

FOR TAX YEAR 2016

GURPREET SINGH & RAVINDER KAUR

ADVANTAGE ONE TAX CONSULTING INC

20610 QUARTERPATH TRACE CIRCLE

Sterling, VA 20165

(703)584-5533

ADVANTAGE ONE TAX CONSULTING INC

20610 QUARTERPATH TRACE CIRCLE
Sterling, VA 20165
nandakumarkv@aotax.com
Phone: (703)584-5533 | Fax: (703)991-0587

February 23, 2017

Gurpreet Singh & Ravinder Kaur
494 Timberlea Dr Apt 114
Rochester, MI 48309

Subject: Preparation of Your 2016 Tax Returns

Gurpreet Singh & Ravinder Kaur:

Thank you for choosing ADVANTAGE ONE TAX CONSULTING INC to assist you with your 2016 taxes. This letter confirms the terms of our engagement with you and outlines the nature and extent of the services we will provide.

We will prepare your 2016 federal and state income tax returns. We will depend on you to provide the information we need to prepare complete and accurate returns. We may ask you to clarify some items but will not audit or otherwise verify the data you submit. An Organizer is enclosed to help you collect the data required for your return. The Organizer will help you avoid overlooking important information. By using it, you will contribute to efficient preparation of your returns and help minimize the cost of our services.

We will perform accounting services only as needed to prepare your tax returns. Our work will not include procedures to find defalcations or other irregularities. Accordingly, our engagement should not be relied upon to disclose errors, fraud, or other illegal acts, though it may be necessary for you to clarify some of the information you submit. We will, of course, inform you of any material errors, fraud, or other illegal acts we discover.

The law imposes penalties when taxpayers underestimate their tax liability. Please call us if you have concerns about such penalties.

Should we encounter instances of unclear tax law, or of potential conflicts in the interpretation of the law, we will outline the reasonable courses of action and the risks and consequences of each. We will ultimately adopt, on your behalf, the alternative you select.

Our fee will be based on the time required at standard billing rates plus out-of-pocket expenses. Invoices are due and payable upon presentation. To the extent permitted by state law, an interest charge may be added to all accounts not paid within thirty (30) days.

We will return your original records to you at the end of this engagement. You should securely store these records, along with all supporting documents, canceled checks, etc., as these items may later be needed to prove accuracy and completeness of a return. We will retain copies of your records and our work papers for your engagement for seven years, after which these documents will be destroyed.

Our engagement to prepare your 2016 tax returns will conclude with the delivery of the completed returns to you (if paper-filing), or your signature and our subsequent submittal of your tax return (if e-filing). If you have not selected to e-file your returns with our office, you will be solely responsible to file the returns with the appropriate taxing authorities. Review all tax-return documents carefully before signing them.

To affirm that this letter correctly summarizes your understanding of the arrangements for this work, please sign the enclosed copy of this letter in the space indicated and return it to us in the envelope provided.

We appreciate your confidence in us. Please call (703)584-5533 if you have questions.

Sincerely,

Sudha Panjabi
ADVANTAGE ONE TAX CONSULTING INC

(Both spouses must sign for preparation of joint returns.)

Accepted By:

Taxpayer

Spouse

Date

ADVANTAGE ONE TAX CONSULTING INC

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February 23, 2017

Gurpreet Singh & Ravinder Kaur
494 Timberlea Dr Apt 114
Rochester, MI 48309

Gurpreet Singh & Ravinder Kaur:

Return Type	Refund/Balance Due	Transaction Method
Federal Income Tax	\$552 Balance Due	Direct Debit from **9500
Michigan Income Tax	\$1 Refund	Direct Deposit to **9500

The following return(s) will be e-filed and do not need to be mailed to the taxing authority:

Federal Income Tax
Michigan Income Tax

Sincerely,

Sudha Panjabi
ADVANTAGE ONE TAX CONSULTING INC

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Gurpreet Singh & Ravinder Kaur
494 Timberlea Dr Apt 114
Rochester, MI 48309

Your privacy is important to us. Please read the following privacy policy.

We collect nonpublic personal information about you from various sources, including:

- * Interviews regarding your tax situation
- * Applications, organizers, or other documents that supply such information as your name, address, telephone number, Social Security Number, number of dependents, income, and other tax-related data
- * Tax-related documents you provide that are required for processing tax returns, such as Forms W-2, 1099R, 1099-INT and 1099-DIV, and stock transactions

We do not disclose any nonpublic personal information about our clients or former clients to anyone, except as requested by our clients or as required by law.

We restrict access to personal information concerning you, except to our employees who need such information in order to provide products or services to you. We maintain physical, electronic, and procedural safeguards that comply with federal regulations to guard your personal information.

If you have any questions about our privacy policy, please contact us.

Sincerely,

Sudha Panjabi
ADVANTAGE ONE TAX CONSULTING INC

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Phone: (703)584-5533 | Fax: (703)991-0587

Customer Name	Customer Information	
Gurpreet Singh & Ravinder Kaur 494 Timberlea Dr Apt 114 Rochester, MI 48309	Invoice #:	
	Date:	February 23, 2017
	Phone:	(847)922-8995
	E-mail:	GURPREET.SINGH.82@GMAIL.COM

Your 2016 tax return was prepared by Sudha Panjabi.

Description	Fee
Federal And Supplemental Forms	
Form 1040	U.S. Individual Income Tax Return
Form 8812	Additional Child Tax Credit
Form 8879	E-File Signature Authorization
Form 9325	General Information for Electronic Filing
Wks 8812	Form 8812 Worksheet - Child Tax Credit
Wks ES	Estimated Tax Worksheet
Comparison	Tax Year Comparison Sheet
Payment	Electronic Payment Voucher
Form W-2	Wage and Tax Statement
Form W-2	Wage and Tax Statement
Form W-2	Wage and Tax Statement
Form W-2	Wage and Tax Statement
W-2 Listing	Listing of All Forms W-2
Michigan Forms	
MI 1040	Individual Income Tax Return
MI SCHW	Withholding Tax Schedule
MIEF_ACK	Efile Acknowledgement
Total Forms	16
	Forms Subtotal
	84.00
	Total Balance Due
	84.00

Payment due upon receipt. Thank you for your business!

