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|--|----------------------------|---|
| Taxpayer first name and initial JACQUELINE C | Last name ERGINA | Taxpayer social security number 176-78-8612 |
| If a joint return, spouse's first name and initial | Last name | Spouse's social security number |

| | | | | |
|---|-------------------------------|--|---|--|
| Home address (number and street). If you have a P.O. box, see instructions. 6387 DOUGLAS STREET | | Apt. no. | Presidential Election Campaign Taxpayer <input type="checkbox"/> Spouse <input type="checkbox"/> | |
| City, town or post office, state, and ZIP code. PITTSBURGH PA 15217 | | | | |
| Foreign country name | Foreign province/state/county | Foreign postal code <input type="text"/> | | |

| | | | | | |
|----|--|---|----------------------------|--|----------|
| 6a | <input checked="checked" type="checkbox"/> | Taxpayer. If someone can claim you as a dependent, do not check box 6a | Boxes checked on 6a and 6b | <u>1</u> | |
| | b | <input type="checkbox"/> | Spouse | Children on 6c who lived with you | _____ |
| | | | | Children on 6c who did not live with you | _____ |
| | | | | Dependents on 6c not entered above | _____ |
| | | | | Total. Add lines above | <u>1</u> |

| 6c Dependents: | | | | (4) <input checked="" type="checkbox"/> if qualifies for | | If more than four dependents, <input checked="" type="checkbox"/> here <input type="checkbox"/> |
|----------------|-----------|----------------------------|-------------------------|--|--------------------------|---|
| (1) First name | Last name | (2) Social security number | (3) Relationship to you | Child tax credit | Other dependents | |
| | | | | <input type="checkbox"/> | <input type="checkbox"/> | |
| | | | | <input type="checkbox"/> | <input type="checkbox"/> | |
| | | | | <input type="checkbox"/> | <input type="checkbox"/> | |
| | | | | <input type="checkbox"/> | <input type="checkbox"/> | |

| Income | | 60,366 | |
|--------|---|--------|--------|
| 7 | Wages, salaries, tips, etc. Attach Form(s) W-2 | 7 | |
| 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. List type and amount | 21 | |
| 22 | Combine the amounts in the far right column for lines 7 through 21. This is your total income | 22 | 60,366 |

| | | | | | | |
|--|-----|--|-----|----|--|--|
| Adjusted Gross Income (Schedule 1) | 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 b Recipient's SSN ► | 31a | | | |
| | 32 | IRA deduction | 32 | | | |
| | 33 | Student loan interest deduction | 33 | | | |
| | 34 | Reserved for future use | 34 | | | |
| | 35 | Reserved for future use | 35 | | | |
| | 36 | Add lines 23 through 35 | | 36 | | |
| | 37 | Subtract line 36 from line 22. This is your adjusted gross income | | 37 | | |

