Organizations	
SALVATION ARMY	350.	From Forms 8283	
		Amount from additional worksheets	
From Schedules K-1		Total	350.

30% Limit Capital gain property donated to 50% limit organizations.			
		From Forms 8283	
From Schedules K-1		Total	

30% Limit Not capital gain property donated to 30% limit organizations.			
		From Forms 8283	
From Schedules K-1		Total	

20% Limit Organization Capital gain property donated to 30% limit organizations.			
		From Forms 8283	
From Schedules K-1		Total	

	From years 2006 through 2012				To 2014 tax year			
	Cash and other property		Capital gain property		Cash and other property		Capital gain property	
	50%	30%	30%	20%	50%	30%	30%	20%
2008								
2009								
2010								
2011								
2012								
2013								

Contributions allowed this year			
50% of adjusted gross income		36,796.	
This year's 50% organization cash contributions allowed			2,475.
30% of adjusted gross income		22,078.	
This year's capital gain contributions to 50% organizations limited to 30%			
50% cash carryover allowed			
50% capital gain carryover limited to 30%			
This year's 30% organization cash and other property contributions allowed			
30% organizations cash and other property carryover			
20% of adjusted gross income		14,718.	
This year's capital gain contributions to 30% organizations limited to 20%			
30% capital gain carryover limited to 20% AGI			
Total contributions allowed this year			2,475.

US Schedule D

Capital Gain or Loss Transactions Worksheet

2013

* Check if 28% rate gain or (loss)

(a) Description of property	1 0 9 9	T S J	*	(b) Date acquired	(c) Date sold	(d) Sales price	(e) Cost or other basis	(f) Code	(g) Adjustments to Gain or Loss	(h) Gain or loss	S / L
100 PURDUE	A	T		07/01/2002	03/10/2013	8,859.	10,123.	E	(35.)	(1,299.)	L
100 RUST CORP	A	T		11/01/1998	09/23/2013	1,700.	3,200.			(1,500.)	L
150 RIO MOTORS	A	T		07/15/2008	06/01/2013	10,675.	9,543.			1,132.	L
65 RIDER CORP	B	T		IN/HE/RIT	12/30/2013	5,663.	7,222.			(1,559.)	L
						26,897.	30,088.		(35.)	(3,226.)	

US Estimated Tax Payments Made for the Current Tax Year 2013

Name: KARL R KENT & KARA B BRYANT

SSN: 211-02-0752

Federal Estimated Tax Payments

See note below	Date of payment	Amount of payment	Towards 04/15/2013 payment	Towards 06/15/2013 payment	Towards 09/15/2013 payment	Towards 01/15/2014 payment
From last year	04/15/2013	200.				
D 04/15 1	04/15/2013	100.				
U 06/15 2	06/15/2013					
E 09/15 3	09/15/2013	100.				
01/15 4	01/15/2014					
* Pay date						
Totals		400.				

* Fill in the pay date on Form 2210, page 1.

State Estimated Tax Payments

**The day listed in the date of payment section is the due date for most state estimated tax payments. If your state has different due dates, disregard the date suggested. If payment 1 was paid on or before the date due for payment 1, enter it in payment 1, etc.

* Check the * column if payment 4 was paid before 01/01/2013.

Taxpayer, Joint, or Combined State Return

** Date of Payment

State	Credit from last year	04/15/2013 Amount 1	06/15/2013 Amount 2	09/15/2013 Amount 3	01/15/2014 Amount 4	*	Total
NJ	100.	50.		40.			190.

NJ	State and/or local balance due from previous years' returns paid in 2013. Include amounts paid with a 2012 extension paid in 2013						
	State and/or local balance due from previous years' returns paid in 2013. Include amounts paid with a 2012 extension paid in 2013						
NJ	Last state estimate payment for 2012 paid in 2013 (due January 15, 2013)						
	Last state estimate payment for 2012 paid in 2013 (due January 15, 2013)						

Spouse Filing Married Separate State Tax Return or Second Full Year Resident State

** Date of Payment

State	Credit from last year	04/15/2013 Amount 1	06/15/2013 Amount 2	09/15/2013 Amount 3	01/15/2014 Amount 4	*	Total

US 1040

IRA Rollover Explanation

2013

ROLLOVER OF 11,755 FROM YALE SECURITY TO MERRILL LYNCH

Name: KARL R KENT & KARA B BRYANT

SSN: 211-02-0752

Traditional IRA

Were you covered by a retirement plan? Yes No
 If married filing jointly, was your spouse covered by a retirement plan? Yes No

				Taxpayer	Spouse
1	Maximum modified AGI for deductible contributions				
	Filing status	Covered by a retirement plan?	Yes	No	
	1 or 4		\$69,000	No limit	
	2	Spouse covered by a plan	\$115,000		
	2	Spouse not covered by a plan		\$188,000	
	2	Neither spouse covered by a plan		No limit	
	3	Lived with spouse at anytime in 2013	\$10,000	No limit	
	3	Did not live with spouse in 2013	\$69,000	No limit	
	5		\$115,000	No limit	
				115,000.	115,000.
2	Modified AGI computation				
	Social security computation without IRA		69,068.		
	Taxable social security for this computation		11,630.		
	Modified income including taxable social security		84,413.		
3	Adjustments to income without IRA contribution		4,053.		
4	Modified AGI. Subtract line 3 from line 2			80,360.	80,360.
5	Line 1 minus line 4. If -0- or less, enter -0- on line 6			34,640.	34,640.
6	Line 5 times the applicable percentage from the instructions, rounded up to nearest \$10. Do not enter less than \$200, or more than \$5,500 (\$6,500 if age 50 or older)			6,500.	6,500.
7	Total wages and other earned income, minus any deductions on Form 1040, lines 27 and 28, or Form 1040NR, line 27. Do not reduce wages by any losses from self-employment		44,153.		
8	Maximum contribution based on earnings		13,000.		
9	Maximum allowable IRA contribution				6,500.
10	Enter IRA contributions for 2013 Do NOT enter more than \$5,500 (\$6,500 if age 50 or older) in either column				6,500.
11	Deductible IRA contributions. Smaller of lines 6, 7, 9, or 10				6,500.
12	Nondeductible IRA contributions				
13	Excess traditional IRA contributions				

Roth IRA

				Taxpayer	Spouse
14	Maximum modified AGI for allowable contributions				
	Filing status	Modified AGI			
	1 or 4	\$127,000			
	2 or 5	\$188,000			
	3	Lived with spouse at anytime in 2013	\$10,000		
	3	Did not live with spouse in 2013	\$127,000	188,000.	188,000.
15	Modified AGI. AGI + Forms 2555, 8815, and 4563 + Puerto Rico income + adoption expense exclusion minus IRA to Roth IRA rollovers			80,360.	80,360.
16	Line 14 minus line 15. If -0-, enter -0- on line 17			107,640.	107,640.
17	Maximum contribution allowed based on AGI			6,500.	
18	Maximum contribution based on earnings		6,500.		
19	Maximum allowable Roth IRA contribution			6,500.	
20	Enter Roth IRA contributions for 2013 Do NOT enter more than \$5,500 (\$6,500 if age 50 or older) in either column				
21	Excess Roth contributions				

US Schedule A

Sales Tax Worksheet

2013

Name: **KARL R KENT & KARA B BRYANT**

SSN: **211-02-0752**

1	Federal AGI.....		73,592.	
2	Nontaxable income listed on tax return			
a	Nontaxable interest	338.		
b	Social security	2,052.		
c	Combat pay			
d	Income on Forms 4970 and 4972			
e	Nontaxable part of IRA, pension, or annuity distributions, not including rollovers	335.	2,725.	
3	Other nontaxable income			
a			
b			
c			
d			
e			
4	Income for sales tax chart		76,317.	
1	Enter the taxpayer's state of residency for 2013			NJ
	If the taxpayer was a part-year resident, enter the dates resided in this state _____ to _____			
	State sales tax from the applicable table			946.
2	Did you live Alaska, Arizona, Arkansas, California (Los Angeles County only), Colorado, Georgia, Illinois, Louisiana, Missouri, New York State, North Carolina, South Carolina, Tennessee, Utah or Virginia in 2013? <input checked="" type="checkbox"/> No. Line 2 should be -0-. <input type="checkbox"/> Yes. Enter the letter (A - D) for the optional local sales tax table you want to use			
	Local sales tax from the applicable table			
3	Did your locality impose a local general sales tax in 2013? Residents of California and Nevada, see the Schedule A instructions. <input checked="" type="checkbox"/> No. Go to line 7. <input type="checkbox"/> Yes. Enter the local general sales tax rate. If the rate is 2.5%, enter 2.5			
4	Did you enter -0- on line 2 above? <input type="checkbox"/> No. Skip to line 6. <input type="checkbox"/> Yes. Enter the state general sales tax rate from the table headed by the state in the Schedule A instructions. Enter 6.5% as 6.5			
5	Divide line 3 by line 4			
6	Did you enter -0- on line 2 above? <input type="checkbox"/> No. Multiply line 2 by line 3. <input type="checkbox"/> Yes. Multiply line 1 by line 5			
7	Total of lines 1 and 6 - prorated for part-year residents			946.
8	General sales tax paid on specified items. Motor vehicles - If the tax rate is higher than the general sales tax rate, only include the amount of tax at the general sales tax rate. Aircraft, boats, homes, including mobile and prefabricated, or home building materials - Only deductible if the sales tax charged is at the federal sales tax rate			
9	Total sales tax using the sales tax chart			946.
10	Sales tax using actual receipts			
11	Sales tax deduction for Schedule A, line 5			946.

