

For the year January 1–December 31, 1982, or other tax year beginning , 1982, ending , 19 . OMB No. 1545–0074

Use IRS label. Otherwise, please print or type. Your first name and initial (if joint return, also give spouse's name and initial) Last name Your social security number Present home address (Number and street, including apartment number, or rural route) Spouse's social security no. City, town or post office, State and ZIP code Your occupation Spouse's occupation

Presidential Election Campaign Do you want \$1 to go to this fund? If joint return, does your spouse want \$1 to go to this fund? Note: Checking "Yes" will not increase your tax or reduce your refund.

Filing Status 1 Single 2 Married filing joint return (even if only one had income) 3 Married filing separate return. Enter spouse's social security no. above and full name here 4 Head of household (with qualifying person). (See page 6 of Instructions.) If the qualifying person is your unmarried child but not your dependent, enter child's name 5 Qualifying widow(er) with dependent child (Year spouse died 19). (See page 6 of Instructions.)

Exemptions 6a Yourself 65 or over Blind 6b Spouse 65 or over Blind 6c First names of your dependent children who lived with you d Other dependents: (1) Name (2) Relationship (3) Number of months lived in your home (4) Did dependent have income of \$1,000 or more? (5) Did you provide more than one-half of dependent's support? e Total number of exemptions claimed

Income 7 Wages, salaries, tips, etc. 8 Interest income (attach Schedule B if over \$400 or you have any All-Savers interest) 9a Dividends (attach Schedule B if over \$400) 9b Exclusion 9c Subtract line 9b from line 9a 10 Refunds of State and local income taxes (do not enter an amount unless you deducted those taxes in an earlier year—see page 9 of Instructions) 11 Alimony received 12 Business income or (loss) (attach Schedule C) 13 Capital gain or (loss) (attach Schedule D) 14 40% capital gain distributions not reported on line 13 (See page 9 of Instructions) 15 Supplemental gains or (losses) (attach Form 4797) 16 Fully taxable pensions, IRA distributions, and annuities not reported on line 17 17a Other pensions and annuities. Total received 17a 17b Taxable amount, if any, from worksheet on page 10 of Instructions 18 Rents, royalties, partnerships, estates, trusts, etc. (attach Schedule E) 19 Farm income or (loss) (attach Schedule F) 20a Unemployment compensation (insurance). Total received 20a 20b Taxable amount, if any, from worksheet on page 10 of Instructions 21 Other income (state nature and source—see page 10 of Instructions) 21 22 Total income. Add amounts in column for lines 7 through 21

Adjustments to Income 23 Moving expense (attach Form 3903 or 3903F) 24 Employee business expenses (attach Form 2106) 25 Payments to an IRA. You must enter code from page 11 (.....) 26 Payments to a Keogh (H.R. 10) retirement plan 27 Penalty on early withdrawal of savings 28 Alimony paid 29 Deduction for a married couple when both work (attach Schedule W) 29 30 Disability income exclusion (attach Form 2440) 30 31 Total adjustments. Add lines 23 through 30.

Adjusted Gross Income 32 Adjusted gross income. Subtract line 31 from line 22. If this line is less than \$10,000, see "Earned Income Credit" (line 62) on page 15 of Instructions. If you want IRS to figure your tax, see page 3 of Instructions.

Tax Computation

(See Instructions on page 12)

33 Amount from line 32 (adjusted gross income)
34a If you itemize, complete Schedule A (Form 1040) and enter the amount from Schedule A, line 30
Caution: If you have unearned income and can be claimed as a dependent on your parent's return, check here
34b If you do not itemize, complete the worksheet on page 13. Then enter the allowable part of your charitable contributions here
35 Subtract line 34a or 34b, whichever applies, from line 33
36 Multiply \$1,000 by the total number of exemptions claimed on Form 1040, line 6e
37 Taxable Income. Subtract line 36 from line 35
38 Tax. Enter tax here and check if from Tax Table, Tax Rate Schedule X, Y, or Z, or Schedule G
39 Additional Taxes. (See page 13 of Instructions.) Enter here and check if from Form 4970, Form 4972, Form 5544, or section 72 penalty taxes
40 Total. Add lines 38 and 39

Credits

(See Instructions on page 13)

41 Credit for the elderly (attach Schedules R&RP)
42 Foreign tax credit (attach Form 1116)
43 Investment credit (attach Form 3468)
44 Partial credit for political contributions
45 Credit for child and dependent care expenses (attach Form 2441)
46 Jobs credit (attach Form 5884)
47 Residential energy credit (attach Form 5695)
48 Other credits—see page 14
49 Total credits. Add lines 41 through 48
50 Balance. Subtract line 49 from line 40 and enter difference (but not less than zero)

Other Taxes

(Including Advance EIC Payments)

51 Self-employment tax (attach Schedule SE)
52 Minimum tax (attach Form 4625)
53 Alternative minimum tax (attach Form 6251)
54 Tax from recapture of investment credit (attach Form 4255)
55 Social security (FICA) tax on tip income not reported to employer (attach Form 4137)
56 Uncollected employee FICA and RRTA tax on tips (from Form W-2)
57 Tax on an IRA (attach Form 5329)
58 Advance earned income credit (EIC) payments received (from Form W-2)
59 Total tax. Add lines 50 through 58

Payments

Attach Forms W-2, W-2G, and W-2P to front.

60 Total Federal income tax withheld
61 1982 estimated tax payments and amount applied from 1981 return
62 Earned income credit. If line 33 is under \$10,000, see page 15 of Instructions
63 Amount paid with Form 4868
64 Excess FICA and RRTA tax withheld (two or more employers)
65 Credit for Federal tax on special fuels and oils (attach Form 4136)
66 Regulated Investment Company credit (attach Form 2439)
67 Total. Add lines 60 through 66

Refund or Amount You Owe

68 If line 67 is larger than line 59, enter amount OVERPAID
69 Amount of line 68 to be REFUNDED TO YOU
70 Amount of line 68 to be applied to your 1983 estimated tax
71 If line 59 is larger than line 67, enter AMOUNT YOU OWE. Attach check or money order for full amount payable to Internal Revenue Service. Write your social security number and "1982 Form 1040" on it. (Check if Form 2210 (2210F) is attached. See page 16 of Instructions.)

Please Sign Here

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Your signature Date Spouse's signature (if filing jointly, BOTH must sign)

Paid Preparer's Use Only

Preparer's signature Date Check if self-employed Preparer's social security no. Firm's name (or yours, if self-employed) and address E.I. No. ZIP code