

FAM-00 Brown Scenario

Step 0 Intake + Interview → Filing Status, Dependency

Interview Notes:

1. See intake sheet and NJ checklist

social Security
781-00-XXXX
THIS NUMBER HAS BEEN ESTABLISHED FOR
HENRY BROWN
For Tax-Aide Training Purposes Only

social Security
782-00-XXXX
THIS NUMBER HAS BEEN ESTABLISHED FOR
MARY BROWN
For Tax-Aide Training Purposes Only

social Security
783-00-XXXX
THIS NUMBER HAS BEEN ESTABLISHED FOR
GEORGE V BROWN
For Tax-Aide Training Purposes Only

social Security
784-00-XXXX
THIS NUMBER HAS BEEN ESTABLISHED FOR
SUSAN B COX
For Tax-Aide Training Purposes Only

FAM-00 Brown Scenario

Step 1 Basic Information

TP Form / Note	TS Screen	Notes
SS Card	Start a New 2019 Tax Return Available Taxpayer Profiles	TS: Enter Social Security Number of Primary taxpayer twice. Hint: SSN format- Use any 4 digits for the last four numbers of the SSN. TS: Ignore the "Available Taxpayer Profiles" TS: Select "Start Return"
Intake Sheet	What is your filing Status?	TS Answer: Filing Status: "Married filing jointly" TS: "Continue"
SS Card Intake Sheet G-Note 2	Personal Information Taxpayer Information Spouse Information Address & Phone Number	TS: Enter all information using "Caps Lock" Hint: Use Name and SSN from SS card. (Not Intake Sheet) Hint: SSN format - - Use any 4 digits for the last four numbers of the SSN. TS: Birth date can be entered using drop down menu or filling in the field. TS: Check any of the "Check here" questions that apply – <ul style="list-style-type: none"> TS- Check presidential election campaign fund for SP TS: Spouses last name auto populates when field is selected. Change if required. TS: Use the address where the taxpayer receives mail. TS: Enter Zip code- TaxSlayer fills in city and state. Correct if required TS: New Jersey automatically populates as the Resident State TS: "Continue"
I-Note 6 &10	New Jersey Return NJ Property Tax Credit or Deduction Do you meet Property Tax Credit or Deduction Eligibility Requirements? Did you and, if applicable, all members of your health care shared responsibility family, have qualifying coverage for every month in 2019? NOTE: If you answer 'NO', you will need to identify for each person in the household, whom had health coverage for each month, if applicable.	Hint: Begin NJ Checklist . TS Answer: At this point answer "No". We will go back and adjust after the Federal Return is complete TS Answer: "Yes" At this point just hit ""Continue"" We will go back and adjust after the Federal Return is complete

FAM-00 Brown Scenario

TP Form / Note	TS Screen	Notes
I-Note 1	Dependents or Qualifying Person(s) Do you have any dependents or qualifying person(s) to claim on your return?	TS: Select Yes
Intake Sheet, SS Card I-Note 1,2,3	Dependent/Qualifying Child Information	<p>Add dependent information Hint: Use name and SSN from SS card (Not Intake Sheet) TS: Last name auto populates. Change if required Answer: SSN format- Use any 4 digits for the last four numbers of the SSN. TS: Check the "Check All That Apply" questions that apply</p> <ul style="list-style-type: none"> • Hint: Both dependents are U.S Citizens and full-time students, but only George is over 18 and a full-time student at an eligible educational institution <p>TS: Add second dependent information Hint: Susan's last name is Cox. Make the change. TS: Select ""Continue"", ""Continue"", ""Continue""</p>

