

Form **8879**

# IRS e-file Signature Authorization

OMB No. 1545-0074

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](http://www.irs.gov/form8879).

## 2013

Submission Identification  
Number (SID)

▶ 20075220142360000157

Taxpayer's name  
FRED P PATTERSON

Social security number  
641-02-0752

Spouse's name

Spouse's social security number

### 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	16,630.
2	Total tax (Form 1040, line 61; Form 1040A, line 35; Form 1040EZ, line 10) . . . . .	2	259.
3	Federal income tax withheld (Form 1040, line 62; Form 1040A, line 36; Form 1040EZ, line 7) . . . . .	3	2,736.
4	Refund (Form 1040, line 74a; Form 1040A, line 43a; Form 1040EZ, line 11a; Form 1040-SS, Part I, line 12a) . . . . .	4	2,477.
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 ▶ 08/24/2014

#### Spouse's PIN: check one box only

I authorize \_\_\_\_\_ to enter or generate my PIN   
**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 ▶ \_\_\_\_\_

### 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 ▶ 08/24/2014

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

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

Form **8879** (2013)

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

Your first name and initial Last name **FRED P PATTERSON** Your social security number **641-02-0752**

If a joint return, spouse's first name and initial Last name Spouse's social security number

Home address (number and street). If you have a P.O. box, see instructions. **3717 BAXTER ST** 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.)  
2  Married filing jointly (even if only one had income) If the qualifying person is a child but not your dependent, enter this child's name here. ▶  
3  Married filing separately. Enter spouse's SSN above and full name here. ▶ 5  Qualifying widow(er) with dependent child

**Exemptions** 6a  **Yourself.** If someone can claim you as a dependent, do not check box 6a 6b  **Spouse** Boxes checked on 6a and 6b **1**

c Dependents:		(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:
(1) First name	Last name				lived with you
					0
					0
					0
d Total number of exemptions claimed					<b>1</b>

Income	7	14,678.
7 Wages, salaries, tips, etc. Attach Form(s) W-2	7	14,678.
8a Taxable interest. Attach Schedule B if required	8a	1,952.
b Tax-exempt interest. Do not include on line 8a	8b	
9a Ordinary dividends. Attach Schedule B if required	9a	
b Qualified dividends	9b	
10 Taxable refunds, credits, or offsets of state and local income taxes	10	
11 Alimony received	11	
12 Business income or (loss). Attach Schedule C or C-EZ	12	
13 Capital gain or (loss). Attach Schedule D if required. If not required, check here <input type="checkbox"/>	13	
14 Other gains or (losses). Attach Form 4797	14	
15a IRA distributions 15a Taxable amount	15b	
16a Pensions and annuities 16a Taxable amount	16b	
17 Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E	17	
18 Farm income or (loss). Attach Schedule F	18	
19 Unemployment compensation	19	
20a Social security benefits 20a 12,682. 20b Taxable amount	20b	
21 Other income. List type and amount	21	
22 Combine the amounts in the far right col for lines 7 through 21. This is your total income ▶	22	16,630.

Adjusted Gross Income	23	24	25	26	27	28	29	30	31a	32	33	34	35	36	37
23 Educator expenses	23														
24 Certain business expenses of reservists, performing artists, and fee-basis gov. officials. Attach Form 2106 or 2106-EZ	24														
25 Health savings account deduction. Attach Form 8889	25														
26 Moving expenses. Attach Form 3903	26														
27 Deductible part of self-employment tax. Attach Schedule SE	27														
28 Self-employed SEP, SIMPLE, and qualified plans	28														
29 Self-employed health insurance deduction	29														
30 Penalty on early withdrawal of savings	30														
31a Alimony paid b Recipient's SSN ▶	31a														
32 IRA deduction	32														
33 Student loan interest deduction	33														
34 Tuition and fees. Attach Form 8917	34														
35 Domestic production activities deduction. Attach Form 8903	35														
36 Add lines 23 through 35	36														
37 Subtract line 36 from line 22. This is your adjusted gross income ▶	37														16,630.

