E 1040 Department of the Treasury—Internal Revenue Service (99)
U.S. Individual Income Tax Return

For the year Jan. 1-Dec. 31, 2012, or other tax year beginning
Your first name and initial
Last name

Hart

If a joint return, spouse's first name and initial

Home address (number and street). If you have a P.O. box, see instructions.

Apt. no.

Make sure the SSN(s) above and on line 6c are correct.

Supplement of the Treasury—Internal Revenue Service (99)

Last name

Hart

Foreign province/state/county

Foreign postal code

Jan. 1-Dec. 31, 2012, or other tax year beginning

Your social security number

Apt. no.

Make sure the SSN(s) above and on line 6c are correct.

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

							46		
Home address (num	nber and s	street). If you have a P.O. box, see it	nstructions.			Apt. I	10.	Make sure the SSN( and on line 6c are of	
One-town or post office	ce, state, a	nd ZIP code. If you have a foreign addr	ess, also complete spaces be	low (see instr	uctions).		-	Presidential Election Ca	mpaign
								heck here if you, or your spous	
Foreign country nar	ne		Foreign province/sta	ate/county		Foreign postal		intly, want \$3 to go to this fund box below will not change you	
								fund. You	Spouse
Filing Status	1	Single		4	Hea	d of household (with	qualifyir	ig person). (See instructi	ons.) If
riling Status	2	Married filing jointly (even if	only one had income)		the	qualifying person is a	child b	ut not your dependent, e	nter this
Check only one	3	<ul> <li>Married filing separately. Er</li> </ul>							
box.	are de secono	and full name here.		5	Qua	alifying widow(er) w	ith dep		
Exemptions	6a	✓ Yourself. If someone can	claim you as a depend	lent, do no	t check	k box 6a	31 31	Boxes checked on 6a and 6b	1
	b	☐ Spouse				- <del>i. i. i. i.</del>	3 3	No. of children	-
	C	Dependents:	(2) Dependent's	(3) Depend		(4) ✓ if child under qualifying for child ta:	age 17 c credit	on 6c who: • lived with you	0
	(1) First	name Last name	social security number	relationship	ionship to you (see instructions)		5)	<ul> <li>did not live with you due to divorce</li> </ul>	
If more than four	-					<del>                                     </del>		or separation (see instructions)	0
dependents, see	-					<del></del>		Dependents on 6c	
instructions and								not entered above	0
check here ▶ _	-	Tetal mush or of avametions	i l					Add numbers on lines above ▶	1
	d	Total number of exemptions of					7		00 00
Income	7	Wages, salaries, tips, etc. Att. Taxable interest. Attach Sche	AND DESCRIPTION OF THE PARTY OF				88		0 00
	8a b			8b	1		- 00	<b>'</b>	_
Attach Form(s) W-2 here. Also	9a							1	
	b	Ordinary dividends. Attach Schedule B if required					- 0.0		+
attach Forms W-2G and	10	Taxable refunds, credits, or offsets of state and local income taxes					10		1
1099-R if tax	11	Alimony received					11		
was withheld.	12	Business income or (loss). Attach Schedule C or C-EZ					12		
	13	Capital gain or (loss). Attach S			red, ch	eck here ▶ □	13		
If you did not	14	Other gains or (losses). Attacl	1-1				14	1	
get a W-2, see instructions.	15a	IRA distributions .   15a	1	b Ta	xable a	mount	15	b	
see instructions.	16a	Pensions and annuities 16a		b Ta	xable a	mount	16	b	
	17	Rental real estate, royalties, p	artnerships, S corporat	ions, trusts	s, etc. /	Attach Schedule E	17	7	
Enclose, but do	18	Farm income or (loss). Attach	Schedule F				18	3	
not attach, any payment. Also, please use Form 1040-V.	19	Unemployment compensation	n,		- ,		19	)	
	20a	Social security benefits 20a		<b>b</b> Ta	xable a	mount	20	b	
	21	Other income, List type and a					21		
	22	Combine the amounts in the far	right column for lines 7 thr			ur total income >	22	156	00
Adjusted Gross Income	23	The state of the s			-				
	24	Certain business expenses of res				1			
	-	fee-basis government officials. At			_	_	-		
	25	Health savings account dedu		First Control	+		-		
	26	Moving expenses. Attach For			_		-		1
	27	Deductible part of self-employme		100000000000000000000000000000000000000	_		-		J
	28 29	Self-employed SEP, SIMPLE, and qualified plans							
	30							11	
	31a								İ
	32	IRA deduction			_			11	
	33	Student loan interest deduction			_				
	34	Tuition and fees, Attach Form		1,2576					
	35	Domestic production activities of		100	1				
	36	Add lines 23 through 35					36	3	
	37	Subtract line 36 from line 22.					37		00