Federal AGI: 0 Federal Refund: 0 NJ Refund Amount: 0

Step 2 SSA-1099

TP Form / Note	TS Screen	Notes
SSA-1099	Left Menu -Federal Section Income 1099-R, RRB-1099, RRB-1099-R, SSA-1099 - Begin Social Security Benefits/RRB-1099 -Begin	<p>TS: Enter SSA-1099 Data Hint: Use TP4F Scratch Pad to document Medicare Parts B, C, D. Insert total in "Taxpayer's Medicare Premiums". Amount = \$1,889 TS: ""Continue"", ""Continue""</p>

FAM-00 Brown Scenario

FORM SSA-1099 - SOCIAL SECURITY BENEFIT STATEMENT																											
<div style="display: flex; align-items: center;"> 2019 <div style="font-size: 10pt;"> <input type="radio"/> PART OF YOUR SOCIAL SECURITY BENEFITS SHOWN IN BOX 5 MAY BE TAXABLE INCOME. <input type="radio"/> SEE THE REVERSE FOR MORE INFORMATION. </div> </div>																											
Box 1. Name HENRY BROWN	Box 2. Beneficiary's Social Security 781-00-XXXX																										
Box 3. Benefits Paid in 2019 \$13,333.00	Box 4. Benefits Repaid to SSA in 2019	Box 5. Net Benefits Paid for 2019 (Box 3 minus Box 4) \$13,333.00																									
<table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 50%; text-align: left; padding: 2px;">DESCRIPTION OF AMOUNT IN BOX 3</th> <th style="width: 50%; text-align: right; padding: 2px;"></th> </tr> </thead> <tbody> <tr> <td style="padding: 2px;">Paid by check or direct deposit</td> <td style="text-align: right; padding: 2px;">\$10,111.20</td> </tr> <tr> <td style="padding: 2px;">Medicare Part B premiums deducted from your benefits</td> <td style="text-align: right; padding: 2px;">\$1,258.80</td> </tr> <tr> <td style="padding: 2px;">Medicare Prescription Drug premiums (Part D) deducted from your benefits</td> <td style="text-align: right; padding: 2px;">\$630.00</td> </tr> <tr> <td style="padding: 2px;">Total Additions</td> <td style="text-align: right; padding: 2px;">\$13,333.00</td> </tr> <tr> <td style="padding: 2px;">Benefits for 2019</td> <td style="text-align: right; padding: 2px;">\$13,333.00</td> </tr> <tr> <td style="padding: 2px;">Benefits for 2018</td> <td></td> </tr> <tr> <td style="padding: 2px;">Benefits for 2017</td> <td></td> </tr> <tr> <td style="padding: 2px;">Benefits for 2016</td> <td></td> </tr> </tbody> </table>		DESCRIPTION OF AMOUNT IN BOX 3		Paid by check or direct deposit	\$10,111.20	Medicare Part B premiums deducted from your benefits	\$1,258.80	Medicare Prescription Drug premiums (Part D) deducted from your benefits	\$630.00	Total Additions	\$13,333.00	Benefits for 2019	\$13,333.00	Benefits for 2018		Benefits for 2017		Benefits for 2016		<table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left; padding: 2px;">DESCRIPTION OF AMOUNT IN BOX 4</th> </tr> </thead> <tbody> <tr> <td style="padding: 2px;">Box 6. Voluntary Federal Income Tax Withheld</td> </tr> <tr> <td style="text-align: center; padding: 2px;">\$1,333.00</td> </tr> <tr> <td style="padding: 2px;">Box 7. Address</td> </tr> <tr> <td style="padding: 2px;">HENRY BROWN 25 DIAMOND ROAD DENVER, NJ 07834</td> </tr> <tr> <td style="padding: 2px;">Box 8. Claim Number (use this number if you need to contact SSA)</td> </tr> <tr> <td style="text-align: center; padding: 2px;">781-00-XXXXA</td> </tr> </tbody> </table>	DESCRIPTION OF AMOUNT IN BOX 4	Box 6. Voluntary Federal Income Tax Withheld	\$1,333.00	Box 7. Address	HENRY BROWN 25 DIAMOND ROAD DENVER, NJ 07834	Box 8. Claim Number (use this number if you need to contact SSA)	781-00-XXXXA
DESCRIPTION OF AMOUNT IN BOX 3																											
Paid by check or direct deposit	\$10,111.20																										
Medicare Part B premiums deducted from your benefits	\$1,258.80																										
Medicare Prescription Drug premiums (Part D) deducted from your benefits	\$630.00																										
Total Additions	\$13,333.00																										
Benefits for 2019	\$13,333.00																										
Benefits for 2018																											
Benefits for 2017																											
Benefits for 2016																											
DESCRIPTION OF AMOUNT IN BOX 4																											
Box 6. Voluntary Federal Income Tax Withheld																											
\$1,333.00																											
Box 7. Address																											
HENRY BROWN 25 DIAMOND ROAD DENVER, NJ 07834																											
Box 8. Claim Number (use this number if you need to contact SSA)																											
781-00-XXXXA																											

