

Income

	Yourself (Y)		Spouse (S)	
1. Federal adjusted gross income from your 2017 federal return (see worksheet on page 7 of the instructions)	1Y	12330 .00	1S	.00
2. Total additions (from Form MO-A , Part 1, Line 7)	2Y	.00	2S	.00
3. Total income - Add Lines 1 and 2.	3Y	12330 .00	3S	.00
4. Total subtractions (from Form MO-A, Part 1, Line 17)	4Y	.00	4S	.00
5. Missouri adjusted gross income - Subtract Line 4 from Line 3.	5Y	12330 .00	5S	.00
6. Total Missouri adjusted gross income - Add columns 5Y and 5S	6	12330 .00		
7. Income percentages - Divide columns 5Y and 5S by total on Line 6. (Must equal 100%)	7Y	100 %	7S	%

Exemptions and Deductions

8. Pension, Social Security, Social Security Disability, and Military exemption (from Form MO-A, Part 3, Section E) 8 .00

9. Select your filing status box below. Enter the appropriate exemption amount on Line 9 9 2100 .00

A. Single - \$2,100 (**see Box B before selecting.**) E. Married Filing Separate (spouse NOT filing) - \$4,200

B. Claimed as a Dependent on Another Person's Federal Tax Return - \$0.00 F. Head of Household - \$3,500

C. Married Filing Combined (joint federal) - \$4,200 G. Qualifying Widow(er) with Dependent Child - \$3,500

D. Married Filing Separate - \$2,100

10. Additional personal exemption (see instructions on page 7) 10 500 .00

11. Tax from federal return - **Do not enter federal income tax withheld** (see instructions on page 7 and 8) 11 194 .00

12. Other tax from federal return - Attach a copy of your federal return (pages 1 and 2) 12 .00

13. Total tax from federal return - Add Lines 11 and 12 13 194 .00

14. Federal tax deduction - Enter the amount from Line 13, not to exceed \$5,000 for an individual filer or \$10,000 for combined filers 14 194 .00

15. Missouri standard deduction or itemized deductions.

- Single or Married Filing Separate - \$6,350
- Head of Household - \$9,350
- Married Filing Combined or Qualifying Widow(er) - \$12,700

If age 65 or older, blind, claimed as a dependent, see page 8. If itemizing, see Form MO-A, Part 2. 15 6350 .00

16. Number of dependents (from Federal Form 1040 or 1040A, Line 6c). **Do not include yourself or spouse.** X \$1,200 = 16 .00

Select box if claiming a stillborn child (see instructions on page 8).

17. Number of dependents on Line 16 who are 65 years of age or older and do not receive Medicaid or state funding. **Do not include yourself or spouse** X \$1,000 = 17 .00



Exemptions and Deductions (cont.)

18. Long-term care insurance deduction	18		.00
19. Health care sharing ministry deduction	19		.00
20. Military income deduction	20		.00
21. Bring jobs home deduction	21		.00
22. Transportation facilities deduction	22		.00

A. Port Cargo Expansion B. International Trade Facility C. Qualified Trade Activities

23. Total deductions - Add Lines 8, 9, 10, and 14 through 22.	23	9144	.00
24. Subtotal - Subtract Line 23 from Line 6.	24	3186	.00
25. Multiply Line 24 by appropriate percentages (%) on Lines 7Y and 7S	25Y	3186	.00
	25S		.00
26. Enterprise zone or rural empowerment zone income modification	26Y		.00
	26S		.00

Tax

27. Taxable income - Subtract Line 26 from Line 25.	27Y	3186	.00	27S		.00
28. Tax (see tax chart on page 20 of the instructions).	28Y	65	.00	28S		.00
29. Resident credit - Attach Form MO-CR and other states' income tax return(s).	29Y		.00	29S		.00
30. Missouri income percentage - Enter 100% unless you are completing Form MO-NRI . Attach Form MO-NRI and a copy of your federal return if less than 100%	30Y	72	%	30S		%
31. Balance - Subtract Line 29 from Line 28; OR multiply Line 28 by percentage on Line 30	31Y	47	.00	31S		.00
32. Other taxes - Select box and attach federal form indicated. <input type="checkbox"/> Lump sum distribution (Form 4972) <input type="checkbox"/> Recapture of low income housing credit (Form 8611)	32Y		.00	32S		.00
33. Subtotal - Add Lines 31 and 32	33Y	47	.00	33S		.00
34. Total Tax - Add Lines 33Y and 33S.	34	47	.00			

Payments and Credits

35. MISSOURI tax withheld - Attach Forms W-2 and 1099.	35	221	.00
36. 2017 Missouri estimated tax payments - Include overpayment from 2016 applied to 2017	36		.00
37. Missouri tax payments for nonresident partners or S corporation shareholders - Attach Forms MO-2NR and MO-NRP	37		.00



Payments and Credits

38. Missouri tax payments for nonresident entertainers - Attach Form MO-2ENT	38		.00
39. Amount paid with Missouri extension of time to file (Form MO-60).	39		.00
40. Miscellaneous tax credits (from Form MO-TC , Line 13) - Attach Form MO-TC	40		.00
41. Property tax credit - Attach Form MO-PTS	41		.00
42. Total payments and credits - Add Lines 35 through 41	42	221	.00

Skip Lines 43 through 45 if you are not filing an amended return.

43. Amount paid on original return.	43		.00
44. Overpayment as shown (or adjusted) on original return	44		.00

Indicate Reason for Amending

Amended Return

- A. Federal audit. Enter date of IRS report (MM/DD/YY)
- B. Net operating loss carryback Enter year of loss (YY)
- C. Investment tax credit carryback Enter year of credit (YY)
- D. Correction other than A, B, or C. Enter date of federal amended return, if filed. (MM/DD/YY)

45. Amended return total payments and credits - Add Line 43 to Line 42 or subtract Line 44 from Line 42.	45		.00
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46. If Line 42, or if amended return, Line 45, is larger than Line 34, enter the difference. Amount of OVERPAYMENT	46	174	.00
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47. Amount of Line 46 to be applied to your 2018 estimated tax	47		.00
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48. Enter the amount of your donation in the trust fund boxes below. See instructions for additional trust fund codes.

