Electronic Filing Instructions for your 2022 Federal Amended Tax Return

Important: Your taxes are not finished until all required steps are completed.

Justin D Hutzler
200 Petain St SW
Hartselle, AL 35640-3230

Balance Due/ Refund	Your federal tax return (Form 1040-X) shows a refund due to you in the amount of $44.00. Applicable fees were deducted from your original refund amount of $1,055.00. Your refund is now $899.00. Because you chose to have your TurboTax fees deducted from your refund, you will receive e-mail from Green Dot Bank, which handles this transaction. Your tax refund should be mailed to you within three to four weeks after your return is accepted.
When Will You Get Your Refund?	The IRS issued more than 9 out of 10 refunds to taxpayers in less than 21 days last year. The same results are expected in 2023. To get your estimated refund date from TurboTax, log into My TurboTax at www.turbotax.com. If you do not receive your refund within 21 days, or the amount you get is not what you expected, contact the Internal Revenue Service directly at 1-800-829-4477. You can also check www.irs.gov and select the "Where's my refund?" link.
What You Need to Keep	Your Electronic Filing Instructions (this form) A copy of your federal return

2022 Federal Tax Return Summary	Adjusted Gross Income Correct Amount	$	778.00
	Taxable Income Correct Amount	$	0.00
	Total Tax Correct Amount	$	0.00
	Total Payments/Credits Correct Amount	$	1,099.00
	Amount to be Refunded	$	44.00

Consent to disclose your information for the refund advance loan and for a checking account with Credit Karma Money™

We're going to disclose the tax information described from your 2022 tax return to Credit Karma, MVB Bank, Inc. (the issuer of Credit Karma Money), First Century Bank (the lender), BorrowWorks (the lender service provider) and Intuit Financing, Inc. (a loan program funder), to process and fund your Refund Advance loan, administer, and communicate with you regarding the loan program and to issue and manage a checking account with Credit Karma Money™ for you.

Federal law requires this consent form be provided to you. Unless authorized by law, we cannot disclose your tax return information to third parties for purposes other than the preparation and filing of your tax return without your consent. If you consent to the disclosure of your tax return information, Federal law may not protect your tax return information from further use or distribution.

You are not required to complete this form to engage our tax return preparation services. If we obtain your signature on this form by conditioning our tax return preparation services on your consent, your consent will not be valid. If you agree to the disclosure of your tax return information, your consent is valid for the amount of time that you specify. If you do not specify the duration of your consent, your consent is valid for one year from the date of signature. If you believe your tax return information has been disclosed or used improperly in a manner unauthorized by law or without your permission, you may contact the Treasury Inspector General for Tax Administration (TIGTA) by telephone at 1-800-366-4484, or by email at complaints@tigta.treas.gov.

Do you agree to let TurboTax disclose your tax return info to the parties listed above?

I agree ×

Taxpayer First Name Justin

Taxpayer Last Name Hutzler

Today's Date 01/14/2023

Spouse First Name ________________________

Spouse Last Name ________________________

Today's Date ________________________

Qualifying is not based on your credit score

Does applying for Refund Advance impact my credit?

This will not impact your credit score. Also, your credit is not one of the factors that goes into prequalifying for Refund Advance.

What information are you sharing?

We're sharing the following information with First Century Bank (the lender), BorrowWorks (the lender service provider) and MVB Bank, Inc. (the issuer of the card) via secure, SSL-encrypted transmission:

Personal and contact information for primary filer and, if applicable, spouse: first and last name; Social Security number; date of birth; address (street, city, state, zip, country); email address; phone number; number of dependents; EFIN; military paygrade; driver's license or state ID number.

Filing and preparation information: federal and state tax return type; tax year; filing status and history; whether you are filing IRS Forms 4136, 1310 or 8888; when you agree to this disclosure consent; when the IRS and state accepted the return; the IRS and state acknowledgement code for the return.

Information about personal and business income, deductions, credits, losses and expenses:

- Income and gain from any source (such as wages, tips, pensions, rental income, and capital gains), and related forms (such as Forms W2 and 1099); adjusted gross income; taxable income
- All deductions, credits and benefits (such as standard deduction, itemized deductions like charitable contributions, education credits, earned income tax credit, and dependent care benefits), and related federal and state forms (such as Schedules A and C, and Form 8862)
- All losses and expenses (such as capital losses, theft losses, and business expenses) and related federal and state forms (such as Schedule E and Form 4684)

Refund and tax liability information: current and prior tax year refund, if any, and how you received or are receiving your refund; amount and type of all taxes paid or withheld for the current and prior year, and related federal and state forms (such as Forms 4868 and 1099R)

Information regarding use of TurboTax, including methods and devices used to provide information to TurboTax and TurboTax use history:

- Indicators on how you provided information to TurboTax
- Indicators regarding the device used to provide information to TurboTax

• Information about your TurboTax use, the amount paid for such product and your filing history and status

Consent to use your information for the refund advance loan and for a checking account with Credit Karma Money™

We're going to disclose the tax information described from your 2021 tax return to Credit Karma, MVB Bank, Inc. (the issuer of Credit Karma Money™), First Century Bank (the lender), and BorrowWorks (the lender service provider) to process your Refund Advance loan, administer, and communicate with you regarding the loan program, and to issue and manage a checking account with Credit Karma Money™ for you.

Federal law requires this consent form be provided to you. Unless authorized by law, we cannot disclose your tax return information to third parties for purposes other than the preparation and filing of your tax return without your consent. If you consent to the disclosure of your tax return information, Federal law may not protect your tax return information from further use or distribution.

You are not required to complete this form to engage our tax return preparation services. If we obtain your signature on this form by conditioning our tax return preparation services on your consent, your consent will not be valid. If you agree to the disclosure of your tax return information, your consent is valid for the amount of time that you specify. If you do not specify the duration of your consent, your consent is valid for one year from the date of signature.
If you believe your tax return information has been disclosed or used improperly in a manner unauthorized by law or without your permission, you may contact the Treasury Inspector General for Tax Administration (TIGTA) at https://treasury.gov/tigta/.

Do you agree to let TurboTax disclose your tax return info to the parties listed above?

I agree ✕

Taxpayer First Name Justin

Taxpayer Last Name Hutzler

Today's Date 01/14/2023

Spouse First Name ______

Spouse Last Name ______

Today's Date ______

Qualifying is not based on your credit score

Does applying for Refund Advance impact my credit?

This will not impact your credit score. Also, your credit is not one of the factors that goes into prequalifying for Refund Advance.

What information are you sharing?

We're sharing the following information with First Century Bank (the lender), BorrowWorks (the lender service provider) and MVB Bank, Inc. (the issuer of the card) via secure, SSL-encrypted transmission:

Personal and contact information for primary filer and, if applicable, spouse: first and last name; Social Security number; date of birth; address (street, city, state, zip, country); email address; phone number; number of dependents; EFIN; military paygrade; driver's license or state ID number.

Filing and preparation information: federal and state tax return type; tax year; filing status and history; whether you are filing IRS Forms 4136, 1310 or 8888; when you agree to this disclosure consent; when the IRS and state accepted the return; the IRS and state acknowledgement code for the return.