Form SSA-1099-SM

Federal AGI: 0 Federal Refund: 1,333 NJ Refund Amount: 0

Step 3 W-2 Green Grass Golf

W-2 Green Grass Golf	Left Menu - Income W-2 Complete W-2 Information- Begin	Hint: This is Henry Brown's W-2 Hint: Make corrections so that information matches the information on the paper W-2. <ul style="list-style-type: none"> TP address shown on the TS W-2 should match the paper W-2 If the name and address of the employer come up after inputting the employer Identification Number, check that the information matches the paper W-2 Hint: Always round up for cents amounts ending in .50 or enter cents and TS will round it for you. Hint: Box 14 NJ Codes are selected from drop down menu. All other entries in box 14 are lumped under "Other" Hint: If NJ State EIN auto populates, check to be sure it is correct TS: Click Save & Enter Another
-------------------------	---	--

FAM-00 Brown Scenario


a. Employee's social security number 781-00-XXXX		Save. accurate, FAST! Use OMB No. 1545-0008				Visit the IRS website at www.irs.gov/efile	
b. Employer identification number (EIN) 70-9000752		1. Wages, tips, other compensation \$15,100.00		2. Federal income tax withheld \$975.00			
c. Employer's name, address, and ZIP code GREEN GRASS GOLF 25 WOOD LANE DENVILLE, NJ 07834		3. Social security wages \$15,100.00		4. Social security tax withheld \$936.20			
		5. Medicare wages and tips \$15,100.00		6. Medicare tax withheld \$218.95			
		7. Social security tips		8. Allocated tips			
d. Control number		9.		10. Dependant care benefits			
e. Employee's first name and initial Last name Suff. Employee's address and ZIP code HENRY BROWN 25 DIAMOND ROAD DENVILLE, NJ 07834		11. Nonqualified plans		12a. See instructions for box 12			
		13. Statutory Employee Retirement Plan Third-party sick pay <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		12b.			
		14. Other NJSUI 64.18 ----- NJSDI 25.67 ----- NJFLI 12.08 -----		12c.			
		14. Other ----- ----- -----		12d.			
15. State	Employer's state ID number	16. State wages, tips, etc.	17. State income tax	18. Local wages, tips, etc.	19. Local income tax	20. Locality name	
NJ	709000752	\$15,100.00	250.00				
Form W-2 Wage and Tax Statement 2019 Copy B - To Be Filed With Employee's FEDERAL Tax Return. This information is being furnished to the Internal Revenue Service.							

