

**RENTAL APPLICATION REGARDING:**

Address: 175 Menahan Apt #: 1R Rental Price: \$ 3000
Lease Date: 7 / 1 / 17 Lease Term: 12 Months Agent Name: Brian Grenga

Applicant's Information:

First Name: Aimee Middle Name: Marie Last Name: Seitz
DOB: 04 / 23 / 1991 Social security number: 193 - 72 - 9326
Current address: 50 Seneca Avenue, Apt. 3D City: Ridgewood State: NY Zip: 11385
E-mail: aimeemseitz@gmail.com Cellphone: 717 - 580 - 5488
How long have you lived at your present address? 12 months
Applicant Previous Home address: 1824 Hastings Place
City: New Orleans State: LA Zip: 70113
Do you or any of the other occupants own a pet? Yes X No If yes; Breed: feline Weight: 12 lbs

Employment Information:

Employer: Achievement First Address: 1300 Green Avenue
Position/title: Teacher Annual income: \$ 70,000 Bonus: \$
Supervisor: Nicole Berman Phone: 781-223-0018 Email: nickyberman@af.or
Length of employment: 12 months

Bank Information:

Name of Bank: Chase Est. Balance: \$ 2,000

Landlord Reference:

Current Landlord: Abe Rosenberg Phone: 7186449349 Email: aberosenberg@ynsman

I hereby certify to the best of my knowledge that the above stated information is true and correct and I hereby authorize Native Real Estate LLC to obtain any and all credit, eviction, employment or landlord history. I further acknowledge that the application fees of \$75 are nonrefundable.

Print Name: Aimee Seitz

Applicant's Signature: Aimee Seitz Date: 06/03/17

Pennsylvania
visitPA.com

DRIVER'S LICENSE

022



ORGAN DONOR

AIMEE MARIE SEITZ
1223 KINGS CIR
MECHANICSBURG PA 17050

No: 29 325 070 Dups: 00

DOB: 04/23/1991 Sex: F

Class: C

Eyes: BRO

Endorse: ----

Height: 5'02"

Com/Med Rstr: */1

Issued: 02/22/2015

Expires: 04/24/2019

Aimee M Seitz



TransUnion Credit

TRANS UNION Credit Profile Report

TRANS UNION

2 BALDWIN PLACE, P.O. BOX 1000

CHESTER, PA 19016

800-888-4213

Date Reported: 6/5/2017

Personal Information

Name:	AIMEE M SEITZ	Date of Birth:	4/23/1991
SSN:	193-72-9326	Phone:	
On File Since:	5/14/2009		
Address:	1834 HASTINGS Place NEW ORLEANS LA 70130		
Reported On:	5/28/2015		
Address:	1825 BORDEAUX Street NEW ORLEANS LA 70115		
Reported On:	1/7/2014		
Address:	1223 KINGS Circle MECHANICSBURG PA 17050		
Reported On:			
Name:	SELTZ,AIMEE,M	Date of Birth:	
On File Since:	5/14/2009		

Report Summary

Total # of Trades: 7	30 Days: 0	Accounts Balance: \$184
Current Trades: 7	60 Days: 0	Mnthly Payment: \$25
Unrated Trades: 0	90+ Days: 0	Credit Limit: \$27,800
Curr Neg Trades: 0	Inquiries: 2	High Credit: \$10,925
Hist Neg Trades: 0	Inq. last 6 mnths: 1	Total Real Est. Bal.: N/A
No. of Accts Paid: 1	Public Records: 0	Total Rev. Bal.: \$184
Curr Past Due: 0	Collections: 1	Tot. Installment Bal.: N/A
Amount Past Due: \$0	Oldest Trade: 8/28/2009	Available %: 99

Scorecards**Scorecard:** FICO Risk Score, Classic 08**Score:** 794

Reasons: (004) Lack of recent installment loan information
 (012) Length of time revolving accounts have been established
 (008) Too many inquiries last 12 months
 (014) Length of time accounts have been established

No alert information is found in the file and/or inquiries do not impact the credit score

For information regarding this report's compliance with new Risk Based Pricing, please [click this link](#).[Click this link for signature page version.](#)**Collections**

<u>Member Number</u>	<u>Industry Code</u>	<u>Date Reported</u>	<u>Amount</u>
<u>Creditor</u>	<u>Account Number</u>	<u>Date Verified</u>	<u>Balance</u>

Trade Lines

Inquiries

3/16

Warning Messages

FICO Risk Score, Classic 08 - 4-Default product delivered /

Credit data not suppressed

Current Address ALERT (house number mismatch): Mismatch - input does not match file

Score Derogatory Alert Flag: No alert information is found in the file and/or inquiries do not impact the credit score

Enhanced Evictions

Aimee Seitz

Search of Database - No Record Found.

