# **REVIEW QUESTIONS**

These questions are either from the 2021 certification tests or questions designed to increase your understanding of issues that we see when preparing returns. Use Pub. 4012 and the various handouts to answer these questions.

## **SESSION 3 – INCOME**

Note: When doing Practice Problems in the TaxSlayer Practice Lab, make up Social Security Numbers (except don't start the number with a "9" and use "00" as the middle digits). Also, make up addresses and other entries required that are not provided. Although the tax documents shown below say 2021, assume they are for 2022 to answer the questions.

**Problem 1 –** Gilbert is an elementary school teacher at a public school. Gilbert and Tara are married and choose to file Married Filing Jointly on their 2022 tax return. Tara retired in 2018 and began receiving her pension on October 1st of that year. She explains that this is a joint and survivor annuity. Tara won \$3,000 gambling at a casino and had additional lottery winnings of \$150. Tara has documented casino losses of \$1,500. Gilbert's birth date shown in the Intake Sheet was 5/5/1964 and Tara's was 3/11/1956.

		CORRE	С	ED (if checked)					
PAYER'S name, street address, o country, ZIP or foreign postal coo			1	Gross distribution		P		Distributions From ensions, Annuities, Retirement or	
OAK ENTERPRISES			\$	\$ 18,485.00 2021 Pr				ofit-Sharing Plans,	
2250 DELTA AVENUE			2a Taxable amount					IRAs, Insurance	
YOUR CITY, YOUR STAT	E, ZIP		\$			Form 1099-	R	Contracts, etc.	
					-	Total		Сору В	
		-		not determined		distribution		Report this	
PAYER'S TIN	RECIPIENT'S TIN	N	3	Capital gain (included box 2a)	1 in	4 Federal incom withheld	ie tax	income on your	
				DOX 24		withinerd		federal tax return. If this	
41-200XXXX	417-00-	XXXX	\$			\$	1.849.00		
RECIPIENT'S name			5	Employee contribution:	is/	6 Net unrealize	d	federal income	
				Designated Roth contributions or		appreciation employer's s		tax withheld in	
TARA WASHINGTON				insurance premiums		employer o o	countroo	box 4, attach this copy to	
			\$	Distribution IRA/		\$		your return.	
Street address (including apt. no	).)		7	sodo(s) SEP	γ	8 Other			
123 TAYLOR AVENUE				7 SIME		\$	%	This information is	
City or town, state or province, cou	intry, and ZIP or for	eign postal code	98	Your percentage of tot		9b Total employee		being furnished to the IRS.	
YOUR CITY, YOUR STATE, ZIP		5.		distribution			3,500.00	ule ino.	
	1 1st year of desig.	12 FATCA filing	14	State tax withheld		15 State/Payer	's state no.	16 State distribution	
within 5 years	Roth contrib.	requirement	\$					\$	
\$		13 Date of	\$	Local tax withheld	_	18 Name of loc	- 1.4	\$ 19 Local distribution	
Account number (see instructions)		payment	11 ¢	Local tax withheld		18 Name of loc	anty	19 Local distribution	
			ŝ		_			\$	
Form 1099-R	www.i	rs.gov/Form1099F	1			Department of	the Treasury -	Internal Revenue Service	
		-				-	-		

PAYER'S name, street address, city or town, province o	r state, country, 1 Reportable winnings	2 Date won	OMB No. 1545-0238
and ZIP or foreign postal code			Form W-2G
CHEVY CASINO	\$ 3,000.	7/04/2021	Certain
1 WINNER CIRCLE	3 Type of wager	4 Federal income tax withheld	Gambling
YOUR CITY, STATE ZIP	SLOT MACHINE	\$	Winnings
	5 Transaction	6 Race	(Rev. January 2021
			For calendar yea
	7 Winnings from identical wag	·	20 21
PAYER'S federal identification number PAYER'S telephone	*	AR	ļ
	9 Winner's taxpayer identification	no. 10 Window	
36-800XXXX	417-00-XXXX		This information is being furnished
WINNER'S name	11 First identification	12 Second identification	to the Interna
TARA WASHINGTON			Revenue Service
Street address (including apt. no.)	13 State/Payer's state identification	no. 14 State winnings	
123 TAYLOR AVENUE		\$	Copy E Report this income
City or town, province or state, country, and ZIP or forei	gn postal code 15 State income tax withhe	ld 16 Local winnings	on your federal tax
YOUR CITY, STATE ZIP	\$	\$	return. If this form shows federa
	17 Local income tax withhe	ald 18 Name of locality	income tax withheld in box 4 attach this copy
	s		to your return
Under penalties of perjury, I declare that, to the best correctly identify me as the recipient of this payment an			
Signature >		Date 🕨	