For the year Jan. 1-Dec. 31, 2016, or other tax year beginning _____, 2016, ending _____, 20

Your first name and initial: **GURPREET** Last name: **SINGH** Your social security number: **810-64-0037**

If a joint return, spouse's first name and initial: **RAVINDER** Last name: **KAUR** Spouse's social security number: **799-53-0124**

Home address (number and street): **494 TIMBERLEA DR** Apt. no.: **114**

City, town or post office, state, and ZIP code: **ROCHESTER MI 48309**

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

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

Filing Status

1 Single

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

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

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. _____

5 Qualifying widow(er) with dependent child

Exemptions

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

b Spouse

c Dependents:

(1) First name	Last name	(2) Dependent's social security number	(3) Dependent's relationship to you	(4) Chk if child under age 17 qualifying for child tax credit (see instructions)
JAPMANN	KAUR	926-95-8060	DAUGHTER	<input checked="" type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

If more than four dependents, see instructions and check here

d Total number of exemptions claimed **3**

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

No. of children on 6c who:
 • lived with you: **1**
 • did not live with you due to divorce or separation (see instructions): _____

Dependents on 6c not entered above: _____

Add numbers on lines above: **3**

Income

7	Wages, salaries, tips, etc. Attach Form(s) W-2	7	152,473
8a	Taxable interest. Attach Schedule B if required	8a	
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	
b	Taxable amount	15b	
16a	Pensions and annuities	16a	
b	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	
b	Taxable amount	20b	
21	Other income	21	
22	Combine the amounts in the far right column for lines 7 through 21. This is your total income	22	152,473

Adjusted Gross Income

23	Educator expenses	23	
24	Certain business expenses of reservists, performing artists, and fee-basis government 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	31a	
b	Recipient's SSN ▶		
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	152,473

Tax and Credits

Table with 3 columns: Line number, Description, and Amount. Includes lines 38-56 for Tax and Credits, such as Adjusted Gross Income, Exemptions, Taxable Income, and Total Credits.

Other Taxes

Table with 3 columns: Line number, Description, and Amount. Includes lines 57-63 for Other Taxes, such as Self-employment tax, Unreported social security and Medicare tax, and Total Tax.

Payments

If you have a qualifying child, attach Schedule EIC.

Table with 3 columns: Line number, Description, and Amount. Includes lines 64-74 for Payments, such as Federal income tax withheld, Earned income credit, and Total Payments.

Refund

Direct deposit? See instructions.

Table with 3 columns: Line number, Description, and Amount. Includes lines 75-77 for Refund, such as Amount overpaid, Routing number, and Amount applied to 2017 estimated tax.

Amount You Owe

Table with 3 columns: Line number, Description, and Amount. Includes lines 78-79 for Amount You Owe, such as Amount you owe and Estimated tax penalty.

Third Party Designee

Table with 3 columns: Question, Answer, and Designee Information. Includes question about allowing another person to discuss the return with the IRS.

Sign Here

Joint return? See instructions. Keep a copy for your records.

Table for signatures and dates. Includes fields for Preparer's signature, Date, Your occupation, Spouse's signature, Date, Spouse's occupation, and PTIN.

Paid Preparer Use Only

Table for paid preparer information. Includes fields for Print/Type preparer's name, Firm's name, Firm's address, Firm's EIN, and Phone no.

SCHEDULE 8812
(Form 1040A or 1040)

Child Tax Credit

OMB No. 1545-0074

2016

Department of the Treasury
Internal Revenue Service (99)

▶ **Attach to Form 1040, Form 1040A, or Form 1040NR.**
▶ **Information about Schedule 8812 and its separate instructions is at**
www.irs.gov/schedule8812.

Attachment
Sequence No. **47**

Name(s) shown on return

Your social security number

GURPREET SINGH & RAVINDER KAUR

810-64-0037

Part I Filers Who Have Certain Child Dependent(s) with an ITIN (Individual Taxpayer Identification Number)

! Complete this part only for each dependent who has an ITIN and for whom you are claiming the child tax credit.
If your dependent is not a qualifying child for the credit, you cannot include that dependent in the calculation of this credit.

CAUTION

Answer the following questions for each dependent listed on Form 1040, line 6c; Form 1040A, line 6c; or Form 1040NR, line 7c, who has an ITIN (Individual Taxpayer Identification Number) and that you indicated is a qualifying child for the child tax credit by checking column (4) for that dependent.

A For the first dependent identified with an ITIN and listed as a qualifying child for the child tax credit, did this child meet the substantial presence test? See separate instructions.

Yes **No**

B For the second dependent identified with an ITIN and listed as a qualifying child for the child tax credit, did this child meet the substantial presence test? See separate instructions.

Yes **No**

C For the third dependent identified with an ITIN and listed as a qualifying child for the child tax credit, did this child meet the substantial presence test? See separate instructions.

Yes **No**

D For the fourth dependent identified with an ITIN and listed as a qualifying child for the child tax credit, did this child meet the substantial presence test? See separate instructions.

Yes **No**

Note: If you have more than four dependents identified with an ITIN and listed as a qualifying child for the child tax credit, see separate instructions and check here ▶

Part II Additional Child Tax Credit Filers

1 If you file Form 2555 or 2555-EZ **stop** here, you cannot claim the additional child tax credit.

If you are required to use the worksheet in **Pub. 972**, enter the amount from line 8 of the Child Tax Credit Worksheet in the publication. Otherwise:

1040 filers: Enter the amount from line 6 of your Child Tax Credit Worksheet (see the Instructions for Form 1040, line 52).

1040A filers: Enter the amount from line 6 of your Child Tax Credit Worksheet (see the Instructions for Form 1040A, line 35).

1040NR filers: Enter the amount from line 6 of your Child Tax Credit Worksheet (see the Instructions for Form 1040NR, line 49).

2 Enter the amount from Form 1040, line 52; Form 1040A, line 35; or Form 1040NR, line 49 **2**

3 Subtract line 2 from line 1. If zero, **stop** here; you cannot claim this credit **3**

4a Earned income (see separate instructions) **4a**

b Nontaxable combat pay (see separate instructions) **4b**

5 Is the amount on line 4a more than \$3,000?

No. Leave line 5 blank and enter -0- on line 6.
 Yes. Subtract \$3,000 from the amount on line 4a. Enter the result **5**

6 Multiply the amount on line 5 by 15% (0.15) and enter the result **6**

Next. Do you have three or more qualifying children?

No. If line 6 is zero, **stop** here; you cannot claim this credit. Otherwise, skip Part III and enter the **smaller** of line 3 or line 6 on line 13.

Yes. If line 6 is equal to or more than line 3, skip Part III and enter the amount from line 3 on line 13. Otherwise, go to line 7.

