## Personal Income Tax Test #1

IT-140
REV 8-18 West Virginia Personal Income Tax Return 2018

			<u> </u>									
SOCIAL SECURITY NUMBER	400-00-5	308	Deceased  Date of Death:		*SPOUS SOCIAL SE NUMB	CURITY				Deceased Date of Death		
LAST NAME	Sitter				SUFFIX		YOUR FIRST NAME	Bab	<b>y</b>		MI	I
SPOUSE'S LAST NAME				SUFFIX		SPOUSE'S FIRST NAME				MI		
FIRST LINE OF ADDRESS	222 Nur	sery Way			SECOND OF ADDI							
CITY	Charle	ston			STATE	wv	ZIP CODE	25305				
TELEPHONE NUMBER	304-40	5-6577 <sub>E</sub>	babysi	tter@gm	ail.com		E	CTENDED DUE DA' MM/DD/YY				
Amended return	Check before 4 (amended retu		o stop the original debit	Net	Operating L	oss	Nonresident Special (See instru	Nonreside Year Resid	ent	Form WV-8379		s an
STA	.ING ATUS	Exempt c. List your de	tions (If someo	one can claim y n five depende				page 38.	"1" in boxes if they apply	Spous	elf (a) se (b)	1
l _ `	ck One)	F	First name		Last r	name		Social Secu Number	rity	Date of Birt (MM DD YY)	th YY)	-
│ ¹ │ Single		Cuddle			Sitter			400-00-53	53	08-25-2002		_
P Head o	of Household											_
<sup>3</sup> Married	d, Filing Joint											
Separa												_
	oouse's SS# and the boxes above											
	(er) with dent child	Enter dece	xemption if surviving s dents SSN: 600-00- ptions (add boxes a, b	1001	Year S		oied: 2016			dependents	(c) (d) (e)	1 3
·		o. Total Exomp	otiono (ada boxeo a, b	, o, and a). Em	or nore und		) bolow. 11 bo/	( 0 10 2010, Cittor ¢		, bolow.	(0)	
1. Federal Ac	djusted Gross Inco	ome or income to	o claim senior citize	en tax credit f	rom Sched	dule SC	TC-1	1		75894		.00
2. Additions t	o income (line 33	of Schedule M).						2		400	1	.00
3. Subtraction	ns from income (li	ne 50 of Schedu	ule M)					3		257	23	.00
4. West Virginia Adjusted Gross Income (line 1 plus line 2 minus line 3)								4		5417	2	.00
5. Low-Income Earned Income Exclusion (see worksheet on page 23)								.00				
				0			6		60	00	.00	
, , , , , , , , , , , , , , , , , , , ,									481	72	.00	
<ul> <li>7. West Virginia Taxable Income (line 4, minus lines 5 &amp; 6) IF LESS THAN ZERO, ENTER Z</li> <li>8. Income Tax Due (Check One)</li> <li>X Tax Table</li> <li>Rate Schedule</li> <li>Nonresident/Part-year resident calculation</li> </ul>									2	066	.00	
ZY IAX II			_									.55
PAYMENT	TAX DEF	SCTC NF	RSR HEPTC	Bab	y Siller's	DL#:	E024698	)				
PLAN												

