## 1040 Department of the Treasury / Internal Revenue Service Individual Income Tax Return

1970
10

FC	or the	year January 1–December 31, 1970, or other taxable year beginning	, 1970, ending		, 19			
r type	Firs	st name and initial (If joint return, use first names and middle initials of both)	Last name	Your so	cial security number			
Please print or type	Pres	sent home address (Number and street or rural route)	Spouse'	Spouse's social security number				
Please	City	r, town or post office, State and ZIP code		Occu-	Yours Spouse's			
	Fil	ling Status—check only one: Exempti	ons Regular / 65	or over	/ Blind			
			elf	σ. σ.σ. Π	number			
		☐ Married filing separately and spouse is also filing. 8 Spouse	se (applies only if item)	$\overline{\Box}$	of boxes checked			
5		If this item checked give spouse's social security number in space above and enter	9 First names of your dependent children who lived with you					
O Dack	4	Unmarried Head of Household			Enter			
3		<del>-</del>	number ►  Number of other dependents (from line 34) ►					
1			•		·  —			
	_6 [	☐ Married filing separately and spouse is not filing	exemptions claimed	<del></del>	· · · · <b>P</b>			
				10				
,		12 Wages, salaries, tips, etc. Attach Forms W–2 to back. If unava	ailable, attach explanation)	·   12				
5				1				
2		13a Dividends (see pages 5 and 9 of instr.) \$		13c				
3	a)	(Also list in Part I of Schedule B, if gross dividends and other distributions a	ire over \$100)					
ا 5	Income	14 Interest. Enter total here (also list in Part II of Schedule B, if	total is over \$100)	14_				
	ည							
3	<b>=</b> .	15 Income other than wages, dividends, and interest (from line	40)	15				
3								
•		16 Total (add lines 12, 13c, 14 and 15)		16				
			,					
		17 Adjustments to income (such as "sick pay," moving expense	e, etc. from line 45)	17				
			1					
$\perp$		18 Adjusted gross income (subtract line 17 from line 16)	18					
See page 2 of instructions for rules under which the IRS will figure your tax and surcharge.  If you do not itemize deductions and line 18 is under \$10,000, find tax in Tables. Enter tax on lin								
1		i itemize deductions or line 18 is \$10,000 or more, go to line 46 to figure		19				
	_ g	19 Tax (Check if from: Tax Tables 1–15 $\square$ , Tax Rate Schedule X, Y, or Z $\square$ ,						
	Tax and Surcharge	20 Tax surcharge. See Tax Surcharge Tables A, B and C in instrument income credit, use Schedule R to figure surcharge.).		20				
	× 5	mont moonie creatt, use schedule it to figure surcharge.).						
ļ	Ta	21 Total (add lines 19 and 20)		21				
-				-				
2		22 Total credits (from line 55)		22				
	S	22 Total Cledits (Hollf line 55)						
מו	Credits	22 Income tou (subtract line 00 from line 01)		23				
5	ē	23 Income tax (subtract line 22 from line 21)						
3	9	Of Other town (form the CI)		24				
OI INOISE	and	24 Other taxes (from line 61)		<del></del> -				
5	ts	OF Tatal (add lines 00 and 04)		25				
5	en	25 Total (add lines 23 and 24)	26	1/////				
5	Payments	26 Total Federal income tax withheld (attach Forms W–2 to back)			ke check or money ler payable to Inter-			
5	Pa	27 1970 Estimated tax payments (include 1969 overpayment allowed as a cred	28		Revenue Service.			
מונמכוו		28 Other payments (from line 65)	. [20]	-   <i>           </i>				
ָ נ		29 Total (add lines 26, 27, and 28)		29				
8	- T		29					
=	al. Due Refund	20 It line OF is lawren than the OO and on DALANOT DUE D	20					
	æ.r	30 If line 25 is larger than line 29, enter BALANCE DUE. Pay in	full with return	30				
	Bal. or Re			31				
		32 Line 31 to be: (a) Credited on 1971 estimated tax ►\$  Under penalties of perjury, I declare that I have examined this return, including accompany	; (b) Refunded ►	\$	of my brand day			
		it is true, correct, and complete.	ing concurres and statements, and to	the pest	or my knowledge and belief			
	E 6							
	Sign here	Your signature Date	Signature of preparer other than taxpa all information of which he has any k	ayer, base nowledge	d on Date			
1		Spouse's signature (if filing jointly, BOTH must sign even if only one had income)	Address		16-81168-1			