Disclaimer Information contained herein is derived solely from public records, which may not be 100 percent accurate or complete. Records listed may not be housing related. Users should consult state and federal laws, including the Fair Credit Reporting Act, before using this information in making business decisions based on the results. Neither we nor our vendors or suppliers are liable for claims or damages arising from the use of this data, beyond the cost of the search(es) performed by users. Because mis-identifications may occur when trying to identify a particular person, based solely upon name and other identifiers, extreme care must be exercised in the review and use of the information available through this site. This information should not be used in legal proceedings. It is recommended that users of this database obtain the original document from the jurisdiction for the purpose of legal proceedings.

Former Address Consumer Tracker

FACT™**6/5/2017 12:04****Requested Information**

First Name: AIMEE
Last Name: SEITZ
SSN: XXX-XX-9326
Quote Back: 507670

Retrieved Information

- 5 ADDRESS RECORDS FOUND
- SSN IS VALID. ISSUED IN PA
- IN THE YEAR 1991-1994
- SSN NOT LISTED IN SSA DMF

Summary Information

NAME VARIATIONS: 1

UNIQUE JURISDICTIONS: 4

of UNIQUE ADDRESSES: 5

SEITZ AIMEE M

LA ORLEANSNY QUEENS

PA ALLEGHENY

PA CUMBERLAND

INFORMATION CONTAINED IN THIS REPORT IS NOT VERIFIED AND CANNOT BE USED TO MAKE ANY DECISIONS REGARDING THE APPLICANT. THE SSN VALIDATION DOES NOT CONFIRM THAT THE INFORMATION LISTED IS ACCURATE. THIS INFORMATION IS FOR REFERENCE ONLY AND IS NOT A CONSUMER INVESTIGATION REPORT.

Returned Information

SEITZ, AIMEE M

DOB: 04/23/1991**Age:** 26

508 SENECA AVE

3D

RIDGEWOOD, NY 11385 2375

QUEENS COUNTY

06/2016 - 03/2017

SEITZ, AIMEE M

DOB: 04/23/1991**Age:** 26

1834 HASTINGS PL

NEW ORLEANS, LA 70130 5006

ORLEANS COUNTY

06/2015 - 10/2016

SEITZ, AIMEE M

DOB: 04/23/1991**Age:** 26

1223 KINGS CIR

MECHANICSBURG, PA 17050 7674

CUMBERLAND COUNTY

10/2009 - 10/2016

SEITZ, AIMEE M

DOB: 04/23/1991**Age:** 26

1825 BORDEAUX ST

NEW ORLEANS, LA 70115 5513

ORLEANS COUNTY

12/2013 - 10/2015

SEITZ, AIMEE M

DOB: 04/23/1991**Age:** 26

3990 5TH AVE

PITTSBURGH, PA 15213 3543

ALLEGHENY COUNTY

04/2014 - 04/2014

Single	0	0	0
Married	0	0	0
Divorced	0	0	0
Widowed	0	0	0
Head of household	0	0	0
Exemptions/Allowances	0	0	0
Taxable Marital Status:	0	0	0
New York City:	0	0	0



Period Beginning:	05/16/2017
Period Ending:	05/31/2017
Pay Date:	05/31/2017

AIMEE M SEITZ
508 SENECA AVE
APT. 3D
RIDGEWOOD NY 11385

Earnings	Reg
rate	hours
2800 .21	
Gross Pay	\$2,800.21
year to date	29,463.20
Information	G.T.L.
this period	1.51
total to date	22.65
Other Benefits and	Mctmt
	Pop
	19.76
	197.60
Deductions	Statutory
Federal Income Tax	-493.60
Social Security Tax	-172.48
Medicare Tax	-40.34
NY State Income Tax	-145.36
New York Cit Income Tax	-90.42
NY SUI/SDI Tax	-1.30
Other	
Pop Dnt125	-1.60*
Pop Med125	-17.90*
Pop Vis125	-0.26*
Net Pay	\$1,836.95
Checking	-1,836.95
Net Check	\$0.00
Important Notes	COMPANY PHONE NUMBER 718-632-2660

* Excluded from federal taxable wages

Your federal taxable wages this period are \$2,780.45

Advice number:  **Pay date:** 

00000210035
05/31/2017

ACHIEVEMENT FIRST EAST
NEW YORK CHARTER SCHOOL
557 PENNSYLVANIA AVENUE
BROOKLYN, NEW YORK 11207

Deposited to the account of
AIMEE M SEITZ

xxxxxx0017	xxxx	xxxx	\$1,836.95
account number	transit	ABA	amount

NON-NEGOTIABLE

ACHIEVEMENT FIRST EAST
NEW YORK CHARTER SCHOOL
557 PENNSYLVANIA AVENUE
BROOKLYN, NEW YORK 11207

Taxable Marital Status: Single
Exemptions/Allowances:
Federal: 0
NY: 0
New York Cit: 0