**SCHEDULE A
(Form 1040)**

Department of the Treasury
Internal Revenue Service (99)

Itemized Deductions

▶ Information about Schedule A and its separate instructions is at www.irs.gov/form1040.
▶ Attach to Form 1040.

OMB No. 1545-0074

2013
Attachment
Sequence No. **07**

Name(s) shown on Form 1040

KARL R KENT & KARA B BRYANT

Your social security number

211-02-0752

Medical and Dental Expenses	Caution. Do not include expenses reimbursed or paid by others.				
	1 Medical and dental expenses (see instructions)	1	9,510.		
	2 Enter amount from Form 1040, line 38 <input type="text" value="2"/> <input type="text" value="73,592."/>				
	3 Multiply line 2 by 10% (.10). But if either you or your spouse was born before Jan. 2, 1949, multiply line 2 by 7.5% (.075) instead	3	5,519.		
4 Subtract line 3 from line 1. If line 3 is more than line 1, enter -0-			4	3,991.	
Taxes You Paid	5 State and local (check only one box):				
	a <input checked="" type="checkbox"/> Income taxes, or	5	2,864.		
	b <input type="checkbox"/> General sales taxes				
	6 Real estate taxes (see instructions)	6	2,135.		
	7 Personal property taxes	7			
	8 Other taxes. List type and amount ▶ _____	8			
	9 Add lines 5 through 8			9	4,999.
	Interest You Paid	10 Home mortgage interest and points reported to you on Form 1098	10	3,164.	
		11 Home mortgage interest not reported to you on Form 1098. If paid to the person from whom you bought the home, see inst. and show that person's name, identifying no., and address ▶ _____	11		
12 Points not reported to you on Form 1098. See instructions for special rules		12			
13 Mortgage insurance premiums (see instructions)		13			
14 Investment interest. Attach Form 4952 if required. (See instructions.)		14			
15 Add lines 10 through 14				15	3,164.
Gifts to Charity	16 Gifts by cash or check. If you made any gift of \$250 or more, see instructions	16	2,125.		
	17 Other than by cash or check. If any gift of \$250 or more, see instructions. You must attach Form 8283 if over \$500	17	350.		
	18 Carryover from prior year	18			
	19 Add lines 16 through 18			19	2,475.
Casualty and Theft Losses	20 Casualty or theft loss(es). Attach Form 4684. (See instructions.)			20	
Job Expenses and Certain Miscellaneous Deductions	21 Unreimbursed employee expenses - job travel, union dues, job education, etc. Attach Form 2106 or 2106-EZ if required. (See instructions.) ▶ _____	21			
	22 Tax preparation fees	22			
	23 Other expenses - investment, safe deposit box, etc. List type and amount ▶ _____	23			
	24 Add lines 21 through 23	24			
	25 Enter amount from Form 1040, line 38 <input type="text" value="25"/> <input type="text" value=""/>	25			
	26 Multiply line 25 by 2% (.02)	26			
	27 Subtract line 26 from line 24. If line 26 is more than line 24, enter -0-			27	
Other Miscellaneous Deductions	28 Other - from list in the inst. List type and amount ▶ <u>GAMBLING LOSSES</u> <u>1,000.</u>			28	1,000.
Total Itemized Deductions	29 Is Form 1040, line 38, over \$150,000? <input checked="" type="checkbox"/> No. Your deduction is not limited. Add the amounts in the far right column for lines 4 through 28. Also, enter this amount on Form 1040, line 40. <input type="checkbox"/> Yes. Your deduction may be limited. See the Itemized Deductions Worksheet in the instructions to figure the amount to enter.			29	15,629.
	30 If you elect to itemize deductions even though they are less than your standard deduction, check here <input type="checkbox"/>				

For Paperwork Reduction Act Notice, see Form 1040 instructions.

Schedule A (Form 1040) 2013

SCHEDULE B
(Form 1040A or 1040)

Department of the Treasury
Internal Revenue Service (99)

Interest and Ordinary Dividends

▶ Attach to Form 1040A or 1040.

OMB No. 1545-0074

2013

Attachment
Sequence No. **08**

▶ Information about Sch. B (Form 1040A or 1040) & its instr. is at www.irs.gov/form1040.

Name(s) shown on return **KARL R KENT & KARA B BRYANT** Your social security number **211-02-0752**

Part I			Amount
Interest (See instructions on back and the instructions for Form 1040A, or Form 1040, line 8a.) Note. If you received a Form 1099-INT, Form 1099-OID, or substitute statement from a brokerage firm, list the firm's name as the payer and enter the total interest shown on that form.	1 List name of payer. If any interest is from a seller-financed mortgage and the buyer used the property as a personal residence, see instructions on back and list this interest first. Also, show that buyer's social security number and address <u>CHARLES CAMPBELL</u> <u>219020752</u> <u>1523 NORTH CURRY RD</u> <u>DENVILLE</u> <u>NJ 07834-</u> <u>KENDALL FCU</u> <u>ZYX INVESTMENTS</u> <u>ZYX INVESTMENTS</u>	1	2,782.
			456.
			123.
			2,455.
	2 Add the amounts on line 1	2	5,816.
	3 Excludable interest on series EE and I U.S. savings bonds issued after 1989. Attach Form 8815	3	
	4 Subtract line 3 from line 2. Enter the result here & on Form 1040A, or Form 1040, line 8a	4	5,816.
	Note. If line 4 is over \$1,500, you must complete Part III.		Amount

Part II			
Ordinary Dividends (See instructions on back and the instructions for Form 1040A, or Form 1040, line 9a.) Note. If you received a Form 1099-DIV or substitute statement from a brokerage firm, list the firm's name as the payer and enter the ordinary dividends shown on that form.	5 List name of payer ▶ <u>ZYX INVESTMENTS</u>	5	232.
	6 Add the amounts on line 5. Enter the total here and on Form 1040A, or Form 1040, line 9a	6	232.
	Note. If line 6 is over \$1,500, you must complete Part III.		

	Yes	No
Part III		
Foreign Accounts and Trusts (See instructions on back.)		
You must complete this part if you (a) had over \$1,500 of taxable interest or ordinary dividends; (b) had a foreign account; or (c) received a distribution from, or were a grantor of, or a transferor to, a foreign trust.		
7a At any time during 2013, did you have a financial interest in or signature authority over a financial account (such as a bank account, securities account, or brokerage account) located in a foreign country? See instr. If "Yes," are you required to file FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR), formerly TD F 90-22.1 to report that financial interest or signature authority? See FinCEN Form 114 and its instructions for filing requirements and exceptions to those requirements.	<input type="checkbox"/>	<input checked="" type="checkbox"/>
b If you are required to file FinCEN Form 114, enter the name of the foreign country where the financial account is located ▶ _____	<input type="checkbox"/>	<input type="checkbox"/>
8 During 2013, did you receive a distribution from, or were you the grantor of, or transferor to, a foreign trust? If "Yes," you may have to file Form 3520. See instructions on back	<input type="checkbox"/>	<input checked="" type="checkbox"/>

**Schedule C
(Form 1040)**

Department of the Treasury
Internal Revenue Service (99)

Profit or Loss From Business
(Sole Proprietorship)

▶ For information on Schedule C and its instructions, go to www.irs.gov/schedulec.
▶ Attach to Form 1040, 1040NR, or 1041; partnerships generally must file Form 1065.