## Personal Income Tax Test #1

	PRIMARY LAST NAME SHOWN ON FORM IT-140	Sitter	SOCIAL SECURITY NUMBER	400-00-5308	8.Total Taxes Due (line 8 from previous page)	8	2065	.00
9. \		e Tax Withheld (SEE INSTRUCTIC SALE OF REAL ESTATE)				9	200	.00
10. Estimated Tax Payments and Payments with Schedule L					10	500	.00	
11. Family Tax Credit if applicable (see required schedule on page 38)					11		.00	
12.	Senior Citizen Tax	Credit for property tax paid from Sc	hedule SCTC-1			12		.00
13.	Homestead Excess	s Property Tax Credit for property to	ax paid from Schedul	e HEPTC-1		13		.00
14.	Credits from Tax C	redit Recap Schedule (see schedu	le on page 6)			14	1294	.00
15.	Amount paid with o	original return (amended return only	·)			15		.00
16.	Payments and Cre	dits (add lines 9 through 15)				16	1994	.00
17.	Overpayment prev	iously refunded or credited (amend	ed return only)		<u></u>	17		.00
18.	Total payments and	d credits (line 16 minus line 17)				18	1994	.00
	Penalty Due from F	, ,				19		.00
20								.00
	_	Tax Due on out-of-state purchases dren's Trust Fund to help prevent c			USE IAX DUE	20		
	-	of your contribution \$5 \$5				21		.00
22.	Add line 8 to the to	tal of lines 19, 20, and 21. This is y	our total amount due	)		22	2066	.00
23.	Balance Due (	ine 22 minus line 18). If Line 18 is ç	greater than line 22,	go to line 24	PAY THIS AMOUNT	23	72	.00
24.	If line 18 is greater	than line 22, subtract line 22 from	line 18. This is your <b>t</b>	total overpayment		24		.00
25.	Amount of overpay	ment to be credited to your 2019 e	stimated tax			25		.00
26.	Refund due you (lin	ne 24 minus line 25)			REFUND	26		.00
	rect Deposit Refund	CHECKING	SAVINGS	ROUTING NUMBE	R	ļ.	ACCOUNT NUMBER	
		YOUR ACCOUNT INFORMATION			RMATION MAY RESULT IN	A \$15.00	RETURNED PAYMENT CH	IARGE.
		Department to discuss my return with r I declare that I have examined this retu		NO edules, and statements, and to	the best of my knowledge and	l belief, it	is true, correct and complete	
							304-405-	6577
	Your Signature		Date Spouse	s's Signature			Date Telephone N	Number
	Preparer: Check He client is requesting t form NOT be e-filed	that 4000/4			D:		987-542	
		Preparer's EIN	Signature of prepare		Printed Name		Date Telephone N	Number
	MAIL TO:	REFUND WV State Tax Depal P.O. Box 1071 Charleston, WV 2532		BALANCE DUE V State Tax Departme P.O. Box 3694 arleston, WV 25336-3	Routin	g#: 0	Checking 51001501 2470201	





## Modifications to Adjusted Gross Income

2018

Modifications Increasing Federal Adjusted G	ross Income						
27. Interest or dividend income on federal obligations which is exempt from	e tax.		27		2000	.00	
28. Interest or dividend income on state and local bonds other than bonds			28		1000	.00	
29. Interest on money borrowed to purchase bonds earning income exem	npt from West Virginia tax			29		1001	.00
30. Qualifying 402(e) lump-sum income NOT included in federal adjusted	I gross income but subject to sta	te tax		30			.00
31. Other income deducted from federal adjusted gross income but subjections.	ect to state tax			31			.00
32. Withdrawals from a WV Prepaid Tuition/SMART529® Savings Plan NO	T used for payment of qualifying e	expen	ses	32			.00
33. TOTAL ADDITIONS (Add lines 27 through 32). Enter here and on Lin	e 2 of Form IT-140		;	33		4001	.00
Modifications Decreasing Federal Adjusted 0			Column A (Y	ou)		Column B (Spo	
34. Interest or dividends received on United States or West Virginia oblig adjusted gross income but exempt from state tax	gations included in federal	34	50	.0	0	•	.00
35. Total amount of any benefit (including survivorship annuities) received from a police, deputy sheriffs' or firemen's retirement system. Excluding PERS –ple	any West Virginia state or local ease see instructions on page 22	35	10	.0	0		.00
36. Up to \$2,000 of benefits received from West Virginia Teachers' Retire West Virginia Public Employees' Retirement System	ement System and	36		.0	0		.00
37. Up to \$2,000 of benefits from Federal Retirement Systems (Title 4 U Combined amounts of Lines 36 and 37 must n		37	2000	.0	0		.00
38. Military Retirement Modification		38	20000	.0	0		.00
39. Active Duty Military pay (see instructions on page 22) Must enclose m	nilitary orders	39	250	.0	0		.00
40. Active Military Separation (see instructions on page 22) Must enclose mil	itary orders and discharge papers	40	1075				.00
41. Refunds of state and local income taxes received and reported as inc	come to the IRS	41	18	.0			.00
42. Contributions to the West Virginia Prepaid Tuition/Savings Plan Trust	Funds	42	120	.0	0		.00
43. Railroad Retirement Board Income received		43		.0	0		.00
44. Check one:  Long-Term Care Insurance IRC 1341 Repayments Autism	Modification (instructions on page 22)	44	1000				.00
45. West Virginia "EZ PASS" deduction		45	1200				.00
EZ Pass Transponder #							
Senior Year of citizen or birth disability 65 or older (a) Income not included in lines 39 through 45 NOT TO EXCEED 8000.00 (b) Add lines 34 through 38			(c) Subtract (b) (If less than			er zero)	
46. YOU .00	22060	00		.0	0		
47. SPOUSE .00	.0	00					.00
48. Surviving spouse deduction (see instructions on page 23)		48		.0	0		.00
49. Add lines 34 through 48 for each column		49	25723	.0	0		.00
	50. Total Subtractions (line 49, 0 Enter here and on line 3 of			n B) 5(	0	25723	.00