Period Beginning: 05/01/2017
Period Ending: 05/15/2017
Pay Date: 05/15/2017

AIMEE M SEITZ
508 SENECA AVE
APT. 3D
RIDGEWOOD NY 11385

Earnings		Reg	
rate	hours	this period	year to date
2800.21		2,800.21	26,434.99
Gross Pay		\$2,800.21	26,434.99

Deductions

Statutory		Other	
Federal Income Tax	-493.60	Pop Dnt125	-1.60*
Social Security Tax	-172.48	Pop Med125	-17.90*
Medicare Tax	-40.34	Pop Vis125	-0.26*
NY State Income Tax	-145.36		
New York Cit Income Tax	-90.42		
NY SUI/SDI Tax	-1.30		
			14.40
			161.10
			2.34

Important Notes
COMPANY PHONE NUMBER 718-632-2660

Information		Other Benefits and	
this period	total to date	Pop	Mcmt
1.51	19.63	19.76	177.84

* Excluded from federal taxable wages

Your federal taxable wages this period are \$2,780.45

ACHIEVEMENT FIRST EAST
NEW YORK CHARTER SCHOOL
557 PENNSYLVANIA AVENUE
BROOKLYN, NEW YORK 11207

Advice number: 00000190064
Pay date: 05/15/2017

Deposited to the account of AIMEE M SEITZ
account number xxxxxx0017
transit ABA xxxx xxxx
amount \$1,836.95

NON-NEGOTIABLE

ACHIEVEMENT FIRST EAST
NEW YORK CHARTER SCHOOL
557 PENNSYLVANIA AVENUE
BROOKLYN, NEW YORK 11207

Period Beginning: 04/16/2017
Period Ending: 04/30/2017
Pay Date: 04/28/2017

Taxable Marital Status: Single
Exemptions/Allowances:
Federal: 0
NY: 0
New York Cit: 0

AIMEE M SEITZ
508 SENECA AVE
APT. 3D
RIDGEWOOD NY 11385

Earnings	rate	hours	this period	year to date
Reg	2800 .21		2,800 .21	23,634 .78
Gross Pay			\$2,800 .21	23,634 .78

Other Benefits and Information	this period	total to date
G.T.L.	1.51	18.12
Mctmt	9.46	
Pop	19.76	158.08

Deductions	Statutory		
Federal Income Tax	-493.60	4,033.78	
Social Security Tax	-172.48	1,456.68	
Medicare Tax	-40.33	340.67	
NY State Income Tax	-145.36	1,170.65	
New York Cit Income Tax	-90.42	455.36	
NY SUI/SDI Tax	-1.30	10.40	
Other			
Pop Dnt125	-1.60*	12.80	
Pop Med125	-17.90*	143.20	
Pop Vis125	-0.26*	2.08	
Net Pay	\$1,836.96		
Checking	-1,836.96		
Net Check	\$0.00		

Important Notes
COMPANY PHONE NUMBER 718-632-2660

* Excluded from federal taxable wages

Your federal taxable wages this period are
\$2,780.45

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ACHIEVEMENT FIRST EAST
NEW YORK CHARTER SCHOOL
557 PENNSYLVANIA AVENUE
BROOKLYN , NEW YORK 11207

Advice number: 00000170032
Pay date: 04/28/2017

Deposited to the account of	account number	transit	ABA	amount
AIMEE M SEITZ	xxxxx0017	xxxx	xxxx	\$1,836.96

THIS IS NOT A CHECK

NON-NEGOTIABLE



JPMorgan Chase Bank, N.A.
P O Box 659754
San Antonio, TX 78265 - 9754

April 26, 2017 through May 23, 2017

Account Number: 000000232880017

CUSTOMER SERVICE INFORMATION

Web site: Chase.com
Service Center: 1-800-935-9935
Deaf and Hard of Hearing: 1-800-242-7383
Para Espanol: 1-877-312-4273
International Calls: 1-713-262-1679

00008123 DRE 552 211 14417 NNNNNNNNNN 1 000000000 17 0000

AIMEE M SEITZ
508 SENECA AVE APT 3D
RIDGEWOOD NY 11385-2375

CHECKING SUMMARY

Chase Total Checking

	AMOUNT
Beginning Balance	-\$809.85
Deposits and Additions	6,864.86
ATM & Debit Card Withdrawals	-348.07
Electronic Withdrawals	-4,650.74
Fees	-5.00
Ending Balance	\$1,051.20