<b>Tax and Credits</b>	<b>38</b>	Amount from line 37 (adjusted gross income)	<b>38</b>	16,630.
	<b>39a</b>	Check <input checked="" type="checkbox"/> You were born before Jan. 2, 1949, <input type="checkbox"/> Blind. <b>Total boxes checked ▶ 39a</b> <input type="checkbox"/> 1 if: <input type="checkbox"/> Spouse was born before Jan. 2, 1949, <input type="checkbox"/> Blind. <b>▶ 39b</b> <input type="checkbox"/>		
<b>Standard Deduction for-</b>	<b>b</b>	If your spouse itemizes on a separate return or you were a dual-status alien, check here ▶ <b>39b</b> <input type="checkbox"/>		
• People who check any box on line 39a or 39b or who can be claimed as a dependent, see instructions.	<b>40</b>	<b>Itemized deductions</b> (from Schedule A) or your <b>standard deduction</b> (see left margin)	<b>40</b>	10,141.
• All others: Single or Married filing separately, \$6,100	<b>41</b>	Subtract line 40 from line 38	<b>41</b>	6,489.
Married filing jointly or Qualifying widow(er), \$12,200	<b>42</b>	<b>Exemptions.</b> If line 38 is \$150,000 or less, multiply \$3,900 by the number on line 6d. Otherwise, see instructions	<b>42</b>	3,900.
Head of household, \$8,950	<b>43</b>	<b>Taxable income.</b> Subtract line 42 from line 41. If line 42 is more than line 41, enter -0-	<b>43</b>	2,589.
	<b>44</b>	<b>Tax</b> (see instructions). Check if any from: <b>a</b> <input type="checkbox"/> Form(s) 8814 <b>b</b> <input type="checkbox"/> Form 4972 <b>c</b> <input type="checkbox"/>	<b>44</b>	259.
	<b>45</b>	<b>Alternative minimum tax</b> (see instructions). Attach Form 6251	<b>45</b>	
	<b>46</b>	Add lines 44 and 45	<b>46</b>	259.
	<b>47</b>	Foreign tax credit. Attach Form 1116 if required	<b>47</b>	
	<b>48</b>	Credit for child and dependent care expenses. Attach Form 2441	<b>48</b>	
	<b>49</b>	Education credits from Form 8863, line 19	<b>49</b>	
	<b>50</b>	Retirement savings contributions credit. Attach Form 8880	<b>50</b>	
	<b>51</b>	Child tax credit. Attach Schedule 8812, if required	<b>51</b>	
	<b>52</b>	Residential energy credits. Attach Form 5695	<b>52</b>	
	<b>53</b>	Other credits from Form: <b>a</b> <input type="checkbox"/> 3800 <b>b</b> <input type="checkbox"/> 8801 <b>c</b> <input type="checkbox"/>	<b>53</b>	
	<b>54</b>	Add lines 47 through 53. These are your <b>total credits</b>	<b>54</b>	
	<b>55</b>	Subtract line 54 from line 46. If line 54 is more than line 46, enter -0-	<b>55</b>	259.
<b>Other Taxes</b>	<b>56</b>	Self-employment tax. Attach Schedule SE	<b>56</b>	