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

Schedule 8812 (Form 1040A or 1040) 2016

Form PMT**ACH Payment****2016**

(Keep for your records)

Name(s) shown on return GURPREET SINGH & RAVINDER KAUR	Taxpayer's SSN 810-64-0037
	Spouse's SSN 799-53-0124
Routing Transit Number 081904808	
Bank Account Number 291011489500	
Type of Account 1 Checking	
Amount of Tax Payment 552	
Requested Payment Date 02-28-2017	
Taxpayer's Daytime Phone Number 847-922-8995	
Type of Form being filed 1040	

Taxpayer's Signature	Date
Spouse's Signature	Date

IRS e-file Signature Authorization

Department of the Treasury
Internal Revenue Service

▶ **Don't send to the IRS. This isn't a tax return.**
▶ **Keep this form for your records.**
▶ **Information about Form 8879 and its instructions is at www.irs.gov/form8879.**

2016

Submission Identification Number (SID) ▶ **5408932017051n2wea13**

Taxpayer's name GURPREET SINGH		Social security number 810-64-0037
Spouse's name RAVINDER KAUR		Spouse's social security number 799-53-0124

Part I Tax Return Information - Tax Year Ending December 31, 2016 (Whole dollars only)		
1	Adjusted gross income (Form 1040, line 38; Form 1040A, line 22; Form 1040EZ, line 4; Form 1040NR, line 37)	152,473
2	Total tax (Form 1040, line 63; Form 1040A, line 39; Form 1040EZ, line 12; Form 1040NR, line 61)	23,473
3	Federal income tax withheld from Forms W-2 and 1099 (Form 1040, line 64; Form 1040A, line 40; Form 1040EZ, line 7; Form 1040NR, line 62a)	22,921
4	Refund (Form 1040, line 76a; Form 1040A, line 48a; Form 1040EZ, line 13a; Form 1040-SS, Part I, line 13a; Form 1040NR, line 73a)	
5	Amount you owe (Form 1040, line 78; Form 1040A, line 50; Form 1040EZ, line 14; Form 1040NR, line 75)	552

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, 2016, and to the best of my knowledge and belief, it is true, correct, and accurately lists all amounts and sources of income I received during the tax year. 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 acknowledgement 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 _____ to enter or generate my PIN _____ as my signature on my tax year 2016 electronically filed income tax return. **ERO firm name** **Enter five digits, but don't enter all zeros**

I will enter my PIN as my signature on my tax year 2016 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.
77468

Your signature ▶ _____ Date ▶ _____

Spouse's PIN: check one box only

I authorize _____ to enter or generate my PIN _____ as my signature on my tax year 2016 electronically filed income tax return. **ERO firm name** **Enter five digits, but don't enter all zeros**

I will enter my PIN as my signature on my tax year 2016 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.
34680

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. **540893-36506**
Don't enter all zeros

I certify that the above numeric entry is my PIN, which is my signature for the tax year 2016 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 **Pub.1345**, Handbook for Authorized IRS e-file Providers of Individual Income Tax Returns.

ERO's signature ▶ _____ Date ▶ **02-23-2017**

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

Acknowledgement and General Information for Taxpayers Who File Returns Electronically

Thank you for participating in IRS *e-file*.

Taxpayer name

GURPREET SINGH & RAVINDER KAUR

Taxpayer address (optional)

494 TIMBERLEA DR APT 114
ROCHESTER, MI 48309

1. Your federal income tax return for 2016 was filed electronically with the IRS Submission Processing Center. The electronic filing services were provided by ADVANTAGE ONE TAX CONSULTING INC.
2. Your return was accepted on 02-20-2017 using a Personal Identification Number (PIN) as your electronic signature. You entered a PIN or authorized the Electronic Return Originator (ERO) to enter or generate a PIN for you. The Submission ID assigned to your return is 5408932017051n2wea13.
3. Your return was accepted on _____. Allow 4 to 6 weeks for the processing of your return. The Earned Income Credit or a dependent's exemption on your return may be reduced or disallowed due to a child's name and social security number mismatch.
4. Your electronic funds withdrawal payment request was accepted for processing.
5. Your electronic funds withdrawal payment request was not accepted for processing. Refer to the "If You Owe Tax" section.
6. Your Form 4868, Application for Automatic Extension of Time to File U.S. Individual Income Tax Return, was accepted on _____. The Submission ID assigned to your extension is _____.

**DO NOT SEND A PAPER COPY OF YOUR RETURN TO THE IRS.
IF YOU DO, IT WILL DELAY THE PROCESSING OF THE RETURN.**

If You Need to Make a Change to Your Return

If you need to make a change or correct the return you filed electronically, you should send a Form 1040X, Amended U.S. Individual Income Tax Return, to the IRS Submission Processing Center that processes paper returns for your area. The address is available at www.irs.gov, or you can call the IRS toll-free at 1-800-829-1040.

If You Need to Ask About Your Refund

The IRS notifies your Electronic Return Originator (ERO) when your return is accepted, usually within 48 hours. If your return was not accepted, the IRS notifies your ERO of the reasons for rejection. If it has been more than three weeks since the IRS accepted your return and you have not received your refund, go to www.irs.gov and click on "Where's My Refund?" to view your refund status. Exception: If box 3 above is checked, allow 4 to 6 weeks for processing of your return. A notice will be sent to you advising of changes to your return.

Also, you can call the TeleTax line at 1-800-829-4477, for automated refund information. You should have available the first social security number shown on your return, your filing status, and the exact amount of the refund you expect. TeleTax gives you the date for mailing or depositing your refund. You should receive your refund check within 30 days of the date given by TeleTax, or within one week of that date, if you chose direct deposit. If you do not receive it by then, or if TeleTax does not give your refund information, call the Refund Hotline at 1-800-829-1954.

The IRS uses refunds to cover overdue taxes and notifies you when this occurs. The Fiscal Service offsets refunds through the Treasury Offset Program to cover past due child support, federal agency non-tax debts such as student loans and state income tax obligations. Fiscal Service sends you an offset notice if it applies your refund or part of your refund to non-tax debts. If you have questions about the offset, contact the agency identified in the notice. You may also call the Treasury Offset Program Call Center at 1-800-304-3107, if you have additional questions.

If You Owe Tax

If your return has a balance due, you must pay the amount you owe by the prescribed due date. If you paid by electronic funds withdrawal (direct debit) or by credit card, no voucher is needed. The credit card service providers will charge a convenience fee based on the amount of taxes you are paying. The fees and the type of credit or debit cards accepted may vary between providers. You will be told the amount of the fee during the transaction and you will be given the option to either continue or end the transaction. For information on paying your taxes electronically, including by credit or debit card, go to www.irs.gov/e-pay.