# Questions

- 1. What is the taxable portion of Tara's pension from Oak Enterprises using the simplified method?
  - a. \$0
  - b. \$17,862
  - c. \$18,035
  - d. \$18,485
- 2. What is the total amount of other income reported on the Washington's Form 1040, Schedule 1?
  - a. \$3,900
  - b. \$3,150
  - c. \$1,650
  - d. \$1,500

**Problem 2** – Kenneth and Martha are married and would like to file a joint return. Kenneth and Martha received a state income tax refund of \$230. They state that they have never itemized their deductions. Martha began receiving pension benefits on May 1, 2020. She chose a joint and survivor annuity. Kenneth was born on 7/11/1963 and Martha on 5/24/1960.

PAYER'S TIN    RECIPIENT'S TIN    3 Capital gain (included in box 2a)    4 Federal income tax withheld    Report this income on your federal tax return. If this form shows      40-000XXXX    456-00-XXXX    \$    \$ Imployee contributions/ Designated Roth contributions or insurance premiums    6 Net unrealized appreciation in employer's securities    federal income tax withheld in box 4, attach this copy to your return.      Martha Kemper    5 Employee contributions or insurance premiums    6 Net unrealized appreciation in employer's securities    federal income tax withheld in box 4, attach this copy to your return.      8705 SKIDMORE WAY    7    Street address (including apt. no.)    7    Distribution Street securities    This information is being furnished to the IRS.      YOUR CITY, YOUR STATE, ZIP    9a Your percentage of total distribution %    9b Total employee contributions / %    90,000      10 Amount allocable to IRR    11 1st year of desig.    12 FATCA filing    14 State tax withheld    15 State/Payer's state no.    16 State distribution		PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no. Clark Company Pension Plan 1721 Donnelly Drive Your City, State ZIP				country, ZIP or foreign postal code, and telephone no. Clark Company Pension Plan 1721 Donnelly Drive			\$ 2: \$	a Taxable amount	14,400 t		/IB No. 1545-0 20 <b>21</b> ≂orm <b>1099-</b> I	Р Р	Distributions From ensions, Annuities, Retirement or rofit-Sharing Plans, IRAs, Insurance Contracts, etc.
RECIPIENT'S name    5    Employee contributions/ Designated Roth contributions or insurance premiums    6    Net unrealized appreciation in employer's securities    federal income tax withheld in box 4, attach this copy to your return.      8    Martha Kemper    \$    7    Distribution (contributions)    8    Other    10    Amount allocable to IRR    11    1st year of desig.    12    FATCA filing    14    State tax withheld    15    State/Payer's state no.    16    State distribution	-					not determined Capital gain (inclu	✓		distribution Federal incom	ne tax	Copy B Report this income on your federal tax return. If this				
Street address (including apt. no.)    7    Distribution (SEP) code(s)    8    Other    7    This information is      8705 SKIDMORE WAY    7    \$    %    %    %    %      City or town, state or province, country, and ZIP or foreign postal code YOUR CITY, YOUR STATE, ZIP    9a Your percentage of total distribution    9b Total employee contributions %    9b Dotal employee contributions %    This information is being furnished to the IRS.      10 Amount allocable to IRR    11    1st year of desig.    12    FATCA filing    14    State tax withheld    15    State/Payer's state no.    16    State distribution		RECIPIENT'S name	456-00-		⊅ 5 \$	Designated Roth contributions or			appreciation	d in	federal income tax withheld in box 4, attach this copy to				
10 Amount allocable to IRR 11 1st year of desig. 12 FATCA filing 14 State tax withheld 15 State/Payer's state no. 16 State distribution		8705 SKIDMORE WAY City or town, state or province, co	untry, and ZIP or fore	eign postal code	Ĺ	code(s) 7 a Your percentage	SEP/ SIMPLE	\$ 9b		contributions	This information is being furnished to the IRS.				
within 5 years  Roth contrib.  requirement  \$    \$  \$  \$		10 Amount allocable to IRR within 5 years \$	11 1st year of desig. Roth contrib.	12 FATCA filing requirement	14 \$ \$	4 State tax withhel		_	State/Payer	's state no.	16 State distribution \$ \$				
Account number (see instructions)    13 Date of payment    17 Local tax withheld    18 Name of locality    19 Local distribution      \$    \$    \$    \$    \$      Form 1099-B    www.irs.gov/Form1099B    Department of the Treasury - Internal Revenue Service					17 \$ \$	7 Local tax withhel	d	18	Name of loc	ality	19 Local distribution \$ \$				