OMB No. 1545-0074

2013

Attachment
Sequence No. **09**

Name of proprietor KARA B BRYANT		Social security number (SSN) 212-02-0752
A Principal business or profession, including product or service (see instructions) MEDICAL TRANSCRIPTIO		B Enter code from instructions ▶ 561410
C Business name. If no separate business name, leave blank.		D Employer ID no. (EIN), (see instr.)
E Business address (including suite or room no.) ▶ _____ City, town or post office, state, and ZIP code		
F Accounting method: (1) <input checked="" type="checkbox"/> Cash (2) <input type="checkbox"/> Accrual (3) <input type="checkbox"/> Other (specify) ▶ _____		
G Did you "materially participate" in the operation of this business during 2013? If "No," see instructions for limit on losses.		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
H If you started or acquired this business during 2013, check here		<input type="checkbox"/> Yes <input type="checkbox"/> No
I Did you make any payments in 2013 that would require you to file Form(s) 1099? (see instructions).		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
J If "Yes," did you or will you file required Forms 1099?		<input type="checkbox"/> Yes <input type="checkbox"/> No

Part I Income

1 Gross receipts or sales. See instructions for line 1 and check the box if this income was reported to you on Form W-2 and the "Statutory employee" box on that form was checked	▶ <input type="checkbox"/>	1	2,719.
2 Returns and allowances (see instructions)		2	
3 Subtract line 2 from line 1		3	2,719.
4 Cost of goods sold (from line 42)		4	
5 Gross profit. Subtract line 4 from line 3		5	2,719.
6 Other income, including federal and state gasoline or fuel tax credit or refund (see instructions).		6	
7 Gross profit. Add lines 5 and 6		7	2,719.

Part II Expenses Enter expenses for business use of your home only on line 30.

8 Advertising	8		18	Office expense (see instructions)	18	
9 Car and truck expenses (see instructions)	9	237.	19	Pension and profit-sharing plans	19	
10 Commissions and fees	10		20	Rent or lease (see instructions):	20	
11 Contract labor (see instructions)	11		20a	a Vehicles, machinery, and equipment	20a	
12 Depletion	12		20b	b Other business property	20b	
13 Depreciation and section 179 expense deduction (not included in Part III) (see instructions)	13		21	Repairs and maintenance	21	
14 Employee benefit programs (other than on line 19)	14		22	Supplies (not included in Part III)	22	
15 Insurance (other than health)	15		23	Taxes and licenses	23	
16 Interest:			24	Travel, meals, and entertainment:	24	
a Mortgage (paid to banks, etc.)	16a		24a	a Travel	24a	
b Other	16b		24b	b Deductible meals and entertainment (see instructions)	24b	
17 Legal and professional services	17		25	Utilities	25	
			26	Wages (less employment credits)	26	
			27a	Other expenses (from line 48)	27a	113.
			27b	b Reserved for future use	27b	
28 Total expenses before expenses for business use of home. Add lines 8 through 27a			28		28	350.
29 Tentative profit or (loss). Subtract line 28 from line 7			29		29	2,369.
30 Expenses for business use of your home. Do not report these expenses elsewhere. Attach Form 8829 unless using the simplified method (see instructions). Simplified method filers only: enter the total square footage of: (a) your home: _____ and (b) the part of your home used for business: _____. Use the Simplified Method Worksheet in the instructions to figure the amount to enter on line 30			30		30	
31 Net profit or (loss). Subtract line 30 from line 29. • If a profit, enter on both Form 1040, line 12 (or Form 1040NR, line 13) and on Schedule SE, line 2 . (If you checked the box on line 1, see instructions). Estates and trusts, enter on Form 1041, line 3 . • If a loss, you must go to line 32.			31		31	2,369.
32 If you have a loss, check the box that describes your investment in this activity (see instructions). • If you checked 32a, enter the loss on both Form 1040, line 12 (or Form 1040NR, line 13) and on Schedule SE, line 2 . (If you checked the box on line 1, see the instructions). Estates and trusts, enter on Form 1041, line 3 . • If you checked 32b, you must attach Form 6198 . Your loss may be limited.			32a	<input type="checkbox"/> All investment is at risk.	32b	<input type="checkbox"/> Some investment is not at risk.

For Paperwork Reduction Act Notice, see your tax return instructions.

Schedule C (Form 1040) 2013

Part III Cost of Goods Sold (see instructions)

33 Method(s) used to value closing inventory: a Cost b Lower of cost or market c Other (attach explanation)

34 Was there any change in determining quantities, costs, or valuations between opening and closing inventory? Yes No
If "Yes," attach explanation

35 Inventory at beginning of year. If different from last year's closing inventory, attach explanation	35	
36 Purchases less cost of items withdrawn for personal use	36	
37 Cost of labor. Do not include any amounts paid to yourself	37	
38 Materials and supplies	38	
39 Other costs	39	
40 Add lines 35 through 39	40	
41 Inventory at end of year	41	
42 Cost of goods sold. Subtract line 41 from line 40. Enter the result here and on line 4	42	

Part IV Information on Your Vehicle. Complete this part **only** if you are claiming car or truck expenses on line 9 and are not required to file Form 4562 for this business. See the instructions for line 13 to find out if you must file Form 4562.

43 When did you place your vehicle in service for business purposes? (month, day, year) ▶ 01/02/2007

44 Of the total number of miles you drove your vehicle during 2013, enter the number of miles you used your vehicle for:
a Business 420 b ^{Commuting} (see instr.) c Other 10000

45 Was your vehicle available for personal use during off-duty hours? Yes No

46 Do you (or your spouse) have another vehicle available for personal use? Yes No

47a Do you have evidence to support your deduction? Yes No
b If "Yes," is the evidence written? Yes No

Part V Other Expenses. List below business expenses not included on lines 8-26 or line 30.

PAPER	45.
PRINTER CARTRIDGE	68.
48 Total other expenses. Enter here and on line 27a	48 <u>113.</u>

**SCHEDULE D
(Form 1040)**

Capital Gains and Losses

OMB No. 1545-0074

▶ Attach to Form 1040 or Form 1040NR.

2013

Department of the Treasury
Internal Revenue Service (99)

▶ Information about Schedule D and its separate instructions is at www.irs.gov/scheduled.
▶ Use Form 8949 to list your transactions for lines 1b, 2, 3, 8b, 9, and 10.

Attachment
Sequence No. **12**

Name(s) shown on return

KARL R KENT & KARA B BRYANT

Your social security number

211-02-0752

Part I Short-Term Capital Gains and Losses - Assets Held One Year or Less

See instructions for how to figure the amounts to enter on the lines below.

This form may be easier to complete if you round off cents to whole dollars.

	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to gain or loss from Form(s) 8949, Part I, line 2, column (g)	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
1a Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b				
1b Totals for all transactions reported on Form(s) 8949 with Box A checked				
2 Totals for all transactions reported on Form(s) 8949 with Box B checked				
3 Totals for all transactions reported on Form(s) 8949 with Box C checked				
4 Short-term gain from Form 6252 and short-term gain or (loss) from Forms 4684, 6781, and 8824				4
5 Net short-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1				5
6 Short-term capital loss carryover. Enter the amount, if any, from line 8 of your Capital Loss Carryover Worksheet in the instructions				6 ()
7 Net short-term capital gain or (loss). Combine lines 1a through 6 in column (h). If you have any long-term capital gains or losses, go to Part II below. Otherwise, go to Part III on the back				7

Part II Long-Term Capital Gains and Losses - Assets Held More Than One Year

See instructions for how to figure the amounts to enter on the lines below.

This form may be easier to complete if you round off cents to whole dollars.

	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to gain or loss from Form(s) 8949, Part II, line 2, column (g)	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
8a Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b				
8b Totals for all transactions reported on Form(s) 8949 with Box D checked	21234 .	22866 .	-35 .	-1667 .
9 Totals for all transactions reported on Form(s) 8949 with Box E checked	5663 .	7222 .		-1559 .
10 Totals for all transactions reported on Form(s) 8949 with Box F checked				
11 Gain from Form 4797, Part I; long-term gain from Forms 2439 and 6252; and long-term gain or (loss) from Forms 4684, 6781, and 8824				11
12 Net long-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1				12
13 Capital gain distributions. See the instructions				13 69 .
14 Long-term capital loss carryover. Enter the amount, if any, from line 13 of your Capital Loss Carryover Worksheet in the instructions				14 (253 .)
15 Net long-term capital gain or (loss). Combine lines 8a through 14 in column (h). Then go to Part III on the back				15 -3410 .

For Paperwork Reduction Act Notice, see your tax return instructions.