Federal AGI: 15,100
Federal Refund: 8,136
NJ Refund Amount: 2,523

FAM-00 Brown Scenario

Step 4 W-2 Joe's Bar & Grill

TP Form / Note	TS Screen	Notes
W-2 Joe's Bar & Grill	Add W-2 Statement	<p>Hint: This is Mary Brown's W-2</p> <p>Hint: Make corrections so that information matches the information on the paper W-2.</p> <ul style="list-style-type: none"> • TP address shown on the TS W-2 should match the paper W-2 <ul style="list-style-type: none"> ○ Mary's address on the paper W-2 differs from the electronic W-2. Make the correction • If the name and address of the employer come up after inputting the employer Identification Number, check that the information matches the paper W-2 • Check boxes 3-7 for correct entries <p>TS: Certain characters are not allowed for E-File (#, '). TS will remove them once the form is saved</p> <p>TS: Always round up for amounts ending in --.50</p> <p>Hint: Box 14 NJ Codes are selected from drop down menu. All other entries in box 14 are lumped under "Other"</p> <p>Hint: If NJ State EIN auto populates, check to be sure it is correct</p> <p>TS: Click "Continue"</p> <p>TS: Warning Message: Be sure the numbers entered are the numbers on the paper W-2. Click on "Cancel", check numbers. If numbers are correct, click "Continue" and then click ""Continue"" on the message.</p>

a. Employee's social security number 782-00-XXXX		Save. accurate, FAST! Use				Visit the IRS website at www.irs.gov/efile	
b. Employer identification number (EIN) 70-8000752		1. Wages, tips, other compensation \$20,900.50		2. Federal income tax withheld \$1,400.00			
c. Employer's name, address, and ZIP code JOE'S BAR & GRILL 34 FUDY CT DENVER, NJ 07834		3. Social security wages \$22,796.50		4. Social security tax withheld \$1,444.63			
		5. Medicare wages and tips \$23,300.50		6. Medicare tax withheld \$337.86			
		7. Social security tips \$504.00		8. Allocated tips			
d. Control number		9.		10. Dependant care benefits			
e. Employee's first name and initial Last name Suff. Employee's address and ZIP code MARY BROWN 32145 LONG ROAD DOVER, NJ 07801		11. Nonqualified plans		12a. See instructions for box 12 D \$2,400.00			
		13. Statutory Employee Retirement Plan Third-party sick pay <input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/>		12b.			
		14. Other NJSUI 88.83		12c.			
		NJSDI 35.53 NJFLI 16.72		12d.			
15. State NJ	Employer's state ID number 708000752	16. State wages, tips, etc. \$20,900.50	17. State income tax 300.00	18. Local wages, tips, etc.	19. Local income tax	20. Locality name	
<p>Form W-2 Wage and Tax Statement 2019</p> <p>Copy B - To Be Filed With Employee's FEDERAL Tax Return.</p> <p>This information is being furnished to the Internal Revenue Service.</p>							

Federal AGI: 41,335 Federal Refund: 5,897 NJ Refund Amount: 1,033

FAM-00 Brown Scenario

Step 5 Interest 1099-INT

TP Form / Note	TS Screen	Notes
1099-INT National City Bank	Left Menu - Income 1099-DIV,INT,OID - Begin Interest or Dividend Income -Begin Interest Income, Form 1099-INT,Form 1099-OID - ""Continue""	TsS: Enter Payer's Name Hint: Select for Taxpayer Enter values that apply. ""Continue""

<input type="checkbox"/> CORRECTED (if checked)						
PAYER'S name Street address City or town, state or province, country, ZIP or foreign postal code Telephone no. NATIONAL CITY BANK 15 MAIN ST. DENVER, NJ 07834		Payer's RTN (optional)	OMB No. 1545-0112 2019 Form 1099-INT		Interest Income	
		1 Interest income \$325.00			Copy B	
		2 Early withdrawal penalty \$46.00			For Recipient	
PAYER'S TIN 70-7XXXXXX	RECIPIENT'S TIN 781-00-XXXX	3 Interest on US Savings Bonds and Treas. obligations		This is important tax information and is being furnished to the IRS. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported		
RECIPIENT'S name Street address (including apt.no.) City or town, state or province, country, ZIP or foreign postal code HENRY BROWN 25 DIAMOND ROAD DENVER, NJ 07834		4 Federal income tax withheld	5 Investment expenses			
		6 Foreign Tax Paid	7 Foreign Country or US possession			
FATCA filing requirement <input type="checkbox"/>		8 Tax exempt interest	9 Specified private activity bond interest			
		10 Market Discount	11 Bond Premium			
		12 Bond premium on Treasury obligations	13 Bond Premium on tax-exempt bond			
Account number (see instructions)		14 Tax-exempt and tax credit bond CUSIP no.	15 State	16 State Identification no.	17 State tax withheld	
Form 1099-INT						