# Questions

- 1. How much of Kenneth and Martha's state income tax refund is taxable?
  - a. \$0
  - b. \$23
  - c. \$115
  - d. \$230
- What age is used to compute the taxable amount of the pension using the Simplified Method?
  a. 60
  - b. 115
  - c. 116
  - d. 117

3. What is the taxable amount of Martha's pension? \$\_\_\_\_\_

**Problem 3 –** Keisha and Jay are married and file a joint return. Jay is an employee and received a Form W-2 showing \$30,000 in wages for the year. Keisha is a self-employed driver for Delicious Deliveries. Keisha and Jay had health insurance subsidized by Jay's employer. They paid \$3,600 pre-tax in premiums for the year.

Keisha provided a statement from the food delivery service that indicated the amount of mileage driven and fees paid for the year. These fees are considered ordinary and necessary for the food delivery business: 7,200 miles driven while delivering food; insulated box rental of \$300; vehicle safety inspection (required by Delicious Deliveries) of \$50; and GPS device fee of \$120. Keisha also

kept receipts for the following out-of-pocket expenses: \$100 for tolls; \$120 for car washes; \$48 for parking tickets; \$75 for Personal Protective Equipment (PPE) used during deliveries; and \$150 for snacks and lunches Keisha consumed while working. Keisha's record-keeping application shows she also drove 4,120 miles between deliveries and 4,200 miles driven between her home and her first and last delivery point of the day. Her miles were split evenly between the first half of 2022 and the second half. Keisha has a separate car for personal use. She bought and started using her second car for business on September 1, 2020. Keisha provided the Form 1099-NEC and Form 1099-K that she received from Delicious Deliveries. Keisha also received \$300 in cash tips that were not reported elsewhere.

CORRECTED (if checked) PAYER'S name, street address, city or town, state or province, country, ZIP OMB No. 1545-0116 or foreign postal code, and telephone no. Nonemployee Delicious Deliveries 2021 567 ALVIN AVENUE Compensation YOUR CITY, YOUR STATE, ZIP Form 1099-NEC RECIPIENT'S TIN PAYER'S TIN Copy B 1 Nonemployee compensation 20-400XXXX 345-00-XXXX 1,800.00 9 For Recipient This is important tax information and is being furnished to the IRS. If you are RECIPIENT'S name 2 Payer made direct sales totaling \$5,000 or more of  $\Box$ consumer products to recipient for resale Keisha Johnson required to file a return, a 3 negligence penalty or other Street address (including apt. no.) sanction may be imposed on you if this income is taxable 789 DANA DRIVE 4 Federal income tax withheld and the IRS determines that it City or town, state or province, country, and ZIP or foreign postal code has not been reported. YOUR CITY, YOUR STATE, ZIP 5 State tax withheld 6 State/Payer's state no. 7 State incom Account number (see instructions) \$ \$ \$ \$ Form 1099-NEC (keep for your records) www.irs.gov/Form1099NEC Department of the Treasury - Internal Revenue Service

Keisha won \$10,000 on a scratch-off lottery ticket. She has \$3,000 of losing tickets.

ILER'S name, street address, city or town, state or province, country, ZIP	FILER'S TIN	OMB No. 1545-2205				
r foreign postal code, and telephone no.	20-400XXXX	Pay	ment Card and			
elicious Deliveries	PAYEE'S TIN	-	Third Party			
67 ALVIN AVENUE	345-00-XXXX	2021	Network			
OUR CITY, YOUR STATE, ZIP	1a Gross amount of payment card/third party network transactions		Transaction			
	\$ 15,245.00	Form 1099-K				
	1b Card Not Present transactions	2 Merchant category code	Copy E			
heck to indicate if FILER is a (an): Check to indicate transactions	\$		For Paye			
Payment settlement entity (PSE) Payment card	3 Number of payment transactions	4 Federal income tax withheld	This is important ta			
Electronic Payment Facilitator (EPF)/Other third party V Third party network	3,300	\$	information and being furnished t			
AYEE'S name	5a January	5b February	the IRS. If you a			
Geisha Johnson	\$ 1,270.00	\$ 1,200.00	required to file return, a negligence			
Alisha Johnson	5c March	5d April	penalty or oth			
treet address (including apt. no.)	\$ 1,340.00	\$ 1,250.00	sanction may b imposed on you			
	5e May	5f June	taxable incom			
89 DANA DRIVE	\$ 1,290.00		results from th transaction and th			
	5g July	5h August	IRS determines that has not bee			
ity or town, state or province, country, and ZIP or foreign postal code	\$ 1,240.00	4	reported			
OUR CITY, YOUR STATE, ZIP	5i September	5j October				
'SE'S name and telephone number	\$ 1,270.00	\$ 1,235.00	2			
	\$ 1.310.00					
ccount number (see instructions)	6 State	7 State identification no.	8 State income tax withhe			
		+	\$			