Schedule D (Form 1040) 2013

Part III Summary

<p>16 Combine lines 7 and 15 and enter the result</p>	<p>16</p>	<p>(3 , 410 .)</p>
<ul style="list-style-type: none"> • If line 16 is a gain, enter the amount from line 16 on Form 1040, line 13, or Form 1040NR, line 14. Then go to line 17 below. • If line 16 is a loss, skip lines 17 through 20 below. Then go to line 21. Also be sure to complete line 22. • If line 16 is zero, skip lines 17 through 21 below and enter -0- on Form 1040, line 13, or Form 1040NR, line 14. Then go to line 22. 		
<p>17 Are lines 15 and 16 both gains? <input type="checkbox"/> Yes. Go to line 18. <input type="checkbox"/> No. Skip lines 18 through 21, and go to line 22.</p>		
<p>18 Enter the amount, if any, from line 7 of the 28% Rate Gain Worksheet in the instructions ▶</p>	<p>18</p>	
<p>19 Enter the amount, if any, from line 18 of the Unrecaptured Section 1250 Gain Worksheet in the instructions ▶</p>	<p>19</p>	
<p>20 Are lines 18 and 19 both zero or blank? <input type="checkbox"/> Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 44 (or in the instructions for Form 1040NR, line 42). Do not complete lines 21 and 22 below. <input type="checkbox"/> No. Complete the Schedule D Tax Worksheet in the instructions. Do not complete lines 21 and 22 below.</p>		
<p>21 If line 16 is a loss, enter here and on Form 1040, line 13, or Form 1040NR, line 14, the smaller of: <ul style="list-style-type: none"> • The loss on line 16 or <input type="text" value=""/> • (\$3,000), or if married filing separately, (\$1,500) <input type="text" value=""/> </p>	<p>21</p>	<p>(3 , 000 .)</p>
<p>Note. When figuring which amount is smaller, treat both amounts as positive numbers.</p>		
<p>22 Do you have qualified dividends on Form 1040, line 9b, or Form 1040NR, line 10b? <input checked="" type="checkbox"/> Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 44 (or in the instructions for Form 1040NR, line 42). <input type="checkbox"/> No. Complete the rest of Form 1040 or Form 1040NR.</p>		

Name: KARL R KENT & KARA B BRYANT

SSN: 211-02-0752

1	Taxable income from Form 1040, line 43, Form 1040NR, line 41, Form 1040A, line 27, or from the Foreign Earned Income Tax Worksheet			38,463.
2	Qualified dividends from Form 1040, line 9b, Form 1040A, line 9b, or Form 1040NR, line 10b	232.		
3	Line 4g of Form 4952			
4	Line 4e of Form 4952			
5	Subtract line 4 from line 3			
6	Subtract line 5 from line 2. If -0- or less, enter -0-		232.	
7	Smaller of line 15 or line 16 of Schedule D			
8	Smaller of line 3 or line 4			
9	Subtract line 8 from line 7. If -0- or less, enter -0-			
10	Add lines 6 and 9		232.	
11	Add lines 18 and 19 of Schedule D			
12	Smaller of line 9 or line 11			
13	Subtract line 12 from line 10. If -0- or less, -0-			232.
14	Subtract line 13 from line 1. If -0- or less, -0-			38,231.
15	Smaller of line 1 or \$72,500 if married filing jointly or qualifying widow(er); \$36,250, if single or married filing separately; \$48,600 if head of household	38,463.		
16	Smaller of line 1 or line 15		38,463.	
17	Smaller of line 14 or line 16		38,231.	
18	Subtract line 10 from line 1. If -0- or less, -0-	38,231.		
19	Larger of line 17 or line 18		38,231.	
20	Subtract line 17 from line 16. This line is taxed at 0%		232.	

If lines 1 and 16 are the same, skip lines 21 through 41 and go to line 42.
Otherwise, go to line 21.

21	Smaller of line 1 or line 13			
22	Amount from line 20			
23	Subtract line 22 from line 21			
24	\$400,000 if single; \$225,000 if married filing separately; \$450,000 if married filing jointly or qualifying widow(er); or \$425,000 if head of household			
25	Smaller of line 1 or line 24			
26	Add lines 19 and 20			
27	Subtract line 26 from line 25			
28	Smaller of line 23 or line 27			
29	Multiply line 28 by 15%			
30	Add lines 22 and 28			

If lines 1 and 30 are the same, skip lines 31 through 41 and go to line 42.
Otherwise, go to line 31.

31	Subtract line 30 from line 21			
32	Multiply line 31 by 20%			

If Schedule D, line 19, is zero, skip lines 33 through 38 and go to line 39.
Otherwise, go to line 33.

33	Smaller of line 9 above or Schedule D, line 19			
34	Add lines 10 and 19			
35	Amount from line 1			
36	Subtract line 35 from line 34. If -0- or less, -0-			
37	Subtract line 36 from line 33. If -0- or less, -0-			
38	Multiply line 37 by 25%			

If Schedule D, line 18, is zero, skip lines 39 through 41 and go to line 42.
Otherwise, go to line 39.

39	Add lines 19, 20, 28, 31 and 37			
40	Subtract line 39 from line 1			
41	Multiply line 40 by 28%			
42	Tax on line 19 amount			4,841.
43	Add lines 29, 32, 38, 41, and 42			4,841.
44	Tax on line 1 amount			4,879.
45	Tax on all taxable income. Smaller of lines 43 or 44			4,841.

Name: KARL R KENT & KARA B BRYANT

SSN: 211-02-0752

Capital Loss Carryovers from This Year to Next Year

1	Amount from Form 1040, line 41, or Form 1040NR, line 38	57,963.
2	Loss shown on Schedule D, line 21 as a positive amount	3,000.
3	Combine lines 1 and 2. If -0- or less, enter -0-	60,963.
4	Smaller line 2 or line 3	3,000.
5	Loss shown on Schedule D, line 7 as a positive amount	
6	Gain, if any, shown on Schedule D, line 15	
7	Add lines 4 and 6	3,000.
8	Short-term capital loss carryover. Subtract line 7 from line 5. If -0- or less, enter -0-	
9	Loss shown on Schedule D, line 15 as a positive amount	3,410.
10	Gain, if any, shown on Schedule D, line 7	
11	Subtract line 5 from line 4. If -0- or less, enter -0-	3,000.
12	Add lines 10 and 11	3,000.
13	Long-term capital loss carryover. Subtract line 12 from line 9. If -0- or less, enter -0-	410.

Sale of Your Home

1 Date main home was sold: _____ Acquisition date: _____

2 If Form 8828 is also needed for this sale, check here

3 If any part of the main home was ever rented out or used for business, see instructions.

If part of the sale is a sale of business property, report the business portion using a depreciation wkst, and report personal portion below and skip line 9.

4 Selling price of home _____

5 Selling expenses _____

6 Amount realized _____

7 Adjusted basis of home sold _____

8 **Gain on the sale.** If -0- or less, enter -0- _____

9 Depreciation claimed on property after 05/06/1997 _____

10 Subtract line 9 from line 8. If -0- or less, enter -0- _____

11 Aggregate number of days of nonqualified use after 12/31/2008. _____

12 Number of days the taxpayer owned the property _____

13 Divide the amount on line 11 by the amount on line 12 _____

14 Gain allocated to nonqualified use _____

15 **Gain eligible for exclusion** _____

16a Did you (and your spouse if filing a joint return) own and occupy the property as your main home for a total of a least 2 years of the 5 year period before the sale? Yes No

b If "No", did you sell the home due to a change in place of employment, health or other unforeseen circumstances? Yes No

c If you are an unmarried surviving spouse, the sale occurred no later than 2 years after the date of the other spouse's death, the ownership and use requirements for joint filers were met immediately before the date of such death, and there was no sale or exchange of a main home by either spouse which qualified for the exclusion during the 2-year period ending on the date of the other spouse's death, check here Yes

17 Maximum exclusion _____

18 Smaller of line 15 or line 17. If you are reporting the sale on the installment method, enter this amount on Form 6252, line 15 _____

19 **Taxable gain.**

a You must enter this amount on Schedule D or Form 6252. _____
This gain is to be considered: short-term long-term.

b Transferred to Form 4797, Part III _____

Information for Separate State Returns - Default is to the Taxpayer.

	Federal	Taxpayer	Spouse
1 Short term			
2 Short term loss based on joint return			
3 Long term	(3,410.)	(3,410.)	
4 Long term loss based on joint return	3,000.	3,000.	
5 Schedule D result (line 16 or line 21)	(3,000.)	(3,000.)	
6 Short term loss carryover			
7 Long term loss carryover	410.	410.	

**SCHEDULE E
(Form 1040)**

Department of the Treasury
Internal Revenue Service (99)

Supplemental Income and Loss

(From rental real estate, royalties, partnerships, S corporations, estates, trusts, REMICs, etc.)

▶ **Attach to Form 1040, 1040NR, or Form 1041.**

OMB No. 1545-0074

2013

Attachment
Sequence No. **13**

▶ **Information about Schedule E and its separate instructions is at www.irs.gov/form1040.**

Name(s) shown on return

KARL R KENT & KARA B BRYANT

Your social security no.

211-02-0752

Part I Income or Loss From Rental Real Estate and Royalties Note. If you are in the business of renting personal property, use **Schedule C or C-EZ** (see instructions). If you are an individual, report farm rental income or loss from **Form 4835** on page 2, line 40.