If you are not paying electronically you may use Form 1040-V, Payment Voucher, which you can obtain from your Electronic Return Originator. If the IRS does not receive your payment by the prescribed due date, you will receive a notice that requests full payment of the tax due, plus penalties and interest. If you can not pay the amount in full, complete Form 9465, Installment Agreement Request, which you may file electronically. To apply for an installment agreement online, go to www.irs.gov. You may also order Form 9465 by calling 1-800-TAX-FORM (1-800-829-3676). If approved, the IRS charges a user fee to set up an installment agreement.

If You Need to Inquire About Your Electronic Funds Withdrawal Payment

You may call 1-888-353-4537 to inquire about the status of your electronic funds withdrawal payment. If there is a change to the bank account information included on your return, you should call this number to cancel a scheduled payment. You should have available the social security number of the first person listed on the tax return, the payment amount, and the bank account number. Cancellation requests must be received no later than 11:59 p.m. E.T. two business days prior to the scheduled payment date.

Tax Refund Related Financial Products

Financial institutions offer a variety of financial products to taxpayers based on their refunds. Contracts for financial products are between you and the financial institution. The IRS is not associated with the contract. **If you have questions about tax refund related products, contact your Electronic Return Originator or the lender.**

Instructions for Electronic Return Originators

Line 2 - PIN Presence Indicator - Check box 2 if the taxpayer entered a PIN or authorized the ERO to enter or generate the PIN for the taxpayer, and the Acknowledgement File PIN Presence Indicator is a "Practitioner PIN," "Self-Select PIN" or "Online Filer PIN." Form 8879, IRS *e-file* Signature Authorization, is required if the ERO enters or generates the PIN or if the Practitioner PIN method is used. **Use Form 8453, U.S. Individual Income Tax Transmittal for an IRS *e-file* Return, to send required paper forms or supporting documentation listed next to the form check boxes (do not send Forms W-2, W-2G, or 1099R).**

Line 3 - Exception Processing - Check box 3 if the Acknowledgement File Acceptance Code equals "Exception." The acceptance code indicates that this return has been previously rejected and this subsequent submission still has invalid data.

Line 4 - Payment Acknowledgement Literal - Check box 4 if the taxpayer requested to use electronic funds withdrawal to pay the balance due, and the Acknowledgement File Payment Acknowledgement Literal field equals "Payment Request Received."

Line 5 - Payment Acknowledgement Literal - Check box 5 if the taxpayer requested to use electronic funds withdrawal to pay the balance due, and the Acknowledgement File Payment Acknowledgement Literal field does not equal "Payment Request Received." If box 5 is checked, inform the taxpayer that he/she must pay by check, money order, debit card, or credit card.

Note: EROs can use the Acknowledgement File information, translated by the transmitter, to complete Form 9325.

GURPREET SINGH & RAVINDER KAUR

		a Employee's social security number 810-64-0037		OMB No. 1545-0008		Safe, accurate, FAST! Use		IRS e-file		Visit the IRS website at www.irs.gov/efile	
b Employer identification number (EIN) 26-1668808				1 Wages, tips, other compensation 146,486				2 Federal income tax withheld 22,678			
c Employer's name, address, and ZIP code NEXTEER AUTOMATIVE CORPORATION 1209 ORANGE STREET WILMINGTON DE 19801				3 Social security wages 118,500				4 Social security tax withheld 7,347			
				5 Medicare wages and tips 154,520				6 Medicare tax withheld 2,241			
				7 Social security tips				8 Allocated tips			
d Control number				9				10 Dependent care benefits			
e Employee's first name and initial GURPREET SINGH 494 TIMBERLEA DR APT 1 ROCHESTER MI 48309				11 Nonqualified plans				12a See instructions for box 12 C 209			
				13 Statutory employee <input type="checkbox"/> Retirement plan <input checked="" type="checkbox"/> Third-party sick pay <input type="checkbox"/>				12b D 8,034			
				14 Other				12c DD 11,799			
								12d W 2,200			
f Employee's address and ZIP code											
15 State Employer's state ID number MI 26 1668808		16 State wages, tips, etc. 146,486		17 State income tax 5,716		18 Local wages, tips, etc.		19 Local income tax		20 Locality name	

Form **W-2 Wage and Tax Statement** **2016** Department of the Treasury-Internal Revenue Service

Copy B - To Be Filed With Employee's FEDERAL Tax Return.
This information is being furnished to the Internal Revenue Service.

EEA The information on the Form W-2 was used to prepare the taxpayer's 2016 Federal tax return by ADVANTAGE ONE TAX CONSULTANTS

		a Employee's social security number 799-53-0124		OMB No. 1545-0008		Safe, accurate, FAST! Use		IRS e-file		Visit the IRS website at www.irs.gov/efile	
b Employer identification number (EIN) 31-0345740				1 Wages, tips, other compensation 3,973				2 Federal income tax withheld 207			
c Employer's name, address, and ZIP code KROGER 1014 VINE STREET CINCINNATI OH 45202				3 Social security wages 3,973				4 Social security tax withheld 246			
				5 Medicare wages and tips 3,973				6 Medicare tax withheld 58			
				7 Social security tips				8 Allocated tips			
d Control number				9				10 Dependent care benefits			
e Employee's first name and initial RAVINDER KAUR 494 TIMBERLEA DR APT 114 ROCHESTER MI 48309				11 Nonqualified plans				12a See instructions for box 12			
				13 Statutory employee <input type="checkbox"/> Retirement plan <input type="checkbox"/> Third-party sick pay <input type="checkbox"/>				12b			
				14 Other				12c			
								12d			
f Employee's address and ZIP code											
15 State Employer's state ID number MI ME0204053		16 State wages, tips, etc. 3,973		17 State income tax 169		18 Local wages, tips, etc.		19 Local income tax		20 Locality name	

Form **W-2 Wage and Tax Statement** **2016** Department of the Treasury-Internal Revenue Service

Copy B - To Be Filed With Employee's FEDERAL Tax Return.
This information is being furnished to the Internal Revenue Service.