Federal AGI: 41,754

Federal Refund: 5,557

NJ Refund Amount: 990

FAM-00 Brown Scenario

Step 6 Dividends 1099-DIV

TP Form / Note	TS Screen	Notes
1099-DIV BNY Mellon	Add an Interest and Dividends Dividend Income, Form 1099-DIV "Continue"	TS: Enter Payer's Name Hint: Select for Taxpayer Enter values that apply "Continue"

<input type="checkbox"/> CORRECTED (if checked)				Dividends and Distributions		
PAYER'S name Street address City or town, state or province, country, ZIP or foreign postal code Telephone no. BNY MELLON PO BOX 9879 PROVIDENCE, RI 02940		1 Total Ordinary Dividends \$645.00	OMB No. 1545--0110 2019 Form 1099-DIV		Copy B For Recipient This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.	
		1b Qualified Dividends \$455.00				
		2a Total capital gain distr. \$256.00	2b Unrecap. Sec. 1250 gain			
PAYER'S TIN 70-6XXXXXX	RECIPIENT'S TIN 781-00-XXXX	2c Section 1202 gain	2d Collectables (28%) gain			
RECIPIENT'S name Street address (including apt.no.) City or town, state or province, country, ZIP or foreign postal code HENRY BROWN 25 DIAMOND ROAD DENVILLE, NJ 07834		3 Nondividend distributions	4 Federal income tax withheld			
		5 Section 199A dividends	6 Investment expenses			
		7 Foreign Tax Paid	8 Foreign Country or US possession			
FATCA filing requirement <input type="checkbox"/>		9 Cash liquidation distributions	10 Noncash liquidation distribution			
		11 Exempt-Interest dividends	12 Specified private activity bond interest dividends			
Account number (see instructions)		13 State	14 State Identification no.	15 State tax withheld		
		-----		-----		
Form 1099-DIV						

Federal AGI: 43,105

Federal Refund: 5,213

NJ Refund Amount: 864

FAM-00 Brown Scenario

Step 7 1099-R

TP Form / Note	TS Screen	Notes
1099-R Fidelity Investments	Left Menu -Federal Section- Income 1099-R, RRB-1099, RRB-1099-R, SSA-1099 – Edit Add or edit a 1099-R -Begin	Hint: “This 1099-R is for Henry Hint: Make corrections so that information matches the information on the 1099-R Hint: Taxable amount defaults to Gross Distribution Amount. Adjust as required. TS: You do not have to select a State for income to go to the State return. TS: “Continue”