Refund

- | | | |
|--|--|---|
| 48a. Children's Trust Fund <input type="text"/> .00 | 48b. Veterans Trust Fund <input type="text"/> .00 | 48c. Elderly Home Delivered Meals Trust Fund <input type="text"/> .00 |
| 48d. Missouri National Guard Trust Fund <input type="text"/> .00 | 48e. Workers' Memorial Fund <input type="text"/> .00 | 48f. Childhood Lead Testing Fund <input type="text"/> .00 |
| 48g. Missouri Military Family Relief Fund <input type="text"/> .00 | 48h. General Revenue Fund <input type="text"/> .00 | 48i. Organ Donor Program Fund <input type="text"/> .00 |
| 48j. Additional Fund Code <input type="text"/> Additional Fund Amount <input type="text"/> .00 | 48k. Additional Fund Code <input type="text"/> Additional Fund Amount <input type="text"/> .00 | |

Total Donation - Add amounts from Boxes 48a through 48k and enter here.	48		.00
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49. Amount of Line 46 to be deposited into a Missouri 529 College Savings Plan (MOST) account. Enter amount from Line E of Form 5632	49		.00
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Refund (cont.)

50. **REFUND** - Subtract Lines 47, 48, and 49 from Line 46 and enter here 50
 If you would like your refund deposited directly into your checking or savings account, complete boxes a, b, and c below.

a. Routing Number c. Checking Savings

b. Account Number

Amount Due

51. If Line 34 is larger than Line 42 or Line 45, enter the difference.
 Amount of UNDERPAYMENT (see the instructions for Line 52) 51

52. Underpayment of estimated tax penalty - Attach **Form MO-2210**. Enter penalty amount here ... 52
 Select this box if you are a farmer exempt from the underpayment of estimated tax penalty.

53. **AMOUNT DUE** - Add Lines 51 and 52.
 If you pay by check, you authorize the Department of Revenue to process the check electronically. Any returned check may be presented again electronically 53

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which he or she has any knowledge. As provided in **Chapter 143, RSMo**, a penalty of up to \$500 shall be imposed on an individual who files a frivolous return. I also declare under penalties of perjury that I employ no illegal or unauthorized aliens as defined under federal law and that I am not eligible for any tax exemption, credit, or abatement if I employ such aliens.

Signature

Signature Date (MM/DD/YY)

Spouse's Signature (If filing combined, BOTH must sign) Date (MM/DD/YY)

E-mail Address Daytime Telephone

Preparer's Signature Date (MM/DD/YY)

Preparer's FEIN, SSN, or PTIN Preparer's Telephone

Preparer's Address State ZIP Code

I authorize the Director of Revenue or delegate to discuss my return and attachments with the preparer or any member of the preparer's firm Yes No

Department Use Only

A FA E10 DE F

(Revised 12-2017)

Mail To: Balance Due: Missouri Department of Revenue
 P.O. Box 3370
 Jefferson City, MO 65105-3370

Refund or No Amount Due: Missouri Department of Revenue
 P.O. Box 3222
 Jefferson City, MO 65105-3222

Phone (Balance Due): (573) 751-7200
Phone (Refund or No Amount Due): (573) 751-3505
Fax: (573) 751-2195
E-mail: income@dor.mo.gov





Resident/Nonresident Status - Select your status in the appropriate box below.

Social Security Number

630 - 79 - 3617

Name

MOHAMMED, RAHAMATH ALI

Address

3255 S PARKER RD APT 1-212

City, State, ZIP Code

AURORA CO 80014

1. Nonresident of Missouri
State of residence during 2017 _____

2. Part-Year Missouri Resident
Indicate the dates you were a Missouri Resident in 2017.

A. Date From: 01/01/2017 Date To: 10/14/2017

B. Indicate the other state of residence
and dates you resided there VIRGINIA

Date From: 10/15/2017 Date To: 12/31/2017

Spouse's Social Security Number

_____ - _____ - _____

Spouse's Name

Address

City, State, ZIP Code

1. Nonresident of Missouri
State of residence during 2017 _____

2. Part-Year Missouri Resident
Indicate the dates you were a Missouri Resident in 2017.

A. Date From: _____ Date To: _____

B. Indicate the other state of residence
and dates you resided there _____

Date From: _____ Date To: _____

Part A

Based on the **Military Spouse's Residency Relief Act**, if you are the spouse of a military servicemember residing outside of Missouri solely because your spouse is there on military orders, and Missouri is your state of residence, any income you earn is taxable to Missouri. **Do not complete Form MO-NRI.** You must report 100% on Line 30 of Form MO-1040.

3. Military/Nonresident Tax Status - Indicate your tax status below and complete Part C - Missouri Income Percentage.

Missouri Home of Record
I did not at any time during the 2017 tax year maintain a permanent place of abode in Missouri, nor did I spend more than 30 days in Missouri during the year. I did maintain a permanent place of abode in the state of _____.

Non-Missouri Home of Record
I resided in Missouri during 2017 solely because my spouse or I was stationed at _____ on military orders. My home of record is in the state of _____.

3. Military/Nonresident Tax Status - Indicate your tax status below and complete Part C - Missouri Income Percentage.

Missouri Home of Record
I did not at any time during the 2017 tax year maintain a permanent place of abode in Missouri, nor did I spend more than 30 days in Missouri during the year. I did maintain a permanent place of abode in the state of _____.

Non-Missouri Home of Record
I resided in Missouri during 2017 solely because my spouse or I was stationed at _____ on military orders. My home of record is in the state of _____.



Worksheet for Missouri Source Income

Part B

Adjusted Gross Income Computations	Federal Form 1040A, Line No.	Federal Form 1040, Line No.	Yourself or One Income Filer		Spouse (On A Combined Return)	
			Missouri Sources		Missouri Sources	
A. Wages, salaries, tips, etc.	7	7	A	8875.00	A	00
B. Taxable interest income.	8a	8a	B	00	B	00
C. Dividend income	9a	9a	C	00	C	00
D. State and local income tax refunds	NONE	10	D	00	D	00
E. Alimony received	NONE	11	E	00	E	00
F. Business income or (loss)	NONE	12	F	00	F	00
G. Capital gain or (loss)	10	13	G	00	G	00
H. Other gains or (losses).	NONE	14	H	00	H	00
I. Taxable IRA distributions.	11b	15b	I	00	I	00
J. Taxable pensions and annuities	12b	16b	J	00	J	00
K. Rents, royalties, partnerships, S corporations, etc.	NONE	17	K	00	K	00
L. Farm income or (loss)	NONE	18	L	00	L	00
M. Unemployment compensation	13	19	M	00	M	00
N. Taxable social security benefits.	14b	20b	N	00	N	00
O. Other income	NONE	21	O	00	O	00
P. Total - Add Lines A through O	15	22	P	8875.00	P	00
Q. Less: federal adjustments to income	20	36	Q	00	Q	00
R. SUBTOTAL (Line P - Line Q) If no modifications to income, enter this amount on Part C, Line 1	21	37	R	8875.00	R	00
S. Missouri modifications - additions to federal adjusted gross income (Missouri source from Form MO-1040, Line 2)			S	00	S	00
T. Missouri modifications - subtractions from federal adjusted gross income (Missouri source from Form MO-1040, Line 4)			T	00	T	00
U. MISSOURI INCOME (Missouri sources). Line R plus Line S, minus Line T. Enter this amount on Part C, Line 1			U	00	U	00