EEA The information on the Form W-2 was used to prepare the taxpayer's 2016 Federal tax return by ADVANTAGE ONE TAX CONSULTANTS

		a Employee's social security number 799-53-0124		OMB No. 1545-0008		Safe, accurate, FAST! Use		IRS e-file		Visit the IRS website at www.irs.gov/efile	
b Employer identification number (EIN) 36-2167912				1 Wages, tips, other compensation 1,780				2 Federal income tax withheld 36			
c Employer's name, address, and ZIP code SALVATION ARMY MENS SOCIAL CENTER 1 5550 PRAIRIE STONE PKWY HOFFMAN ESTATES IL 60192				3 Social security wages 1,780				4 Social security tax withheld 110			
				5 Medicare wages and tips 1,780				6 Medicare tax withheld 26			
				7 Social security tips				8 Allocated tips			
d Control number				9				10 Dependent care benefits			
e Employee's first name and initial RAVINDER		Last name KAUR		Suff.		11 Nonqualified plans				12a See instructions for box 12	
494 TIMBERLEA DRIVE APT 114 ROCHESTER MI 48309				<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		12b	
f Employee's address and ZIP code				13 Statutory employee <input type="checkbox"/> Retirement plan <input type="checkbox"/> Third-party sick pay <input type="checkbox"/>				12c			
				14 Other				12d			
15 State Employer's state ID number MI 362167912		16 State wages, tips, etc. 1,780		17 State income tax 76		18 Local wages, tips, etc.		19 Local income tax		20 Locality name	

Form **W-2** Wage and Tax Statement

2016

Department of the Treasury-Internal Revenue Service

Copy B - To Be Filed With Employee's FEDERAL Tax Return.
This information is being furnished to the Internal Revenue Service.

EEA The information on the Form W-2 was used to prepare the taxpayer's 2016 Federal tax return by ADVANTAGE ONE TAX CONSULTANTS

		a Employee's social security number 799-53-0124		OMB No. 1545-0008		Safe, accurate, FAST! Use		IRS e-file		Visit the IRS website at www.irs.gov/efile	
b Employer identification number (EIN) 33-0777005				1 Wages, tips, other compensation 234				2 Federal income tax withheld			
c Employer's name, address, and ZIP code TACO BELL OF AMERICA LLC PO BOX 32400 LOUISVILLE KY 40232				3 Social security wages 234				4 Social security tax withheld 15			
				5 Medicare wages and tips 234				6 Medicare tax withheld 3			
				7 Social security tips				8 Allocated tips			
d Control number				9				10 Dependent care benefits			
e Employee's first name and initial RAVINDER		Last name KAUR		Suff.		11 Nonqualified plans				12a See instructions for box 12	
494 TIMBERLEA DR 114 ROCHESTER MI 48309				<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		12b	
f Employee's address and ZIP code				13 Statutory employee <input type="checkbox"/> Retirement plan <input type="checkbox"/> Third-party sick pay <input type="checkbox"/>				12c			
				14 Other				12d			
15 State Employer's state ID number MI ME02547196		16 State wages, tips, etc. 234		17 State income tax 10		18 Local wages, tips, etc.		19 Local income tax		20 Locality name	

Form **W-2** Wage and Tax Statement

2016

Department of the Treasury-Internal Revenue Service

Copy B - To Be Filed With Employee's FEDERAL Tax Return.
This information is being furnished to the Internal Revenue Service.

EEA The information on the Form W-2 was used to prepare the taxpayer's 2016 Federal tax return by ADVANTAGE ONE TAX CONSULTANTS

Estimated Tax Worksheet for Next Year

(Keep for your records)

2016

Name(s) as shown on return

Tax ID Number

GURPREET SINGH & RAVINDER KAUR

810-64-0037

1.	Wages	1.	_____
2.	Interest and Dividend income	2.	_____
3.	Capital gain income	3.	_____
4.	Taxable IRA/Pension income	4.	_____
5.	Taxable Social Security income	5.	_____
6.	Business income	6.	_____
7.	Other income	7.	_____
8.	Total income (add lines 1 thru 7)	8.	_____
9.	Adjustments to income	9.	_____
10.	Adjusted gross income (subtract line 9 from line 8)	10.	_____
11.	Exemption amount (exemptions * \$4,050)	11.	_____
12.	Subtract line 11 from line 10	12.	_____
13.	Itemized or Standard deduction	13.	_____
14.	Projected Taxable income (subtract line 13 from line 12)	14.	_____
15.	Projected Tax	15.	_____
16.	Alternative Minimum Tax	16.	_____
17.	Total tax	17.	_____
18.	Projected Credits	18.	_____
19.	Subtract line 16 from line 15	19.	_____
20.	Projected SE Tax - Taxpayer	20.	_____
21.	Projected SE Tax - Spouse	21.	_____
22.	Other taxes	22.	_____
23a.	Add lines 19 through 22	23a.	_____
b.	Earned income credit, additional child tax credit, fuel tax credit, net premium tax credit, refundable American opportunity credit, and refundable credit from Form 8885	23b.	_____
c.	Total 2017 estimated tax. Subtract line 23b from line 23a. If zero or less enter -0-	23c.	_____
24a.	Multiply line 23c by 90% (66 2/3% for farmers and fishermen)	24a.	_____
b.	Required annual payment based on prior year's tax (see instructions) 110%	24b.	25,820
c.	Required annual payment to avoid a penalty. Enter the smaller of line 24a or 24b	24c.	25,820
25.	Projected Withholding	25.	22,921
26.	Projected Net Tax (subtract line 25 from line 24c)	26.	2,899

Estimates will be computed on \$2,899. This is line 26.

Use screen ETA to provide accurate estimates of next year's income, deductions, and credits. If screen ETA is used, lines 1-24a of this worksheet will be autofilled.

Name(s) as shown on return

Tax ID Number

GURPREET SINGH & RAVINDER KAUR

810-64-0037

Before you begin: Figure the amount of any credits you are claiming on Form 5695, Part II, line 30; Form 8910; Form 8936; or Schedule R.

CAUTION! • To be a qualifying child for the child tax credit, the child must be under age 17 at the end of 2016 and meet the other requirements listed earlier under Qualifying Child. Also see Taxpayer identification number needed by due date of return, earlier.
• If you do not have a qualifying child, you cannot claim the child tax credit.

Part 1

1. Number of qualifying children: 1 X \$1,000. Enter the result. 1. 1,000
2. Enter the amount from Form 1040, line 38; Form 1040A, line 22; or Form 1040NR, line 37. 2. 152,473
3. **1040 Filers.** Enter the total of any -
 - Exclusion of income from Puerto Rico, and
 - Amounts from Form 2555, lines 45 and 50; Form 2555-EZ, line 18; and Form 4563, line 15.3. _____
- 1040A and 1040NR Filers.** Enter -0-.
4. Add lines 2 and 3. Enter the total. 4. 152,473
5. Enter the amount shown below for your filing status.
 - Married filing jointly - \$110,000
 - Single, head of household, or qualifying widow(er) - \$75,000
 - Married filing separately - \$55,0005. 110,000
6. Is the amount on line 4 more than the amount on line 5?
 - No.** Leave line 6 blank. Enter -0- on line 7.
 - Yes.** Subtract line 5 from line 4. 6. 43,000