# Questions

- 1. What is Keisha's Schedule C net profit (gross profit less expenses)?
  - a. \$6,992
  - b. \$7,310
  - c. \$9,533
  - d. \$9,851
- How much of Keisha's gambling winnings must be included in adjusted gross income (AGI)?
  \$\_\_\_\_\_\_
- 3. Which of the following statements is true:
  - a. Keisha can add the \$3,600 they paid for health insurance premiums to her selfemployment expenses on Schedule C.
  - b. Keisha can claim the \$3,600 they paid for health insurance premiums as a selfemployed health insurance deduction on Schedule 1.
  - c. Keisha can claim her portion of the health insurance premiums, \$1,800, as a selfemployed health insurance deduction on Schedule 1.
  - d. Keisha can add her portion of the health insurance premiums, \$1,800, to her selfemployment expenses on Schedule C.
  - e. Keisha is **not** eligible for a self-employed health insurance deduction.
- 4. What if the amount in Box 1A of Form 1099-K showed \$5,245 rather than \$15,245?

**Problem 4 –** Cynthia is age 29, and single. Cynthia has investment income and has a consolidated broker's statement.

Cynthia began a cleaning service business in 2020. She was paid on Form 1099- NEC for 2022. She also received additional cash receipts of \$400 not reported on Form 1099-NEC. Cynthia has receipts for the following expenses: \$350 for cleaning supplies; \$225 for business cards; \$450 for a mop, broom, and vacuum cleaner; \$150 for work gloves; \$125 for lunches; and \$175 for work clothes suitable for everyday use. Cynthia has a detailed mileage log reporting for 2022:

- Mileage from her home to her first client's home and mileage from her last client's home to her home – 750 miles, 300 of which were from January to June and 450 from July to December
- In addition, on the days Cynthia worked for multiple clients, she kept track of the mileage from the first client's home to the second client's home in case that mileage was also deductible. She logged 450 miles (not included in the 750 miles), 150 from January to June, and 300 from July to December.

		CTED (if checked	)		
PAYER'S name, street address, city o or foreign postal code, and telephone			OMB No. 1545-0116		
HOUSEKEEPERS HELPERS 123 TIDY WAY YOUR CITY, YOUR STATE, ZIP			2021		Nonemployee Compensation
			Form 1099-NEC		
PAYER'S TIN	RECIPIENT'S TIN	1 Nonemployee comper	nsation		Copy B
63-400XXXX	419-00-XXXX	\$		4,000	For Recipient
RECIPIENT'S name		2 Payer made direct sa consumer products t	This is important tax information and is being furnished to the IRS. If you are		
Street address (including apt. no.)		3			required to file a return, a negligence penalty or other sanction may be imposed on
159 ARCHER AVENUE		4 Federal income tax	withheld		you if this income is taxable and the IBS determines that it
City or town, state or province, country	y, and ZIP or foreign postal code	\$			has not been reported.
YOUR CITY, YOUR STATE, ZIP		5 State tax withheld	6 State/Payer's state no.		7 State income
Account number (see instructions)		\$			\$
		\$			\$
Form 1099-NEC (keep f	or your records) w	ww.irs.gov/Form1099NEC	Department of the T	reasury ·	Internal Revenue Service

## ABC INVESTMENTS

456 Pima Plaza Your City, YS ZIP

## 2021 TAX REPORTING STATEMENT

Cynthia Simon 159 Archer Avenue Your City, YS ZIP Account No. 111-222 Recipient ID No. 419-00-XXXX Payer's Fed ID Number: 40-200XXXX