Missouri Income Percentage

Part C

	1Y	2Y	3Y	1S	2S	3S
1. Missouri Income - Enter wages, salaries, etc. from Missouri. (You must file a Missouri return if the amount on this line is more than \$600)	8875.00					
2. Taxpayer's total adjusted gross income (From Form MO-1040, Lines 5Y and 5S or from your federal form if you are a military nonresident and you are not required to file a Missouri return).	12330.00					
3. Missouri Income Percentage - Divide Line 1 by Line 2. If greater than 100%, enter 100%. (Round to a whole percent such as 91% instead of 90.5% and 90% instead of 90.4%. However, if percentage is less than 0.5%, use the exact percentage.) Enter percentage here and on Form MO-1040, Lines 30Y and 30S	72 %					

Under penalties of perjury, I declare that I have examined this form and to the best of my knowledge and belief it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which he/she has any knowledge. As provided in Chapter 143, RSMo, a penalty of up to \$500 shall be imposed on any individual who files a frivolous return.

Signature

Signature	Date (MM/DD/YY)
<input type="text"/>	<input type="text"/>
Spouse's Signature (if filing combined, BOTH must sign)	Date (MM/DD/YY)
<input type="text"/>	<input type="text"/>



Missouri Information Worksheet

2017

Keep for your records

Part I - Personal Information

Taxpayer

Last Name MOHAMMED
First Name RAHAMATH ALI
Middle Initial Suffix
Social Security No. 630-79-3617
Date of Birth 02/02/1992
Date of Death
E-mail address ali7.oracle@gmail.com
Work Phone Number *
In Care of Name
Address 3255 s parker rd Apt. 1-212
City Aurora State CO ZIP Code 80014
County Cape Girardeau Home Phone Number *
County Code CAPE

Spouse

Last Name
First Name
Middle Initial Suffix
Social Security No.
Date of Birth
Date of Death
E-mail address
Work Phone Number *

* Check this box to claim a stillbirth child exemption for Missouri
**Note: A copy of the stillbirth certificate is required to claim this additional dependent deduction.

* Check one of these boxes to print optional daytime phone number on Form MO-1040 page 2

Yes No
Address is the same as last year

Part II - Main Form

- Missouri resident (Long Form) QuickZoom to Form MO-1040
Missouri resident - Single/Married (One Income) QuickZoom to Form MO-1040A
Missouri part-year resident filing as a resident QuickZoom to Form MO-1040
X Missouri part-year resident filing as a nonresident QuickZoom to Form MO-1040
Nonresident QuickZoom to Form MO-1040

Spouse Residency or Military Spouse Relief Act:

- Spouse has different residency than the taxpayer (See Tax Help)
Spouse qualifies under Military Spouse Residency Relief Act (See Tax Help)

For Part-Year Residents Only:

Taxpayer Missouri residency dates (use MM/DD/YYYY format) . From 01/01/2017 To 10/14/2017
Spouse Missouri residency dates From To

Taxpayer City Forms

- QZ to
QZ to
QZ to
QZ to
QZ to

Spouse City Forms

- QZ to
QZ to
QZ to
QZ to
QZ to

- Form E-1 St. Louis Individual Earnings Tax return
Form E-1R St. Louis Individual Earnings Tax return
Form E-234 St. Louis Earnings Tax return
Form RD-108 Kansas City Profits Return Earnings Tax
Form RD-109 Kansas City Wage Earner Earnings Tax

Part III - Filing Status

- X 1 Single
2 Married and filing a combined Missouri return
3a Married filing separate return
b Married filing separate (spouse not filing)
4 Head of household
5 Qualifying widow(er) with dependent child
6 Claimed as a dependent on another person's federal tax return

Part IV - Farmer Status

- At least 2/3 of your gross 2017 income is from farming
At least 2/3 of your gross 2017 income is from farming and you will file your 2017 return and pay the full amount of the tax due on or before March 1, 2018

Part V — Non-Obligated Spouse

Yourself **Spouse** Non-obligated spouse

Part VI — 100% Disabled

Yes **No** **Taxpayer** is 100% disabled
 Spouse is 100% disabled

Part VII — Property Tax Credit

- 1** Taxpayer does not need to file a MO return (not enough income was earned) but wants to claim the property tax credit. **QuickZoom to Form MO-PTC ▶**
- 2** Taxpayer needs to file a MO return and:
 - 1) will file as single or married filing jointly;
 - 2) will claim the property tax credit on the return. **QuickZoom to Form MO-PTS ▶**
- 3** Taxpayer needs to file a return and will file the return jointly with a spouse, but they:
 - 1) lived separately for the entire year; and
 - 2) want to claim the property tax credit separately. **QuickZoom to Form MO-PTC ▶**

Part VIII — Electronic Filing Information

New! State e-file disclosure consent:

By using a computer system and software to prepare and transmit my client's return electronically, I consent to the disclosure of all information pertaining to my use of the system and software to create my client's return and to the electronic transmission of my client's tax return to the Missouri Department of Revenue, as applicable by law.

The state return will be filed electronically

Yes **No** Do you want to use the Federal PIN?

Date return was EFiled _____
Date return was accepted by the state _____
Enter the date Form MO-1040V was given to client _____

Electronic PDF Attachments

PDF's that you have selected to attach to your state e-file return are listed below.

Description	Filename

Part IX — Direct Deposit Information

Yes **No** Elect direct deposit of state tax refund?
* See Tax Help for refund expectation.