DEPOSITS AND ADDITIONS

DATE	DESCRIPTION	PPD ID	AMOUNT
04/26	Tax Products Pe4 Sbtpg LLC	PPD ID: 3722260102	\$2,332.74
04/28	Achievement Firs Direct Dep	PPD ID: 9111111103	1,836.96
05/10	Venmo Cashout	PPD ID: 5264681992	12.00
05/15	Achievement Firs Direct Dep	PPD ID: 9111111103	1,836.95
05/15	Achievement Firs Direct Dep	PPD ID: 9111111103	196.85
05/17	LA Revenue Dept. Tax Refund	PPD ID: 1726000805	326.00
05/19	Venmo Cashout	PPD ID: 5264681992	133.36
05/22	Venmo Cashout	PPD ID: 5264681992	125.00
05/22	Venmo Cashout	PPD ID: 5264681992	65.00
Total Deposits and Additions			\$6,864.86

ATM & DEBIT CARD WITHDRAWALS

DATE	DESCRIPTION	AMOUNT
05/04	Card Purchase 05/02 Ic Brooklyn Cafe Brooklyn NY Card 9919	\$8.95
05/05	Card Purchase 05/04 Apl* Itunes.Com/Bill 866-712-7753 CA Card 9919	14.29
05/08	Card Purchase 05/05 Spin New York NY Card 9919	19.00
05/08	Non-Chase ATM Withdraw 05/07 582 Seneca Avenue Ridgewood NY Card 9919	100.99
05/17	Card Purchase 05/17 Apl* Itunes.Com/Bill 866-712-7753 CA Card 9919	2.99
05/18	Non-Chase ATM Withdraw 05/18 66 Wyckoff Avenue Brooklyn NY Card 9919	201.85
Total ATM & Debit Card Withdrawals		\$348.07



JPMorgan Chase Bank, N.A.
P O Box 659754
San Antonio, TX 78265-9754

March 24, 2017 through April 25, 2017
Account Number: 000000232880017



00007520 DRE 552 211 11617 NNNNNNNNNN 1 000000000 17 0000

AIMEE M SEITZ
508 SENECA AVE APT 3D
RIDGEWOOD NY 11385-2375

CUSTOMER SERVICE INFORMATION

Web site: Chase.com
Service Center: 1-800-935-9935
Deaf and Hard of Hearing: 1-800-242-7383
Para Espanol: 1-877-312-4273
International Calls: 1-713-262-1679

We want to remind you about the overdraft service options that are available for your personal checking account(s)

We've included information on the last page of this statement to remind you about our overdraft services and associated fees. You can find more information about these services and fees online at chase.com/coverage, which includes a link to a PDF that tells you how overdraft transactions will work.

Additionally, you can find ways to avoid overdraft fees at chase.com/AccountTips.

If you have questions, please call us anytime at the number on your statement.

CHECKING SUMMARY

Chase Total Checking

	AMOUNT
Beginning Balance	\$465.44
Deposits and Additions	3,919.23
ATM & Debit Card Withdrawals	-420.52
Electronic Withdrawals	-4,669.50
Fees	-104.50
Ending Balance	-\$809.85

DEPOSITS AND ADDITIONS

DATE	DESCRIPTION	PPD ID	AMOUNT
03/31	Achievement Firs Direct Dep	9111111103	\$1,836.95
03/31	Achievement Firs Direct Dep	9111111103	103.33
04/05	Venmo Cashout	5264681992	142.00
04/14	Achievement Firs Direct Dep	9111111103	1,836.95
Total Deposits and Additions			\$3,919.23

ATM & DEBIT CARD WITHDRAWALS

DATE	DESCRIPTION	AMOUNT
03/24	Non-Chase ATM Withdraw 03/24 1449 Myrtle Avenue Brooklyn NY Card 9919	\$201.75
03/30	Card Purchase 03/28 Ic Brooklyn Cafe Brooklyn NY Card 9919	23.60
03/30	Card Purchase 03/28 Ic Brooklyn Cafe Brooklyn NY Card 9919	11.40
04/03	Card Purchase 03/31 The Starliner Brooklyn NY Card 9919	74.00

N-2 Wage and Tax Statement 2016

OMB No. 1545-0008
Control number 0009 LONG/65F MS5030 Dept. MS5030 Corp. A Employer use only 100

Employer's name, address, and ZIP code
**ACHIEVEMENT FIRST
BUSHWICK CHARTER SCHO
981 HEGEMAN
BROOKLYN NY 11208**