<input type="checkbox"/> CORRECTED (if checked)						Distributions From Pensions, Annuities, Retirement or Profit-Sharing Plans, IRAs, Insurance Contracts, etc.		
PAYER'S name Street address City or town, state or province, country, ZIP or foreign postal code Telephone no. FIDELITY INVESTMENTS PO BOX 673000 DALLAS, TX 75267			1 Gross distribution \$4,500.00	<div style="font-size: 2em; font-weight: bold;">2019</div> Form 1099-R		Copy B Report this income on your federal tax return. If this form shows federal income tax withheld in box 4, attach this copy to your return. This information is being furnished to the IRS		
PAYER'S TIN 70-5000752			2a Taxable amount \$4,500.00		2b Taxable amount not determined. <input type="checkbox"/>			
RECIPIENT'S TIN 781-00-XXXX			3 Capital gain (included in box 2a).		Total Distribution <input type="checkbox"/> 4 Federal income tax withheld \$700.00			
RECIPIENT'S name Street address (including apt.no.) City or town, state or province, country, ZIP or foreign postal HENRY BROWN 25 DIAMOND ROAD DENVILLE, NJ 07834			5 Employee contributions/ Designated Roth contributions or		6 Net unrealized appreciation in employer's securities			
7 Distribution Code(s) 7			IRA/ SEP/ SIMPLE <input type="checkbox"/>		8 Other %			
9a Your percentage of total distribution %			9b Total Employee Contributions					
10 Amount allocable to IRR within 5 years		11 1st year of desig. Roth contrib.	FATCA filing requirement <input type="checkbox"/>	12 State tax withheld		13 State/Payer's state no.		
Account number (see instructions)			Date of payment	15 Local tax withheld		16 Name of locality		
17 Local distribution								
Form 1099-R								

Federal AGI: 51,377 Federal Refund: 3,035, NJ Refund Amount: 187

FAM-00 Brown Scenario

Step 8 Unemployment 1099-G

TP Form / Note	TS Screen	Notes
1099-G NJ Dep. of Labor	Left Menu- Federal Section - Income Form 1099-G Box 1 Unemployment compensation – Begin Add or Edit a 1099-G - Begin	TS: This 1099G worksheet is for Mary Brown Hint: Phone number not required Hint: State information not required “Continue”

<input type="checkbox"/> CORRECTED (if checked)			
PAYER'S name Street address City or town, state or province, country, ZIP or foreign postal code Telephone no. NEW JERSEY DEPARTMENT OF LABOR PO BOX 908 TRENTON, NJ 08625	1 Unemployment compensation <div style="text-align: center; font-size: 1.2em;">\$5,890.00</div>	OMB No. 1545-0120 <div style="text-align: center; font-size: 2em; font-weight: bold;">2019</div>	<div style="font-size: 1.2em; font-weight: bold;">Certain Government Payments</div>
PAYER'S TIN <div style="text-align: center;">22-2481818</div>	RECIPIENT'S TIN <div style="text-align: center;">782-00-XXXX</div>	2 State or local income tax refunds, credits or offsets Form 1099-G	
RECIPIENT'S name Street address City or town, state or province, country, ZIP or foreign postal code MARY BROWN 25 DIAMOND ROAD DENVILLE, NJ 07834	3 Box 2 amount is for tax year	4 Federal income tax withheld <div style="text-align: center; font-size: 1.2em;">\$589.00</div>	<div style="font-size: 1.2em; font-weight: bold;">Copy B For Recipient</div> This is important tax information and is being furnished to the IRS. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.
Account number (see instructions)	5 RTAA payments 7 Agriculture payments 9 Market gain	6 Taxable grants 8 If checked, box 2 is trade or business income > <input type="checkbox"/>	
Form 1099-G	10. State <div style="text-align: center;">NJ</div>	10b State identification no. 11 State income tax withheld	

Federal AGI: 58,904 Federal Refund: 2,488 NJ Refund Amount: 95

Step 9 Student Loan Interest

TP Form / Note	TS Screen	Notes
I-Note 2	Left Menu Federal Section – Deductions Adjustments - Begin Student Loan Interest Deduction - Begin	Enter Student Loan Interest Amount “Continue”

Federal AGI: 58,760 Federal Refund: 2,506 NJ Refund Amount: 95

FAM-00 Brown Scenario

Step 10 Itemized Deductions – Taxes You Paid

TP Form / Note	TS Screen	Notes
I-Note 4	Left Menu-Federal Section - Deductions Itemized Deductions – Begin Taxes You Paid - Begin	TS: Go to ADD SALES TAX WORKSHEET and enter ZIP Code and 365 days living in NJ TS: “Continue” – “Continue” TS: Enter real estate taxes paid “Continue”