	<b>57</b>	Unreported social security and Medicare tax from Form: <b>a</b> <input type="checkbox"/> 4137 <b>b</b> <input type="checkbox"/> 8919	<b>57</b>	
	<b>58</b>	Additional tax on IRAs, other qualified retirement plans, etc. Attach Form 5329 if required	<b>58</b>	
	<b>59a</b>	Household employment taxes from Schedule H	<b>59a</b>	
	<b>b</b>	First-time homebuyer credit repayment. Attach Form 5405 if required	<b>59b</b>	
	<b>60</b>	Taxes from: <b>a</b> <input type="checkbox"/> Form 8959 <b>b</b> <input type="checkbox"/> Form 8960 <b>c</b> <input type="checkbox"/> Instructions; enter code(s)	<b>60</b>	
	<b>61</b>	Add lines 55 through 60. This is your <b>total tax</b>	<b>61</b>	259.
<b>Payments</b>	<b>62</b>	Federal income tax withheld from Forms W-2 and 1099	<b>62</b>	2,736.
	<b>63</b>	2013 estimated tax payments and amount applied from 2012 return	<b>63</b>	
	<b>64a</b>	<b>Earned income credit (EIC)</b> NO	<b>64a</b>	
	<b>b</b>	Nontaxable combat pay election <b>64b</b>		
	<b>65</b>	Additional child tax credit. Attach Form 8812	<b>65</b>	
	<b>66</b>	American opportunity credit from Form 8863, line 8	<b>66</b>	
	<b>67</b>	Reserved	<b>67</b>	
	<b>68</b>	Amount paid with request for extension to file	<b>68</b>	
	<b>69</b>	Excess social security and tier 1 RRTA tax withheld	<b>69</b>	
	<b>70</b>	Credit for federal tax on fuels. Attach Form 4136	<b>70</b>	
	<b>71</b>	Credits from Form: <b>a</b> <input type="checkbox"/> 2439 <b>b</b> <input type="checkbox"/> Re-served <b>c</b> <input type="checkbox"/> 8885 <b>d</b> <input type="checkbox"/>	<b>71</b>	
	<b>72</b>	Add lines 62, 63, 64a, and 65 through 71. These are your <b>total payments</b>	<b>72</b>	2,736.
	<b>73</b>	If line 72 is more than line 61, subtract line 61 from line 72. This is the amount you <b>overpaid</b>	<b>73</b>	2,477.
	<b>74a</b>	Amount of line 73 you want <b>refunded to you</b> . If Form 8888 is attached, check here ▶ <input type="checkbox"/>	<b>74a</b>	2,477.
Direct deposit? ▶ See instructions ▶	<b>b</b>	Routing number <input type="text"/>	<b>c</b>	Type: <input type="checkbox"/> Checking <input type="checkbox"/> Savings
	<b>d</b>	Account number <input type="text"/>		
	<b>75</b>	Amount of line 73 you want <b>applied to your 2014 estimated tax</b> ▶	<b>75</b>	
<b>Amount You Owe</b>	<b>76</b>	<b>Amount you owe.</b> Subtract line 72 from line 61. For details on how to pay, see instructions ▶	<b>76</b>	
	<b>77</b>	Estimated tax penalty (see instructions)	<b>77</b>	