Bank Information:

If you selected Direct Deposit, fill out the information below:

Name of Financial Institution (optional) CHASE BANK
Account type Checking Savings
Routing number 102001017
Account number 617792119

International ACH Transactions

Yes No

Will the funds for this refund (or payment) go to (or come from) an account outside the U.S.?

Part X — Paid Preparer Information

Enter Preparer Code from Firm/Preparer Info . . . 1

Yes No

Authorize Director of Revenue to discuss return with preparer?

Part XI — Extension Status

Federal extension has been filed

Yes No

Missouri tax return due date extended?

Extended due date . . . _____

QuickZoom to Form MO-60 ▶

QuickZoom to Form MO-1040 ▶

QuickZoom to Form MO-1040A ▶

Tax Payments Worksheet

2017

▶ Keep for your records

Name RAHAMATH ALI MOHAMMED	Social Security Number 630-79-3617
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Tax Payments for the Current Year

		State	
		Date	Payment
1	First Payment		
2	Second Payment		
3	Third Payment		
4	Fourth Payment		
Additional Payments			
5	Payment		
	Payment		
	Payment		
	Payment		
	Payment		
6	Overpayment from previous year applied to current year		
7	Amount paid with current year extension		
8	Total tax payments		

Income Taxes Withheld for the Current Year

	Taxpayer		Spouse
9	State withholding on Forms W-2	221.	
10	State withholding on Forms W-2G		
11	State withholding on Forms 1099-R		
12 a	State withholding on Forms 1099-MISC		
b	State withholding on Forms 1099-G		
c	State withholding on Forms 1099-K		
13	Other state tax withholding		
14	Total income tax withheld	221.	
15	Date return will be filed and balance paid	15	

Smart Worksheets from your 2017 Missouri Tax Return

SMART WORKSHEET FOR: Form MO-1040: Missouri Resident (Long Form)

Missouri Income Tax Withheld for Nonresidents Smart Worksheet	
A	Missouri income tax withheld from the Tax Payments Worksheet <u>221.</u>
Nonresident partners or S corporation shareholders:	
B	Missouri tax withholding from Form(s) MO-2NR (entered on the federal Tax Payments Worksheet and included on line A) _____
Nonresident entertainers:	
C	Missouri tax withholding from Form MO-2ENT (entered on the federal Tax Payments Worksheet and included on line A) _____
Note: Make sure that the amounts on line B and/or line C are reported on the federal Tax Payments Worksheet or you will not get the state income tax deduction on your federal Schedule A.	
D	Missouri income tax withheld for line 34. Subtract lines B and C from line A <u>221.</u>

DO NOT SEND THIS VA-8453 TO THE VIRGINIA DEPARTMENT OF TAXATION OR THE IRS. IT MUST BE MAINTAINED IN YOUR FILES!

Virginia Submission Identification Number (SID)

First Name & Middle Initial (if joint or combined return, enter both)	Last Name	B Your Social Security Number
RAHAMATH ALI	MOHAMMED	630-79-3617
Present Home Address		A Spouse's Social Security Number
3255 S PARKER RD APT # 1-212		
City, State and Zip Code		Online Filed Return <input type="checkbox"/>
AURORA CO 80014		

Part I Tax Return Information	A Spouse	B Yourself
1. Federal Adjusted Gross Income (Form 760CG, Line 1; 760PY, Line 1, columns A & B; Form 763, Line 1)		12,330.
2. Virginia Adjusted Gross Income (Form 760CG, Line 9; 760PY, Line 10, columns A & B; Form 763, Line 9)		5,455.
3. Taxable Income (Form 760CG, Line 16; 760PY, Line 17, columns A & B; Form 763, Line 18)		3,930.
4. Virginia Income Tax (Form 760CG, Line 19; 760PY, Line 18, columns A & B; Form 763 Line 19)		0.
5. Withholding (Form 760CG, Line 20a & b; 760PY, Lines 20a & 20b; Form 763, Lines 20a & 20b)		247.
6. Amount you Owe (Form 760CG, Line 37; Form 760PY, Line 37; Form 763, Line 37)		
7. Refund (Form 760CG, Line 38; 760PY, Line 38; Form 763, Line 38)		247.

Part II Declaration of Taxpayer

8a. I consent that my refund be directly deposited as designated on my 2017 Virginia income tax return. If I have filed a joint return, this is an irrevocable appointment of the other spouse as an agent to receive the refund. I certify that the transaction does not directly involve a financial institution outside of the territorial jurisdiction of the United States at any point in the process.

8b. I do not want direct deposit of my refund or I am not receiving a refund. I choose to have a check mailed to me.

8c. I authorize the Virginia Department of Taxation (Virginia Tax) and its designated Financial Agent to initiate an ACH electronic funds withdrawal entry to the financial institution account indicated on my 2017 Virginia income tax return for payment of my state taxes owed on this return and/or a payment of estimated tax. 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 certify that the transaction does not directly involve a financial institution outside of the territorial jurisdiction of the United States at any point in the process.

I declare under penalties of perjury that I have compared the information on my return with the information I have provided to my electronic return originator and that the amounts described in Part I above agree with the amounts shown on the corresponding lines of my 2017 Virginia individual income tax return. To the best of my knowledge and belief, my return is true, correct and complete. I consent that my return including this declaration and accompanying schedules and statements be sent to the Internal Revenue Service (IRS) by my electronic return originator (ERO) and by the IRS to Virginia Tax. This declaration is to be retained by the ERO or transmitter as validation of my electronically filed Virginia income tax return. Taxpayers may sign the form using a rubber stamp, mechanical device, such as a signature pen, or computer software program.

Your Signature	Date	Spouse's Signature (If Filing Status 2 or 4, BOTH must sign)	Date
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Part III Declaration of Electronic Return Originator (ERO) and Paid Preparer

I declare that I have reviewed the above taxpayer's return and that the entries on this form are complete and correct to the best of my knowledge. I have obtained the taxpayer's signature on Form VA-8453 before submitting this return to the Internal Revenue Service (IRS) and Virginia Tax. I have provided the taxpayer with a copy of all forms and information to be filed with the IRS and Virginia Tax and have followed all other requirements as described in Handbook for Electronic Filers of Individual Income Tax Returns (Tax Year 2017) and any requirements specified by Virginia Tax. If I am also the Paid Preparer, under penalties of perjury, I declare that I have examined the above taxpayer's return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer is based on all information of which preparer has any knowledge. EROs and paid preparer can sign the form using a rubber stamp, mechanical device, such as a signature pen, or computer software program.