Information about personal and business income, deductions, credits, losses and expenses:

- Income and gain from any source (such as wages, tips, pensions, rental income, and capital gains), and related forms (such as Forms W2 and 1099); adjusted gross income; taxable income
- All deductions, credits and benefits (such as standard deduction, itemized deductions like charitable contributions, education credits, earned income tax credit, and dependent care benefits), and related federal and state forms (such as Schedules A and C, and Form 8862)
- All losses and expenses (such as capital losses, theft losses, and business expenses) and related federal and state forms (such as Schedule E and Form 4684)

Refund and tax liability information: current and prior tax year refund, if any, and how you received or are receiving your refund; amount and type of all taxes paid or withheld for the current and prior year, and related federal and state forms (such as Forms 4868 and 1099R)

Information regarding use of TurboTax, including methods and devices used to provide information to TurboTax and TurboTax use history:

- Indicators on how you provided information to TurboTax
- Indicators regarding the device used to provide information to TurboTax

- Information about your TurboTax use, the amount paid for such product and your filing history and status

Form **1040-X** (Rev. July 2021)

Department of the Treasury—Internal Revenue Service

Amended U.S. Individual Income Tax Return

▶ Use this revision to amend 2019 or later tax returns.
▶ Go to *www.irs.gov/Form1040X* for instructions and the latest information.

OMB No. 1545-0074

This return is for calendar year (enter year) 2022 **or fiscal year** (enter month and year ended)

Your first name and middle initial	Last name	Your social security number
Justin D	Hutzler	417-39-5015
If joint return, spouse's first name and middle initial	Last name	Spouse's social security number

Current home address (number and street). If you have a P.O. box, see instructions.	Apt. no.	Your phone number
200 Petain St SW		(256)957-8656

City, town or post office, state, and ZIP code. If you have a foreign address, also complete spaces below. See instructions.
Hartselle AL 35640-3230

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

Amended return filing status. You **must** check one box even if you are not changing your filing status. **Caution:** In general, you can't change your filing status from married filing jointly to married filing separately after the return due date.

☒ Single ☐ Married filing jointly ☐ Married filing separately (MFS) ☐ Head of household (HOH) ☐ Qualifying widow(er) (QW)

If you checked the MFS box, enter the name of your spouse. If you checked the HOH or QW box, enter the child's name if the qualifying person is a child but not your dependent ▶

Enter on lines 1 through 23, columns A through C, the amounts for the return year entered above. Use Part III on page 2 to explain any changes.		A. Original amount reported or as previously adjusted (see instructions)	B. Net change—amount of increase or (decrease)—explain in Part III	C. Correct amount
Income and Deductions				
1 Adjusted gross income. If a net operating loss (NOL) carryback is included, check here ▶ ☐	1	306.	472.	778.
2 Itemized deductions or standard deduction	2	12,950.	0.	12,950.
3 Subtract line 2 from line 1	3	-12,644.	472.	-12,172.
4a Reserved for future use	4a			
b Qualified business income deduction	4b	0.	0.	
5 Taxable income. Subtract line 4b from line 3. If the result is zero or less, enter -0-	5	0.	0.	0.
Tax Liability				
6 Tax. Enter method(s) used to figure tax (see instructions): Table	6	0.	0.	0.
7 Nonrefundable credits. If a general business credit carryback is included, check here ▶ ☐	7	0.	0.	0.
8 Subtract line 7 from line 6. If the result is zero or less, enter -0-	8	0.	0.	0.
9 Reserved for future use	9			
10 Other taxes	10	0.	0.	0.
11 Total tax. Add lines 8 and 10	11	0.	0.	0.
Payments				
12 Federal income tax withheld and excess social security and tier 1 RRTA tax withheld. (**If changing,** see instructions.)	12	30.	10.	40.
13 Estimated tax payments, including amount applied from prior year's return	13	0.	0.	
14 Earned income credit (EIC)	14	25.	34.	59.
15 Refundable credits from: ☐ Schedule 8812 Form(s) ☐ 2439 ☐ 4136 ☒ 8863 ☐ 8885 ☐ 8962 or ☐ other (specify):	15	1,000.	0.	1,000.
16 Total amount paid with request for extension of time to file, tax paid with original return, and additional tax paid after return was filed	16			0.
17 Total payments. Add lines 12 through 15, column C, and line 16	17			1,099.
Refund or Amount You Owe				
18 Overpayment, if any, as shown on original return or as previously adjusted by the IRS	18			1,055.
19 Subtract line 18 from line 17. (If less than zero, see instructions.)	19			44.
20 **Amount you owe.** If line 11, column C, is more than line 19, enter the difference	20			
21 If line 11, column C, is less than line 19, enter the difference. This is the amount **overpaid** on this return	21			44.
22 Amount of line 21 you want **refunded to you**	22			44.
23 Amount of line 21 you want **applied to your (enter year):** **estimated tax** 23				

Complete and sign this form on page 2.

Part I Dependents

Complete this part to change any information relating to your dependents.
This would include a change in the number of dependents.
Enter the information for the return year entered at the top of page 1.

			A. Original number of dependents reported or as previously adjusted	B. Net change — amount of increase or (decrease)	C. Correct number
24	Reserved for future use	24			
25	Your dependent children who lived with you	25	0	0	
26	Your dependent children who didn't live with you due to divorce or separation	26	0	0	
27	Other dependents	27	0	0	
28	Reserved for future use	28			
29	Reserved for future use	29			

30 List **ALL** dependents (children and others) claimed on this amended return.

Dependents (see instructions):

If more than four dependents, see instructions and check here ▶ ☐

(a) First name	Last name	(b) Social security number	(c) Relationship to you	(d) ✓ if qualifies for (see instructions): Child tax credit	Credit for other dependents
				☐	☐
				☐	☐
				☐	☐
				☐	☐

Part II Presidential Election Campaign Fund (for the return year entered at the top of page 1)

Checking below won't increase your tax or reduce your refund.

☐ Check here if you didn't previously want $3 to go to the fund, but now do.

☐ Check here if this is a joint return and your spouse did not previously want $3 to go to the fund, but now does.

Part III Explanation of Changes. In the space provided below, tell us why you are filing Form 1040-X.

▶ Attach any supporting documents and new or changed forms and schedules.

added a document

Sign Here

Remember to keep a copy of this form for your records.

Under penalties of perjury, I declare that I have filed an original return, and that I have examined this amended return, including accompanying schedules and statements, and to the best of my knowledge and belief, this amended return is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information about which the preparer has any knowledge.

Your signature	Date	Your occupation: Student
Spouse's signature. If a joint return, **both** must sign.	Date	Spouse's occupation

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check ☐ if self-employed	PTIN
Firm's name ▶ Self-Prepared			Firm's EIN ▶	
Firm's address ▶			Phone no.	

Form **1040** Department of the Treasury—Internal Revenue Service
U.S. Individual Income Tax Return **2022** OMB No. 1545-0074 IRS Use Only—Do not write or staple in this space.

