1040

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

First name and initial (if joint return, use first names and middle initials of both) Last name				Your social s	ecurity number	
5	ent home address (Number and street, including apartment number, or rural ru		Spouse's social security number			
<u>.</u>						
City,	town or post office, State and ZIP code		Occu-	Yours		
			pation	Spouse's		
Fili	ing Status—check only one: □ Single		ar / 65 o	r over / Blir		
2	☐ Married filing jointly (even if only one had income)	7 Yourself] [ᆜ	number of boxes checked	
3	Married filing separately and spouse is also filing.	8 Spouse (applies only if item) 2 or 6 is checked) 9 First names of your dependence	l L	l ∟ ildron who	- -	
-	Give spouse's social security number in space above and enter first name here ►	you			lived with	
4 [Unmarried Head of Household				Enter number	
4 [5 [6 [Surviving widow(er) with dependent child	10 Number of other dependen		line 33)		_
6 [Married filing separately and spouse is not filing	11 Total exemptions claimed	xemptions claimed			
	12 Wages, salaries, tips, etc. (A tach Forms W–2 to b	ack. If unavailable, attach explan	ation) .	12		_
	10 plus / see nage 6) a			13c		
3	13a Dividends (see pages 6) \$	exclusion \$ Bala	nce . >	- -		_
ae a	14 Interest. If \$100 or less, enter total without		14			
Incom	If over \$100, enter total and list in	Part II of Schedule B	• • •	. _		
_ =	15 Income other than wages, dividends, and interes	st (from line 40)		15		
Income						
1	16 Total (add lines 12, 13c, 14 and 15)			16		_
				17		
	17 Adjustments to income (such as "sick pay," movir	ng expense, etc. from line 45) .		-		_
	18 Adjusted gross income (subtract line 17 from li			_ 18		
See I	page 3 of instructions for rules under which the IRS will fi u do not itemize deductions and line 18 is under \$10,00	gure your tax. O. find tax in Tables and enter on	line 19			
If yo	u itemize deductions or line 18 is \$10,000 or more, go	1				
	19 Tax (Check if from: Tax Tables 1-13, Tax Rate Sch.)	K, Y, or Z, 🔲 Sch. D, 🖂 Sch. G or 🥅 Fo	rm 4726)	19		
lits				20		
Credits	20 Total credits (from line 54)	20				
1	21 Income tax (subtract line 20 from line 19)	21				
and	21 theome tax (subtract line 20 hom line 19)		• • •			_
	22 Other taxes (from line 60)			22		
Payments	,					
	23 Total (add lines 21 and 22)			23	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,,,,,
ية	24 Total Federal income tax withheld (attach Forms W-2 or W-			- /////		
Foreign Bal. Due Tax, Paym	25 1971 Estimated tax payments (include 1970 overpayment allo		- ////			
F	26 Other payments (from line 64)	26		_ <i> </i>		1111
		Dan la sull cut	· · ·	- -		
Due efund	28 If line 23 is larger than line 27, enter BALANCE	DUE Pay in full with return. Make check o order payable to Internal Revenue	r money Service	28		
و م	29 If line 27 is larger than line 23, enter OVERPAYME	NT	>	29		
Bal.		eks ▶	_			
[]	(b) Credited on 1972 estimated	T .				
ng an	31 Did you, at any time during the taxable year, have ity over a bank, securities, or other financial acc	any interest in or signature or ot	her auth	or-		
Foreign Accounts	military banking facility operated by a U.S. fin	ancial institution)?	ı, ın a U	o. . ▶ ୮	l Yes □	No
		<u> </u>			<u> </u>	
; (c	Under penalties of perjury, I declare that I have examined this return, in it is true, correct, and complete.	nctuating accompanying schedules and stateme	nts, and to	the best of r	my knowledge and	bel
Sign	Your signature	Date Signature of preparer othe	r than town	aver based of	n Dat	te
here	b and	all information of which h			181	

