

uro For	10 the ve	40	US 0er 31 1974, or of	Individua	Income	rnal Revenue Serv Tax Retui	rn 1974				
type	1	the year January 1-December 31, 1974, or other taxable year be Name (If joint return, give first names and initials of both)			ast name COUNTY OF RESIDENCE		Your social security number				
e print or	Preser	nt home address (Number a	nd street, including apa		Spouse's social security no.						
Please	City, t	own or post office, State a	Occu- pation Spouse's ►	•							
	Filin 1  2  3  4	g Status (check Single Married filing joir Married filing se spouse's social secui and enter full name here ► Unmarried Head of H	nt return (even if or parately. If spouse rity number in desi	e is also filing give gnated space above	you	· · [ [	Enter number of boxes checked ► 				
	5 🗌 8 Pre	Widow(er) with depe			d Number of other dependents (from line 27)          7 Total exemptions claimed          vour taxes for this fund?						
V-2 here		mpaign Fund	If joint return	n, does your spouse v	(Attach Forms W-2 )	· · Yes	No box(es) it will not increase your tax or reduce your refund.				
of Forms 👋	ncome	10a Dividends ( (If gross divider 11 Interest inc	10c								
attach Copy B	5	<ul><li>12 Income oth</li><li>13 Total (add</li><li>14 Adjustment</li></ul>	12								
Please at	<ul> <li>15 Subtract line 14 from line 13 (adjusted gross income)</li></ul>										
6	redits		s (from line 54)	Tables 1–12 hedule D	Schedule G O	R Form 4726					
	and C	19 Other taxes	•			· · · · · · · · · · · · · · · · · · ·					
Irder here	Payments	21a Total Feder W-2 or W-2 b 1974 estim allowed as o c Amount pai	Pay amount on line 23 in full with this return. Write social security number on check or money order and make								
or Money C	Tax,	Extension of 1 d Other paym	lime to File U.S. Ind	ividual Income Tax Re 65)	turn <u>c</u>	 	22				
	Balance Due or Refund	(Check here ► 24 If line 22 is 25 Amount of 26 Amount of	, if Form 2210, F larger than line		is attached. See instruct <b>OVERPAID</b>	· · · · · · · · · · · ·	23       24       25       overpayment (line 24) is to be       25, make no entry on line 26, m				
	Sign here	, and to the best of my knowledge and belief my knowledge. other than taxpayer) Date									
1		Spouse's signature	(if filing jointly, BOTH	must sign even if only	one had income)	Address (and ZIP Code	) Preparer's Emp. Ident. or Soc. Sec. No				

Form 1040 (1974) Page														
	(a) NAME	(b) Relationship	(c) Months lived in your	(d) Did de-		unt YOU	(f) Amoun							
			home. If born or died during year, write B or D.	pendent have income of \$750 or more?	pendent'		nished by 0 including							
er-					port. I write AL		ent.							
Other					¢		s							
	<u>b</u>				Ψ		-   Ψ							
2			►	1										
27 Total number of dependents listed in column (a). Enter here and on line 6d														
	Business income or (loss) (atta				. 2	8	# #							
	Net gain or (loss) from sale or	•			2	9		-						
	Net gain or (loss) from Suppler				1 1	0								
	Pensions, annuities, rents, roya		1		-									
	Farm income or (loss) (attach		2		-									
	Fully taxable pensions and annu	· ·	3											
	-					4		-						
34	50% of capital gain distribution State income tax refunds (does stand	J	5		-									
		· · · · ·	6	· · · · · · · · · · · · · · · · · · ·										
	Alimony received	•••			-									
3/	Other (state nature and source-	3	7											
38	Total (add lines 28, 29, 30, 31,		8		-									
	art II Adjustments to In		,			<u> </u>								
	"Sick pay." (From Forms W-2 and V		Forms W_2 or W_2P attach Fo	rm 2440 or statem	ent) 3	9		1						
	Moving expense (attach Form				unu)	0		-						
	Employee business expense (attach ronni -				• •	1		-						
	Payments as a self-employed pe				· ·	2								
	Total adjustments (add lines 39				· ·	3		-						
			part if you use Tax Table					_ <u>_</u>						
	Adjusted gross income (from					4		1						
	(a) If you itemize deductions, (				; ·		. <u></u>	-						
	and attach Schedule A .				. 4	5		1						
	(b) If you do not itemize deduc	tions, check here	► □ and enter 15% of line	ine 44, but do				-						
16	NOT enter more than \$2,00 Subtract line 45 from line 44		5 checked)			6		1						
	Multiply total number of exemption		line 7 by \$750		4	7		-						
	Taxable income. Subtract line 4				4	8		-						
Ŧ	(Figure your tax on the am	ount on line 48 by	y using Tax Rate Schedul	le X, Y, or Z, or	if applic	able, the	alternative							
	tax from Schedule D, incom	ne averaging from	Schedule G, or maximum	n tax from Form	4726.)	Enter tax	on line 16.							
Pa	art IV Credits													
49	Retirement income credit (atta	ch Schedule R) .			4	9								
	Investment credit (attach Forr				5	50								
	Foreign tax credit (attach For				5	51		-						
	Credit for contributions to cand				5	52		_						
	Work Incentive (WIN) credit (a					53								
54	Total credits (add lines 49, 50,	51, 52, and 53).	Enter here and on line 1	7	. 🕨 🗄	54								
	art V. Other Taxes													
55	Self-employment tax (attach S	chedule SE)			5	55 ·		1						
	Tax from recomputing prior-yea					56								
	Tax from recomputing prior-yea		57		_									
	Minimum tax. Check here 🕨	5	58											
59	Social security tax on tip incom	me not reported to	employer (attach Form 4	137)	5	59								
	Uncollected employee social se				6	50								
	Total (add lines 55, 56, 57, 58,	. 🕨 🤆	51											
	art VI Other Payments													
	Excess FICA tax withheld (two	or more employe	rs—see instructions on r	page 9)		52	·····							
	Credit for Federal tax on special fuels					53		_						
	Credit from a Regulated Investi					54								
	Total (add lines 62, 63, and 64)	). Enter here and c	on line 21d	· · _ · _ · _ ·	. 🕨 🤘 🤆	55								
5	Did you, at any time during a bank, securities, or othe	g the taxable year,	have any interest in or si	ignature or othe	er author	ty over								
Foreign	Did you, at any time during a bank, securities, or othe facility operated by a U.S If "Yes," attach Form 4683	financial institut	tion)?		inniary f	[	Yes	∏ No						
Fo	If "Yes," attach Form 4683					-	L							