Filing Status Check only one box.
☒ Single ☐ Married filing jointly ☐ Married filing separately (MFS) ☐ Head of household (HOH) ☐ Qualifying surviving spouse (QSS)

If you checked the MFS box, enter the name of your spouse. If you checked the HOH or QSS box, enter the child's name if the qualifying person is a child but not your dependent:

Your first name and middle initial	Last name	Your social security number
Justin D	Hutzler	417-39-5015
If joint return, spouse's first name and middle initial	Last name	Spouse's social security number

Home address (number and street). If you have a P.O. box, see instructions.	Apt. no.	
200 Petain St SW		
City, town, or post office. If you have a foreign address, also complete spaces below.	State	ZIP code
Hartselle	AL	356403230
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

Digital Assets At any time during 2022, did you: (a) receive (as a reward, award, or payment for property or services); or (b) sell, exchange, gift, or otherwise dispose of a digital asset (or a financial interest in a digital asset)? (See instructions.) ☐ Yes ☒ No

Standard Deduction **Someone can claim:** ☐ You as a dependent ☐ Your spouse as a dependent
☐ Spouse itemizes on a separate return or you were a dual-status alien

Age/Blindness **You:** ☐ Were born before January 2, 1958 ☐ Are blind **Spouse:** ☐ Was born before January 2, 1958 ☐ Is blind

Dependents (see instructions):
If more than four dependents, see instructions and check here . . ☐

(1) First name Last name	(2) Social security number	(3) Relationship to you	(4) Check the box if qualifies for (see instructions): Child tax credit	Credit for other dependents
			☐	☐
			☐	☐
			☐	☐
			☐	☐

Income

Attach Form(s) W-2 here. Also attach Forms W-2G and 1099-R if tax was withheld.

If you did not get a Form W-2, see instructions.

Attach Sch. B if required.

1a	Total amount from Form(s) W-2, box 1 (see instructions)	1a	778.
b	Household employee wages not reported on Form(s) W-2	1b	
c	Tip income not reported on line 1a (see instructions)	1c	
d	Medicaid waiver payments not reported on Form(s) W-2 (see instructions)	1d	
e	Taxable dependent care benefits from Form 2441, line 26	1e	
f	Employer-provided adoption benefits from Form 8839, line 29	1f	
g	Wages from Form 8919, line 6	1g	
h	Other earned income (see instructions)	1h	0.
i	Nontaxable combat pay election (see instructions) 1i		
z	Add lines 1a through 1h	1z	778.
2a	Tax-exempt interest 2a — b Taxable interest	2b	
3a	Qualified dividends 3a — b Ordinary dividends	3b	
4a	IRA distributions 4a — b Taxable amount	4b	
5a	Pensions and annuities 5a — b Taxable amount	5b	
6a	Social security benefits 6a — b Taxable amount	6b	
c	If you elect to use the lump-sum election method, check here (see instructions) ☐		
7	Capital gain or (loss). Attach Schedule D if required. If not required, check here ☐	7	
8	Other income from Schedule 1, line 10	8	0.
9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your **total income**	9	778.
10	Adjustments to income from Schedule 1, line 26	10	
11	Subtract line 10 from line 9. This is your **adjusted gross income**	11	778.
12	**Standard deduction or itemized deductions** (from Schedule A)	12	12,950.
13	Qualified business income deduction from Form 8995 or Form 8995-A	13	
14	Add lines 12 and 13	14	12,950.
15	Subtract line 14 from line 11. If zero or less, enter -0-. This is your **taxable income**	15	0.

Standard Deduction for—
- Single or Married filing separately, $12,950
- Married filing jointly or Qualifying surviving spouse, $25,900
- Head of household, $19,400
- If you checked any box under *Standard Deduction*, see instructions.

Tax and Credits

16	**Tax** (see instructions). Check if any from Form(s): 1 ☐ 8814 2 ☐ 4972 3 ☐	16	0.
17	Amount from Schedule 2, line 3	17	
18	Add lines 16 and 17	18	0.
19	Child tax credit or credit for other dependents from Schedule 8812	19	
20	Amount from Schedule 3, line 8	20	0.
21	Add lines 19 and 20	21	0.
22	Subtract line 21 from line 18. If zero or less, enter -0-	22	0.
23	Other taxes, including self-employment tax, from Schedule 2, line 21	23	0.
24	Add lines 22 and 23. This is your **total tax**	24	0.

Payments

If you have a qualifying child, attach Sch. EIC.

25	Federal income tax withheld from:				
a	Form(s) W-2	25a	40.		
b	Form(s) 1099	25b			
c	Other forms (see instructions)	25c			
d	Add lines 25a through 25c			25d	40.
26	2022 estimated tax payments and amount applied from 2021 return			26	
27	Earned income credit (EIC)	27	59.		
28	Additional child tax credit from Schedule 8812	28			
29	American opportunity credit from Form 8863, line 8	29	1,000.		
30	Reserved for future use	30			
31	Amount from Schedule 3, line 15	31			
32	Add lines 27, 28, 29, and 31. These are your **total other payments and refundable credits**			32	1,059.
33	Add lines 25d, 26, and 32. These are your **total payments**			33	1,099.

Refund

Direct deposit? See instructions.

34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you **overpaid**	34	1,099.
35a	Amount of line 34 you want **refunded to you**. If Form 8888 is attached, check here ☐	35a	1,099.
b	Routing number XXXXXXXXX c Type: ☐ Checking ☐ Savings		
d	Account number XXXXXXXXXXXXXXXXX		
36	Amount of line 34 you want **applied to your 2023 estimated tax**	36	

Amount You Owe

37	Subtract line 33 from line 24. This is the **amount you owe**. For details on how to pay, go to *www.irs.gov/Payments* or see instructions	37	
38	Estimated tax penalty (see instructions)	38	

Third Party Designee

Do you want to allow another person to discuss this return with the IRS? See instructions ☐ **Yes.** Complete below. ☒ **No**

Designee's name | Phone no. | Personal identification number (PIN)

Sign Here

Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

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

Your signature	Date	Your occupation	If the IRS sent you an Identity Protection PIN, enter it here (see inst.)
		Student	182547
Spouse's signature. If a joint return, both must sign.	Date	Spouse's occupation	If the IRS sent your spouse an Identity Protection PIN, enter it here (see inst.)

Phone no. (256)957-8656 | Email address

Paid Preparer Use Only

Preparer's name	Preparer's signature	Date	PTIN	Check if: ☐ Self-employed

Firm's name Self-Prepared | Phone no.

Firm's address | Firm's EIN

SCHEDULE 1 (Form 1040)

Department of the Treasury Internal Revenue Service

Additional Income and Adjustments to Income

Attach to Form 1040, 1040-SR, or 1040-NR.

Go to *www.irs.gov/Form1040* for instructions and the latest information.