A Did you make any payments in 2013 that would require you to file Form(s) 1099? (see instructions) Yes No

B If "Yes," did you or will you file all required Forms 1099? Yes No

1a Physical address of each property (street, city, state, Zip code)

A 1001 YUKON DRIVE FAIRBANKS AK 99701-

B

C

1b	Type of Property (from list below)	2	For each rental real estate property listed above, report the number of fair rental and personal use days. Check the QJV box only if you meet the requirements to file as a qualified joint venture. See instructions.	Fair Rental Days		Personal Use Days		QJV	
				A	B	A	B	A	B
A	6								
B									
C									

Type of Property:

- 1 Single Family Residence
- 2 Multi-Family Residence
- 3 Vacation/Short-Term Rental
- 4 Commercial
- 5 Land
- 6 Royalties
- 7 Self-Rental
- 8 Other (describe)

Income:	Properties:	A	B	C
3 Rents received	3			
4 Royalties received	4	1,050.		
Expenses:				
5 Advertising	5			
6 Auto and travel (see instructions)	6			
7 Cleaning and maintenance	7			
8 Commissions	8			
9 Insurance	9			
10 Legal and other professional fees	10			
11 Management fees	11			
12 Mortgage interest paid to banks, etc.(see instructions)	12			
13 Other interest	13			
14 Repairs	14			
15 Supplies	15			
16 Taxes	16			
17 Utilities	17			
18 Depreciation expense or depletion	18			
19 Other (list) ▶	19			
20 Total expenses. Add lines 5 through 19	20			
21 Subtract line 20 from line 3 (rents) and/or 4 (royalties). If result is a (loss), see instructions to find out if you must file Form 6198	21	1,050.		
22 Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions)	22	()	()	()
23a Total of all amounts reported on line 3 for all rental properties	23a			
b Total of all amounts reported on line 4 for all royalty properties	23b		1,050.	
c Total of all amounts reported on line 12 for all properties	23c			
d Total of all amounts reported on line 18 for all properties	23d			
e Total of all amounts reported on line 20 for all properties	23e			
24 Income. Add positive amounts shown on line 21. Do not include any losses	24			1,050.
25 Losses. Add royalty losses from line 21 and rental real estate losses from line 22. Enter total losses here	25	()		()
26 Total rental real estate and royalty income or (loss). Combine lines 24 and 25. Enter the result here. If Parts II, III, IV, and line 40 on page 2 do not apply to you, also enter this amount on Form 1040, line 17, or Form 1040NR, line 18. Otherwise, include this amount in the total on line 41 on page 2	26			1,050.

For Paperwork Reduction Act Notice, see your tax return instructions.

Schedule E (Form 1040) 2013

Name of person with self-employment income (as shown on Form 1040)

KARA B BRYANT

Social security number of person

with self-employment income ▶ 212-02-0752

Section B - Long Schedule SE

Part I Self-Employment Tax

Note. If your only income subject to self-employment tax is church employee income, see instructions. Also see instructions for the definition of church employee income.

A If you are a minister, member of a religious order, or Christian Science practitioner and you filed Form 4361, but you had \$400 or more of other net earnings from self-employment, check here and continue with Part I

1a Net farm profit or (loss) from Schedule F, line 34, and farm partnerships, Schedule K-1 (Form 1065), box 14, code A. Note. Skip lines 1a and 1b if you use the farm optional method (see instructions)	1a	
b If you received social security retirement or disability benefits, enter the amount of Conservation Reserve Program payments included on Schedule F, line 4b, or listed on Schedule K-1 (Form 1065), box 20, code Z	1b ()	
2 Net profit or (loss) from Schedule C, line 31; Schedule C-EZ, line 3; Schedule K-1 (Form 1065), box 14, code A (other than farming); and Schedule K-1 (Form 1065-B), box 9, code J1. Ministers & members of religious orders, see instructions for types of income to report on this line. See instructions for other income to report. Note. Skip this line if you use the nonfarm optional method (see instructions)	2	2,369.
3 Combine lines 1a, 1b, and 2	3	2,369.
4a If line 3 is more than zero, multiply line 3 by 92.35% (.9235). Otherwise, enter amount from line 3 Note. If line 4a is less than \$400 due to Conservation Reserve Program payments on line 1b, see instructions.	4a	2,188.
b If you elect one or both of the optional methods, enter the total of lines 15 and 17 here	4b	
c Combine lines 4a and 4b. If less than \$400, stop; you do not owe self-employment tax. Exception. If less than \$400 and you had church employee income, enter -0- and continue	4c	2,188.
5a Enter your church employee income from Form W-2. See instructions for definition of church employee income	5a	
b Multiply line 5a by 92.35% (.9235). If less than \$100, enter -0-	5b	
6 Add lines 4c and 5b	6	2,188.
7 Maximum amount of combined wages and self-employment earnings subject to social security tax or the 6.2% portion of the 7.65% railroad retirement (tier 1) tax for 2013	7	113,700 00
8a Total social security wages and tips (total of boxes 3 and 7 on Form(s) W-2) and railroad retirement (tier 1) compensation. If \$113,700 or more, skip lines 8b through 10, and go to line 11	8a	13,817.
b Unreported tips subject to social security tax (from Form 4137, line 10)	8b	
c Wages subject to social security tax (from Form 8919, line 10)	8c	
d Add lines 8a, 8b, and 8c	8d	13,817.
9 Subtract line 8d from line 7. If zero or less, enter -0- here and on line 10 and go to line 11	9	99,883.
10 Multiply the smaller of line 6 or line 9 by 12.4% (.124)	10	271.
11 Multiply line 6 by 2.9% (.029)	11	63.
12 Self-employment tax. Add lines 10 and 11. Enter here and on Form 1040, line 56, or Form 1040NR, line 54	12	334.
13 Deduction for one-half of self-employment tax. Multiply line 12 by 50% (.50). Enter the result here and on Form 1040, line 27, or Form 1040NR, line 27	13	167.

Part II Optional Methods To Figure Net Earnings (see instructions)

Farm Optional Method. You may use this method only if (a) your gross farm income ¹ was not more than \$6,960 or (b) your net farm profits ² were less than \$5,024		
14 Maximum income for optional methods	14	4,640 00
15 Enter the smaller of: two-thirds (2/3) of gross farm income ¹ (not less than zero) or \$4,640. Also include this amount on line 4b above	15	
Nonfarm Optional Method. You may use this method only if (a) your net nonfarm profits ³ were less than \$5,024 and also less than 72.189% of your gross nonfarm income, ⁴ and (b) you had net earnings from self-employment of at least \$400 in 2 of the prior 3 years. Caution. You may use this method no more than five times.		
16 Subtract line 15 from line 14	16	
17 Enter the smaller of: two-thirds (2/3) of gross nonfarm income ⁴ (not less than zero) or the amount on line 16. Also include this amount on line 4b above	17	

¹ From Sch. F, line 9, and Sch. K-1 (Form 1065), box 14, code B.

² From Sch. F, line 34, and Sch. K-1 (Form 1065), box 14, code A - minus the amount you would have entered on line 1b had you not used the optional method.

³ From Sch. C, line 31; Sch. C-EZ, line 3; Sch. K-1 (Form 1065), box 14, code A; and Sch. K-1 (Form 1065-B), box 9, code J1.

⁴ From Sch. C, line 7; Sch. C-EZ, line 1; Sch. K-1 (Form 1065), box 14, code C; and Sch. K-1 (Form 1065-B), box 9, code J2.

Name: KARL R KENT & KARA B BRYANT

SSN: 211-02-0752

Use the spouse column if this is a married joint return for this year and the spouse filed separately last year.	Joint or Taxpayer	Spouse	Taxable
1 <u>NJ</u> 2012 state/local income tax refund	437.		
___ 2012 state/local income tax refund			
Total state/local income tax refund for 2012	437.		
2 Enter the amounts from the 2012 tax return If the itemized deductions were reduced due to the AGI limitation, be sure to enter the reduced amounts			
Schedule A, line 5a, income taxes	1,320.		
Schedule A, line 5b, general sales tax	955.		
Difference - the state tax refund is only taxable to the extent the state tax deduction exceeds the sales tax deduction	365.		
3 Net state/local income tax refund	365.		
4 Enter the total of all other Schedule A refunds or reimbursements			
5 Add lines 3 and 4	365.		
On the 2012 tax return, If itemized deductions are reduced due to income limitations, AMT is included, or there are unused credits, see Publication 525. Some or all of the state tax refund may be tax-free. Check here if the ENTIRE state tax refund is nontaxable. Stop here	<input type="checkbox"/>	<input type="checkbox"/>	
6 2012 itemized deductions	13,337.		
7 Filing status for 2012. Enter 1, 2, 3, 4, or 5. 1 = Single 4 = Head of household 2 = Married filing jointly 5 = Qualifying widow(er) 3 = Married filing separately If the 2012 filing status was married filing separately, and itemized deductions were required to be used because the spouse itemized, check here	<input checked="" type="checkbox"/> 2 <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	
8 Age 65 or blind, enter amount from the 2012 Form 1040, page 2, line 39a	<input checked="" type="checkbox"/> 1	<input type="checkbox"/>	
9 Standard deduction	13,050.		
10 Subtract line 9 from line 6	287.		
11 Smaller of line 5 or line 10	287.		
12 Enter the taxable income for 2012, adjusted for any NOL carryover. If less than -0-, show the amount as a negative number	39,544.		
13 Amount to include in income for 2013	287.		
14 Taxable state/local income tax refund	287.		287.
15 Taxable amount of other income			