Form 1040 (2012	2)			P	age 2
	38	Amount from line 37 (adjusted gross income)	38	1560	00
Tax and	39a	Check   You were born before January 2, 1948, Blind. Total boxes			
Credits		if: ☐ Spouse was born before January 2, 1948, ☐ Blind.   checked ▶ 39a ☐		1	
Standard	) b	If your spouse itemizes on a separate return or you were a dual-status alien, check here ▶ 39b			
Deduction	40	Itemized deductions (from Schedule A) or your standard deduction (see left margin)	40	5950	00
for—	41	Subtract line 40 from line 38	41	4390	00
People who check any	42	Exemptions. Multiply \$3,800 by the number on line 6d.	42	3800	00
box on line 39a or 39b or	43	Taxable income. Subtract line 42 from line 41. If line 42 is more than line 41, enter -0-	43	590	00
who can be		Tax (see instructions). Check if any from: a Form(s) 8814 b Form 4972 c 962 election	44	0	
claimed as a dependent,	44	Alternative minimum tax (see instructions). Attach Form 6251	45	0	
see instructions.	45		46	0	
All others:	46	And in contract of	40		
Single or	47	Toreign tax oreals. Attach Total Total Total Total	-	1	
Married filing separately,	48	Credit for child and dependent care expenses. Attach i of 12441	-		
\$5,950	49	Education credits north coop, line 15	-	-	
Married filing jointly or	50	Nettrement savings contributions create Attach Form 6500	-		
Qualifying	51	Child tax credit. Attach Schedule 8812, if required 51 0	-	1	
widow(er), \$11,900	52	Residential energy credits. Attach Form 5695	4		
Head of	53	Other credits from Form: a 3800 b 8801 c 53 0			
household, \$8,700	54	Add lines 47 through 53. These are your total credits	54	0	
	55	Subtract line 54 from line 46. If line 54 is more than line 46, enter -0	55	0	
Other	56	Self-employment tax. Attach Schedule SE	56	.0	
	57	Unreported social security and Medicare tax from Form: a 4137 b 8919	57	0	
Taxes	58	Additional tax on IRAs, other qualified retirement plans, etc. Attach Form 5329 if required	58	0	
	59a	Household employment taxes from Schedule H	59a	0	
	b	First-time homebuyer credit repayment. Attach Form 5405 if required	59b	0	
	60	Other taxes. Enter code(s) from instructions	60	0	
	61	Add lines 55 through 60. This is your total tax	61	0	
Payments	62	Federal income tax withheld from Forms W-2 and 1099 62 2318 7	3		
	63	2012 estimated tax payments and amount applied from 2011 return 63 0		1	
If you have a	64a	Earned income credit (EIC) 64a 0		1	
qualifying	b	Nontaxable combat pay election 64b		1	
child, attach Schedule EIC.	65	Additional child tax credit. Attach Schedule 8812 65			
	66	American opportunity credit from Form 8863, line 8 66		1	
	67	Reserved	1	1	
	68	Amount paid with request for extension to file 68	1		
	69	Excess social security and tier 1 RRTA tax withheld 69	-	- 1	
	70	Credit for federal tax on fuels. Attach Form 4136 70			
	7 (5 (5 (5 (5 (5 (5 (5 (5 (5 (5 (5 (5 (5	Credits from Form: a	-	1	
	71 72	Add lines 62, 63, 64a, and 65 through 71. These are your total payments	72	2318	73
Refund	73	If line 72 is more than line 61, subtract line 61 from line 72. This is the amount you overpaid	73	2318	73
neiuliu		Amount of line 73 you want refunded to you. If Form 8888 is attached, check here .	74a	2318	73
	74a		140	2010	, ,
Direct deposit? See	▶ b				
instructions.	▶ d	Account number		1	
Amount	75	Amount of line 73 you want applied to your 2013 estimated tax ▶ 75 Amount you owe. Subtract line 72 from line 61. For details on how to pay, see instructions ▶	70	0	
You Owe	76		76		
Tou owe	77	Estimated tax penalty (see instructions)	0 /		
Third Party	Do	you want to allow another person to discuss this return with the IRS (see instructions)?	s. Comple	ete below. 🔽 🖡	NO
Designee		signee's Phone Personal ident	fication		_
0.		me ▶ no. ▶ number (PIN)	<b>P</b>		_
Sign	Un	der penalties of perjury. I declare that I have examined this return and accompanying schedules and statements, and to by are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer	the best of	my knowledge and beli v knowledge	ef,
Here		Term Land	1		
Joint return? See	Yo	ur signature Date Your occupation	, who are the control of	e phone number	
instructions.		n/a		y mail only please	
Keep a copy for your records.	Sp	ouse's signature. If a joint return, both must sign. Date Spouse's occupation	If the IRS PIN, enter	sent you an Identity Prote	ction
700 10001001		n/a	here (see	inst.)	
Paid	Pri	nt/Type preparer's name Preparer's signature Date	Check	☐ if PTIN	
Preparer			self-emp		
Use Only	Fin	m's name ▶ Firm's EIN ▶			
Jac Offiny	Fin	m's address ▶ Phone no.			

