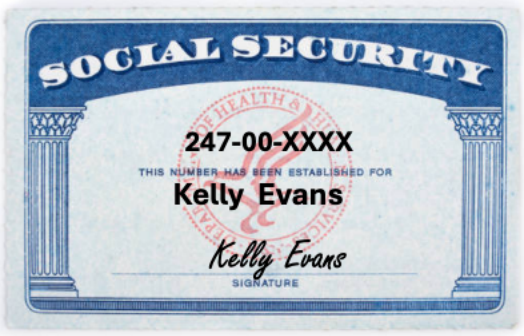
Advanced #2

- Kelly Evans is a single mother who lives in an apartment with her daughter, Lacey. Lacey is in first grade and goes to daycare after school while her mother is at work.
- Kelly started working for a new company in retail which she likes partly because she gets paid for overtime, especially during the holiday season, when business is booming.
- However, since it is a small company (less than 10 employees) they don't pay for healthcare benefits. Therefore, she went on the Marketplace (Pennie in PA) for the first time and received healthcare for her and Lacey.
- Kelly also sold some stock to help pay for a used car.
- She has never come to VITA tax site before, but she received some extra tax forms in the mail, a 1099-B and a 1095-A, which she brought with her but doesn't know what to do with them. She also bought in her SS cards for her and her daughter, her W-2, a receipt from Lacey's daycare, and her bank information for direct deposit in her checking account if she is getting a refund.

Bank info-PNC BANK
Routing number 043000096
Account number 987987987

Kelly birthdate: 06/07/2001 cell: 412 246 4748
Lacey birthday: 09/17/2020

Home address:137 Brook Lane, Pittsburgh, PA 15219





Loving Hearts Daycare

Loving Hearts Daycare
154 Meadow Lane
Pittsburgh, PA15219

Date: December 31, 2026 Received from :
Kelly Evans
137 Brook lane
Pittsburgh, PA 15219

EIN: 39:5XXXXXX
Provider: Loving Hearts Daycare

Description	Price	Total
After school care for Lacey Evans	$4300	$4300

	a Employee's social security number	OMB No. 1545-0008		
	247-00-0247			

b Employer identification number (EIN)	1 Wages, tips, other compensation	2 Federal income tax withheld
34-8000000	38000	3200
c Employer's name, address, and ZIP code	**3** Social security wages	**4** Social security tax withheld
HOLIDAY STYLES 1452 CENTER AVE PITTSBURGH PA 15219	38000	2356
	5 Medicare wages and tips	**6** Medicare tax withheld
	38000	551
	7 Social security tips	**8** Allocated tips
d Control number	**9**	**10** Dependent care benefits
e Employee's first name and initial / Last name / Suff.	**11** Nonqualified plans	**12** Code: TT 2500
KELLY EVANS 137 BROOK LANE PITTSBURGH PA 15219	**13** Statutory employee ☐ Retirement plan ☐ Third-party sick pay ☐	**12b** Code
	14 Other	**12c** Code
		12d Code
f Employee's address and ZIP code		

15 State	Employer's state ID number	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
PA	34-8000000	38000	1167	38000	1140	700102

W-2 2025 Department of the Treasury—Internal Revenue Service

Form **1095-A**

Department of the Treasury
Internal Revenue Service

Health Insurance Marketplace Statement

Do not attach to your tax return. Keep for your records.
Go to *www.irs.gov/Form1095A* for instructions and the latest information.

☐ VOID
☐ CORRECTED

OMB No. 1545-2232

2026

Part I Recipient Information

1 Marketplace identifier	2 Marketplace-assigned policy number	3 Policy issuer's name	
12-3456789	345678		
4 Recipient's name		**5** Recipient's SSN	**6** Recipient's date of birth
KELLY EVANS		247-22-2222	06/07/2001
7 Recipient's spouse's name		**8** Recipient's spouse's SSN	**9** Recipient's spouse's date of birth
10 Policy start date	**11** Policy termination date	**12** Street address (including apartment no.)	
01/01/2026	12/31/2026	137 BROOK LANE	
13 City or town	**14** State or province	**15** Country and ZIP or foreign postal code	
PITTSBURGH	PA	15219	

Part II Covered Individuals

	A. Covered individual name	B. Covered individual SSN	C. Covered individual date of birth	D. Coverage start date	E. Coverage termination date
16	KELLY EVANS	247-22-2222	06/07/2001	01/01/2026	
17	LACEY EVANS	328-33-3333	09/17/2020	01/01/2026	
18					
19					
20					

Part III Coverage Information

Month	A. Monthly enrollment premiums	B. Monthly second lowest cost silver plan (SLCSP) premium	C. Monthly advance payment of premium tax credit
21 January	420	602	350
22 February	420	602	350
23 March	420	602	350
24 April	420	602	350
25 May	420	602	350
26 June	420	602	350
27 July	420	602	350
28 August	420	602	350
29 September	420	602	350
30 October	420	602	350
31 November	420	602	350
32 December	420	602	350
33 **Annual Totals**	5040	7224	4200

2026 Tax Reporting Statement

CDE Investments
PO Box 658
Pittsburgh, PA 15219
Payer's TIN: 11-2567891

To: Kelly Evans
137 Brook Lane
Pittsburgh, PA 15219
Account # 11-2234567
Recipient ID # 247-00-XXXX

FORM 1099-B* 2026 Proceeds from Broker and Barter Exchange Transactions
Copy B for Recipient OMB NO. 1545-0715

Short-term transactions for which basis is reported 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 Description, **1d** Stock or Other Symbol, CUSIP (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
Idaho Co. Common stock										
Sale	03/01/2026	08/01/2026	100	$1640	$281	$1359				

FORM 1099-B* 2026 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 Description, **1d** Stock or Other Symbol, CUSIP (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
Oregon Co. Common Stock										
Sale	06/01/2020	11/15/2026	150	$4600.	$2400	$2200				