**Third Party Designee** Do you want to allow another person to discuss this return with the IRS (see instructions)?  Yes. Complete below.  No

Designee's name  Phone no.  Personal identification number (PIN)

**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? ▶ See instructions Keep a copy for your records. ▶	Your signature <input type="text"/>	Date <input type="text"/>	Your occupation RETIRED	Daytime phone number 973-222-1212
	Spouse's signature. If a joint return, <b>both</b> must sign. <input type="text"/>	Date <input type="text"/>	Spouse's occupation	If the IRS sent you an Identity Protection PIN, enter it here (see inst.)

**Paid Preparer Use Only**

Print/Type preparer's name 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: FRED P PATTERSON

SSN: 641-02-0752

**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 .....	12,682.		
Railroad tier 1 received this year .....			
Total .....	12,682.		12,682.
Medicare to Schedule A .....	1,397.		
Federal tax withheld .....	1,268.		

**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 16,630.

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

Puerto Rico: \_\_\_\_\_ + 50% of the benefits received: 6,341. .....

22,971.

If the modified AGI is less than \$25,001 (\$32,001 married filing jointly), none of the Social Security and RR Benefits are taxable. .... 0

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**

Modified AGI .....	
\$34,000 (\$44,000) .....	
Subtract .....	

X 85% =

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

Add ..... **B**

**Taxable social security and railroad retirement tier 1.** Minimum of A or B .....

**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 .....			
<b>Taxable benefits using the lump-sum election method</b> .....			

**US Schedule A**

**Itemized Deduction Detail Worksheet**

**2013**

Name: FRED P PATTERSON

SSN: 641-02-0752

Medical Expenses		Medical miles:	Deduction:
Insurance premiums paid (not pre-tax)		1	
Taxpayer .....		Medicare from 1040 worksheet .....	1,397.
Spouse .....		Remainder from worksheets	
Qualified long term care contracts		Taxpayer .....	
Taxpayer .....		Spouse .....	
Spouse .....		Self-employed health insurance	
Other medical expenses		Taxpayer .....	
		Spouse .....	
		Amount from additional worksheets .....	
		<b>Total</b> .....	1,397.

Cash Contributions		Other Charitable miles:	X .14 =
<b>50% Limit Organizations</b>			
		From Schedules K-1 .....	
		Amount from additional worksheets .....	
		<b>Total</b> .....	

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

Other Than Cash Contributions		50% Limit Organizations
		From Forms 8283 .....
		Amount from additional worksheets .....
From Schedules K-1		<b>Total</b> .....

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

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

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

	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 .....	8,315.
This year's 50% organization cash contributions allowed .....	
30% of adjusted gross income .....	4,989.
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 .....	3,326.
This year's capital gain contributions to 30% organizations limited to 20% .....	
30% capital gain carryover limited to 20% AGI .....	
<b>Total contributions allowed this year</b> .....	

**US Schedule A**

**Sales Tax Worksheet**

**2013**

Name: FRED P PATTERSON

SSN: 641-02-0752

1	Federal AGI.....		16,630.	
2	Nontaxable income listed on tax return			
a	Nontaxable interest .....			
b	Social security .....	12,682.		
c	Combat pay .....			
d	Income on Forms 4970 and 4972 .....			
e	Nontaxable part of IRA, pension, or annuity distributions, not including rollovers .....		12,682.	
3	Other nontaxable income			
a	.....			
b	.....			
c	.....			
d	.....			
e	.....			
4	<b>Income for sales tax chart</b> .....		29,312.	
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 _____			
	<b>State sales tax from the applicable table</b> .....			413.
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"/> <b>No.</b> Line 2 should be -0-. <input type="checkbox"/> <b>Yes.</b> Enter the letter (A - D) for the optional local sales tax table you want to use .....			
	<b>Local sales tax from the applicable table</b> .....			
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"/> <b>No.</b> Go to line 7. <input type="checkbox"/> <b>Yes.</b> 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"/> <b>No.</b> Skip to line 6. <input type="checkbox"/> <b>Yes.</b> 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"/> <b>No.</b> Multiply line 2 by line 3. <input type="checkbox"/> <b>Yes.</b> Multiply line 1 by line 5 .....			
7	Total of lines 1 and 6 - prorated for part-year residents .....			413.
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	<b>Total sales tax using the sales tax chart</b> .....			413.
10	<b>Sales tax using actual receipts</b> .....			
11	<b>Sales tax deduction for Schedule A, line 5</b> .....			413.