If the result is not a multiple of \$1,000, increase it to the next multiple of \$1,000.
For example, increase \$425 to \$1,000, increase \$1,025 to \$2,000, etc.
7. Multiply the amount on line 6 by 5% (.05). Enter the result. 7. 2,150
8. Is the amount on line 1 more than the amount on line 7?
 - No. STOP**
You cannot take the child tax credit on Form 1040, line 52; Form 1040A, line 35; or Form 1040NR, line 49. You also cannot take the additional child tax credit on Form 1040, line 67; Form 1040A, line 43; or Form 1040NR, line 64. Complete the rest of your Form 1040, Form 1040A, or Form 1040NR.
 - Yes.** Subtract line 7 from line 1. Enter the result. *Go to Part 2 below.* 8. _____

Part 2

9. Enter the amount from Form 1040, line 47; Form 1040A, line 30; or Form 1040NR, line 45. 9. 0
10. Add the following amounts from:

Form 1040	or	Form 1040A	or	Form 1040NR	+	_____
Line 48				Line 46		_____
Line 49		Line 31		Line 47		_____
Line 50		Line 33				_____
Line 51		Line 34		Line 48		_____
Form 5695 , line 30						_____
Form 8910 , line 15						_____
Form 8936 , line 23						_____
Schedule R , line 22						_____
Enter the total.					10.	_____

11. Are you claiming any of the following credits?
 - Mortgage interest credit, Form 8396.
 - Adoption credit, Form 8839.
 - Residential energy efficient property credit, Form 5695, Part I.
 - District of Columbia first-time homebuyer credit, Form 8859.
 - No.** Enter the amount from line 10.
 - Yes.** If you are filing Form 2555 or 2555-EZ, enter the amount from line 10. Otherwise, complete the Line 11 Worksheet, later, to figure the amount to enter here. 11. _____
12. Subtract line 11 from line 9. Enter the result. 12. 0
13. Is the amount on line 8 of this worksheet more than the amount on line 12?
 - No.** Enter the amount from line 8.
 - Yes.** Enter the amount from line 12. See the **TIP** below. 13. 0

TIP

You may be able to take the **additional child tax credit** on Form 1040, line 67; Form 1040A, line 43; or Form 1040NR, line 64, only if you answered "Yes" on line 13.

- First, complete your Form 1040 through line 66a (also complete line 71), Form 1040A through line 42a, or Form 1040NR through line 63 (also, complete line 67).
- Then, use Parts II - IV of Schedule 8812 to figure any additional child tax credit.

This is your child tax credit.

Enter this amount on Form 1040, line 52; Form 1040A, line 35; or Form 1040NR, line 49.

Carryover Worksheet

List of items that will carryover to the 2017 tax return

(Keep for your records)

2016

Name(s) as shown on return

Tax ID Number

GURPREET SINGH & RAVINDER KAUR

810-64-0037

Itemized Deductions

Carryover Amount

Contributions subject to 100% of AGI limitations	_____
Contributions subject to 50% of AGI limitations	_____
Contributions subject to 30% of AGI limitations (50% capital gains appreciated property)	_____
Contributions subject to 30% of AGI limitations	_____
Contributions subject to 20% of AGI limitations (30% capital gains appreciated property)	_____
Taxable state and local refunds to Form 1040, line 10	_____
State/local taxes paid in 2017 to flow to the Schedule A	_____
Preparer Fee to flow to the Schedule A	84
State donations and contributions carryover	_____
State overpayment applied to next year	_____

Expenses

Office in home operating expenses	_____
Office in home excess casualty losses and depreciation	_____
Disallowed investment interest expense AMT _____ Reg. Tax _____	_____
Section 179 expense	_____
Operating expenses, from Form WK_E, Sch E - Rental limitation on deductions when used for personal use	_____
Excess depreciation, from Form WK_E, Sch E - Rental limitation on deductions when used for personal use	_____

Losses

Short-term capital loss AMT _____ Reg. Tax _____	_____
Long-term capital loss AMT _____ Reg. Tax _____	_____
Net operating loss AMT _____ Reg. Tax _____	_____
Nonrecaptured net section 1231 losses from WK_1231C AMT _____ Reg. Tax _____	_____

Credits

Mortgage interest credit	_____
Credit for prior year minimum tax	_____
Foreign Tax credit AMT _____ Reg. Tax _____	_____
District of Columbia first time home owner's credit	_____
Res. energy efficient property credit	_____

Other

Overpayment applied to next year's estimates	_____
Estimated Tax Payment 1 _____ Estimated Tax Payment 2 _____	_____
Estimated Tax Payment 3 _____ Estimated Tax Payment 4 _____	_____
Federal tax liability for 2210 calculation	23,473
State tax liability for state 2210 calculation	5,970
IRA basis Taxpayer _____ Spouse _____	_____

Passive Activity

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

At Risk Limitations

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

**TAX RETURN COMPARISON
2014 / 2015 /2016**

2016

Name(s) as shown on return
GURPREET SINGH & RAVINDER KAUR

Identifying number
810-64-0037

	2014	2015	2016	Difference 2015-2016
Filing Status		2	2	
Number of Exemptions		3	3	
Income				
Wages, salaries, tips, etc.		135,433	152,473	17,040
Taxable interest and dividends				
Taxable state and local refunds				
Alimony				
Business income (loss)				
Gains (losses)				
Pensions and IRA distributions				
Rent and royalty income (loss)				
Part, S-corps, trusts income (loss) . . .				
Farm income (loss)				
Unemployment compensation				
Total SS benefits received				
Taxable SS benefits				
Other income (loss)				
Total Income		135,433	152,473	17,040
Adjusted Gross Income				
Half of self-employment tax				
IRA deduction				
Other adjustments				
Total Adjusted Gross Income		135,433	152,473	17,040
Deductions				
Medical deductions				
State and local taxes				
Interest				
Contributions				
Employee business expenses				
Standard or other deductions		12,600	12,600	
Total Itemized or Standard Ded . . .		12,600	12,600	
Exemption Amount		12,000	12,150	150
Tax and Credits				
Taxable Income		110,833	127,723	16,890
Tax		19,296	23,473	4,177
Credits				
Self-employment tax				
Other taxes				
Total Tax		19,296	23,473	4,177
Payments				
Withholdings		20,245	22,921	2,676
Estimated tax payments				
Earned income credit				
Other payments and credits				
Overpayment		949		(949)
Overpayment Applied				
Refund		949		(949)
Balance Due			552	552
Resident State			MI	
Taxable income			140,473	140,473
Tax			5,970	5,970
Refund			1	1
Balance Due				
Marginal tax rate		25.00	25.00	
Effective tax rate			18.38	18.38

Account Transaction Summary

2016

Name(s) as shown on return

Your ID Number

GURPREET SINGH & RAVINDER KAUR

XXX-XX-0037

Account #1

Financial Institution Name BANK OF AMERICA

Routing Transit Number 081904808

Account Number 291011489500

Account Type checking

Federal Debit (552)

Date of Transaction 02-28-2017

MI Deposit 1

Net Debit (551)

PLEASE VERIFY BANK INFORMATION

- 1. Bank Name
- 2. Bank Routing Transit Number
- 3. Bank Account Number
- 4. Bank Account Type

This information is used to deposit your refund or to pay any amount due. If you have provided incorrect information, or you have closed the account, you are responsible.