Federal AGI: 58,760 Federal Refund: 2,506 NJ Refund Amount: 95

Step 11 Compare Standard vs Itemized Deductions

TP Form / Note	TS Screen	Notes
	Federal Section Deductions Compare Deductions - Begin	TS: Check to see if using itemized or standard deductions. Itemized = 5,352 Std = 25,700 Hint: You can view Schedule A (Itemized Deductions) by clicking on the Print Icon next to Itemized Deductions in the Deductions Menu. “Continue”

Federal AGI: 58,760 Federal Refund: 2,506 NJ Refund Amount: 95

Step 12 Health Insurance

TP Form / Note	TS Screen	Notes
G-Note 2 I-Note 10	Left Menu-Health Insurance Health Insurance Questionnaire Did you purchase health insurance via HealthCare.gov or a State Marketplace? *	TS-NO “Continue”

Federal AGI: 58,760 Federal Refund: 2,506 NJ Refund Amount: 95

FAM-00 Brown Scenario

Step 13 New Jersey Return

TP Form / Note	TS Screen	Notes
I-Note 1,5,6,8,9,10 G-Note 2,3,4	State Return –Edit Basic Information - Edit Credits <ul style="list-style-type: none"> • Property Tax Credit/Deduction-Begin 	Hint: The Brown’s meet the NJ Property Tax Credit or Deduction Eligibility Requirements. Hint: Use scratch pad at TP4F to determine the proper value for Property Tax Paid <ul style="list-style-type: none"> • Hint: Property Taxes Paid = (rent*.18) + Property taxes paid (9,000*.18) + 4,534 = \$6,154 Hint: Taxpayer was both a homeowner and renter on 2019. Hint: Brown filed for homestead benefit Hint: Enter the Block and Lot numbers Hint: County Property Located in Denville “Save” TP NJ Health Insurance Hint: All of the Brown’s had health insurance for 2019. “Save” Basic Information Hint: Use the NJ Checklist to enter NJ items TS: Complete Basic Information Hint: George is attending college, but he is not under 22 years of age. Hint: Gubernatorial Election Fund: Henry – No, Mary - Yes “Save” Save back to the beginning of the State Return and “Exit the NJ Return”

Federal AGI: 58,760 Federal Refund: 2,506 NJ Refund Amount: 202

FAM-00 Brown Scenario

Step 14 Prepare for e-file

Intake Sheet G Note 5	Left Menu – e-file –	TS – Clear up any diagnostic messages (if any)
	Federal Return Type	TS: Select “E:file: Direct Deposit” Next
	Fees	TS: No entries in Fees section except for Client email address Next
	State Return Type	TS: Select State Refund Type “E:file: Direct Deposit” Next
	Bank Accounts	TS: Enter Bank Information – <ul style="list-style-type: none"> Account Type - Checking Name of Bank not required. Deposit amount is required. Click “PULL REFUND” Enter Routing and Account numbers twice Next
	Third Party Designee Info	TS: Skip Third Party Designee. It is Out of Scope for us. Next
	Consent to Disclose	TS: Consent to Disclose Tax Return Information – Check GRANT and enter 5 digit pin (any 5 digit number) and date for TP and SP Next
	Taxpayer ID Information	TS: Skip TP ID Information Screen. Not required for NJ. Save
	Questions	TS – Questions – Answer questions from Intake sheet Part VII, lines 5,6,7 and 8 <ul style="list-style-type: none"> Assume taxpayer was present Next
		You are Done

HENRY BROWN MARY BROWN 25 DIAMOND ROAD DENVER, NJ 07834	1234
PAY TO THE _____ \$ _____ ORDER OF _____	DOLLARS
Your Bank _____ Bank City, State, ZIP Code _____	
For _____	
: 325070760 : 987123654 1234	

Federal AGI: 58,760

Federal Refund: 2,506

NJ Refund Amount: 202