	m 1099-DIV* 2021 Dividends and Distributions B for Recipient (OMB NO. 1545-0110)
1aTo	otal Ordinary Dividends
1b	Qualified Dividends
2a	Total Capital Gain Distributions (Includes 2b- 2d)
2b	Capital Gains that represent Unrecaptured 1250 Gain
2c	Capital Gains that represent Section 1202 Gain
2d	Capital Gains that represent Collectibles (28%) Gain
2	Nondividend Distributions
4	Federal Income Tax Withheld0.00
5	Investment Expenses
6	Foreign Country or U.S. Possession
7	Cash Liquidation Distributions0.00
8	Non-Cash Liquidation Distributions
9	Exempt Interest Dividends
10	Specified Private Activity Bond Interest Dividends
11	State
12	State Identification No.
13	State Tax Withheld
	m 1099-MISC* 2021 Miscellaneous Income B for Recipient (OMB NO. 1545-0115)
2	Royalties
4	Federal Income Tax Withheld
8	Substitute Payments in Lieu of Dividends or Interest
8 16	Substitute Payments in Lieu of Dividends of Interest
10	
18	State/ Payer's State No
	m 1099-INT* 2021 Interest Income B for Recipient (OMB NO. 1545-0112)
1	Interest Income
2	Early Withdrawal Penalty0.00
3	Interest on U.S. Savings Bonds and Treas. Obligations
4	Federal Income Tax Withheld
5	Investment Expenses
6	Foreign Tax Paid
7	Foreign Country or U.S. Possession
8	Tax-Exempt Interest
9	Specified Private Activity Bond Interest
14	Tax-Exempt Bond CUSIP No.
	nmary of 2021 Proceeds From Broker and
	ter Exchange Transactions
	s Price of Stocks, Bonds, etc
-ed	eral Income Tax Withheld0.00

Gross Proceeds from each of your security transactions are reported individually to the IRS. Refer to the Form 1099-B section of this statement. Report gross proceeds individually for each security on the appropriate IRS tax return. Do not report gross proceeds in aggregate.

Page 1 of 2

#### ABC INVESTMENTS

456 Pima Plaza Your City, YS ZIP

### 2021 TAX REPORTING STATEMENT

Cynthia Simon 159 Archer Avenue Your City, YS ZIP Account No. 111-222 Recipient ID No. 419-00-XXXX Payer's Fed ID Number: 40-200XXXX

#### FORM 1099-B\* 2021 Proceeds from Broker and Barter Exchange Transactions Copy B for Recipient OMB NO. 1545-0715

Short-term transactions for which basis <u>is reported</u> to the IRS Report on Form 8949 with Box A checked and/or Schedule D, Part I (This Label is a Substitute for Boxes 1c & 6)

8 Desc	ription, 1d Sto	ck or Other S	Symbol, CUS	P	(IRS Form 1099-B box numbers are shown below in bold typ						
Action	1b Date Acquired	1c Date sold disposed	1a Quantity Sold	1d Proceeds	1e Cost or Other Basis	Gain / Loss (-)	1g Wash Sale Loss Disallowed	4 Federal Income Tax Withheld	14 State	15 State Tax Withheld	
lowa	Co. Commo	n Stock									
Sale	01/08/2021	10/30/2021	200.000	2,650.00	2,000.00	650.00					

#### FORM 1099-B\* 2021 Proceeds from Broker and Barter Exchange Transactions Copy B for Recipient OMB NO. 1545-0715

Long-term transactions for which basis is not reported to the IRS Report on Form 8949 with Box E checked and/or Schedule D, Part II (This Label is a Substitute for Boxes 1c & 6)

8 Descr	iption, 1d Sto	ck or Other S	Symbol, CUS	P	(IRS Form 1099-B box numbers are shown below in bold type						
Action	1b Date Acquired	1c Date sold disposed	1a Quantity Sold	1d Proceeds	1e Cost or Other Basis	Gain / Loss (-)	1g Wash Sale Loss Disallowed	4 Federal Income Tax Withheld	14 State	15 State Tax Withheld	
lowa (	Co. Commo	n Stock									
Sale	10/12/2008	11/01/2021	200.000	3,500.00	2,100.00	1,400.00					
TOTAL	s			3,500.00	2,100.00						

This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.

Page 2 of 2

**Questions** (I suggest putting the capital gain information and her self-employment income and expenses in TaxSlayer to answer these questions.)

- 1. What is the net short-term capital gain reported on Cynthia's Schedule D?
  - a. \$2,350
  - b. \$1,400
  - c. \$650
  - d. \$300
- 2. What is the net long-term capital gain reported on Cynthia's Schedule D?
  - a. \$2,350
  - b. \$2,050
  - c. \$1,700
  - d. \$1,400

# 3. Which of the following **cannot** be claimed as a business expense on Cynthia's Schedule C?

- a. Cleaning supplies
- b. Business cards
- c. Lunches
- d. Work gloves
- 4. What are her total miles that qualify for the cents-per-mile deduction?
- 5. What is her net income shown on Schedule C?