ERO's Signature GLOBAL TAXES LLC	Date 06-14-18	SSN/PTIN 301017196
Firm's name (or yours if self-employed) 2530 PEBBLE CREEK LN CUMMING GA 30041	Address, City, State and Zip	Paid Preparer? <input type="checkbox"/> Y <input type="checkbox"/> N Self-employed? <input type="checkbox"/> Y <input type="checkbox"/> N 301017196
Paid Preparer's Signature APPANA RUPA VENKATA SATYA SAI MANI KUMAR	Date 06-14-18	SSN/PTIN P02090332
Firm's name (or yours if self-employed) 2530 PEBBLE CREEK LN CUMMING GA 30041	Address, City, State and Zip	Self-employed? <input type="checkbox"/> Y <input type="checkbox"/> N 301017196

Form 760PY Virginia Part-Year Resident Income Tax Return
2017
Page 1 Due May 1, 2018



See instructions before completing line items.

Enclose a complete copy of your federal tax return and all other required Virginia enclosures.

Dates of VA Residence (mm-dd-yyyy)	
You - From	You - To
10-15-2017	12-31-2017
Spouse - From	Spouse - To

YOUR First Name RAHAMATH ALI	MI	Your Last Name MOHAMMED	Check if deceased <input type="checkbox"/>	Suffix	A Your Social Security Number 630-79-3617
SPOUSE'S First Name (filing status 2 or 4)	MI	Spouse's Last Name	Check if deceased <input type="checkbox"/>	Suffix	B Spouse's Social Security Number

Present Home Address (Number and Street, or Rural Route) 3255 S PARKER RD APT 1-212			VA Driver's License Information Customer ID		
City, Town or Post Office AURORA			You _____ Spouse _____		
State CO	ZIP Code 80014	Locality Code 029	Issue Date (mm-dd-yyyy) You _____ Spouse _____		

Check Applicable Boxes	<input type="checkbox"/> Amended Return	<input type="checkbox"/> Qualifying Farmer, Fisherman or Merchant Seaman	Combined Social Security for You and Spouse reported as taxable income on Federal Return \$ _____,00
	<input type="checkbox"/> Check if Result of NOL	<input type="checkbox"/> Earned Income Credit Claimed on federal return	
	<input type="checkbox"/> Dependent on Another's Return	<input type="checkbox"/> Overseas on Due Date	

Filing Status Enter Filing Status Code in box below.

1 = Single (Column A) - Federal head of household? YES

2 = Married, Filing Joint return (Column A)

3 = Married, Filing Separate returns (Column A)

4 = Married, Filing Separately on this combined return (Columns A and B)

If Filing Status 3, enter spouse's SSN in the Spouse's Social Security Number box at top of form and, enter Spouse's Name _____

Exemptions Enter the number of exemptions being claimed.

	You/ Spouse	Dependents	65 or Over	Blind
A - You Enter the numbers for both You and Spouse if Filing Status 2	1	0		
B - Spouse Filing Status 4 Only				

DATE OF BIRTH

Your Birth Date (mm-dd-yyyy) 0 2 - 0 2 - 1 9 9 2

Spouse's Birth Date (mm-dd-yyyy) - -

B Spouse Filing Status 4 ONLY	A You Include Spouse if Filing Status 2
---	---

Complete the Schedule of Income first and submit it with your Form 760PY.

Line	Description	1	2	3	4a	4b	5	6	7	8	9	10	11	12	13
1	FEDERAL ADJUSTED GROSS INCOME from Sch. of Income, Part 1, Line 7, Column 1.		00	12330	00										
2	Additions from Schedule 760PY ADJ, Line 3.		00		00										
3	Add Lines 1 and 2.		00	12330	00										
4a	Qualifying Age Deduction. Enter Birth Dates above. Complete Age Deduction Worksheet in instructions. Enter Spouse's Age Deduction on Line 4b, Column B when using Filing Status 4 ONLY. Otherwise, claim Your Age Deduction on Line 4a, Column A and Spouse's on Line 4b, Column A.														00
4b			00		00										00
5	Social Security Act and equivalent Tier 1 Railroad Retirement Act benefits reported as taxable income on federal return and attributable to your period of residence in Virginia.		00		00										00
6	State income tax refund or overpayment credit reported as income on your federal return and received while a Virginia resident. Claim in the same column you reported adjusted gross income on Line 1.		00		00										00
7	Income attributable to your period of residence outside Virginia from Schedule of Income, Part 1, Line 9, Column 3.		00	6875	00										00
8	Subtractions from Schedule 760PY ADJ, Line 7.		00		00										00
9	Add Lines 4a, 4b, 5, 6, 7 and 8.		00	6875	00										00
10	Virginia Adjusted Gross Income (VAGI). Subtract Line 9 from Line 3.		00	5455	00										00
11	Itemized Deductions paid while a Virginia resident		00		00										00
12	State and local income taxes on Federal Schedule A and included on Line 11.		00		00										00
13	Subtract Line 12 from Line 11 if claiming itemized deductions. Otherwise, enter standard deduction from Standard Deductions Worksheet in instructions.		00	1326	00										00