Foreign Accounts (check

Did you, at any time during the taxal	ole year, have a	any interest in c	or signature or o	ther author	rity over
a bank, securities, or other financial	account in a f	foreign country	(except in a U.	S. military	banking
facility operated by a U.S. financial i	nstitution)?.			. 🗀 Yes	☐ No.
If "Yes" attach Form 4683, (For de	efinitions, see l	Form 4683.)			

appropriate box) If "Yes," attach	Form 4683.	(For definitions, se	e Form 4683	.)			
PART I.—Additional Exemptions (Comple	ete only for	other dependents	claimed on I	ine 10)			
33 (a) NAME	(b) Relation- ship	(c) Months lived in your home. If born or died during year write "B" or "D"	(d) Did dependent have income of \$625 or more?	(e) Amount YOU fu for dependent's sup 100% write "ALL"	rnished port, if	(f) Amount furn by OTHERS incl ing dependent.	ished ud-
34 Total number of dependents listed abo	ve. Enter he	re and on line 10.				<u>'</u> ▶	-
PART II.—Income other than Wages, D			<del></del>		**, *		
					35		
35 Business income (or loss) (attach Sche 36 Sale or exchange of property (attach Sc					36		
37 Pensions and annuities, rents and royalti					37		
38 Farm income (or loss) (attach Schedule					38		
39 Miscellaneous income (state nature and							
					39		_
<b>40 Total</b> (add lines 35, 36, 37, 38, and 39).	Enter here ar	nd on line 15	<u> </u>	<u> ▶</u>	40		
PART III.—Adjustments to Income							
41 "Sick pay" if included in line 12 (attack	Form 2440	or other required s	tatement) .		41		
42 Moving expense (attach Form 3903) .					42		
43 Employee business expense (attach Fo					43		_
44 Payments as a self-employed person to	a retireme	nt plan, etc. (attach	Form 2950SE	E)	44		_
45 Total adjustments (add lines 41, 42, 43,	, and 44). Er	nter here and on line	17	<u> ▶</u>	45		
PART IV.—Tax Computation							
46 Adjusted gross income (from line 18) .					46		
47 (a) If you itemize deductions, enter total			)				
(b) If you do not itemize deductions, an			er }		47		_
\$1,000 (\$500 if married and filing se			J				
48 Subtract line 47 from line 46					48		_
49 Multiply total number of exemptions cla					49		-
50 Taxable income. Subtract line 49 from					E0		
Schedule X, Y, or Z unless the alternative					50 51		-
51 Tax. Enter here and on line 19	· · · ·				31		
PART V.—Credits							
52 Retirement income credit (attach Sche	dule R)				52		_
53 Investment credit (attach Form 3468					53		
54 Foreign tax credit (attach Form 1116					54		_ _
55 Total credits (add lines 52, 53, and 54).	Enter here	and on line 22.	<u> </u>	<u> ▶</u>	55		
PART VI.—Other Taxes							
56 Self-employment tax (attach Schedule	SF)				56		
57 Tax from recomputing prior-year invest					57		
58 Minimum tax. See instructions on page					58		_
59 Social security tax on unreported tip i					59		
60 Uncollected employee social security to	ax on tips (1	from Forms W-2) .			60		_ _
61 Total (add lines 56, 57, 58, 59, and 60).				>	61		
PART VII.—Other Payments					62		
62 Excess F.I.C.A. tax withheld (two or m					63		-
63 Credit for Federal tax on gasoline, spec					64		_ -
64 Regulated Investment Company Credit 65 Total (add lines 62, 63, and 64). Enter h					65		_ -