1099 MISCELLANEOUS REPORT - 2013

Payer	ID number	Rent	Roy	Prizes	Fed With	Fish Boat	Med	Nonemp Comp	Sub Paymts	Crop Ins	EPP	Sect 409A	St	St With	St	St With
-------	-----------	------	-----	--------	----------	-----------	-----	-------------	------------	----------	-----	-----------	----	---------	----	---------

MEDICAL TRANSCRIPTIO:

PRATT MEDICAL C 26-0990752

1637

1637

1099G DETAIL REPORT - 2013

Payer	T S	Unemployment Received	Repaid	Withholding Federal	State
NEW JERSEY DEPARTMENT OF LABOR	X	2550		120	
		----		---	
		2550		120	

1099-R DETAIL REPORT - 2013

Payer	EIN	T S	Box 7	IRA/SEP Simple	Fed. With.	State With.	Gross	1099R Taxable	Roll/ Exclude	Net	Cost	Cost Bal.
SAULK TRUST COMPANY	26-2990752	T	7	X		NJ	838	838		838		
YALE SECURITIES IRA	26-3990752	T	G	X		NJ	11755		R 11755			
DEFENSE FINANCE & AC	11-2990752	T	7			NJ	1200	1200		1200		
STILLMAN PENSION FUN	26-4990752	T	7		1715	NJ	18625		E 335	18290	5864	5194
					-----		-----	-----	-----	-----	-----	-----
					1715		32418	2038	12090	20328	5864	5194

W-2 DETAIL REPORT - 2013

Employer	EIN	TP SP	Gross Wages	Federal With.	FICA	Medicare	St	State Wages	State With.	Locality	Local With.
JEFFERSON COUNTY SCHOOL	25-5990752	X	13817	987	857	200	NJ	13817	693		
AMERICUS PETROLEUM	25-6990752	X	28134	2176	1927	451	NJ	28134	1674		
			-----	-----	-----	---		-----	-----		
			41951	3163	2784	651		41951	2367		

W-2G DETAIL REPORT - 2013

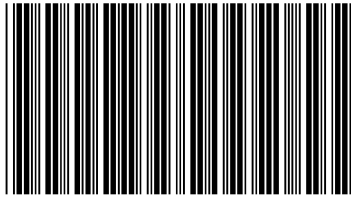
Payer	EIN	TP SP	Federal Withheld	Gross Winnings	State Withheld	Losses
NEW JERSEY LOTTERY	26-7990752	X		1200	36	1000
				-----	--	-----
				1200	36	1000

Name: KARL R KENT & KARA B BRYANT

SSN: 211-02-0752

Gross Income	2011	2012	2013
Wages and salaries			41,951.
Interest and dividends			6,048.
Business income			2,369.
Sale of assets - gain or loss			(3,000.)
Pension and IRA distributions			20,328.
Rents, royalties, etc			1,050.
Unemployment and social security			14,180.
Other income			1,487.
Total gross income			84,413.
Adjustments to Income			10,821.
Adjusted gross income			73,592.
Itemized or Standard Deductions			
Medical expense deduction			3,991.
Taxes			4,999.
Interest			3,164.
Contributions			2,475.
Miscellaneous deductions			
Other itemized deductions			1,000.
Total deductions			15,629.
Exemptions			19,500.
Taxable Income	0	0	38,463.
Tax (2013 - 1040, line 44)	0	0	4,841.
Alternative minimum tax			
Other taxes			334.
Credits and Payments			
Credits			2,894.
Withholding			5,603.
EIC and Additional Child Tax Credit			
Estimated tax payments			400.
Other payments			925.
Total credits and payments			9,822.
Tax liability after credits			2,281.
Estimated tax penalty			
Refund or (Balance Due)			4,647.
Federal marginal tax bracket	0.0 %	0.0 %	15.0 %
Tax preparation fee			
State refund or (balance due)			
1st resident state refund (balance due)			NJ 2,151.
2nd resident state refund (balance due)			
1st part-year state refund (balance due)			
2nd part-year state refund (balance due)			
1st nonresident state refund (balance due)			
2nd nonresident state refund (balance due)			
3rd nonresident state refund (balance due)			
4th nonresident state refund (balance due)			
5th nonresident state refund (balance due)			

NOTES FOR 2013:



040MP02130

KENT KARL R & BRYANT KARA B

211020752

1045

Residency Status IF YOU WERE A NEW JERSEY RESIDENT FOR ONLY PART OF THE TAXABLE YEAR GIVE THE PERIOD OF NEW JERSEY RESIDENCY FROM TO

FILING STATUS

- 1. SINGLE
2. MARRIED/CU COUPLE FILING JOINT RETURN X
3. MARRIED/CU COUPLE FILING SEPARATE RETURN
4. HEAD OF HOUSEHOLD
5. QUALIFYING WIDOW(ER)/SURVIVING CU PARTNER

EXEMPTIONS

- 6. REGULAR 2
7. AGE 65 OR OVER 1
8. BLIND OR DISABLED
9. NUMBER OF QUALIFIED DEPENDENT CHILDREN 3
10. NUMBER OF OTHER DEPENDENTS
11. DEPENDENTS ATTENDING COLLEGE 1
12A. TOTAL (LINE 12A - ADD LINES 6, 7, 8, AND 11) 4
12B. TOTAL (LINE 12B - ADD LINES 9 AND 10) 3

CHECKBOXES FOR EXEMPTIONS

- REGULAR SPOUSE/CU PARTNER X DOMESTIC PARTNER
AGE 65 OR OLDER YOURSELF X SPOUSE/CU PARTNER
BLIND OR DISABLED YOURSELF SPOUSE/CU PARTNER

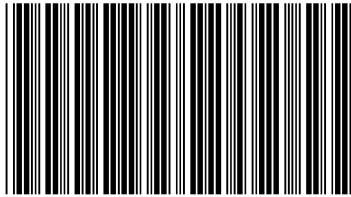
DEPENDENT'S INFORMATION FROM LINES 9 AND 10 (ATTACH RIDER IF MORE THAN FOUR)

Table with 4 columns: LAST NAME, FIRST NAME, MIDDLE INITIAL, SOCIAL SECURITY NUMBER, BIRTH YEAR, HEALTH INS IND. Rows include THOMAS TAMARA, KENT KENDRA, BRYANT KERRI.

GUBERNATORIAL ELECTIONS FUND

DO YOU WISH TO DESIGNATE \$1 OF YOUR TAXES FOR THIS FUND? YES NO X
IF JOINT RETURN, DOES YOUR SPOUSE/CU PARTNER WISH TO DESIGNATE \$1? YES X NO

Main tax schedule table with 3 columns: Line number, Description, Amount. Includes lines 14 through 36, ending with TAXABLE INCOME of 28478.