Batch #00568

Employee's name, address, and ZIP code
**MEE M SEITZ
18 SENECA AVE
PT. 3D
DGEWOOD NY 11385**

Employer's FED ID number 20-5118947 a Employee's SSA number 193-72-9326

Wages, tips, other comp. 33613.03 2 Federal income tax withheld 5959.31

Social security wages 33613.03 4 Social security tax withheld 2084.01

Medicare wages and tips 33613.03 6 Medicare tax withheld 487.39

Social security tips 8 Allocated tips

Verification Code CF-F41D-7A58-BB1A 10 Dependent care benefits

Nonqualified plans 12a See instructions for box 12 C 19.63

Other 15.60 SDI 12b 12c 12d

13 Stat emp Ret. plan 3rd party sick pay

State Employer's state ID no. 16 State wages, tips, etc. IY 20-5118947 33613.03

State income tax 1744.92 18 Local wages, tips, etc.

Local income tax 20 Locality name

The reverse side includes general information that you may also find helpful.

1. The following information reflects your final 2016 pay stub plus any adjustments submitted by your employer:

Gross Pay	33830.52	Social Security Tax Withheld	2084.01	NY. State Income Tax	1744.92
		Box 4 of W-2		Box 17 of W-2	
Fed. Income Tax Withheld	5959.31	Medicare Tax Withheld	487.39	SUI/SDI	15.60
Box 2 of W-2		Box 6 of W-2		Box 14 of W-2	

2. Your Gross Pay was adjusted as follows to produce your W-2 Statement.

	Wages, Tips, other Compensation Box 1 of W-2	Social Security Wages Box 3 of W-2	Medicare Wages Box 5 of W-2	NY. State Wages, Tips, Etc. Box 16 of W-2
Gross Pay	33,830.52	33,830.52	33,830.52	33,830.52
Plus GTL (C-Box 12)	19.63	19.63	19.63	19.63
Less Other Cafe 125	237.12	237.12	237.12	237.12
Reported W-2 Wages	33,613.03	33,613.03	33,613.03	33,613.03

3. Employee W-4 Profile. To change your Employee W-4 Profile Information, file a new W-4 with your payroll department.

**AIMEE M SEITZ
508 SENECA AVE
APT. 3D
RIDGEWOOD NY 11385**

Social Security Number: 193-72-9326
Taxable Marital Status: SINGLE

Exemptions/Allowances:

FEDERAL: 0
STATE: 0

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Wages, tips, other comp. 33613.03 2 Federal income tax withheld 5959.31

Social security wages 33613.03 4 Social security tax withheld 2084.01

Medicare wages and tips 33613.03 6 Medicare tax withheld 487.39

Control number 0009 LONG/65F MS5030 Dept. MS5030 Corp. A Employer use only 100

Employer's name, address, and ZIP code
**ACHIEVEMENT FIRST
BUSHWICK CHARTER SCHO
981 HEGEMAN
BROOKLYN NY 11208**

Employer's FED ID number 20-5118947 a Employee's SSA number 193-72-9326

Social security tips 8 Allocated tips

Verification Code CF-F41D-7A58-BB1A 10 Dependent care benefits

Nonqualified plans 12a See instructions for box 12 C 19.63

Other 15.60 SDI 12b 12c 12d

13 Stat emp Ret. plan 3rd party sick pay

Employee's name, address and ZIP code
**MEE M SEITZ
18 SENECA AVE
PT. 3D
DGEWOOD NY 11385**

State Employer's state ID no. 16 State wages, tips, etc. IY 20-5118947 33613.03

State income tax 1744.92 18 Local wages, tips, etc.

Local income tax 20 Locality name

Federal Filing Conv

1 Wages, tips, other comp. 33613.03 2 Federal income tax withheld 5959.31

3 Social security wages 33613.03 4 Social security tax withheld 2084.01

5 Medicare wages and tips 33613.03 6 Medicare tax withheld 487.39

d Control number 120009 LONG/65F MS5030 Dept. MS5030 Corp. A Employer use only 100

c Employer's name, address, and ZIP code
**ACHIEVEMENT FIRST
BUSHWICK CHARTER SCHO
981 HEGEMAN
BROOKLYN NY 11208**

b Employer's FED ID number 20-5118947 a Employee's SSA number 193-72-9326

7 Social security tips 8 Allocated tips

9 10 Dependent care benefits

11 Nonqualified plans 12a C 19.63

14 Other 15.60 SDI 12b 12c 12d

13 Stat emp Ret. plan 3rd party sick pay

e/f Employee's name, address and ZIP code
**AIMEE M SEITZ
508 SENECA AVE
APT. 3D
RIDGEWOOD NY 11385**