OMB No. 1545-0074

2022

Attachment Sequence No. **01**

Name(s) shown on Form 1040, 1040-SR, or 1040-NR	**Your social security number**
Justin D Hutzler	417-39-5015

Part I Additional Income

1	Taxable refunds, credits, or offsets of state and local income taxes			1	
2a	Alimony received			2a	
b	Date of original divorce or separation agreement (see instructions):				
3	Business income or (loss). Attach Schedule C			3	
4	Other gains or (losses). Attach Form 4797			4	
5	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E			5	
6	Farm income or (loss). Attach Schedule F			6	
7	Unemployment compensation			7	
8	Other income:				
a	Net operating loss	8a	( )		
b	Gambling	8b			
c	Cancellation of debt	8c			
d	Foreign earned income exclusion from Form 2555	8d	( )		
e	Income from Form 8853	8e			
f	Income from Form 8889	8f			
g	Alaska Permanent Fund dividends	8g			
h	Jury duty pay	8h			
i	Prizes and awards	8i			
j	Activity not engaged in for profit income	8j			
k	Stock options	8k			
l	Income from the rental of personal property if you engaged in the rental for profit but were not in the business of renting such property	8l			
m	Olympic and Paralympic medals and USOC prize money (see instructions)	8m			
n	Section 951(a) inclusion (see instructions)	8n			
o	Section 951A(a) inclusion (see instructions)	8o			
p	Section 461(l) excess business loss adjustment	8p			
q	Taxable distributions from an ABLE account (see instructions)	8q			
r	Scholarship and fellowship grants not reported on Form W-2	8r	0.		
s	Nontaxable amount of Medicaid waiver payments included on Form 1040, line 1a or 1d	8s	( )		
t	Pension or annuity from a nonqualifed deferred compensation plan or a nongovernmental section 457 plan	8t			
u	Wages earned while incarcerated	8u			
z	Other income. List type and amount:	8z			
9	Total other income. Add lines 8a through 8z			9	0.
10	Combine lines 1 through 7 and 9. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 8			10	0.

Part II Adjustments to Income

11	Educator expenses	11	
12	Certain business expenses of reservists, performing artists, and fee-basis government officials. Attach Form 2106	12	
13	Health savings account deduction. Attach Form 8889	13	
14	Moving expenses for members of the Armed Forces. Attach Form 3903	14	
15	Deductible part of self-employment tax. Attach Schedule SE	15	
16	Self-employed SEP, SIMPLE, and qualified plans	16	
17	Self-employed health insurance deduction	17	
18	Penalty on early withdrawal of savings	18	
19a	Alimony paid	19a	
b	Recipient's SSN		
c	Date of original divorce or separation agreement (see instructions):		
20	IRA deduction	20	
21	Student loan interest deduction	21	
22	Reserved for future use	22	
23	Archer MSA deduction	23	
24	Other adjustments:		
a	Jury duty pay (see instructions)	24a	
b	Deductible expenses related to income reported on line 8l from the rental of personal property engaged in for profit	24b	
c	Nontaxable amount of the value of Olympic and Paralympic medals and USOC prize money reported on line 8m	24c	
d	Reforestation amortization and expenses	24d	
e	Repayment of supplemental unemployment benefits under the Trade Act of 1974	24e	
f	Contributions to section 501(c)(18)(D) pension plans	24f	
g	Contributions by certain chaplains to section 403(b) plans	24g	
h	Attorney fees and court costs for actions involving certain unlawful discrimination claims (see instructions)	24h	
i	Attorney fees and court costs you paid in connection with an award from the IRS for information you provided that helped the IRS detect tax law violations	24i	
j	Housing deduction from Form 2555	24j	
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form 1041)	24k	
z	Other adjustments. List type and amount:	24z	
25	Total other adjustments. Add lines 24a through 24z	25	
26	Add lines 11 through 23 and 25. These are your **adjustments to income**. Enter here and on Form 1040 or 1040-SR, line 10, or Form 1040-NR, line 10a	26	

Form **8863**

Department of the Treasury
Internal Revenue Service

Education Credits
(American Opportunity and Lifetime Learning Credits)

Attach to Form 1040 or 1040-SR.
Go to *www.irs.gov/Form8863* for instructions and the latest information.

OMB No. 1545-0074
2022
Attachment Sequence No. **50**

Name(s) shown on return: Justin D Hutzler
Your social security number: 417-39-5015

CAUTION *Complete a separate Part III on page 2 for each student for whom you're claiming either credit before you complete Parts I and II.*

Part I Refundable American Opportunity Credit

1	After completing Part III for each student, enter the total of all amounts from all Parts III, line 30			1	2,500.
2	Enter: $180,000 if married filing jointly; $90,000 if single, head of household, or qualifying surviving spouse	2	90,000.		
3	Enter the amount from Form 1040 or 1040-SR, line 11. But if you're filing Form 2555 or 4563, or you're excluding income from Puerto Rico, see Pub. 970 for the amount to enter instead	3	778.		
4	Subtract line 3 from line 2. If zero or less, **stop**; you can't take any education credit	4	89,222.		
5	Enter: $20,000 if married filing jointly; $10,000 if single, head of household, or qualifying surviving spouse	5	10,000.		
6	If line 4 is: • Equal to or more than line 5, enter 1.000 on line 6 • Less than line 5, divide line 4 by line 5. Enter the result as a decimal (rounded to at least three places)			6	1.000
7	Multiply line 1 by line 6. **Caution:** If you were under age 24 at the end of the year **and** meet the conditions described in the instructions, you **can't** take the refundable American opportunity credit; skip line 8, enter the amount from line 7 on line 9, and check this box ☐			7	2,500.
8	**Refundable American opportunity credit.** Multiply line 7 by 40% (0.40). Enter the amount here and on Form 1040 or 1040-SR, line 29. Then go to line 9 below			8	1,000.

Part II Nonrefundable Education Credits

9	Subtract line 8 from line 7. Enter here and on line 2 of the Credit Limit Worksheet (see instructions)			9	1,500.
10	After completing Part III for each student, enter the total of all amounts from all Parts III, line 31. If zero, skip lines 11 through 17, enter -0- on line 18, and go to line 19			10	
11	Enter the smaller of line 10 or $10,000			11	
12	Multiply line 11 by 20% (0.20)			12	
13	Enter: $180,000 if married filing jointly; $90,000 if single, head of household, or qualifying surviving spouse	13			
14	Enter the amount from Form 1040 or 1040-SR, line 11. But if you're filing Form 2555 or 4563, or you're excluding income from Puerto Rico, see Pub. 970 for the amount to enter instead	14			
15	Subtract line 14 from line 13. If zero or less, skip lines 16 and 17, enter -0- on line 18, and go to line 19	15			
16	Enter: $20,000 if married filing jointly; $10,000 if single, head of household, or qualifying surviving spouse	16			
17	If line 15 is: • Equal to or more than line 16, enter 1.000 on line 17 and go to line 18 • Less than line 16, divide line 15 by line 16. Enter the result as a decimal (rounded to at least three places)			17	
18	Multiply line 12 by line 17. Enter here and on line 1 of the Credit Limit Worksheet (see instructions)			18	
19	**Nonrefundable education credits.** Enter the amount from line 7 of the Credit Limit Worksheet (see instructions) here and on Schedule 3 (Form 1040), line 3			19	0.

Name(s) shown on return: Justin D Hutzler | Your social security number: 417-39-5015

CAUTION *Complete Part III for each student for whom you're claiming either the American opportunity credit or lifetime learning credit. Use additional copies of page 2 as needed for each student.*

Part III Student and Educational Institution Information. See instructions.