040MP03130

KENT KARL R & BRYANT KARA B

211020752

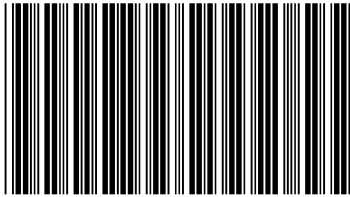
1045

37A	TOTAL PROPERTY TAXES PAID (SEE INSTRUCTION PAGE 29)	37A.	2135 .
37B.	FILL IN OVAL IF YOU WERE A NEW JERSEY HOMEOWNER ON OCTOBER 1, 2013	37B.	.
37C.	PROPERTY TAX DEDUCTION (SEE INSTRUCTION PAGE 32)	37C.	.
38.	NEW JERSEY TAXABLE INCOME (SUBTRACT LINE 37C FROM LINE 36) IF ZERO OR LESS, MAKE NO ENTRY	38.	28478 .
39.	TAX (FROM TAX TABLES, PAGE 52)	39.	428 .
40.	THIS LINE IS NOT USED ON COMPUTER GENERATED RETURNS	40.	.
41.	CREDIT FOR INCOME TAXES PAID TO OTHER JURISDICTIONS	41.	.
41A.	JURISDICTION CODE (SEE INSTRUCTIONS)	41A.	.
42.	BALANCE OF TAX (SUBTRACT LINE 41 FROM LINE 39)	42.	428 .
43.	SHELTERED WORKSHOP TAX CREDIT	43.	.
44.	BALANCE OF TAX AFTER CREDIT (SUBTRACT LINE 43 FROM LINE 42)	44.	428 .
45.	USE TAX DUE ON INTERNET, MAIL-ORDER, OR OTHER OUT-OF-STATE PURCHASES (SEE WKST AND INSTR. PAGE 35) IF NO USE TAX, ENTER ZERO	45.	64 .
46.	PENALTY FOR UNDERPAYMENT OF ESTIMATED TAX	46.	.
46A.	FILL IN IF FORM 2210 IS ENCLOSED	46A.	.
47.	TOTAL TAX AND PENALTY (ADD LINES 44, 45, AND 46)	47.	492 .
48.	TOTAL NEW JERSEY INCOME TAX WITHHELD (ENCLOSE FORMS W-2 AND 1099)	48.	2403 .
49.	PROPERTY TAX CREDIT (SEE INSTRUCTION PAGE 32)	49.	50 .
50.	NEW JERSEY ESTIMATED TAX PAYMENTS/CREDIT FROM 2012 TAX RETURN	50.	190 .
51.	NEW JERSEY EARNED INCOME TAX CREDIT (SEE INSTRUCTION PAGE 38)	51.	.
51B.	FILL IN THE BOX IF YOU HAD THE IRS FIGURE YOUR FEDERAL EARNED INCOME CREDIT	51B.	.
51C.	FILL IN THE BOX IF YOU ARE A CU COUPLE CLAIMING THE NJ EARNED INCOME TAX CREDIT	51C.	.
52.	EXCESS NEW JERSEY UI/SF/SWF WITHHELD (SEE INSTRUCTION PAGE 38) (ENCLOSE FORM NJ-2450)	52.	.
53.	EXCESS DISABILITY INSURANCE WITHHELD (SEE INSTRUCTION PAGE 38) (ENCLOSE FORM NJ-2450)	53.	.
54.	EXCESS NEW JERSEY FAMILY LEAVE WITHHELD (SEE INSTRUCTION PAGE 38) (ENCLOSE FORM NJ-2450)	54.	.
55.	TOTAL PAYMENTS/CREDITS (ADD LINES 48 THROUGH 54)	55.	2643 .
56.	IF LINE 55 IS LESS THAN LINE 47, ENTER AMOUNT YOU OWE <small>IF YOU OWE TAX, YOU MAY MAKE A DONATION BY ENTERING AN AMOUNT ON LINES 59, 60, 61, 62, 63, AND/OR 64 AND ADDING THIS TO YOUR PAYMENT AMOUNT</small>	56.	.
57.	IF LINE 55 IS MORE THAN LINE 47, ENTER OVERPAYMENT DEDUCTIONS FROM OVERPAYMENT ON LINE 57 WHICH YOU ELECT TO CREDIT TO:	57.	2151 .
58.	YOUR 2014 TAX	58.	.
59.	NEW JERSEY ENDANGERED WILDLIFE FUND	59.	.
60.	NEW JERSEY CHILDREN'S TRUST FUND	60.	.
61.	NEW JERSEY VIETNAM VETERANS' MEMORIAL FUND	61.	.
62.	NEW JERSEY BREAST CANCER RESEARCH FUND	62.	.
63.	U.S.S. NEW JERSEY EDUCATIONAL MUSEUM FUND	63.	.
64.	OTHER DESIGNATED CONTRIBUTION (SEE INSTRUCTION PAGE 39)	64.	.
64C.	DESIGNATION CODE	64C.	.
65.	TOTAL DEDUCTIONS FROM OVERPAYMENT (ADD LINES 58 THROUGH 64)	65.	.
66.	REFUND (AMOUNT TO BE SENT TO YOU. SUBTRACT LINE 65 FROM LINE 57)	66.	2151 .

DIRECT DEPOSIT INFORMATION

dd1.	REFUND CHECK BOX ('1' FOR REFUND, '4' FOR NO REFUND)	dd1.	1
dd2.	ACCOUNT TYPE ('C' FOR CHECKING, 'S' FOR SAVINGS)	dd2.	C
dd3.	FILL IN THE CHECK BOX IF REFUND IS GOING TO AN ACCOUNT OUTSIDE THE UNITED STATES	dd3.	
dd4.	ROUTING NUMBER	dd4.	065502789
dd5.	ACCOUNT NUMBER	dd5.	12345678
dnm	DO NOT MAIL INDICATOR	dnm.	
pa.	POWER OF ATTORNEY INDICATOR	pa.	
pdr.	PRESIDENTIAL DISASTER RELIEF INDICATOR	pdr.	

NJ - 1040
2013
Page 1



040MP01130

STATE OF NEW JERSEY INCOME TAX – RESIDENT RETURN

For Privacy Act Notification, See Instructions
For Tax Year Jan. – Dec. 2013 or Other Tax Year

Beginning _____, 2013 Month Ending _____
On-line Federal Extension Confirmation # _____

KENT KARL R & BRYANT KARA B

1068 RIVERMEADE DR

DENVILLE NJ 07834 1408

1045 12

211020752 212020752

S24051405

.00



Under the penalties of perjury, I declare that I have examined this income tax return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct and complete. If prepared by a person other than the taxpayer, this declaration is based on all information of which the preparer has any knowledge.

Pay amount on Line 56 in full. Write Social Security number(s) on check or money order and make payable to: STATE OF NEW JERSEY – TGI

Mail your return in the envelope provided and affix the appropriate mailing label.

If you have an amount due on Line 56, enclose your check and NJ-1040-V payment voucher with your return and use the label for **PO Box 111**.

If not, use the label for **PO Box 555**. You may also pay by e-check or credit card. See instruction page 11.

> _____
Your Signature Date

> _____
Spouse/CU Partner's Signature (If filed jointly both must sign)

If enclosing copy of death certificate for deceased taxpayer, check box (See instruction page 13)

Paid Preparer's Signature

Federal Identification Number

S24051405

Firm's Name KINNELON PUBLIC LIBRARY

Federal Employer Identification Number

Name(s) as shown on Form NJ-1040 KENT KARL R & BRYANT KARA B	Your Social Security Number 211-02-0752
---	--

PART I NET PROFITS FROM BUSINESS List the net profit (loss) from business(es). See instructions.

	Business Name	Social Security Number/ Federal EIN	Profit or (Loss)
1.	KARA B BRYANT	212-02-0752	2,369.
2.			
3.			
4.	Net Profit or (Loss). (Add Lines 1, 2, and 3.) (Enter here and on Line 17. If loss, make no entry on Line 17.)		4. 2,369.

PART II DISTRIBUTIVE SHARE OF PARTNERSHIP INCOME List the distributive share of income (loss) from partnership(s). See instructions.

	Partnership Name	Federal EIN	Share of Partnership Income or (Loss)
1.			
2.			
3.			
4.	Distributive Share of Partnership Income or (Loss). (Add Lines 1, 2, and 3.) (Enter here and on Line 20. If loss, make no entry on Line 20.)		4.

PART III NET PRO RATA SHARE OF S CORPORATION INCOME List the pro rata share of income (loss) from S Corporation(s). See instructions.

	S Corporation Name	Federal EIN	Pro Rata Share of S Corporation Income or (Loss)
1.			
2.			
3.			
4.	Net Pro Rata Share of S Corporation Income or (Loss). (Add Lines 1, 2, and 3.) (Enter here and on Line 21. If loss, make no entry on Line 21.)		4.

PART IV NET GAINS OR INCOME FROM RENTS, ROYALTIES, PATENTS, AND COPYRIGHTS List the net gains or net income, less net loss, derived from or in the form of rents, royalties, patents, and copyrights. See instructions.
 Type of Property: 1-Rental real estate 2-Royalties 3-Patents 4-Copyrights

	Source of Income or Loss. If rental real estate, enter physical address of property.	Social Security Number/ Federal EIN	Type - Enter number from list above	Income or (Loss)
1.	1001 YUKON DRIVE FAIRBANKS	211-02-0752	2	1,050.
2.				
3.				
4.	Net Income or (Loss). (Add Lines 1, 2, and 3.) (Enter here and on Line 22. If loss, make no entry on Line 22.)			4. 1,050.

