

Form 1040

1040

US

Department of the Treasury / Internal Revenue Service

Individual Income Tax Return



1970

For the year January 1-December 31, 1970, or other taxable year beginning _____, 1970, ending _____, 19

Please print or type

First name and initial (If joint return, use first names and middle initials of both) Last name Your social security number
Present home address (Number and street or rural route) Spouse's social security number
City, town or post office, State and ZIP code Occu- pation Yours Spouse's

Filing Status—check only one:

- 1 Single; 2 Married filing jointly (even if only one had income)
3 Married filing separately and spouse is also filing. If this item checked give spouse's social security number in space above and enter first name here
4 Unmarried Head of Household
5 Surviving widow(er) with dependent child
6 Married filing separately and spouse is not filing

Exemptions

- 7 Yourself Regular / 65 or over / Blind Enter number of boxes checked
8 Spouse (applies only if item 2 or 6 is checked)
9 First names of your dependent children who lived with you Enter number
10 Number of other dependents (from line 34)
11 Total exemptions claimed

Please attach Copy B of Form W-2 to back

Table with columns for Income (12-18) and Tax and Surcharge (19-21). Includes rows for Wages, Dividends, Interest, and Adjusted gross income.

Please attach Check or Money Order here

Table with columns for Payments and Credits (22-29) and Bal. Due or Refund (30-32). Includes rows for Total credits, Income tax, and Balance due.

Make check or money order payable to Internal Revenue Service.

Sign here

Your signature Date
Spouse's signature (if filing jointly, BOTH must sign even if only one had income)
Signature of preparer other than taxpayer, based on all information of which he has any knowledge. Date
Address 16-81168-1

Foreign Accounts
(check appropriate box)

Did you, at any time during the taxable year, have any interest in or signature or other authority over a bank, securities, or other financial account in a foreign country (except in a U.S. military banking facility operated by a U.S. financial institution)? Yes No.
If "Yes," attach Form 4683. (For definitions, see Form 4683.)

PART I.—Additional Exemptions (Complete only for other dependents claimed on line 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 furnished for dependent's support, if 100% write "ALL"	(f) Amount furnished by OTHERS including dependent.
				\$ _____	\$ _____

34 Total number of dependents listed above. Enter here and on line 10. ▶

PART II.—Income other than Wages, Dividends, and Interest

35 Business income (or loss) (attach Schedule C)	35		
36 Sale or exchange of property (attach Schedule D)	36		
37 Pensions and annuities, rents and royalties, partnerships, estates or trusts, etc. (attach Schedule E)	37		
38 Farm income (or loss) (attach Schedule F)	38		
39 Miscellaneous income (state nature and source)	39		
40 Total (add lines 35, 36, 37, 38, and 39). Enter here and on line 15 ▶	40		

PART III.—Adjustments to Income

41 "Sick pay" if included in line 12 (attach Form 2440 or other required statement)	41		
42 Moving expense (attach Form 3903)	42		
43 Employee business expense (attach Form 2106 or other statement)	43		
44 Payments as a self-employed person to a retirement plan, etc. (attach Form 2950SE)	44		
45 Total adjustments (add lines 41, 42, 43, and 44). Enter here and on line 17 ▶	45		

PART IV.—Tax Computation

46 Adjusted gross income (from line 18)	46		
47 (a) If you itemize deductions, enter total from Schedule A, line 22 (b) If you do not itemize deductions, and line 46 is \$10,000 or more, enter \$1,000 (\$500 if married and filing separately)	47		
48 Subtract line 47 from line 46	48		
49 Multiply total number of exemptions claimed on line 11, by \$625	49		
50 Taxable income. Subtract line 49 from line 48. (Figure your tax on this amount by using Tax Rate Schedule X, Y, or Z unless the alternative tax or income averaging is applicable.) Enter tax on line 51	50		
51 Tax. Enter here and on line 19 ▶	51		

PART V.—Credits

52 Retirement income credit (attach Schedule 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 ▶	55		

PART VI.—Other Taxes

56 Self-employment tax (attach Schedule SE)	56		
57 Tax from recomputing prior-year investment credit (attach Form 4255)	57		
58 Minimum tax. See instructions on page 7. Check here <input type="checkbox"/> , if Form 4625 is attached	58		
59 Social security tax on unreported tip income (attach Form 4137)	59		
60 Uncollected employee social security tax on tips (from Forms W-2)	60		
61 Total (add lines 56, 57, 58, 59, and 60). Enter here and on line 24 ▶	61		

PART VII.—Other Payments

62 Excess F.I.C.A. tax withheld (two or more employers—see instructions on page 7)	62		
63 Credit for Federal tax on gasoline, special fuels, and lubricating oil (attach Form 4136)	63		
64 Regulated Investment Company Credit (attach Form 2439)	64		
65 Total (add lines 62, 63, and 64). Enter here and on line 28 ▶	65		