20 Student name (as shown on page 1 of your tax return) Justin D Hutzler	**21** Student social security number (as shown on page 1 of your tax return) 417-39-5015

22 Educational institution information (see instructions)

a. Name of first educational institution Colorado technical university	**b.** Name of second educational institution (if any)
(1) Address. Number and street (or P.O. box). City, town or post office, state, and ZIP code. If a foreign address, see instructions. 4435 north chestnut street, suite e Colorado springs CO 80907	**(1)** Address. Number and street (or P.O. box). City, town or post office, state, and ZIP code. If a foreign address, see instructions.
(2) Did the student receive Form 1098-T from this institution for 2022? ☒ Yes ☐ No	**(2)** Did the student receive Form 1098-T from this institution for 2022? ☐ Yes ☐ No
(3) Did the student receive Form 1098-T from this institution for 2021 with box 7 checked? ☐ Yes ☒ No	**(3)** Did the student receive Form 1098-T from this institution for 2021 with box 7 checked? ☐ Yes ☐ No
(4) Enter the institution's employer identification number (EIN) if you're claiming the American opportunity credit or if you checked "Yes" in (**2**) or (**3**). You can get the EIN from Form 1098-T or from the institution. 26-1763096	**(4)** Enter the institution's employer identification number (EIN) if you're claiming the American opportunity credit or if you checked "Yes" in (**2**) or (**3**). You can get the EIN from Form 1098-T or from the institution.

23 Has the American opportunity credit been claimed for this student for any 4 prior tax years? ☐ Yes — **Stop!** Go to line 31 for this student. ☒ No — Go to line 24.

24 Was the student enrolled at least half-time for at least one academic period that began or is treated as having begun in 2022 at an eligible educational institution in a program leading towards a postsecondary degree, certificate, or other recognized postsecondary educational credential? See instructions. ☒ Yes — Go to line 25. ☐ No — **Stop!** Go to line 31 for this student.

25 Did the student complete the first 4 years of postsecondary education before 2022? See instructions. ☐ Yes — **Stop!** Go to line 31 for this student. ☒ No — Go to line 26.

26 Was the student convicted, before the end of 2022, of a felony for possession or distribution of a controlled substance? ☐ Yes — **Stop!** Go to line 31 for this student. ☒ No — Complete lines 27 through 30 for this student.

CAUTION *You **can't** take the American opportunity credit and the lifetime learning credit for the **same student** in the same year. If you complete lines 27 through 30 for this student, don't complete line 31.*

American Opportunity Credit

27	Adjusted qualified education expenses (see instructions). **Don't enter more than $4,000**	27	4,000.
28	Subtract $2,000 from line 27. If zero or less, enter -0-	28	2,000.
29	Multiply line 28 by 25% (0.25)	29	500.
30	If line 28 is zero, enter the amount from line 27. Otherwise, add $2,000 to the amount on line 29 and enter the result. Skip line 31. Include the total of all amounts from all Parts III, line 30, on Part I, line 1	30	2,500.

Lifetime Learning Credit

31	Adjusted qualified education expenses (see instructions). Include the total of all amounts from all Parts III, line 31, on Part II, line 10	31	

Form **8962**

Department of the Treasury
Internal Revenue Service

Premium Tax Credit (PTC)

Attach to Form 1040, 1040-SR, or 1040-NR.
Go to *www.irs.gov/Form8962* for instructions and the latest information.

OMB No. 1545-0074
2022
Attachment Sequence No. **73**

Name shown on your return: Justin D Hutzler
Your social security number: 417-39-5015

A. You cannot take the PTC if your filing status is married filing separately unless you qualify for an exception. See instructions. If you qualify, check the box ☐

Part I Annual and Monthly Contribution Amount

1	Tax family size. Enter your tax family size. See instructions	1	1
2a	Modified AGI. Enter your modified AGI. See instructions — 2a: 778.		
b	Enter the total of your dependents' modified AGI. See instructions — 2b:		
3	Household income. Add the amounts on lines 2a and 2b. See instructions	3	778.
4	Federal poverty line. Enter the federal poverty line amount from Table 1-1, 1-2, or 1-3. See instructions. Check the appropriate box for the federal poverty table used. a ☐ Alaska b ☐ Hawaii c ☒ Other 48 states and DC	4	12,880.
5	Household income as a percentage of federal poverty line (see instructions)	5	6 %
6	Reserved for future use		
7	Applicable figure. Using your line 5 percentage, locate your "applicable figure" on the table in the instructions	7	0.0000
8a	Annual contribution amount. Multiply line 3 by line 7. Round to nearest whole dollar amount — 8a: 0. **b** Monthly contribution amount. Divide line 8a by 12. Round to nearest whole dollar amount	8b	0.

Part II Premium Tax Credit Claim and Reconciliation of Advance Payment of Premium Tax Credit

9 Are you allocating policy amounts with another taxpayer or do you want to use the alternative calculation for year of marriage? See instructions.
☐ **Yes.** Skip to Part IV, Allocation of Policy Amounts, or Part V, Alternative Calculation for Year of Marriage. ☒ **No.** Continue to line 10.

10 See the instructions to determine if you can use line 11 or must complete lines 12 through 23.
☐ **Yes.** Continue to line 11. Compute your annual PTC. Then skip lines 12–23 and continue to line 24. ☒ **No.** Continue to lines 12–23. Compute your monthly PTC and continue to line 24.

Annual Calculation	(a) Annual enrollment premiums (Form(s) 1095-A, line 33A)	(b) Annual applicable SLCSP premium (Form(s) 1095-A, line 33B)	(c) Annual contribution amount (line 8a)	(d) Annual maximum premium assistance (subtract (c) from (b); if zero or less, enter -0-)	(e) Annual premium tax credit allowed (smaller of (a) or (d))	(f) Annual advance payment of PTC (Form(s) 1095-A, line 33C)
11 Annual Totals						

Monthly Calculation	(a) Monthly enrollment premiums (Form(s) 1095-A, lines 21–32, column A)	(b) Monthly applicable SLCSP premium (Form(s) 1095-A, lines 21–32, column B)	(c) Monthly contribution amount (amount from line 8b or alternative marriage monthly calculation)	(d) Monthly maximum premium assistance (subtract (c) from (b); if zero or less, enter -0-)	(e) Monthly premium tax credit allowed (smaller of (a) or (d))	(f) Monthly advance payment of PTC (Form(s) 1095-A, lines 21–32, column C)
12 January	507.	544.	0.	544.	507.	507.
13 February	507.	544.	0.	544.	507.	507.
14 March	507.	544.	0.	544.	507.	507.
15 April	507.	544.	0.	544.	507.	507.
16 May	544.	544.	0.	544.	544.	544.
17 June	544.	544.	0.	544.	544.	544.
18 July	544.	544.	0.	544.	544.	544.
19 August	544.	544.	0.	544.	544.	544.
20 September	544.	544.	0.	544.	544.	544.
21 October	544.	544.	0.	544.	544.	544.
22 November	544.	544.	0.	544.	544.	544.
23 December	544.	544.	0.	544.	544.	544.

24	Total premium tax credit. Enter the amount from line 11(e) or add lines 12(e) through 23(e) and enter the total here	24	6,380.
25	Advance payment of PTC. Enter the amount from line 11(f) or add lines 12(f) through 23(f) and enter the total here	25	6,380.
26	Net premium tax credit. If line 24 is greater than line 25, subtract line 25 from line 24. Enter the difference here and on Schedule 3 (Form 1040), line 9. If line 24 equals line 25, enter -0-. Stop here. If line 25 is greater than line 24, leave this line blank and continue to line 27	26	0.