Your Name RAHAMATH ALI MOHAMMED	Your SSN 630-79-3617
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	B Spouse Filing Status 4 ONLY	A You Include Spouse if Filing Status 2
14 Prorated exemption amount from Schedule of Income, Part 2, Line 11. See instructions.....	00	199 00
15 Deductions from Schedule 760PY ADJ, Line 9.....	00	00
16 Add Lines 13, 14 and 15.	00	1525 00
17 Virginia Taxable Income. Subtract Line 16 from Line 10.	00	3930 00
18 Tax amount from Tax Table or Tax Rate Schedule.....	00	0 00
19 Total Tax. Add Line 18, Column A and Line 18, Column B.		0 00
20a Your Virginia income tax withheld. Enclose copies of Forms W-2, W-2G, 1099 and VK-1.....		247 00
20b Spouse's Virginia income tax withheld. Enclose copies of Forms W-2, W-2G, 1099 and VK-1.....		00
21 Combined 2017 Estimated Tax Payments.....		00
22 2016 overpayment credited to 2017 estimated taxes.....		00
23 Extension Payment - Enter amount paid on Form 760IP.....		00
24 Tax Credit for Low-Income Individuals or Virginia Earned Income Credit from Schedule 760PY ADJ, Line 17...		00
25 Total credit for taxes paid to another state from Schedule OSC.....		00
26 Reserved for future use.....		
27 Credits from Schedule CR, Section 5, Line 1A.....		00
28 Total payments and credits. Add Lines 20a, 20b, 21, 22, 23, 24, 25, and 27.		247 00
29 If Line 19 is larger than Line 28, enter the difference. This is the INCOME TAX YOU OWE.		00
30 If Line 28 is larger than Line 19, enter the difference. This is the OVERPAYMENT AMOUNT.		247 00
31 Amount of overpayment on Line 30 to be CREDITED TO 2018 ESTIMATED INCOME TAX.		00
32 Virginia College Savings Plan Contributions from Schedule VAC, Section I, Line 6.....		00
33 Other Voluntary Contributions from Schedule VAC, Section II, Line 14.....		00
34 Addition to Tax, Penalty and Interest from enclosed Schedule 760PY ADJ, Line 21.....		00
35 Sales and Use Tax is due on Internet, mail order, and out-of-state purchases (Consumer's Use Tax). See instructions.Check here if no sales and use tax is due..... <input checked="" type="checkbox"/>		00
36 Add Lines 31 through 35.		00
37 If you owe tax on Line 29, add Lines 29 and 36 - OR - If Line 30 is an overpayment and Line 36 is larger than Line 30, enter the difference. Enclose payment or pay at www.tax.virginia.gov AMOUNT YOU OWE ... <input type="checkbox"/> Check here if paying by credit or debit card - See instructions.....		00
38 If Line 30 is larger than Line 36, subtract Line 36 from Line 30..... YOUR REFUND. If the Direct Deposit section below is not completed, your refund will be issued by check.		247 00

DIRECT BANK DEPOSIT

Domestic Accounts Only.
No International Deposits.

Your Bank Routing Transit Number
1 0 2 0 0 1 0 1 7

Your Bank Account Number Checking Savings
6 1 7 7 9 2 1 1 9

I (We) authorize the Department of Taxation to discuss this return with my (our) preparer. I agree to obtain my Form 1099-G at www.tax.virginia.gov.
I (We), the undersigned, declare under penalty of law that I (we) have examined this return and to the best of my (our) knowledge, it is a true, correct and complete return.

Your Signature	Your Phone Number	Date
Spouse's Signature (If a joint return, both must sign)	Spouse's Phone Number	Date
Preparer's Name APPANA RUPA VENKATA SATYA SAI MANI KUMAR	Preparer's Phone Number (678) 965-9729	Date 06-14-2018
Firm's Name (or Yours if Self-Employed) GLOBAL TAXES LLC 2530 PEBBLE CREEK LN CUMMING GA 30041	Preparer's PTIN P02090332	Vendor Code 1555
	Filing Election Code 7	Office Use Only

**2017 VIRGINIA SCHEDULE OF INCOME
Form 760PY**

Page 1



Your Name RAHAMATH ALI MOHAMMED	Your SSN 630-79-3617
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PART 1

Income Distribution

Complete the Schedule of Income prior to beginning Form 760PY. Everyone should complete Section A. If you are claiming filing status 4, also complete Section B. Refer to your federal return when completing Part 1.

SECTION A SCHEDULE OF INCOME Form 760PY, Column A — All Filers Must Complete This Schedule —		You (Include Spouse if Filing Status 2)						
		Column A1 Federal Return		Column A2 While VA Resident		Column A3 While NOT VA Resident		
1.	Wages, salaries, tips, etc.....	1	14330	.00	5455	.00	8875	.00
2.	Interest and dividends	2		.00		.00		.00
3.	Pension and other income.....	3		.00		.00		.00
4.	Gross income (add Lines 1, 2 and 3)	4	14330	.00	5455	.00	8875	.00
5.	Adjustments to income: moving expenses	5	2000	.00	0	.00	2000	.00
6.	Other income adjustments (enclose explanation)	6		.00		.00		.00
7.	Federal adjusted gross income (Line 4 less Lines 5 and 6)*	7	12330	.00	5455	.00	6875	.00
8.	Net fixed date conformity modifications.....	8		.00		.00		.00
9.	Fixed date conformity Federal Adjusted Gross Income (add Lines 7 and 8).....	9	12330	.00	5455	.00	6875	.00

*Enter the amount from Line 7, Column A1 on Form 760PY, Page 1, Line 1, Column A.

SECTION B SCHEDULE OF INCOME Form 760PY, Column B — Spouse Must Complete This Schedule if claiming Filing Status 4 —		Enter Spouse's Income When Filing Status 4 Is Claimed						
		Column B1 Federal Return		Column B2 While VA Resident		Column B3 While NOT VA Resident		
1.	Wages, salaries, tips, etc.....	1		.00		.00		.00
2.	Interest and dividends	2		.00		.00		.00
3.	Pension and other income.....	3		.00		.00		.00
4.	Gross income (add Lines 1, 2 and 3)	4		.00		.00		.00
5.	Adjustments to income: moving expenses	5		.00		.00		.00
6.	Other income adjustments (enclose explanation)	6		.00		.00		.00
7.	Federal Adjusted gross income (Line 4 less Lines 5 and 6)**	7		.00		.00		.00
8.	Net fixed date conformity modifications.....	8		.00		.00		.00
9.	Fixed date conformity Federal Adjusted Gross Income (add Lines 7 and 8).....	9		.00		.00		.00

**Enter the amount from Line 7, Column B1 on Form 760PY, Page 1, Line 1, Column B.

Submit completed Schedule of Income with Form 760PY to avoid delays.

2017 VIRGINIA SCHEDULE OF INCOME

Form 760PY

Page 2



Your Name RAHAMATH ALI MOHAMMED	Your SSN 630-79-3617
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PART 2

Prorated Exemptions Worksheet

Complete the Prorated Exemption Worksheet to compute your allowable personal and dependent exemptions. The worksheet below is used to reduce your personal and dependent exemptions to an amount that is proportional to the number of days you resided in Virginia during the taxable year. The total exemption amount is the number of exemptions claimed, prorated based on the portion of the year you resided in Virginia (see Ratio Schedule in Form 760PY Instructions).