I have reviewed the above information and certify that this information is correct and authorize ADVANTAGE ONE TAX CONSULTING INC to use this account to deposit my refund.

Your Signature

Date

Spouse's Signature (If Married Filing Jointly)

Date

MIINST**Filing Instructions****2016**

Name(s) as shown on return

GURPREET SINGH & RAVINDER KAUR

SSN or EIN

810-64-0037

Date to file by: 04-18-2017**Form to be filed:** MI1040 and supplemental forms and schedules**Sign and Date:** Each spouse must sign a joint return. If preparer used, he/she must include name, address, and tax ID.**Refund:** \$1.00**Address to file:** Michigan Department of Treasury
Lansing, MI 48956**Transaction Method:** The refund will be directly deposited into your checking account at Bank Of America ending in 9500.

2016 MICHIGAN Individual Income Tax Return MI-1040

Return is due April 18, 2017.

Type or print in blue or black ink.

1. Filer's First Name GURPREET		M.I.	Last Name SINGH		2. Filer's Full Social Security No. (Example: 123-45-6789) 810 — 64 — 0037	
If a Joint Return, Spouse's First Name RAVINDER		M.I.	Last Name KAUR		3. Spouse's Full Social Security No. (Example: 123-45-6789) 799 — 53 — 0124	
Home Address (Number, Street, or P.O. Box) 494 TIMBERLEA DR APT 114					4. School District Code (5 digits) (page 2) 73010	
City or Town ROCHESTER			State MI	ZIP Code 48309		
5. STATE CAMPAIGN FUND Check if you (and/or your spouse, if filing a joint return) want \$3 of your taxes to go to this fund. This will not increase your tax or reduce your refund. a. <input type="checkbox"/> Filer b. <input type="checkbox"/> Spouse				6. FARMERS, FISHERMEN, OR SEAFARERS <input type="checkbox"/> Check this box if 2/3 of your income is from farming, fishing, or seafaring.		
7. 2016 FILING STATUS. Check one. a. <input type="checkbox"/> Single b. <input checked="" type="checkbox"/> Married filing jointly c. <input type="checkbox"/> Married filing separately* * If you check box "c," complete line 3 and enter spouse's full name below: <div style="border: 1px solid black; width: 150px; height: 20px; margin-left: 20px;"></div>				8. 2016 RESIDENCY STATUS. Check all that apply. a. <input checked="" type="checkbox"/> Resident b. <input type="checkbox"/> Nonresident* c. <input type="checkbox"/> Part-Year Resident * If you check box "b" or "c," you must complete and attach Schedule NR.		

9. **EXEMPTIONS. NOTE:** If someone else can claim you as a dependent, check box 9d, enter 0 on line 9a and enter \$1,500 on line 9d (see instr.).

a. Number of exemptions claimed on 2016 federal return	9a.	3	x \$4,000	9a.	12,000	00
b. Number of individuals who qualify for one of the following special exemptions: deaf, blind, hemiplegic, paraplegic, quadriplegic, or totally and permanently disabled	9b.		x \$2,600	9b.		00
c. Number of qualified disabled veterans	9c.		x \$400	9c.		00
d. Claimed as dependent, see line 9 NOTE above	9d.	<input type="checkbox"/>		9d.		00
e. Add lines 9a, 9b, 9c and 9d. Enter here and on line 15	9e.			9e.	12,000	00

10. Adjusted Gross Income from your U.S. Forms 1040, 1040A, 1040EZ or 1040NR (see instructions)	10.	152,473	00
11. Additions from Schedule 1, line 9. Attach Schedule 1	11.		00
12. Total. Add lines 10 and 11	12.	152,473	00
13. Subtractions from Schedule 1, line 27. Attach Schedule 1	13.		00
14. Income subject to tax. Subtract line 13 from line 12. If line 13 is greater than line 12, enter "0"	14.	152,473	00
15. Exemption allowance. Subtract amount from line 9e or Schedule NR, line 19	15.	12,000	00
16. taxable income. Subtract line 15 from line 14. If line 15 is greater than line 14, enter "0"	16.	140,473	00
17. Tax. Multiply line 16 by 4.25% (0.0425)	17.	5,970	00

NON-REFUNDABLE CREDITS

	AMOUNT	CREDIT
18. Income tax imposed by government units outside Michigan. Attach copy of the return (see instructions)	18a. 00	18b. 00
19. Michigan Historic Preservation Tax Credit carryforward and/or Small Business Investment Tax Credit (see instructions)	19a. 00	19b. 00
20. Income Tax. Subtract the sum of lines 18b and 19b from line 17. If the sum of lines 18b and 19b is greater than line 17, enter "0"		20. 5,970 00

Filer's Full Social Security Number

810 — 64 — 0037

21. Enter amount of Income Tax from line 20	21.	5,970	00
22. Voluntary Contributions from Form 4642, line 11. Attach Form 4642	22.		00
23. USE TAX. Use tax due on Internet, mail order or other out-of-state purchases from Worksheet 1 (see instructions)	23.	0	00
24. Total Tax Liability. Add lines 21, 22 and 23	24.	5,970	00

REFUNDABLE CREDITS AND PAYMENTS

25. Property Tax Credit. Attach MI-1040CR or MI-1040CR-2	25.		00
26. Farmland Preservation Tax Credit. Attach MI-1040CR-5	26.		00
27. a. Federal Earned Income Tax Credit	27a.		00
b. Michigan Earned Income Tax Credit. Multiply line 27a by 6% (0.06)	27b.		00
28. Michigan Historic Preservation Tax Credit (refundable). Attach Form 3581	28.		00
29. Michigan tax withheld from Schedule W, line 7. Attach Schedule W (do not submit W-2s)	29.	5,971	00
30. Estimated tax, extension payments and 2015 credit forward	30.		00
31. Total refundable credits and payments. Add lines 25, 26, 27b, 28, 29 and 30	31.	5,971	00

