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Single

## **FILING YOUR TAXES**

## W-2 Scenario 4: Felix

Felix is a 28-year full time employee at Banfield Pet Hospital in Iowa City, IA as a veterinarian assistant. He received this W-2 from his employer in February and needs to file his taxes. Last year, Felix changed his W-4 and indicated he had 6 allowances even though that

is not accurate. Felix noticed that his bi-weekly paycheck went up by over \$100 after the change. Last year he got a \$500 federal tax refund using a different tax software.

Felix rents an apartment with a roommate, he has been independent several years. For tax purposes, he is single, and has one job. Felix's birthday is August 11, 1989. His Social Security number is on the W-2 below.

Felix's W-2 For Banfield:

|  | a Employee's social security number 398-49-6480 OMB No. 1545 |                | Safe, accura<br>5-0008 FAST! Use      | e,                          | Visit the IRS website at www.irs.gov/efile |  |
|--|--|----------------|---------------------------------------|-----------------------------|--|--|
| b Employer identification number (EIN)   |  |                | 1 Wages, tips, other compensation     |                             | 2 Federal income tax withheld              |  |
| 28-7288567   |  |                | 39.500.00                             |                             | 1066.00                                    |  |
| c Employer's name, address, and ZIP code   |  |                | 3 Social security wages               |                             | 4 Social security tax withheld             |  |
| Banfield Pet Hospital  |  |                | 39,500.00                             |                             | 2446.34<br>6 Medicare tax withheld         |  |
| 408 Highland Ave   |  |                | 5 Medicare wages and tips             |                             | 572.78                                     |  |
| Iowa City, IA 52240  |  |                | 39,500.00<br>7 Social security tips   |                             | 372.78<br>8 Allocated tips                 |  |
| 10wa City, 1A 32240  |  |                |                                       |                             | • Anocated tips                            |  |
| d Control number   |  |                | 9                                     |                             | 10 Dependent care benefits                 |  |
|  |  |                |                                       |                             |  |  |
| e Employee's first name and initial Last name Suff.  |  |                | 11 Nonqualified plans                 |                             | <b>12a</b> See instructions for box 12     |  |
| Felix Leon   |  |                | 13 Statutory Retirem<br>employee plan | ent Third-party<br>sick pay | •<br>12b                                   |  |
| 1017 Diana St.   |  |                |                                       |                             | C<br>o<br>d<br>e                           |  |
| Iowa City, IA 52240  |  |                | 14 Other                              |                             |  |  |
|  |  |                |                                       |                             | WE RECOMMEND                               |  |
|  |  |                |                                       | Free                        | e Edition                                  |  |
| f Employee's address and ZIP cod   |  |                |                                       |                             |  |  |
| 15 State Employer's state ID nun   | ber <b>16</b> State wages, tips, etc.                        | 17 State incon | ne tax <b>18</b> Local wa             | ges, t                      | tax returns                                |  |
| IA 192372195   | 39,500.00  | 3,224.0        | 0                                     |                             |  |  |
|  |  |                |                                       | \$0 F                       | \$0 Fed. \$0 State. \$0 File.              |  |
|  |  |                |                                       |                             |  |  |
| Form W-2 Wage and Tax 2019   |  |                |                                       |                             |  |  |
| Copy B—To Be Filed With Employee's FEDERAL Tax Return.<br>This information is being furnished to the Internal Revenue Service. |  |                |                                       |                             | File for \$0                               |  |

There is no other information about Felix that you need to file his taxes.

However; at times you may be asked questions by Turbo Tax such as "*Did Felix serve in the National Guard*" or "*Is Felix legally Blind*". Answer "no" to questions like these.