EX PASS #'s: 123456 789012 345617 190212



## Tax Credit Recap Schedule

2018

This form is used by individuals to summarize tax credits that they claim against their personal income tax. In addition to completing this summary form, each tax credit has a schedule or form that is used to determine the amount of credit that can be claimed. Both this summary form and the appropriate credit calculation schedule(s) or form(s) MUST BE ENCLOSED with your return in order to claim a tax credit. Information for all of these tax credits may be obtained by visiting our website at tax.wv.gov or by calling the Taxpayer Services Division at 1-800-982-8297.

Note: If you are claiming the Schedule E credit(s) or the Neighborhood Investment Program Credit you are no longer required to enclose the other state(s) return(s) or the NIPA-2 schedule with your return. You must maintain the other state(s) return(s) or NIPA-2 schedule in your files.

WEST VIRGINIA TAX CREDIT RECAP SCHEDULE						
TAX CREDIT	SCHEDULE	APPLICABLE CREDIT				
Credit for Income Tax paid to another state(s)	E	1	.(	00		
** For what states?						
2. Non-family Adoption Credit	WV/NFA-1	2	500	00		
General Economic Opportunity Tax Credit	WV/EOTC-PIT	3	50 .	.00		
WV Environmental Agricultural Equipment Credit	WV/AG-1	4	95	.00		
5. WV Military Incentive Credit	J	5	50	.00		
Neighborhood Investment Program Credit	NIPA-2	6	80 .0	00		
Historic Rehabilitated Buildings Investment Credit	RBIC	7	50 .0	00		
Qualified Rehabilitated Buildings Investment Credit	RBIC-A	8	89 .	.00		
West Virginia Film Industry Investment Tax Credit	WV/FIIA-TCS	9	65 .0	.00		
10. Apprenticeship Training Tax Credit	WV/ATTC-1	10	56 .0	00		
11. Alternative-Fuel Tax Credit	AFTC-1	11	89 .0	00		
12. Conceal Carry Gun Permit Credit	CCGP-1	12	50 .0	.00		
13. Farm to Food Bank Tax Credit		13	120 .0	.00		
14. <b>TOTAL CREDITS</b> — add lines 1 through 13. <i>Enter on Form IT-140, lin</i>	ne 14	14	1294	.00		
**You cannot claim credit for taxes paid to KY, MD, PA, OH, or VA u	nless your source income is	other than wa	ges and/or salaries.			



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