REFUND OR TAX DUE

32. If line 31 is less than line 24, subtract line 31 from line 24. Include interest <input type="text"/> and penalty <input type="text"/> if applicable (see instr.) YOU OWE	32.		00
33. Overpayment. If line 31 is greater than line 24, subtract line 24 from line 31	33.	1	00
34. Credit Forward. Amount of line 33 to be credited to your 2017 estimated tax for your 2017 tax return	34.		00
35. Subtract line 34 from line 33 REFUND	35.	1	00

DIRECT DEPOSIT

Deposit your refund directly to your financial institution! See instructions and complete a, b and c.

a. Routing Transit Number	b. Account Number	c. Type of Account
081904808	291011489500	1. <input checked="" type="checkbox"/> Checking 2. <input type="checkbox"/> Savings

Deceased Taxpayer. If Filer and/or Spouse died after December 31, 2015, enter dates below. ENTER DATE OF DEATH ONLY. Example: 04-15-2016 (MM-DD-YYYY) Filer <input type="text"/> - <input type="text"/> - <input type="text"/> Spouse <input type="text"/> - <input type="text"/> - <input type="text"/>		Preparer Certification. I declare under penalty of perjury that this return is based on all information of which I have any knowledge. Preparer's PTIN, FEIN or SSN P01822276	
Taxpayer Certification. I declare under penalty of perjury that the information in this return and attachments is true and complete to the best of my knowledge. Filer's Signature _____ Date _____ Spouse's Signature _____ Date _____		Preparer's Name (print or type) SUDHA PANJABI Preparer's Business Name, Address and Telephone Number ADVANTAGE ONE TAX CONSULTING 20610 QUARTERPATH TRACE CIR STERLING VA 20165 703-584-5533	
<input checked="" type="checkbox"/> By checking this box, I authorize Treasury to discuss my return with my preparer.			

Refund, credit, or zero returns. Mail your return to: **Michigan Department of Treasury, Lansing, MI 48956**

Pay amount on line 32. Mail your check and return to: **Michigan Department of Treasury, Lansing, MI 48929**

Make your check payable to "State of Michigan." Print the last four digits of your Social Security number and "2016 Income Tax" on the front of your check. If paying on behalf of another taxpayer, write the filer's name and the last four digits of the filer's Social Security number on the check. Do not staple your check to the return. You can pay electronically using Michigan's e-Payments service. Keep a copy of your return and supporting schedules for six years. For more information and to check your refund status, have a copy of your MI-1040 available when you visit www.michigan.gov/it.

2016 MICHIGAN Withholding Tax Schedule

Issued under authority of Public Act 281 of 1967, as amended.

Type or print in blue or black ink.

Attachment 13

INSTRUCTIONS: If you had Michigan income tax withheld in 2016, you must complete a *Withholding Tax Schedule* (Schedule W) to claim the withholding on your *Individual Income Tax Return* (MI-1040, line 29). Report military pay in Table 1 and military retirement benefits and taxable railroad retirement benefits in Table 2 even if no Michigan tax was withheld. Attach your completed Schedule W to Form MI-1040 or MI-1040X-12 where applicable. See complete instructions on page 2 of this form. If you need additional space, attach another Schedule W.

1. Filer's First Name GURPREET	M.I.	Last Name SINGH	2. Filer's Full Social Security No. (Example: 123-45-6789) 810 — 64 — 0037
If a Joint Return, Spouse's First Name RAVINDER	M.I.	Last Name KAUR	3. Spouse's Full Social Security No. (Example: 123-45-6789) 799 — 53 — 0124

TABLE 1: MICHIGAN TAX WITHHELD OR MILITARY PAY REPORTED ON W-2, W-2G or CORRECTED W-2 FORMS

A Enter "X" for: Filer or Spouse		B Employer's identification number (Example: 38-1234567)	C Box c - Employer's name	D Box 1 - Wages, tips, other compensation		E Box 17 - Michigan income tax withheld	
X		26-1668808	NEXTEER AUTOMATIV	146,486	00	5,716	00
	X	31-0345740	KROGER	3,973	00	169	00
	X	36-2167912	SALVATION ARMY ME	1,780	00	76	00
	X	33-0777005	TACO BELL OF AMER	234	00	10	00
					00		00
					00		00
Enter Table 1 Subtotal from additional Schedule W forms (if applicable)							00
4. SUBTOTAL. Enter total of Table 1, column E						4.	5,971 00

TABLE 2: MICHIGAN TAX WITHHELD OR MILITARY RETIREMENT BENEFITS AND RAILROAD RETIREMENT BENEFITS REPORTED ON 1099 FORMS

A Enter "X" for: Filer or Spouse		B Payer's federal identification number (Example: 38-1234567)	C Payer's name	D Taxable pension distribution, misc. income, etc. (see inst.)	E Michigan income tax withheld		
					00	00	
					00	00	
					00	00	
					00	00	
					00	00	
					00	00	
Enter Table 2 Subtotal from additional Schedule W forms (if applicable)							00
5. SUBTOTAL. Enter total of Table 2, column E						5.	00

Filer's Full Social Security Number

810— 64 — 0037

TABLE 3: MICHIGAN FLOW-THROUGH WITHHOLDING

A Payer's federal identification number (Example: 38-1234567)	B Payer's name	C Michigan flow-through withholding tax withheld	
			00
			00
			00
			00
			00
			00
Enter Table 3 Subtotal from additional <i>Schedule W</i> forms (if applicable)			00
6. SUBTOTAL. Enter total of Table 3, column C	6.		00
7. TOTAL. Add lines 4, 5 and 6. Enter here and carry to MI-1040, line 29	7.	5,971	00

Note: If line 6 does not apply, only submit page 1 of the Schedule W with your return.

MIEF_ACK

**Acknowledgement and General Information for
Taxpayers Who File Returns Electronically**

2016

Name(s) as shown on return

GURPREET SINGH & RAVINDER KAUR

Identification Number

***-**-0037

Address

494 TIMBERLEA DR APT 114
ROCHESTER, MI 48309

Thank you for participating in IRS e-file.

1. Your 2016 state income tax return for MI1040 was filed electronically.
The electronic filing services were provided by ADVANTAGE ONE TAX CONSULTING INC

2. Your return was accepted on 02-21-2017 using a Personal Identification Number (PIN) as your electronic signature. You entered a PIN or authorized the Electronic Return Originator (ERO) to enter or generate a PIN for you.
The submission ID assigned to this return is 5408932017051f4dz0eg.

**PLEASE DO NOT SEND A PAPER COPY OF THE TAX RETURN TO THE
STATE. IF YOU DO, IT WILL DELAY THE PROCESSING OF THE RETURN.**