Part III Repayment of Excess Advance Payment of the Premium Tax Credit

27	Excess advance payment of PTC. If line 25 is greater than line 24, subtract line 24 from line 25. Enter the difference here	27	
28	Repayment limitation (see instructions)	28	
29	Excess advance premium tax credit repayment. Enter the smaller of line 27 or line 28 here and on Schedule 2 (Form 1040), line 2	29	

Part IV Allocation of Policy Amounts

Complete the following information for up to four policy amount allocations. See instructions for allocation details.

Allocation 1

30	(a) Policy Number (Form 1095-A, line 2)	(b) SSN of other taxpayer	(c) Allocation start month	(d) Allocation stop month

Allocation percentage applied to monthly amounts	(e) Premium Percentage	(f) SLCSP Percentage	(g) Advance Payment of the PTC Percentage

Allocation 2

31	(a) Policy Number (Form 1095-A, line 2)	(b) SSN of other taxpayer	(c) Allocation start month	(d) Allocation stop month

Allocation percentage applied to monthly amounts	(e) Premium Percentage	(f) SLCSP Percentage	(g) Advance Payment of the PTC Percentage

Allocation 3

32	(a) Policy Number (Form 1095-A, line 2)	(b) SSN of other taxpayer	(c) Allocation start month	(d) Allocation stop month

Allocation percentage applied to monthly amounts	(e) Premium Percentage	(f) SLCSP Percentage	(g) Advance Payment of the PTC Percentage

Allocation 4

33	(a) Policy Number (Form 1095-A, line 2)	(b) SSN of other taxpayer	(c) Allocation start month	(d) Allocation stop month

Allocation percentage applied to monthly amounts	(e) Premium Percentage	(f) SLCSP Percentage	(g) Advance Payment of the PTC Percentage

34 Have you completed all policy amount allocations?

☐ **Yes.** Multiply the amounts on Form 1095-A by the allocation percentages entered by policy. Add all allocated policy amounts and non-allocated policy amounts from Forms 1095-A, if any, to compute a combined total for each month. Enter the combined total for each month on lines 12–23, columns (a), (b), and (f). Compute the amounts for lines 12–23, columns (c)–(e), and continue to line 24.

☐ **No.** See the instructions to report additional policy amount allocations.

Part V Alternative Calculation for Year of Marriage

Complete line(s) 35 and/or 36 to elect the alternative calculation for year of marriage. For eligibility to make the election, see the instructions for line 9. To complete line(s) 35 and/or 36 and compute the amounts for lines 12–23, see the instructions for this Part V.

35	**Alternative entries for your SSN**	(a) Alternative family size	(b) Alternative monthly contribution amount	(c) Alternative start month	(d) Alternative stop month
36	**Alternative entries for your spouse's SSN**	(a) Alternative family size	(b) Alternative monthly contribution amount	(c) Alternative start month	(d) Alternative stop month

File by Mail Instructions for your 2022 Alabama Amended Tax Return

Important: Your taxes are not finished until all required steps are completed.

Justin D Hutzler
200 Petain St SW
Hartselle, AL 35640-3230

Balance Due/ Refund	Your Alabama state amended tax return shows you are due a refund of $27.00.
What You Need to Mail	Your amended tax return - FORM AL40. Remember to sign and date the return. Attach wage and tax statements (Forms W-2, 1099, W2-G) to the front of your return. Mail your return and attachments to: Alabama Department of Revenue Individual and Corporate Tax Division P.O. Box 327464 Montgomery, AL 36132-7464 Don't forget correct postage on the envelope.
What You Need to Keep	Keep these instructions and a copy of your return for your records. You can download or print a copy of your return by logging into your TurboTax account.
2022 Alabama Tax Return Summary	Adjusted Gross Income Correct Amount $ 778.00 Taxable Income Correct Amount $ -3,722.00 Total Tax Correct Amount $ 0.00 Total Payments/Credits Correct Amount $ 27.00 Amount to be Refunded $ 27.00
Special Formatting	Your printed state tax forms may have special formatting on them, such as bar codes or other symbols. This is to enable fast processing. Don't worry, these forms have been approved by your taxing authority and are acceptable for printing and mailing.

FORM **40** Alabama **2022**
Individual Income Tax Return
RESIDENTS & PART-YEAR RESIDENTS

For the year Jan. 1 - Dec. 31, 2022, or other tax year:

Beginning: ● Ending: ●

Your social security number: ● 417-39-5015
Spouse's SSN if joint return: ●

● ☐ Check if primary is deceased — Primary's deceased date (mm/dd/yyyy) ●
● ☐ Check if spouse is deceased — Spouse's deceased date (mm/dd/yyyy) ●

Your first name: ● JUSTIN Initial: ●D Last name: ●HUTZLER

Spouse's first name: ● Initial: ● Last name: ●

Present home address (number and street or P.O. Box number): ● 200 PETAIN ST SW

▶ **CHECK BOX IF AMENDED RETURN** ● ☒

City, town, or post office: ● HARTSELLE State: ●AL ZIP code: ●35640-3230 ● ☐ Check if address is outside U.S. Foreign Country

Filing Status/ Exemptions

1 ● ☒ $1,500 Single
2 ● ☐ $3,000 Married filing joint
3 ● ☐ $1,500 Married filing separate. Complete Spouse SSN ●
4 ● ☐ $3,000 Head of Family (with qualifying person).Complete Schedule HOF
☐ NRA

