

For the year January 1-December 31, 1971, or other taxable year beginning 1971, 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, including apartment number, or rural route) Spouse's social security number
City, town or post office, State and ZIP code Occupation 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. 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 Regular / 65 or over / Blind Enter number of boxes checked
7 Yourself
8 Spouse (applies only if item 2 or 6 is checked)
9 First names of your dependent children who lived with you
10 Number of other dependents (from line 33)
11 Total exemptions claimed

Please attach Copy B of Form W-2 to back

Income
12 Wages, salaries, tips, etc. (Attach Forms W-2 to back. If unavailable, attach explanation)
13a Dividends (see pages 6 and 11 of instr.) \$ 13b Less exclusion \$ Balance
14 Interest. [If \$100 or less, enter total without listing in Schedule B]. [If over \$100, enter total and list in Part II of Schedule B]
15 Income other than wages, dividends, and interest (from line 40)
16 Total (add lines 12, 13c, 14 and 15)
17 Adjustments to income (such as "sick pay," moving expense, etc. from line 45)
18 Adjusted gross income (subtract line 17 from line 16)

See page 3 of instructions for rules under which the IRS will figure your tax.
If you do not itemize deductions and line 18 is under \$10,000, find tax in Tables and enter on line 19.
If you itemize deductions or line 18 is \$10,000 or more, go to line 46 to figure tax.

Tax, Payments and Credits
19 Tax (Check if from: Tax Tables 1-13, Tax Rate Sch. X, Y, or Z, Sch. D, Sch. G or Form 4726)
20 Total credits (from line 54)
21 Income tax (subtract line 20 from line 19)
22 Other taxes (from line 60)
23 Total (add lines 21 and 22)
24 Total Federal income tax withheld (attach Forms W-2 or W-2P to back)
25 1971 Estimated tax payments (include 1970 overpayment allowed as a credit)
26 Other payments (from line 64)
27 Total (add lines 24, 25, and 26)

Bal. Due or Refund
28 If line 23 is larger than line 27, enter BALANCE DUE Pay in full with return. Make check or money order payable to Internal Revenue Service
29 If line 27 is larger than line 23, enter OVERPAYMENT
30 Line 29 to be: (a) REFUNDED Allow at least six weeks for your refund check
(b) Credited on 1972 estimated tax

Foreign Accounts
31 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)? If "Yes," attach Form 4683. (For definitions, see Form 4683.) Yes No

Write soc. sec. no. on Check or Money Order. Attach here

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

PART I.—Additional Exemptions (Complete only for other dependents claimed 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 including dependent.
				\$	\$

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

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

34 Business income or (loss) (attach Schedule C)		34	
35 Net gain or (loss) from sale or exchange of capital assets (attach Schedule D)		35	
36 Net gain or (loss) from Supplemental Schedule of Gains and Losses (attach Form 4797)		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			
(a) Fully taxable pensions and annuities <small>not reported on Schedule E—see instructions on page 7</small>			
(b) 50% of capital gain distributions (not reported on Schedule D)			
(c) State income tax refunds (caution—see instructions on page 7)			
(d) Alimony			
(e) Other (state nature and source)			
(f) Total miscellaneous income (add lines 39(a), (b), (c), (d) and (e))		39	
40 Total (add lines 34, 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 (Do not use this part if you use Tax Tables 1-13 to find your tax.)

46 Adjusted gross income (from line 18)		46	
47 (a) If you itemize deductions, enter total from Schedule A, line 32 and attach Schedule A (b) If you do not itemize deductions, and line 46 is: (1) \$10,000 or more but less than \$11,538.43, enter 13% of line 46 (2) \$11,538.43 or more, enter \$1,500. Note: deduction under (1) or (2) is limited to \$750 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 \$675		49	
50 Taxable income. Subtract line 49 from line 48 ▶		50	

(Figure your tax on the amount on line 50 by using Tax Rate Schedule X, Y or Z, or if applicable, the alternative tax from Schedule D, income averaging from Schedule G, or maximum tax from Form 4726.) Enter tax on line 19.

PART V.—Credits

51 Retirement income credit (attach Schedule R)		51	
52 Investment credit (attach Form 3468)		52	
53 Foreign tax credit (attach Form 1116)		53	
54 Total credits (add lines 51, 52, and 53). Enter here and on line 20 ▶		54	

PART VI.—Other Taxes

55 Self-employment tax (attach Schedule SE)		55	
56 Tax from recomputing prior-year investment credit (attach Form 4255)		56	
57 Minimum tax (see instructions on page 8). Check here <input type="checkbox"/> , if Form 4625 is attached		57	
58 Social security tax on unreported tip income (attach Form 4137)		58	
59 Uncollected employee social security tax on tips (from Forms W-2)		59	
60 Total (add lines 55, 56, 57, 58, and 59). Enter here and on line 22 ▶		60	

PART VII.—Other Payments

61 Excess FICA tax withheld (two or more employers—see instructions on page 8)		61	
62 Credit for Federal tax on special fuels, nonhighway gasoline and lubricating oil (attach Form 4136)		62	
63 Regulated Investment Company Credit (attach Form 2439)		63	
64 Total (add lines 61, 62, and 63). Enter here and on line 26 ▶		64	