Each spouse must compute his or her own prorated personal exemptions based on the number of exemptions claimed in the Exemption Section of Form 760PY. Use the separate exemption amounts for "you" and your "spouse" when completing Lines 1 - 11 of the worksheet. Enter the total prorated exemption in the appropriate column on Form 760PY, Line 14. If claiming Filing Status 2, the combined exemption amount for you and spouse should be entered on Form 760PY, Line 14, Column A.

For example, if you are single, claim no dependents and moved to Virginia on July 1, your prorated Virginia personal exemption is computed as follows:

\$930 (One personal exemption)

X .504 (Ratio Schedule factor for July 1 move to Virginia)

\$468.72 (Be sure to round to the nearest whole number, \$469.00 in this example)

Prorated Virginia Personal Exemptions

		Column B Spouse	Column A You
1.	Your exemption		1
2.	Dependents		0
3.	Add Lines 1 and 2		1
4.	Multiply Line 3 by \$930		930
5.	65 or over		
6.	Blind		
7.	Add Lines 5 and 6		
8.	Multiply Line 7 by \$800		
9.	Add Lines 4 and 8		930
10.	Enter the ratio amount from the Personal Exemption Ratio Schedule in the Form 760PY Instructions		0.214
11.	Multiply Line 9 by Line 10 and enter the result in the appropriate column on Form 760PY, Line 14.....		199

PART 3

Moving Information

- 1a. If YOU moved into Virginia in 2017, prior state of residence MO
- 1b. If YOU moved out of Virginia in 2017, state moved to _____
- 2a. If SPOUSE moved into Virginia in 2017, prior state of residence _____
- 2b. If SPOUSE moved out of Virginia in 2017, state moved to _____

2017 Schedule INC/CG

630793617

Report all W-2s, 1099s & VK-1s with VA Withholding



RAHAMATH ALI MOHAMMED

Your/ Spouse SSN	Withholding Type	VA Withholding	Employer FEIN	VA Account Number	VA Wages, tips, other comp.
630793617	W	247.	811643169	30811643169F001	5455.

Total VA Withholding	SSN	VA Withholding
You	630793617	247.
Spouse		
Total # of W-2s, 1099s & VK-1s	01	

To avoid delays - be sure to enter all information, including the Employer's FEIN.

Virginia Information Worksheet

2017

▶ Keep for your records

Part I – Personal Information

Taxpayer:

First Name RAHAMATH ALI
 Last Name MOHAMMED
 Middle Initial _____ Suffix _____
 Social Security No 630-79-3617
 Date of Birth 02/02/1992
 Date of Death _____
 VA Driver's License/VA ID No _____
 VA DL/VA ID Issue Date _____
 E-mail Address ali7.oracle@gmail.com
 Daytime Phone _____ *
 Home Phone _____ *

Spouse:

First Name _____
 Last Name _____
 Middle Initial _____ Suffix _____
 Social Security No _____
 Date of Birth _____
 Date of Death _____
 VA Driver's License/VA ID No. _____
 VA DL/VA ID Issue Date. _____
 E-mail Address _____
 Daytime Phone _____ *

* Check a box to print daytime and/or home phone numbers on the return.

Important - Clients may have received a Virginia Identity PIN from the Virginia Department of Revenue (See Part IV - Other Information below)

Address 3255 s parker rd Apartment Number 1-212
 City Aurora State CO ZIP Code 80014
 Locality * Buckingham City County

* Select a Virginia city or county you were a resident of on January 1, 2018.

If nonresident, select a city or county where the Virginia source income was located (see help).

Part II – Main Form

- Form 760: Resident Tax Return ▶
- Form 760PY: Part-Year Resident Tax Return ▶
- Form 763: Nonresident Tax Return. ▶
- Form 763S: Special Nonresident Claim for Income Tax Withheld Taxpayer ▶
Spouse ▶

Nonresident

• Enter state of residence _____ **Taxpayer** **Spouse**

Part-Year Resident

- If you moved out of Virginia during 2017, enter date you moved out _____
- If you moved into Virginia during 2017, enter date you moved in 10/15/2017 10/15/2017
- Part-year residency ratio 0.214

Part III – Filing Status

Resident

- 1 = Single
- 2 = Married, joint
- 3 = Married, separate

Part-Year Resident

- 1 = Single
- 2 = Married, joint
- 3 = Married, separate
- 4 = Married, combined separate

Nonresident

- 1 = Single
- 2 = Married, joint
- 3 = Married, spouse no income
- 4 = Married, separate

Low Income Credit

Check if married Filing Separate and spouse is claiming the low income credit

Part IV – Other Information

Identity Protection PIN: (must be 7 characters in length)

If the Virginia Department of Revenue sent the taxpayer or spouse an Identity PIN, enter it below.

(Note: The Virginia Identity PIN is not the IRS Identity PIN)

(Note: Only one Virginia Identity PIN is required for joint filers, even if both filers are issued a PIN)

- You agree to obtain Form 1099-G income tax refund statement electronically at www.tax.virginia.gov
- You mail your return directly to the state of Virginia
- Your address is different from last year
- Your name or filing status is different from last year
- You did not file a Virginia return last year
- You are a Virginia resident who has income from **only one** of these states that borders Virginia: Kentucky, Maryland, North Carolina or West Virginia, and your only income from the border state was earned income on wages and salaries or business income reported on federal Schedule C.

Part IV – Other Information (continued)

Farmers and Fishermen

- Are you self-employed in farming/fishing or a merchant seaman?
Return will be filed and tax due will be paid by March 1, 2018

Sales & Use Tax Information

Yes No

Did you purchase merchandise from retailers in 2017 for use in Virginia and not pay retail sales and use tax? If yes, you owe Virginia and must pay the tax. Enter purchases below.

Enter total cost of food items purchased
Enter total cost of non-food items purchased
Check this box if home is in Northern Virginia or Hampton Roads region affected by increase of Use Tax Rate to 6% (otherwise rate is 5.3%)

Underpayment Penalty Information

Enter last year's Virginia adjusted gross income
Enter last year's deductions
Enter last year's nonrefundable credits
Enter last year's total tax liability before credits
Enter last year's spouse tax adjustment credit (if you filed Form 760 last year)

Part V – Electronic Filing Information

New! State e-file disclosure consent:

By using a computer and software to prepare and transmit my client's return electronically, I consent to the disclosure of all information pertaining to my use of the system and software to create my client's return and to the electronic transmission of my client's tax return to the Virginia Department of Taxation, as applicable by law.