**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](http://www.irs.gov/form1040).  
▶ Attach to Form 1040.

OMB No. 1545-0074

**2013**  
Attachment  
Sequence No. **07**

Name(s) shown on Form 1040 <b>FRED P PATTERSON</b>		Your social security number <b>641-02-0752</b>			
<b>Medical and Dental Expenses</b>	<b>Caution.</b> Do not include expenses reimbursed or paid by others.				
	1 Medical and dental expenses (see instructions) . . . . .	1	1,397.		
	2 Enter amount from Form 1040, line 38 <b>2</b> 16,630.				
	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	1,247.		
4 Subtract line 3 from line 1. If line 3 is more than line 1, enter -0-			4	150.	
<b>Taxes You Paid</b>	5 State and local (check only one box): a <input type="checkbox"/> Income taxes, or b <input checked="" type="checkbox"/> General sales taxes	5	413.		
	6 Real estate taxes (see instructions) . . . . .	6	9,578.		
	7 Personal property taxes . . . . .	7			
	8 Other taxes. List type and amount ▶ _____	8			
	9 Add lines 5 through 8 . . . . .			9	9,991.
	<b>Interest You Paid</b>	10 Home mortgage interest and points reported to you on Form 1098	10		
		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	
<b>Gifts to Charity</b>	16 Gifts by cash or check. If you made any gift of \$250 or more, see instructions . . . . .	16			
	17 Other than by cash or check. If any gift of \$250 or more, see instructions. You <b>must</b> attach Form 8283 if over \$500 . . . . .	17			
	18 Carryover from prior year . . . . .	18			
	19 Add lines 16 through 18 . . . . .			19	
<b>Casualty and Theft Losses</b>	20 Casualty or theft loss(es). Attach Form 4684. (See instructions.) . . . . .			20	
<b>Job Expenses and Certain Miscellaneous Deductions</b>	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 <b>25</b> _____				
	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	
<b>Other Miscellaneous Deductions</b>	28 Other - from list in the inst. List type and amount ▶ _____			28	
<b>Total Itemized Deductions</b>	29 Is Form 1040, line 38, over \$150,000? <input checked="" type="checkbox"/> <b>No.</b> 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"/> <b>Yes.</b> Your deduction may be limited. See the Itemized Deductions Worksheet in the instructions to figure the amount to enter.			29	10,141.
	30 If you elect to itemize deductions even though they are less than your standard deduction, check here . . . . .				

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](http://www.irs.gov/form1040).

Name(s) shown on return: **FRED P PATTERSON** Your social security number: **641-02-0752**

<b>Part I</b>		<b>Amount</b>
<b>Interest</b>	<b>1</b> 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	
(See instructions on back and the instructions for Form 1040A, or Form 1040, line 8a.)	NATIONAL CITY BANK	1,952.
<b>Note.</b> 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.		
	<b>2</b> Add the amounts on line 1	1,952.
	<b>3</b> Excludable interest on series EE and I U.S. savings bonds issued after 1989. Attach Form 8815	
	<b>4</b> Subtract line 3 from line 2. Enter the result here & on Form 1040A, or Form 1040, line 8a	1,952.
	<b>Note.</b> If line 4 is over \$1,500, you must complete Part III.	
		<b>Amount</b>

<b>Part II</b>		<b>Amount</b>
<b>Ordinary Dividends</b>	<b>5</b> List name of payer	
(See instructions on back and the instructions for Form 1040A, or Form 1040, line 9a.)		
<b>Note.</b> 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.		
	<b>6</b> Add the amounts on line 5. Enter the total here and on Form 1040A, or Form 1040, line 9a	
	<b>Note.</b> If line 6 is over \$1,500, you must complete Part III.	

<b>Part III</b>		<b>Yes</b>	<b>No</b>
<b>Foreign Accounts and Trusts</b>			
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.			
<b>7a</b>	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. . . . .		X
	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. . . . .		
<b>b</b>	If you are required to file FinCEN Form 114, enter the name of the foreign country where the financial account is located . . . . . ▶		
<b>8</b>	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 . . . . .		X





## W-2 DETAIL REPORT - 2013

Employer	EIN	TP SP	Gross Wages	Federal With.	FICA	Medicare	St	State Wages	State With.	Locality	Local With.
FRANCISCAN OAKS	64-9020752	X	14678	1468	910	213	NJ	14678	55		
			-----	-----	---	---		-----	--		
			14678	1468	910	213		14678	55		