15 State Employer's state ID no. 16 State wages, tips, etc. NY 20-5118947 33613.03

17 State income tax 1744.92 18 Local wages, tips, etc.

19 Local income tax 20 Locality name

NY State Reference Conv

1 Wages, tips, other comp. 33613.03 2 Federal income tax withheld 5959.31

3 Social security wages 33613.03 4 Social security tax withheld 2084.01

5 Medicare wages and tips 33613.03 6 Medicare tax withheld 487.39

d Control number 120009 LONG/65F MS5030 Dept. MS5030 Corp. A Employer use only 100

c Employer's name, address, and ZIP code
**ACHIEVEMENT FIRST
BUSHWICK CHARTER SCHO
981 HEGEMAN
BROOKLYN NY 11208**

b Employer's FED ID number 20-5118947 a Employee's SSA number 193-72-9326

7 Social security tips 8 Allocated tips

9 10 Dependent care benefits

11 Nonqualified plans 12a C 19.63

14 Other 15.60 SDI 12b 12c 12d

13 Stat emp Ret. plan 3rd party sick pay

e/f Employee's name, address and ZIP code
**AIMEE M SEITZ
508 SENECA AVE
APT. 3D
RIDGEWOOD NY 11385**

15 State Employer's state ID no. 16 State wages, tips, etc. NY 20-5118947 33613.03

17 State income tax 1744.92 18 Local wages, tips, etc.

19 Local income tax 20 Locality name

NY State Filing Conv

For the year Jan. 1–Dec. 31, 2016, or other tax year beginning , 2016, ending , 20		See separate instructions.
Your first name and initial Aimee M	Last name Seitz	Your social security number 193-72-9326
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. 508 Seneca Avenue		Apt. no. 3D
City, town or post office, state, and ZIP code. If you have a foreign address, also complete spaces below (see instructions). Ridgewood NY 11385		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. <input type="checkbox"/> You <input type="checkbox"/> Spouse
Foreign country name	Foreign province/state/county	
Foreign postal code		

Filing Status

- 1 ☒ Single
- 2 ☐ Married filing jointly (even if only one had income)
- 3 ☐ Married filing separately. Enter spouse's SSN above and full name here. ▶
- 4 ☐ Head of household (with qualifying person). (See instructions.) If the qualifying person is a child but not your dependent, enter this child's name here. ▶
- 5 ☐ Qualifying widow(er) with dependent child

Check only one box.

Exemptions

6a <input checked="" type="checkbox"/> Yourself. If someone can claim you as a dependent, do not check box 6a				Boxes checked on 6a and 6b 1 No. of children on 6c who: • lived with you _____ • did not live with you due to divorce or separation (see instructions) _____ Dependents on 6c not entered above _____ Add numbers on lines above 1
b <input type="checkbox"/> Spouse				
c Dependents:		(2) Dependent's social security number	(3) Dependent's relationship to you	(4) <input checked="" type="checkbox"/> if child under age 17 qualifying for child tax credit (see instructions)
(1) First name	Last name			
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
d Total number of exemptions claimed				

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

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 W-2, see instructions.

7 Wages, salaries, tips, etc. Attach Form(s) W-2	7	60,743.
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	29.
b Qualified dividends	9b	4.
10 Taxable refunds, credits, or offsets of state and local income taxes	10	0.
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	-100.
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	60,672.

Adjusted Gross Income

23 Educator expenses	23	250.
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	700.
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 Tuition and fees. Attach Form 8917	34	4,000.
35 Domestic production activities deduction. Attach Form 8903	35	
36 Add lines 23 through 35	36	4,950.
37 Subtract line 36 from line 22. This is your adjusted gross income ▶	37	55,722

Tax and Credits

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, \$6,300
Married filing jointly or Qualifying widow(er), \$12,600
Head of household, \$9,300