- The state return will be filed electronically
You elect to opt-out of electronic filing and Form 8454-P has been filed with the state

Electronic PDF Attachments

PDF's that you have selected to attach to your state e-file return are listed below.

Table with 2 columns: Description, Filename

Date return was EFiled
Date return was accepted by the state
Enter the date Form 760-PMT or Form 760-PFF was given to client.

QuickZoom to Form 8453

Part VI – Direct Deposit Information or Electronic Funds Withdrawal Information

Yes No

Do you want to elect direct deposit of state tax refund?
Important: If you answered No to direct deposit, your state refund will be issued on a paper check. The Virginia Department of Taxation no longer issues debit cards.

- Do you want to elect electronic funds withdrawal of state balance due (EF Only)?
Do you want to pay the amount you owe by credit/debit card?

International ACH Transactions:

Will the fund go to or originate from an account outside the U.S.?
Virginia does not currently support International ACH transactions.

If you selected direct deposit or electronic funds withdrawal and answered No to International ACH Transactions, fill out the information below:

Name of Financial Institution (optional) - CHASE BANK

Check the appropriate box:

- Checking
Savings
Routing number: 102001017
Account number: 617792119

Enter the date to withdraw from the account above (Caution: See help for date to enter)
State balance-due amount from this return.

Part VII – Paid Preparer Information

Enter the preparer's assigned code from Preparer's Information Worksheet - 1

Yes No

I authorize the Department of Taxation to discuss my return with my preparer

Part VIII – Extension Status

Yes No

Has the tax return due date been extended for a six month extension?

Extended due date

QuickZoom to Form 760-IP Automatic Extension Payment

Part IX – Amended Return

- You are filing a Virginia amended return
- You are filing a Virginia amended return due to NOL

If amending a current year return, **QuickZoom** to Worksheet for Amended Returns to determine if you are due a refund, or need to make an additional payment ▶

-
- QuickZoom** to Form 760 ▶
 - QuickZoom** to Form 760PY ▶
 - QuickZoom** to Form 763 ▶
 - QuickZoom** to Form 763S (Taxpayer) ▶
 - QuickZoom** to Form 763S (Spouse) ▶

Tax Payments Worksheet

2017

▶ Keep for your records

Name RAHAMATH ALI MOHAMMED	Social Security Number 630-79-3617
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Tax Payments for the Current Year

	Date	Payment
1 First Payment		
2 Second Payment		
3 Third Payment		
4 Fourth Payment		
Additional Payments		
5 a Payment		
b Payment		
c Payment		
d Payment		
e Payment		
6 Overpayment from previous year applied to 2017		
7 Amount paid with current year extension		
8 Total tax payments. Add lines 1 through 7		

Income Taxes Withheld for the Current Year

	Spouse	Taxpayer
9 State withholding on Forms W-2		247.
10 State withholding on Forms W-2G		
11 State withholding on Forms 1099-R		
12 a State withholding on Forms 1099-MISC		
b State withholding on Forms 1099-G		
c State withholding on Forms 1099-INT		
d State withholding on Forms 1099-K		
13 a Withholding from Schedule VK-1		
b Other state tax withholding		
<input type="checkbox"/> If Schedule VK-1 withholding is included on both lines 13a and 13b, either check this box or enter the Schedule VK-1 withholding as a negative amount here ▶		
14 Total income tax withheld.		247.
15 Date return will be filed and balance paid		

Smart Worksheets from your 2017 Virginia Tax Return

SMART WORKSHEET FOR: Form 8453: Declaration for Electronic Filing

Additional Information Smart Worksheet	
A	Date this return was E-Filed ▶ _____
B	Date return was accepted by the state ▶ _____
C	Documents to attach to the FRONT of Form VA-8453: Form W-2 (State copy) _____ _____ _____
D	Documents to attach to the BACK of Form VA-8453: _____ _____ _____
E	Retain Form VA-8453 and all attachments for a period of three years. DO NOT MAIL TO STATE AUTHORITIES

SMART WORKSHEET FOR: Form 760 PY: Part-Year Individual Income Tax Return

Standard Deduction Worksheet	
1	Fixed date conformity federal adjusted gross income <u>12330</u>
2	Fixed date conformity income attributable to the period of Virginia residence <u>5455</u>
3	Percentage of full standard deduction allowable (divide line 2 by line 1) <u>44.2 %</u>
4	Maximum standard deduction: Filing Status 1 or 3, enter \$3,000; Filing Status 2 or 4, enter \$6,000 (For dependents, the standard deduction amount is limited to the amount of earned income) <u>3000</u>
5	Multiply line 3 by line 4. Enter here and on line 13. If using Filing Status 4, you may allocate this amount between each spouse as mutually agreed <u>1326</u>

SMART WORKSHEET FOR: Virginia Schedule of Income

Income and Adjustments Allocation Smart Worksheet				
Note: Entries made on this smart worksheet will transfer to Section A and/or Section B, lines 1-9.	A Taxpayer (include Spouse if Filing Status 2)		B Spouse — Use only when Filing Status 4 is claimed	
	Income on Federal Return	Income While Virginia Resident	Income on Federal Return	Income While Virginia Resident
Income:				
1 Wages, salaries, tips, etc	14330	5455		
2 Taxable interest income				
3 Dividend income				
4 Taxable refunds, credits, offsets of state and local income taxes . .				
5 Alimony received				
6 Business income or (loss)				
7 Capital gain or (loss)				
8 Other gains or (losses)				
9 Taxable IRA distributions				
10 Taxable pensions and annuities .				
11 Rents, royalties, partnerships, estates, trusts, S Corporations . .				
12 Farm income or (loss)				
13 Unemployment compensation . .				
14 Taxable social security benefits .				
15 Other income				
Adjustments:				
16 Educator expenses				
17 Certain business expenses of reservists, performing artists, etc.				
18 Health savings account deduction				
19 Moving expenses	2000	0		
20 Deduction for self-employment tax				
21 SEP, SIMPLE and qualified plans				
22 Self-employed health insurance .				
23 Penalty for early withdrawal . . .				
24 Alimony paid				
25 IRA deduction				
26 Student loan interest deduction . .				
27 Tuition and fees deduction				
28 Domestic production activities . .				
29 Other adjustments				
Fixed Date Conformity:				
30 Fixed date conformity addition . .				
31 Fixed date conformity subtraction				