**US 1040**

**Three - Year Tax Summary**

**2013**

Name: FRED P PATTERSON

SSN: 641-02-0752

Gross Income	2011	2012	2013
Wages and salaries .....			14,678.
Interest and dividends .....			1,952.
Business income .....			
Sale of assets - gain or loss .....			
Pension and IRA distributions .....			
Rents, royalties, etc .....			
Unemployment and social security .....			
Other income .....			
Total gross income .....			16,630.
<b>Adjustments to Income</b> .....			
<b>Adjusted gross income</b> .....			16,630.
<b>Itemized or Standard Deductions</b>			
Medical expense deduction .....			150.
Taxes .....			9,991.
Interest .....			
Contributions .....			
Miscellaneous deductions .....			
Other itemized deductions .....			
Total deductions .....			10,141.
<b>Exemptions</b> .....			3,900.
Taxable Income .....	0	0	2,589.
<b>Tax (2013 - 1040, line 44)</b> .....	0	0	259.
Alternative minimum tax .....			
Other taxes .....			
<b>Credits and Payments</b>			
Credits .....			
Withholding .....			2,736.
EIC and Additional Child Tax Credit .....			
Estimated tax payments .....			
Other payments .....			
Total credits and payments .....			2,736.
Tax liability after credits .....			259.
Estimated tax penalty .....			
<b>Refund or (Balance Due)</b> .....			2,477.
Federal marginal tax bracket .....	0.0 %	0.0 %	10.0 %
Tax preparation fee .....			
<b>State refund or (balance due)</b>			
1st resident state refund (balance due) .....			NJ (1.)
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:**

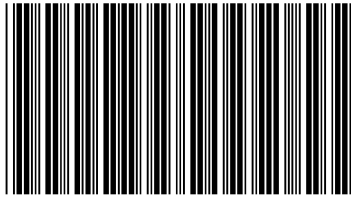
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040MP02130

PATTERSON FRED P

641020752

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

EXEMPTIONS

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

CHECKBOXES FOR EXEMPTIONS

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

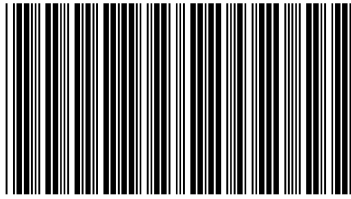
DEPENDENT'S INFORMATION FROM LINES 9 AND 10 (ATTACH RIDER IF MORE THAN FOUR)

Table with 4 columns: LAST NAME, FIRST NAME, MIDDLE INITIAL, SOCIAL SECURITY NUMBER, BIRTH YEAR, HEALTH INS IND. Rows A, B, C, D.

GUBERNATORIAL ELECTIONS FUND

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

Main tax table with 3 columns: Line number, Description, Amount. Includes lines 14-36 with amounts like 14678, 1952, 16630, 3064, 13566.



040MP03130

PATTERSON FRED P

641020752

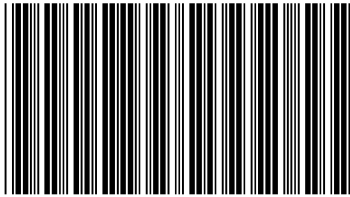
1045

37A	TOTAL PROPERTY TAXES PAID (SEE INSTRUCTION PAGE 29)	37A.	9578	.
37B.	FILL IN OVAL IF YOU WERE A NEW JERSEY HOMEOWNER ON OCTOBER 1, 2013	37B.	X	
37C.	PROPERTY TAX DEDUCTION (SEE INSTRUCTION PAGE 32)	37C.	9578	.
38.	NEW JERSEY TAXABLE INCOME (SUBTRACT LINE 37C FROM LINE 36) IF ZERO OR LESS, MAKE NO ENTRY	38.	3988	.
39.	TAX (FROM TAX TABLES, PAGE 52)	39.	56	.
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.	56	.
43.	SHELTERED WORKSHOP TAX CREDIT	43.		.
44.	BALANCE OF TAX AFTER CREDIT (SUBTRACT LINE 43 FROM LINE 42)	44.	56	.
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.		.
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.	56	.
48.	TOTAL NEW JERSEY INCOME TAX WITHHELD (ENCLOSE FORMS W-2 AND 1099)	48.	55	.
49.	PROPERTY TAX CREDIT (SEE INSTRUCTION PAGE 32)	49.		.
50.	NEW JERSEY ESTIMATED TAX PAYMENTS/CREDIT FROM 2012 TAX RETURN	50.		.
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.	55	.
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.	1	.
57.	IF LINE 55 IS MORE THAN LINE 47, ENTER OVERPAYMENT DEDUCTIONS FROM OVERPAYMENT ON LINE 57 WHICH YOU ELECT TO CREDIT TO:	57.		.
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.		.