				A – Alabama tax withheld		B – Income
Income and Adjustments	5a	Alabama Income Tax Withheld *(from Schedule W-2, line 18, column G)*				
	5b	Wages, salaries, tips, etc. *(from Schedule W-2, line 18, column I plus J):*	5a	● 35	5b	● 778
	6	Interest and dividend income *(also attach Schedule B if over $1,500)*			6	●
	7	Other income *(from page 2, Part I, line 9)*			7	●
	8	**Total income.** Add amounts in the income column for line 5b through line 7			8	● 778
	9	Total adjustments to income *(from page 2, Part II, line 16)*			9	●
	10	**Adjusted gross income.** Subtract line 9 from line 8			10	● 778
Deductions	11	Box a or b **MUST** be checked. Check box a, if you **itemize deductions,** and enter amount from Schedule A, line 27. Check box b, if you **do not** itemize deductions, and enter **standard deduction** *(see instructions)* ● a ☐ **Itemized Deductions** ● b ☒ **Standard Deduction**	11	● 3,000		
If claiming a deduction on line 12, you must attach page 1,2 and Schedule 1 of your Federal Return, if applicable.	12	Federal tax deduction *(see instructions)* **DO NOT ENTER THE FEDERAL TAX WITHHELD FROM YOUR FORM W-2(S)**	12	● 0		
	13	Personal exemption *(from line 1, 2, 3, or 4)*	13	● 1,500		
	14	Dependent exemption *(from page 2, Part III, line 2)*	14	●		
	15	**Total deductions.** Add lines 11, 12, 13, and 14			15	● 4,500
Tax	16	**Taxable income.** Subtract line 15 from line 10			16	● -3,722
Staple Form(s) W-2, W-2G, and/or 1099 here. Attach Schedule W-2 to return.	17	**Income Tax due.** Enter amount from tax table or check if from ● ☐ Form NOL-85A			17	● 0
	18	**Net tax due Alabama.** Check box if computing tax using Schedule OC ● ☐, otherwise enter amount from line 17			18	● 0
	19	Additional taxes (from Schedule ATP, Part I, Line 3)			19	● 0
	20	**Alabama Election Campaign Fund.** You may make a voluntary contribution to the following:				
	a	Alabama Democratic Party ☐ $1 ☐ $2 ☒ none			20a	●
	b	Alabama Republican Party ☐ $1 ☐ $2 ☒ none			20b	●
	21	**Total tax liability and voluntary contribution.** Add lines 18, 19, 20a, and 20b			21	● 0
Payments	22	**Alabama income tax withheld** *(from column A, line 5a)*	22	● 35		
	23	2022 estimated tax payments/Automatic Extension Payment	23	●		
	24	Amended Returns Only — Previous payments *(see instructions)*	24	●		
	25	**Refundable Credits.** Enter the amount from Schedule OC, Section F, line F4	25	●		
	26	Payments from Schedule CP, Section B, Line 1	26	●		
	27	**Total payments.** Add lines 22, 23, 24, 25, and 26			27	● 35
	28	Amended Returns Only — Previous refund *(see instructions)*			28	● 8
	29	**Adjusted Total Payments.** Subtract line 28 from line 27			29	● 27
AMOUNT YOU OWE	30	If line 21 is larger than line 29, subtract line 29 from line 21, and add line 31 and enter **AMOUNT YOU OWE**. Place payment, along with Form 40V, loose in the mailing envelope. **(FORM 40V MUST ACCOMPANY PAYMENT.)**			30	●
	31	Penalties (from Schedule ATP, Part II, line 3) *(see instructions)*	31	●		
OVERPAID	32	If line 29 is larger than line 21, subtract line 21 from line 29, and enter AMOUNT **OVERPAID**			32	● 27
	33	Amount of line 32 to be applied to your **2023 estimated tax**	33	●		
Donations	34	**Total** Donation Check-offs from Schedule DC, line 2	34	●		
REFUND	35	**REFUNDED TO YOU.** (**CAUTION:** You must **sign** this return on the reverse side.) If line 32 is greater than zero, subtract lines 31, 33, and 34 from line 32. For Direct Deposit, check here ● ☐ and complete Part V, Page 2.			35	● 27

PART I

Other Income *(See instructions)*

1	Alimony received	1	●
2	Business income or (loss) *(attach Federal Schedule C or C-EZ) (see instructions)*	2	●
3	Gain or (loss) from sale of Real Estate, Stocks, Bonds, etc. *(attach Schedule D)*	3	●
4a	Total IRA distributions 4a ● — **4b** Taxable amount *(see instructions)*	4b	●
5a	Total pensions and annuities 5a ● — **5b** Taxable amount *(see instructions)*	5b	●
6	Rents, royalties, partnerships, estates, trusts, etc. *(attach Schedule E)*	6	●
7	Farm income or *(loss) (attach Federal Schedule F)*	7	●
8	Other income *(state nature and source — see instructions)*	8	●
9	**Total other income.** Add lines 1 through 8. Enter here and also on page 1, line 7	9	●

PART II

Adjustments to Income *(See instructions)*

1a	Your IRA deduction	1a	●
b	Spouse's IRA deduction	1b	●
2	Payments to a Keogh retirement plan and self-employment SEP deduction	2	●
3	Penalty on early withdrawal of savings	3	●
4	Alimony paid. Recipient's last name ______ SSN ● ______	4	●
5	Adoption expenses	5	●
6	Moving Expenses (Attach Federal Form 3903) to: City ______ State ____ ZIP ______	6	●
7	Self-employed health insurance deduction	7	●
8	Payments to Alabama College Counts 529 Fund or Alabama PACT Program	8	●
9	Health insurance deduction for small employer employee *(see instructions)*	9	●
10	Costs to retrofit or upgrade home to resist wind or flood damage	10	●
11	Deposits to a catastrophe savings account	11	●
12	Contributions to a health savings account	12	●
13	Deposits to an Alabama First-Time and Second Chance Home Buyer Savings Account (*see instructions*)	13	●
14	Firefighter's Insurance Premium	14	●
15	Contributions to an Achieving a Better Life Experience (ABLE) savings account	15	●
16	Total adjustments. Add lines 1 through 15. Enter here and also on page 1, line 9	16	●

PART III

Dependents

1	Total number of dependents from Schedule DS, line 1b	1	●
2	**Amount allowed.** Multiply total number of dependents claimed on line 1 by the amount on the dependent chart in the instructions. Enter amount here and on page 1, line 14	2	●

PART IV

General Information

All Taxpayers Must Complete This Section.

(See instructions)

1 **Residency** *Check only one box* ► ● ☒ Full Year ● ☐ Part Year From ______ 2022 through ______ 2022.

2 Did you file an Alabama income tax return for the year 2021? ● ☒ Yes ● ☐ No If no, state reason ______

3 Give name and address of present employer(s). Yours RETIRED

Your Spouse's ______

4 Enter the Federal Adjusted Gross Income ● $ 778 and Federal Taxable Income ● $ 0 as reported on your 2022 Federal Individual Income Tax Return.

5 Do you have income which is reported on your Federal return, but not reported on your Alabama return (other than your state tax refund)? ● ☐ Yes ● ☒ No

If yes, enter source(s) and amount(s) below: *(other than state income tax refund)*

Source ● ______ Amount ●

Source ● ______ Amount ●

PART V

Direct Deposit

For Direct Deposit of your refund, complete 1, 2, 3, and 4 below. *(See Page 17 of instructions to see if you qualify.)*

1 Routing Number: ______ **2** Type: ☐ Checking ☐ Savings **3** Account Number: ______

4 Is this refund going to or through an account that is located outside of the United States? ☐ Yes ☐ No

Drivers License Info

DOB (mm/dd/yyyy)	Your state / Spouse state	DL#	Iss date (mm/dd/yyyy)	Exp date (mm/dd/yyyy)
● XX/XX/XXXX	● XX	● XXXXXXX	● XX/XX/XXXX	● XX/XX/XXXX
●	●	●	●	●

● ☐ I authorize a representative of the Department of Revenue to discuss my return and attachments with my preparer.

Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Sign Here In Black Ink Keep a copy of this return for your records.