38	Amount from line 37 (adjusted gross income)	38	55,722.
39a	Check <input type="checkbox"/> You were born before January 2, 1952, <input type="checkbox"/> Blind. <input type="checkbox"/> Spouse was born before January 2, 1952, <input type="checkbox"/> Blind. Total boxes checked <input type="checkbox"/> 39a		
b	If your spouse itemizes on a separate return or you were a dual-status alien, check here <input type="checkbox"/> 39b		
40	Itemized deductions (from Schedule A) or your standard deduction (see left margin)	40	6,300.
41	Subtract line 40 from line 38	41	49,422.
42	Exemptions. If line 38 is \$155,650 or less, multiply \$4,050 by the number on line 6d. Otherwise, see instructions	42	4,050.
43	Taxable income. Subtract line 42 from line 41. If line 42 is more than line 41, enter -0-	43	45,372.
44	Tax (see instructions). Check if any from: a <input type="checkbox"/> Form(s) 8814 b <input type="checkbox"/> Form 4972 c <input type="checkbox"/>	44	7,115.
45	Alternative minimum tax (see instructions). Attach Form 6251	45	
46	Excess advance premium tax credit repayment. Attach Form 8962	46	
47	Add lines 44, 45, and 46	47	7,115.
48	Foreign tax credit. Attach Form 1116 if required	48	
49	Credit for child and dependent care expenses. Attach Form 2441	49	
50	Education credits from Form 8863, line 19	50	
51	Retirement savings contributions credit. Attach Form 8880	51	
52	Child tax credit. Attach Schedule 8812, if required	52	
53	Residential energy credits. Attach Form 5695	53	
54	Other credits from Form: a <input type="checkbox"/> 3800 b <input type="checkbox"/> 8801 c <input type="checkbox"/>	54	
55	Add lines 48 through 54. These are your total credits	55	
56	Subtract line 55 from line 47. If line 55 is more than line 47, enter -0-	56	7,115.

Other Taxes

57	Self-employment tax. Attach Schedule SE	57	
58	Unreported social security and Medicare tax from Form: a <input type="checkbox"/> 4137 b <input type="checkbox"/> 8919	58	
59	Additional tax on IRAs, other qualified retirement plans, etc. Attach Form 5329 if required	59	
60a	Household employment taxes from Schedule H	60a	
b	First-time homebuyer credit repayment. Attach Form 5405 if required	60b	
61	Health care: individual responsibility (see instructions) Full-year coverage <input checked="" type="checkbox"/>	61	0.
62	Taxes from: a <input type="checkbox"/> Form 8959 b <input type="checkbox"/> Form 8960 c <input type="checkbox"/> Instructions; enter code(s)	62	
63	Add lines 56 through 62. This is your total tax	63	7,115.

Payments

If you have a qualifying child, attach Schedule EIC.

64	Federal income tax withheld from Forms W-2 and 1099	64	9,695.
65	2016 estimated tax payments and amount applied from 2015 return	65	
66a	Earned income credit (EIC) No	66a	
b	Nontaxable combat pay election 66b		
67	Additional child tax credit. Attach Schedule 8812	67	
68	American opportunity credit from Form 8863, line 8	68	
69	Net premium tax credit. Attach Form 8962	69	
70	Amount paid with request for extension to file	70	
71	Excess social security and tier 1 RRTA tax withheld	71	
72	Credit for federal tax on fuels. Attach Form 4136	72	
73	Credits from Form: a <input type="checkbox"/> 2439 b <input type="checkbox"/> Reserved c <input type="checkbox"/> 8885 d <input type="checkbox"/>	73	
74	Add lines 64, 65, 66a, and 67 through 73. These are your total payments	74	9,695.

Refund

Direct deposit? See instructions.

75	If line 74 is more than line 63, subtract line 63 from line 74. This is the amount you overpaid	75	2,580.
76a	Amount of line 75 you want refunded to you. If Form 8888 is attached, check here <input type="checkbox"/>	76a	2,580.
b	Routing number 0 6 5 4 0 0 1 3 7		
c	Type: <input checked="" type="checkbox"/> Checking <input type="checkbox"/> Savings		
d	Account number 2 3 2 8 8 0 0 1 7		
77	Amount of line 75 you want applied to your 2017 estimated tax	77	

Amount You Owe

78	Amount you owe. Subtract line 74 from line 63. For details on how to pay, see instructions	78	
79	Estimated tax penalty (see instructions)	79	

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

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

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 accurately list all amounts and sources of income I received during the tax year. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Your signature	Date	Your occupation Teacher	Daytime phone number (717) 580-5488
Spouse's signature. If a joint return, both must sign.	Date	Spouse's occupation	If the IRS sent you an Identity Protection PIN, enter it here (see inst.)

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN
Firm's name	Self-Prepared	Firm's EIN		
Firm's address				

Tips for Estimated Tax

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Department of Taxation and Finance

New York State • New York City • Yonkers • MCTMT

REV 01/25/17 INTUIT.CG.OFP.SP

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Full SSN or taxpayer ID number 193729326		Enter your 2-character special condition code if applicable (<i>see instructions</i>)	
Taxpayer's first name and middle initial AIMEE M		Taxpayer's last name SEITZ	
Mailing address (<i>number and street or PO box; see instructions</i>) 508 SENECA AVENUE			Apartment number 3D
City, village, or post office RIDGEWOOD		State NY	ZIP code 11385
Taxpayer's e-mail address AIMEEMSEITZ@GMAIL.COM			