**DIRECT DEPOSIT INFORMATION**

dd1.	REFUND CHECK BOX ('1' FOR REFUND, '4' FOR NO REFUND)	dd1.	4	
dd2.	ACCOUNT TYPE ('C' FOR CHECKING, 'S' FOR SAVINGS)	dd2.		
dd3.	FILL IN THE CHECK BOX IF REFUND IS GOING TO AN ACCOUNT OUTSIDE THE UNITED STATES	dd3.		
dd4.	ROUTING NUMBER	dd4.		
dd5.	ACCOUNT NUMBER	dd5.		
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 # \_\_\_\_\_

PATTERSON FRED P

3717 BAXTER ST

DENVILLE NJ 07834 1408

1045 12

641020752

S24051405

1.00



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.

> \_\_\_\_\_  
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

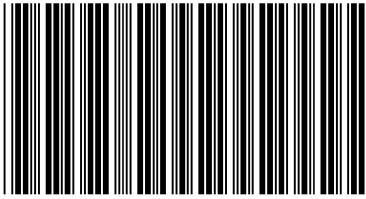
Federal Employer Identification Number

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.



0130201010

### 2013 NJ-1040-V PAYMENT VOUCHER

#### Payment by Credit Card

You may pay your 2013 New Jersey income taxes or make payment of estimated tax for 2014 by credit card by visiting the Division's website at [www.state.nj.us/treasury/taxation/](http://www.state.nj.us/treasury/taxation/) and selecting electronic services.

#### Payment by E-Check

You may pay your 2013 New Jersey income taxes or make a payment of estimated tax for 2014 by e-check. This option is available on the Division's Website at: [www.state.nj.us/treasury/taxation/](http://www.state.nj.us/treasury/taxation/) Taxpayers who do not have access to the Internet can make a payment by calling the Division's Customer Service Call Center at 609-292-6400. **Do not use the payment voucher if you pay your taxes by e-check.**

#### Payment by Check

If you are paying your 2013 New Jersey income taxes by check, be sure to enclose the payment voucher printed below with your check or money order and enclose it with your return. Mail to: State of New Jersey, Division of Taxation, Revenue Processing Center, PO Box 111, Trenton, NJ 08645-0111.

If you are making your first installment payment of estimated tax for 2014, use separate checks or money orders for each payment. Send your 2014 estimated tax payment with a NJ-1040-ES voucher to: State of New Jersey, Division of Taxation, Revenue Processing Center, PO Box 222, Trenton, NJ 08646-0222.

**DO NOT CUT THIS PAGE**

New Jersey Gross Income Tax  
Resident Payment Voucher  
NJ-1040-V

641-02-0752 PATT  
PATTERSON FRED P  
3717 BAXTER ST  
DENVERVILLE NJ 07834-

1045 2013

Make your check payable to 'State of New Jersey - TGI'  
Write your social security # and tax year on your check.

State of New Jersey  
Division of Taxation  
Revenue Processing Center  
PO Box 111  
Trenton, NJ 08645-0111

Enter amount of payment here:

1.00



013026410207520005PATT1312060000000100

NEW JERSEY GROSS INCOME TAX  
**BUSINESS INCOME SUMMARY SCHEDULE**

**2013**

Name(s) as shown on Form NJ-1040 PATTERSON FRED P	Your Social Security Number 641-02-0752
--	--

**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.	FRED P PATTERSON	641-02-0752	
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.

**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.				
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.