Name(s) as shown on Form NJ-1040 KENT KARL R & BRYANT KARA B				Your Social Security Number 211-02-0752			
PART I INCOME (LOSS)				Column A		Column B	
				Reportable Regular Business Income		Alternative Business Income/(Loss)	
1.	Net Profits From Business	1a.	2,369.	1b.	2,369.		
2.	Distributive Share of Partnership Income	2a.		2b.			
3.	Net Pro Rata Share of S Corporation Income	3a.		3b.			
4.	Net Gain or Income From Rents, Royalties, Patents, and Copyrights	4a.	1,050.	4b.	1,050.		
5.	Loss Carryforward From Tax Year 2012			5b.	()		
6.	Totals	6a.	3,419.	6b.	3,419.		
PART II ADJUSTMENT CALCULATION							
7.	Total Regular Business Income	7.	3,419.				
8.	Total Alternative Business Income/(Loss). (If loss, enter zero)	8.	3,419.				
9.	Business Increment (Line 7 minus Line 8)	9.					
10.	Adjustment Percentage	10.	0.20				
11.	Alternative Business Calculation Adjustment (Line 9 x 0.20)	11.					
PART III LOSS CARRYFORWARD TO TAX YEAR 2014							
12.	Loss Carryforward to Tax Year 2014			12.	()		

Instructions

- Line 1a. Enter the amount from Line 17 of Form NJ-1040.
- Line 1b. Enter the amount from Part I, Line 4 of Schedule NJ-BUS-1 (Form NJ-1040).
- Line 2a. Enter the amount from Line 20 of Form NJ-1040.
- Line 2b. Enter the amount from Part II, Line 4 of Schedule NJ-BUS-1 (Form NJ-1040).
- Line 3a. Enter the amount from Line 21 of Form NJ-1040.
- Line 3b. Enter the amount from Part III, Line 4 of Schedule NJ-BUS-1 (Form NJ-1040).
- Line 4a. Enter the amount from Line 22 of Form NJ-1040.
- Line 4b. Enter the amount from Part IV, Line 4 of Schedule NJ-BUS-1 (Form NJ-1040).
- Line 5b. Enter the amount from Line 11 of your 2012 Schedule NJ-BUS-2 (Form NJ-1040).
- Line 6a. Enter the total of Lines 1a through 4a.
- Line 6b. Enter the total of Lines 1b through 5b, netting gains with losses.
- Line 7. Enter the amount from Line 6a of this schedule.
- Line 8. Enter the amount from Line 6b of this schedule. If loss, enter zero here.
- Line 9. Subtract Line 8 from Line 7. If the result is zero, enter zero on Line 11 and continue with Line 12.
- Line 10. The adjustment percentage for tax year 2013 is 20% (0.20).
- Line 11. Multiply the amount on Line 9 by 20% (0.20). Enter here and Line 34 of Form NJ-1040.
- Line 12. If the amount on 6b is a loss, enter the amount of the loss on this line. Otherwise, enter zero.

NJ Direct Deposit or Direct Debit Worksheet for Electronic Filing 2013

Name: KARL R KENT & KARA B BRYANT

SSN: 211-02-0752

Tax Return Information

1 Refund	2151.
2 Balance Due	

Direct Deposit and Direct Debit Information

- Check here if you had a Federal refund and want the state refund deposited to the same bank account as listed on the Federal return. This information will not appear below, but will be transmitted to New Jersey with the electronic return.
- Check here if you want the state refund deposited into a different account.
- Check here to have a refund check mailed to you.

Direct Debit of Balance Due

Check here if you want your balance due withdrawn from your bank account and enter your account information below. Please note that the account will be debited when the tax return is processed.
Enter the date you want the balance due to be withdrawn from your account
If the return is transmitted on or before April 18, the requested payment date cannot be later than April 18. If the return is efiled after April 18, the requested payment date should be today. This is today's date **12/13/2014**
Check here if you will mail your balance due to New Jersey.

Bank Account Information

Routing number 065502789
Account number 12345678
Account type Checking Savings

Will the refund or debit you are requesting involve a foreign bank account? Yes No

Electronic Filing Only

If you used a different account for direct deposit of your state tax refund or requested electronic funds withdrawal for your state tax balance due, rekey the account information below from the check or other document for verification.

RTN:

Account:

NJ

Dependents Information

2013

Name: KARL R KENT & KARA B BRYANT

SSN: 211-02-0752

First name	MI	Last name	SSN	Birth year
TAMARA		THOMAS	214-02-0752	2008
KENDRA		KENT	213-02-0752	1992
KERRI		BRYANT	210-02-0752	1950

Name: KENT KARL R & BRYANT KARA B

SSN: 211-02-0752

Part I

1	Value of IRA on December 31, 2013	
2	Total distributions from IRA during the tax year	838.
3	Total value of IRA	838.
Unrecovered contributions: Complete either line 4a or 4b.		
4 a	First year of withdrawal from IRA, enter the total of IRA contributions that were previously taxed	
b	After first year of withdrawal from IRA. Amount of unrecovered contributions from Part II, line 7	
5	Accumulated earnings in IRA on December 31, 2013	838.
6	Divide line 5 by line 3	1.00
7	Taxable portion of this year's withdrawal	838.
8	Excludable portion of this year's withdrawal	

Part II: Unrecovered Contributions for Second and Later Years

a	Last year's unrecovered contributions, from line 4 of last year's worksheet	
b	Amount withdrawn last year, from line 2 of last year's worksheet	
c	Taxable portion of last year's withdrawal, from line 7 of last year's worksheet	
d	Contributions recovered last year	
e	This year's unrecovered contributions	
f	Contributions to IRA during current tax year, do not include tax free rollovers	
g	Total unrecovered contributions	

SCHEDULES
A & B
(Form NJ-1040)

NEW JERSEY GROSS INCOME TAX

2013

Name(s) as shown on Form NJ-1040 KENT KARL R & BRYANT KARA B	Your Social Security Number 211-02-0752
--	---

Schedule A CREDIT FOR INCOME OR WAGE TAXES PAID TO OTHER JURISDICTION	If you are claiming a credit for income taxes paid to more than one jurisdiction, a separate Schedule A must be enclosed for each. See instructions page 40.
--	--

A COPY OF OTHER STATE OR POLITICAL SUBDIVISION TAX RETURN MUST BE RETAINED WITH YOUR RECORDS

1. Income actually taxed by other jurisdiction during tax year (indicate name _____) (DO NOT combine the same income taxed by more than one jurisdiction) (The amount on Line 1 cannot exceed the amount shown on Line 2)		1.		
2. Income subject to tax by New Jersey (From Line 28, Form NJ-1040)		2.		
3. Maximum Allowable Credit Percentage 1 _____ (Divide Line 2 into Line 1) 2 _____		3.		%
IF YOU ARE NOT ELIGIBLE FOR A PROP. TAX BENEFIT ONLY COMPLETE COL. B.		COLUMN A		COLUMN B
4. Taxable Income (after Exemptions and Deductions) from Line 36, Form NJ-1040	4.		4.	
5. Property Tax Enter in Box 5a the amount from Worksheet and Deduction F line 1. See instructions page 33. Property tax deduction. Enter the amount from Worksheet F, line 2. See instructions page 33.	5a.		5.	- 0 -
6. New Jersey Taxable Income (Line 4 minus Line 5)	6.		6.	
7. Tax on Line 6 amount (From Tax Table or Tax Rate Schedules)	7.		7.	
8. Allowable Credit (Line 3 times Line 7)	8.		8.	
9. Credit for Taxes Paid to Other Jurisdiction Enter in Box 9a the income or wage tax paid to other jurisdiction during tax year on income shown on Line 1. See instructions page 43. Credit allowed. (Enter lesser of Line 8 or Box 9a). (The credit may not exceed your New Jersey tax on Line 39).	9a.		9.	

- If you are not eligible for a property tax benefit, enter the amount from Line 9, Column B, on Line 41, Form NJ-1040. Make no entry on Lines 37c or 49, Form NJ-1040.
- If you are eligible for a property tax benefit, you must complete Worksheet I on page 43 to determine whether you receive a greater benefit by claiming a property tax deduction or taking the property tax credit.

Schedule B NET GAINS OR INCOME FROM DISPOSITION OF PROPERTY	List the net gains or income, less net loss, derived from the sale, exchange, or other disposition of property including real or personal whether tangible or intangible.
--	---

1. a. Kind of property and description	b. Date acquired (Mo., day, yr.)	c. Date sold (Mo., day, yr.)	d. Gross sales price	e. Cost or other basis as adj. (see inst.) and expense of sale	f. Gain or (loss) (d less e)
FED SCH D					(3,226.)
2. Capital Gains Distributions					69.
3. Other Net Gains					
4. Net Gains (Add Lines 1, 2, and 3) (Enter here and on Line 18. If loss enter ZERO here & make no entry on Line 18) ..					

NOTE: For tax year 2012 and after, Schedule C, Net Gains or Income From Rents, Royalties, Patents, and Copyrights, has been eliminated from this page. Use Part IV of Schedule NJ-BUS-1 (Form NJ-1040) to report that income.