IT-2105

Estimated tax amounts

Dollars	Cents
	. 00
244	. 00
	. 00
	. 00
244	. 00

STOP: Pay this electronically on our website

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Estimated Tax Payment Voucher for Individuals

New York State • New York City • Yonkers • MCTMT

REV 01/25/17 INTUIT CG CFP SP

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Full SSN or taxpayer ID number 193729326		Enter your 2-character special condition code if applicable (see instr.)		New York State	
Taxpayer's first name and middle initial AIMEE M		Taxpayer's last name SEITZ			
Mailing address (number and street or PO box; see instructions) 508 SENECA AVENUE				Apartment number 3D	
City, village, or post office RIDGEWOOD		State NY	ZIP code 11385		
Taxpayer's e-mail address AIMEEMSEITZ@GMAIL.COM					

IT-2105

Estimated tax amounts

Dollars Cents

		. 00
New York State		
New York City	244	. 00
Yonkers		. 00
MCTMT		. 00
Total payment	244	. 00

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Department of Taxation and Finance

Department of Taxation and Finance Estimated Tax Payment Voucher for Individuals

New York State • New York City • Yonkers • MCTMT

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Taxpayer's first name and middle initial AIMEE M	Taxpayer's last name SEITZ	
Mailing address (number and street or PO box; see instructions) 508 SENECA AVENUE		Apartment number 3D
City, village, or post office RIDGEWOOD	State NY	ZIP code 11385
Taxpayer's e-mail address AIMEEMSEITZ@GMAIL.COM		

IT-2105

Estimated tax amounts	
Dollars	Cents
	. 00
244	. 00
	. 00
	. 00
244	. 00

STOP: Pay this electronically on our website

N-2 Wage and Tax Statement 2016

OMB No. 1545-0008

Control number	Dept.	Corp.	Employer use only
0009 LONG/65F	MS5030		A 100

Employer's name, address, and ZIP code
**ACHIEVEMENT FIRST
 BUSHWICK CHARTER SCHO
 981 HEGEMAN
 BROOKLYN NY 11208**

Batch #00568

Employee's name, address, and ZIP code

**MEE M SEITZ
 18 SENECA AVE
 PT. 3D
 DGEWOOD NY 11385**

Employer's FED ID number a Employee's SSA number

20-5118947 193-72-9326

Wages, tips, other comp. 2 Federal income tax withheld

33613.03 5959.31

Social security wages 4 Social security tax withheld

33613.03 2084.01

Medicare wages and tips 6 Medicare tax withheld

33613.03 487.39

Social security tips 8 Allocated tips

Verification Code 10 Dependent care benefits

CF-F41D-7A58-BB1A

Nonqualified plans 12a See instructions for box 12

C 19.63

Other 12b

15.60 SDI 12c

12d

13 Stat emp Ret. plan 3rd party sick pay

State Employer's state ID no. 16 State wages, tips, etc.

NY 20-5118947 33613.03

State income tax 18 Local wages, tips, etc.

1744.92

Local income tax 20 Locality name

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1744.92

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Federal Filing Conv

The reverse side includes general information that you may also find helpful.

1. The following information reflects your final 2016 pay stub plus any adjustments submitted by your employer

Gross Pay	33830.52	Social Security Tax Withheld	2084.01	NY. State Income Tax	1744.92
		Box 4 of W-2		Box 17 of W-2	
Fed. Income Tax Withheld	5959.31	Medicare Tax Withheld	487.39	SUI/SDI	15.60
Box 2 of W-2		Box 6 of W-2		Box 14 of W-2	

2. Your Gross Pay was adjusted as follows to produce your W-2 Statement.

	Wages, Tips, other Compensation Box 1 of W-2	Social Security Wages Box 3 of W-2	Medicare Wages Box 5 of W-2	NY. State Wages, Tips, Etc. Box 16 of W-2
Gross Pay	33,830.52	33,830.52	33,830.52	33,830.52
Plus GTL (C-Box 12)	19.63	19.63	19.63	19.63
Less OtherCafe 125	237.12	237.12	237.12	237.12
Reported W-2 Wages	33,613.03	33,613.03	33,613.03	33,613.03

3. Employee W-4 Profile. To change your Employee W-4 Profile Information, file a new W-4 with your payroll dep

**AIMEE M SEITZ
 508 SENECA AVE
 APT. 3D
 RIDGEWOOD NY 11385**

Social Security Number:193-72-9326

Taxable Marital Status: SINGLE

Exemptions/Allowances:

FEDERAL: 0

STATE: 0

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33613.03 5959.31

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C 19.63

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12d

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e/f Employee's name, address and ZIP code

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