(Rev. August 2013)

Department of the Treasury Internal Revenue Service

## Substitute for Form W-2, Wage and Tax Statement, or Form 1099-R. Distributions From Pensions, Annuities, Retirement or Profit-Sharing Plans, IRAs, Insurance Contracts, etc.

▶ Attach to Form 1040, 1040A, 1040-EZ, or 1040X.

▶ Information about Form 4852 is available at www.irs.gov/form4852.

OMB No. 1545-0074

1 Name( Benjamin Ry	s) shown on return	2 Your social security number
3 Addres		
THE PARTY OF		
a Enter	year in space provided and check one box. For the tax year ending December	31. 2012
	been unable to obtain (or have received an incorrect)  Form W-2 OR  For	
	notified the IRS of this fact. The amounts shown on line 7 or line 8 are my best es	
	to me and tax withheld by my employer or payer named on line 5.	<b>3</b> . ,
5 Employ	yer's or payer's name, address, and ZIP code	6 Employer's or payer's
		identification number (if known
	W-2. Enter wages, tips, other compensation, and taxes withheld.	
		ithheld
	Social security wages (Name of state) .	
		ithheld
	Advance EIC payment , , , (Name of locality)	
	Social security tips	withheld
f F	federal income tax withheld	eld 588.10
8 Form	n 1099-R. Enter distributions from pensions, annuities, retirement/profit-sharing p	lans, IRAs, insurance contracts, etc.
a 0	Gross distribution 0 f Federal income tax	withheld
		ithheld
	axable amount not determined .   h Local income tax w	ithheld
d T	otal distribution i Employee contribut	ions 0
e C	Capital gain (included in line 8b)	0
Company position  10 Explain The company	id you determine the amounts on lines 7 and 8 above? rovided records and the statutory language behind IRC sections 3401 and 3121 are n your efforts to obtain Form W-2, Form 1099-R, or Form W-2c, Corrected Wage and the refuses to issue forms correctly listing payments of "wages as defined in 3401(as listed as withheld on the W-2 it submitted are correct, however.  Under penalties of perjury, I declare that I have examined this statement, and to the	and Tax Statement. a) and 3121(a)" for fear of IRS retaliation.
Sign Here	correct, and complete.  Signature ▶	Date ▶

## General Instructions

Section references are to the Internal Revenue Code.

Future developments. The IRS has created a page on IRS.gov for information about Form 4852, at www.irs.gov/form4852. Information about any future developments affecting Form 4852 (such as legislation enacted after we release it) will be posted on that page.

Purpose of form. Form 4852 serves as a substitute for Forms W-2, W-2c, and 1099-R and is completed by you or your representatives when (a) your employer or payer does not issue you a Form W-2 or Form 1099-R or (b) an employer or payer has issued an incorrect Form W-2 or Form 1099-R. Attach this form to the back of your income tax return, before any supporting forms or schedules.

You should always attempt to get Form W-2, Form W-2c, or Form 1099-R from your employer or payer before contacting the IRS or filling Form 4852. If you do not receive the missing or corrected form from your employer or payer by February 14, you may call the IRS at 1-800-829-1040 for assistance. You must provide your name, address (including ZIP code), phone number, social security number, and dates of employment, and your employer's or payer's

name, address (including ZIP code), and phone number. The IRS will contact your employer or payer and request the missing form. The IRS also will send you a Form 4852. If you do not receive the missing form in sufficient time to file your income tax return timely, you may use the Form 4852 that the IRS sent you.

If you received an incorrect Form W-2 or Form 1099-R, you should always attempt to have your employer or payer issue a corrected form before filing Form 4852.

Note. Retain a copy of Form 4852 for your records. To help protect your social security benefits, keep a copy of Form 4852 until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year. After September 30 following the date shown on line 4, you may use a my Social Security online account to verify wages reported by your employers. Please visit www.ssa.gov/myaccount. Or, you may contact your local SSA office to verify wages reported by your employer.

Will I need to amend my return? If you receive a Form W-2, Form W-2c, or Form 1099-R after your return is filed with Form 4852, and the information differs from the information reported on your return,