| Form | Tax Return Reconciliation Worksheet, Page 2 | 2021 |
|--|--|---------------------------|
| Name JACQUELINE C ERGINA | | Tp TIN 176-78-8612 |
| <div style="display: flex; justify-content: space-between;"> <div style="width: 30%;"> 38 Amount from line 37 (adjusted gross income) </div> <div style="width: 60%; text-align: right;"> 38 60,366 </div> </div> | | |
| Tax and Credits (Schedules 2, 3) | 39a Check <input type="checkbox"/> You were born before January 2, 1957, <input type="checkbox"/> Blind. Total boxes checked 39a <input type="checkbox"/> if: <input type="checkbox"/> Spouse was born before January 2, 1957, <input type="checkbox"/> Blind. | |
| | b If your spouse itemizes on a separate return or you were a dual-status alien, check here 39b <input type="checkbox"/> | |
| Standard Deduction for— • People who check any box on line 39a or 39b or who can be claimed as a dependent, see instructions. • All others: Single or Married filing separately, \$12,550 Married filing jointly or Qualifying widow(er), \$25,100 Head of household, \$18,800 | 40 Itemized deductions (from Schedule A) or your standard deduction (see left margin) <div style="float: right;">40 12,550</div> | |
| | 40b Charitable contributions if you take the standard deduction <div style="float: right;">40b 300</div> | |
| | 41 Subtract line 40 and 40b from line 38 <div style="float: right;">41 47,516</div> | |
| | 42 Qualified business income deduction (see instructions) <div style="float: right;">42</div> | |
| | 43 Taxable income. Subtract line 42 from line 41. If line 42 is more than line 41, enter -0- <div style="float: right;">43 47,516</div> | |
| | 44 Tax (see instr.). Check if any from: a <input type="checkbox"/> Form(s) 8814 b <input type="checkbox"/> Form 4972 c <input type="checkbox"/> <div style="float: right;">44 6,204</div> | |
| | 45 Alternative minimum tax (see instructions). Attach Form 6251 <div style="float: right;">45</div> | |
| | 46 Excess advance premium tax credit repayment. Attach Form 8962 <div style="float: right;">46</div> | |
| | 47 Add lines 44, 45, and 46 <div style="float: right;">47 6,204</div> | |
| | 48 Foreign tax credit. Attach Form 1116 if required <div style="float: right;">48</div> | |
| 49 Credit for child and dependent care expenses. Attach Form 2441 <div style="float: right;">49</div> | | |
| 50 Education credits from Form 8863, line 19 <div style="float: right;">50</div> | | |
| 51 Retirement savings contributions credit. Attach Form 8880 <div style="float: right;">51</div> | | |
| 52 Child tax credit/credit for other dependents <div style="float: right;">52</div> | | |
| 53 Residential energy credits. Attach Form 5695 <div style="float: right;">53</div> | | |
| 54 Other credits from Form: a <input type="checkbox"/> 3800 b <input type="checkbox"/> 8801 c <input type="checkbox"/> <div style="float: right;">54</div> | | |
| 55 Add lines 48 through 54. These are your total credits <div style="float: right;">55</div> | | |
| 56 Subtract line 55 from line 47. If line 55 is more than line 47, enter -0- <div style="float: right;">56 6,204</div> | | |
| Other Taxes (Schedule 2) | 57 Self-employment tax. Attach Schedule SE <div style="float: right;">57</div> | |
| | 58 Unreported social security and Medicare tax from Form: a <input type="checkbox"/> 4137 b <input type="checkbox"/> 8919 <div style="float: right;">58</div> | |
| | 59 Additional tax on IRAs, other qualified retirement plans, etc. Attach Form 5329 if required <div style="float: right;">59</div> | |
| | 60a Household employment taxes from Schedule H <div style="float: right;">60a</div> | |
| | 60b First-time homebuyer credit repayment. Attach Form 5405 if required <div style="float: right;">60b</div> | |
| 61 Taxes from: a <input type="checkbox"/> Form 8959 b <input type="checkbox"/> Form 8960 c <input type="checkbox"/> Instructions; enter code(s) <div style="float: right;">61</div> | | |
| 62 Section 965 net tax liability installment from Form 965-A <div style="float: right;">62</div> | | |
| 63 Add lines 56 through 61. This is your total tax <div style="float: right;">63 6,204</div> | | |
| Payments (Schedule 3) | 64 Federal income tax withheld from: <div style="float: right;">64 6,270</div> | |
| | a Form(s) W-2 <div style="float: right;">64a</div> | |
| | b Form(s) 1099 <div style="float: right;">64b</div> | |
| | c Other forms <div style="float: right;">64c</div> | |
| | 65 2021 estimated tax payments and amount applied from 2020 return <div style="float: right;">65</div> | |
| | 66a Earned income credit (EIC) <div style="float: right;">66a</div> | |
| | b Nontaxable combat pay election <div style="float: right;">66b</div> | |
| | c Prior year (2019) earned income <div style="float: right;">66c</div> | |
| | 67 Additional child tax credit. Attach Schedule 8812 <div style="float: right;">67</div> | |
| | 68 American opportunity credit from Form 8863, line 8 <div style="float: right;">68</div> | |
| | 69 Recovery rebate credit <div style="float: right;">69 0</div> | |
| | 70 Net premium tax credit. Attach Form 8962 <div style="float: right;">70</div> | |
| | 71 Amount paid with request for extension to file <div style="float: right;">71</div> | |
| | 72 Excess social security and tier 1 RRTA tax withheld <div style="float: right;">72</div> | |
| | 73 Credit for federal tax on fuels. Attach Form 4136 <div style="float: right;">73</div> | |
| 74 Other payments and refundable credits <div style="float: right;">74</div> | | |
| 75 Total pymts. Add ln 64, 65, 66a, 67-74. <div style="float: right;">75 6,270</div> | | |
| Refund | 76 If line 75 is more than line 63, subtract line 63 from line 75. This is the amount you overpaid <div style="float: right;">76 66</div> | |
| | 77a Amount of line 76 you want refunded to you . If Form 8888 is attached, check here <div style="float: right;">77a 66</div> | |
| | b Routing number 043000096 c Type: <input type="checkbox"/> Checking <input checked="" type="checkbox"/> Savings <div style="float: right;">77b</div> | |
| | d Account number 1051101981 <div style="float: right;">77c</div> | |
| 78 Amount of line 76 you want applied to your 2022 estimated tax <div style="float: right;">78</div> | | |
| Amount You Owe | 79 Amount you owe. Subtract line 75 from line 63. For details on how to pay, see instructions <div style="float: right;">79</div> | |
| | 80 Estimated tax penalty (see instructions) <div style="float: right;">80</div> | |
| Int/Pen Date filed Int Fail to file Fail to pay Total | | |
| Third Party Designee | Do you want to allow another person to discuss this return with the IRS (see instructions)? <input checked="" type="checkbox"/> Yes. Complete below. <input type="checkbox"/> No Personal identification no. (PIN) 31279 | |
| | Designee's Name Barry Kaufman, CPA Phone no. 412-362-9040 | |
| Other Info | Taxpayer Daytime phone number Taxpayer: Occupation IRS Identity Protection PIN | |
| | Spouse: Occupation IRS Identity Protection PIN | |
| | <input checked="" type="checkbox"/> Taxpayer <input type="checkbox"/> Spouse Email address JCE9198@GMAIL.COM | |