PART I.—	-Additional Exempti	ons (Complete or	nly for other depende	ents claime	d on line	10)		
32 (a) NAME		(b) Relationship	(c) Months lived in your home. If born or died during year, write B or D.	(d) Did dependent have income of \$675 or more?	(e) Amount YOU furnished for dependent's support. If 100% write ALL.		(f) Amount furnished by OTHERS includ- ing dependent.	
			<u> </u>		<u> </u>		<u> </u>	
33 Total nu	imber of dependents	listed above. Enter	here and on line 10 .	· · · · ·	· · · ·	· · · ·	· · · · >	<u>:</u>
PART II.—	-Income other than	Wages, Dividend	s, and Interest					
34 Rusines	s income or (loss) (s	attach Schedule C)				34	İ	
	• • •	•	al assets (attach Schedu			35		-
			f Gains and Losses (atta		97)	36		
_	, , ,		rships, estates or trusts,		•	97		
	come or (loss) (attac	-	•		oncuale E,	38		
39 Miscel-			not reported on Schedule E— see instructions on page 7			• 7////		
laneous			ot reported on Schedule	D) .				
income	1		see instructions on page					
	(d) Alimony							
	1	ure and source)						
						/////		
	(f) Total miscellane	ous income (add li	nes 39(a), (b), (c), (d)	and (e)) .		. 39		_
			here and on line 15 .	<u> </u>	<u> l</u>	40		
PART III.—	-Adjustments to Inc	come						
41 "Sick pa	ay" if included in line	12 (attach Form 24	140 or other required st	atement) .		. 41		_
42 Moving	expense (attach Form	1 3903)				. 42		_
43 Employe	e business expense (attach Form 2106	or other statement) .			. 43		_
			ent plan, etc. (attach Fo			. 44		_
45 Total ad	ljustments (add lines 4	11, 42, 43, and 44).	Enter here and on line	<u> 17</u>	<u> </u>	► 45	<u> </u>	
PART IV	-Tax Computation	(Do not use this pa	rt if you use Tax Tables	1–13 to find	your tax.)			
•	I gross income (from	•				. 46		_
(b) If yo (1)	u itemize deductions, e ou do not itemize deduc \$10,000 or more but le \$11,538.43 or more, e	tions, and line 46 is: ess than \$11,538.43,		Schedule A	}	. 47		-
\ ->	• • • • • • • • • • • • • • • • • • • •	• •	50 if married and filing s	onaratoly)			ļ
	: line 47 from line 46	• •	50 il marrieu anu ming s	eparatery.	,	48		
	total number of exen		line 11 by \$675			49		_
	income. Subtract line		inic 11, by ψ0/5			·		-
		_	using Tax Rate Schedul	 la V V ar 7	or if appli	50	o alternative	
tax f	from Schedule D, incor	ne averaging from S	Schedule G, or maximum	tax from Fo	rm 4726.)	Enter ta	x on line 19.	
PART V	–Credits							
51 Retireme	ent income credit (at	tach Schedule R)				. 51		_
52 Investme	ent credit (attach Fori	m 3468)				. 52		_
53 Foreign	tax credit (attach For	m 1116)				. 53		_
	edits (add lines 51, 52	., and 53). Enter he	re and on line 20	<u> </u>	<u> </u>	► 54		
PART VI	-Other Taxes							
55 Self-emp	oloyment tax (attach	Schedule SE) .				. 55		_
56 Tax fron	n recomputing prior-ye	ear investment cred	lit (attach Form 4255)			. 56		_
57 Minimur	n tax (see instructions	on page 8). Check	here [], if Form 4625 is	attached .		. 57		-
	ecurity tax on unrepo	•				. 58		-
	ted employee social so	•				· <u>59</u>		_
	dd lines 55, 56, 57, 58	s, and 59). Enter he	re and on line 22	· · · ·	<u> </u>	60	<u> </u>	
	Other Payments					101	1	
	•		-see instructions on page	•		. 61	<u> </u>	_
	•		gasoline and lubricating	oil (attach Fo	orm 4136)	62		-
	ed Investment Compar					64		-