Your Signature	Date	Daytime Telephone Number	Your Occupation
		(256)957-8656	STUDENT
Spouse's Signature (if joint return, BOTH must sign)	Date	Daytime Telephone Number	Spouse's Occupation

Paid Preparer's Use Only

Preparer's Signature	Date	Check if Self-employed	Preparer's SSN or PTIN	E.I. Number
SELF PREPARED		☐	●	

Firm's Name (or yours if self employed) ______ Daytime Telephone No. ______ ZIP Code ______

Address ______

SCHEDULE
ATP

Alabama Department of Revenue
Income Tax Administration Division
Additional Taxes & Penalties

2022

NAME(S) AS SHOWN ON THE TAX RETURN: JUSTIN D HUTZLER

SOCIAL SECURITY NUMBER: 417-39-5015

PART I **Additional Taxes**

1	Consumer Use Tax (see instructions). If you certify that no use tax is due, check box ● ☒	1	●	0
2	Catastrophe savings tax (see instructions)	2	●	
3	Total Additional Taxes. Add line 1 and line 2. Enter here and also on Form 40, page 1, line 19	3	●	0

PART II **Penalties**

1	Estimated Tax Penalty (see instructions). Farmers and Fishermen that meets IRC §6654, check box ● ☐	1	●	
2	First-time Second chance Home Buyer Savings Account penalty (from Schedule HBC, Part IV, Line 4)	2	●	
3	Total penalties. Add line 1 and line 2. Enter here and also on Form 40, page 1, line 31	3	●	

SCHEDULE
W-2
(FORM 40, 40A, or 40NR)

2022

Alabama Department of Revenue

Wages, Salaries, Tips, etc.

Schedule W-2 must be completed fully and included with your return in order to receive proper credit for your Alabama income tax withheld. Attach a copy of all withholding statements to your return.

NAME(S) AS SHOWN ON TAX RETURN: JUSTIN D HUTZLER

PRIMARY'S SOCIAL SECURITY NO.: 417-39-5015

SPOUSE'S SOCIAL SECURITY NO.:

	A Employee's Social Security Number	B Employer's Identification Number (EIN)	C Statutory Employee	D Schedule C/C-EZ Filed?	E State Code	F Alabama Employer's State ID Number	G Alabama State Income Tax Withheld	H Federal Wages (Box 1 of Form W-2)	I Alabama State Wages (Box 16 of Form W-2)	J Additional Taxable Wages – Other States
1	417-39-5015	522096150	☐	☐	AL	009016029	19	306	306	
2	417-39-5015	843189730	☐	☐	AL	010511316	16	472	472	
3			☐	☐						
4			☐	☐						
5			☐	☐						
6			☐	☐						
7			☐	☐						
8			☐	☐						
9			☐	☐						
10			☐	☐						
11			☐	☐						
12			☐	☐						
13			☐	☐						
14			☐	☐						
15			☐	☐						
16	**TOTAL ALABAMA TAX WITHHELD FROM W-2s.** Total lines 1-15, Column G and enter the amount here						35			
17	**ALABAMA TAX WITHHELD FROM 1099s AND W-2Gs.** Enter the total Alabama Income Tax Withheld from all Form 1099s and Form W-2Gs received. See instructions on where to report the income from these statements						0			
18	**TOTAL WAGES AND TOTAL ALABAMA TAX WITHHELD FROM W-2s, 1099s, AND W-2Gs.** See instructions						35	778	778	

E-FILE ONLY

DO NOT MAIL

THIS SCHEDULE CAN ONLY BE SUBMITTED AND/OR PRINTED VIA LANDSCAPE

REV 02/06/23 INTUIT.CG.CFP.SP

1555

FORM
AL8453

ALABAMA DEPARTMENT OF REVENUE
Individual Income Tax Declaration for Electronic Filing

2022

For the year January 1 – December 31, 2022

Your first name and initial JUSTIN D	Last name HUTZLER	Your social security number 4 1 7 : 3 9 : 5 0 1 5
If a joint return, spouse's first name and initial	Last name	Spouse's soc. sec. no. if joint return : :
Home address (number and street). If a P.O. Box, see instructions. 200 PETAIN ST SW	Apt. no.	Telephone number (optional) (256)957-8656
City, town or post office, state, and ZIP code HARTSELLE AL 35640-3230		

Part I

Tax Return Information

(Whole dollars only.)

1	Alabama taxable income (Form 40, line 16 or Form 40NR, line 18)	1	-3,722
2	Total tax liability (Form 40, line 21) or Net tax due (Form 40NR, line 20)	2	0
3	Total payments (Form 40, line 27 or Form 40NR, line 26)	3	35
4	Refund (Form 40, line 35 or Form 40NR, line 33)	4	27
5	Amount you owe (Form 40, line 30 or Form 40NR, line 29)	5	

Part II

Refund and Payment Information

1 Routing number:

2 Account number:

3 Type of account: ☐ Checking ☐ Savings

4 Type of transaction: ☐ Direct Deposit ☐ Direct Debit

5 ☒ Paper Check (Check this box to have your refund issued by a paper check.)

Part III

Declaration of Taxpayer

(Sign only after Part I is completed.)

Under penalties of perjury, I declare that I have compared the information contained on my return with the information I have provided to my electronic return originator and that the amounts described in Part 1 above agree with the amounts shown on the corresponding lines of my 2022 Alabama individual income tax return. To the best of my knowledge and belief, this return, including any accompanying schedules and statements, is true, correct, and complete. Also, I hereby authorize the Alabama Department of Revenue to disclose to my ERO described below, any information concerning the disbursement of the refund requested or any problems encountered in the processing of my return.

☐ I authorize a representative of the Department of Revenue to discuss my return and attachments with my preparer.

F

Sign Here ▶

Your signature	Date	Spouse's signature. If a joint return, BOTH must sign.	Date

Part IV

Declaration of Electronic Return Originator (ERO) and Paid Preparer

(See instructions.)

I declare that I have reviewed the above taxpayer's Alabama individual income tax return and that the entries on this form are complete and correctly represented based on all information of which I have any knowledge. I also declare that I have followed all other requirements described in IRS PUB. 1345, Revenue Procedures for Electronic Filing of Individual Income Tax Returns (Tax Year 2022), and the Alabama Handbook for Electronic Filers of Individual Income Tax Returns (Tax Year 2022). 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 **Alabama Department of Revenue,** as applicable by law. **If I am also the paid preparer, under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete.**

ERO's Use Only

ERO's signature ▶	Date	Check if also paid preparer ☐	Preparer's PTIN
Firm's name (or yours if self-employed) and address ▶		E.I. No.	
		ZIP Code	

Paid Preparer's Use Only

Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete.

Preparer's signature ▶ SELF-PREPARED	Date	Check if self-employed ☐	Preparer's PTIN
Firm's name (or yours if self-employed) and address ▶		E.I. No.	
		ZIP Code	

DO NOT MAIL TO ALABAMA DEPT. OF REVENUE

1555

Income Worksheet 2022

Name as Shown on Return	Social Security Number
JUSTIN D HUTZLER	417-39-5015

Wages, Salaries, Tips, Etc for Line 5 of Form 40/40NR

Special Type Indicator (X = Income will not be included in your return)
Check this box to exclude income from your Alabama return.

☐ Check this box if you are excluding income and plan to attempt to electronically file your return.
NOTE: Part-year residents may use this worksheet to remove non Alabama source income. Resident and Non-Resident returns may be rejected during electronic filing if you exclude income by marking boxes in the # column.

Payer's name	#	State name	Gross earnings	Alabama wages	Alabama tax withheld
CONCENTRIX SERVICES US IN		AL	306.	306.	19.
TDMW Management Inc		AL	472.	472.	16.
Total			778.	778.	35.

Other Income for Form 40/40NR

\# Special Type Indicator (X = Income will not be included in your return)
Check this box to exclude income from your Alabama return.

Description	#	Total amount	Alabama amount
Total			