

Label
(See page 19.)

Use the IRS label.
Otherwise, please print or type.

L A B E L H E R E	Your first name and initial	Last name
	If a joint return, spouse's first name and initial	Last name
	Home address (number and street). If you have a P.O. box, see page 19.	Apt. no.
	City, town or post office, state, and ZIP code. If you have a foreign address, see page 19.	

OMB No. 1545-0085

Your social security number

Spouse's social security number

For Privacy Act and Paperwork Reduction Act Notice, see page 11.

Presidential Election Campaign Fund (See page 19.)

Do you want \$3 to go to this fund?
If a joint return, does your spouse want \$3 to go to this fund?

Yes	No

Note: Checking "Yes" will not change your tax or reduce your refund.

Check the box for your filing status

(See page 20.)
Check only one box.

- 1 Single
- 2 Married filing joint return (even if only one had income)
- 3 Married filing separate return. Enter spouse's social security number above and full name here. ▶ _____
- 4 Head of household (with qualifying person). (See page 21.) If the qualifying person is a child but not your dependent, enter this child's name here. ▶ _____
- 5 Qualifying widow(er) with dependent child (year spouse died ▶ 19 ____). (See page 22.)

Figure your exemptions

(See page 22.)

If more than seven dependents, see page 25.

6a Yourself. If your parent (or someone else) can claim you as a dependent on his or her tax return, **do not** check box 6a. But be sure to check the box on line 18b on page 2.

b Spouse

(1) First name		Last name	(2) Dependent's social security number. If born in 1995, see page 25.	(3) Dependent's relationship to you	(4) No. of months lived in your home in 1995

d If your child didn't live with you but is claimed as your dependent under a pre-1985 agreement, check here ▶

e Total number of exemptions claimed. Add numbers entered on lines above

Figure your adjusted gross income

Attach Copy B of your Forms W-2 and 1099-R here. If you didn't get a W-2, see page 27. Enclose, but do not attach, any payment.

7	Wages, salaries, tips, etc. This should be shown in box 1 of your W-2 form(s). Attach Form(s) W-2.	7
8a	Taxable interest income (see page 28). If over \$400, attach Schedule 1.	8a
b	Tax-exempt interest. DO NOT include on line 8a.	8b
9	Dividends. If over \$400, attach Schedule 1.	9
10a	Total IRA distributions.	10a
10b	Taxable amount (see page 29).	10b
11a	Total pensions and annuities.	11a
11b	Taxable amount (see page 29).	11b
12	Unemployment compensation (see page 32).	12
13a	Social security benefits.	13a
13b	Taxable amount (see page 33).	13b
14	Add lines 7 through 13b (far right column). This is your total income .	14
15a	Your IRA deduction (see page 35).	15a
b	Spouse's IRA deduction (see page 35).	15b
c	Add lines 15a and 15b. These are your total adjustments .	15c
16	Subtract line 15c from line 14. This is your adjusted gross income . If less than \$26,673 and a child lived with you (less than \$9,230 if a child didn't live with you), see "Earned income credit" on page 47.	16



Figure your standard deduction, exemption amount, and taxable income

17	Enter the amount from line 16.	17	
18a	Check if: <input type="checkbox"/> You were 65 or older <input type="checkbox"/> Blind <input type="checkbox"/> Spouse was 65 or older <input type="checkbox"/> Blind } Enter number of boxes checked ▶	18a	<input type="checkbox"/>
b	If your parent (or someone else) can claim you as a dependent, check here. ▶	18b	<input type="checkbox"/>
c	If you are married filing separately and your spouse itemizes deductions, see page 40 and check here. ▶	18c	<input type="checkbox"/>
19	Enter the standard deduction shown below for your filing status. But if you checked any box on line 18a or b , go to page 40 to find your standard deduction. If you checked box 18c , enter -0-.		
	• Single—\$3,900 • Married filing jointly or Qualifying widow(er)—\$6,550		
	• Head of household—\$5,750 • Married filing separately—\$3,275	19	
20	Subtract line 19 from line 17. If line 19 is more than line 17, enter -0-.	20	
21	Multiply \$2,500 by the total number of exemptions claimed on line 6e.	21	
22	Subtract line 21 from line 20. If line 21 is more than line 20, enter -0-. This is your taxable income . ▶	22	

Figure your tax, credits, and payments

If you want the IRS to figure your tax, see the instructions for line 22 on page 41.

23	Find the tax on the amount on line 22. Check if from: <input type="checkbox"/> Tax Table (pages 65–70) or <input type="checkbox"/> Form 8615 (see page 42).	23	
24a	Credit for child and dependent care expenses. Attach Schedule 2.	24a	
b	Credit for the elderly or the disabled. Attach Schedule 3.	24b	
c	Add lines 24a and 24b. These are your total credits .	24c	
25	Subtract line 24c from line 23. If line 24c is more than line 23, enter -0-.	25	
26	Advance earned income credit payments from Form W-2.	26	
27	Household employment taxes. Attach Schedule H.	27	
28	Add lines 25, 26, and 27. This is your total tax . ▶	28	
29a	Total Federal income tax withheld. If any is from Form(s) 1099, check here. ▶ <input type="checkbox"/>	29a	
b	1995 estimated tax payments and amount applied from 1994 return.	29b	
c	Earned income credit. Attach Schedule EIC if you have a qualifying child. Nontaxable earned income: amount ▶ and type ▶	29c	
d	Add lines 29a, 29b, and 29c (don't include nontaxable earned income). These are your total payments . ▶	29d	

Figure your refund or amount you owe

30	If line 29d is more than line 28, subtract line 28 from line 29d. This is the amount you overpaid .	30	
31	Amount of line 30 you want refunded to you .	31	
32	Amount of line 30 you want applied to your 1996 estimated tax .	32	
33	If line 28 is more than line 29d, subtract line 29d from line 28. This is the amount you owe . For details on how to pay, including what to write on your payment, see page 55.	33	
34	Estimated tax penalty (see page 55). Also, include on line 33.	34	

Sign your return

Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and accurately list all amounts and sources of income I received during the tax year. Declaration of preparer (other than the taxpayer) is based on all information of which the preparer has any knowledge.

Keep a copy of this return for your records.	Your signature	Date	Your occupation	
	Spouse's signature. If joint return, BOTH must sign.	Date	Spouse's occupation	
Paid preparer's use only	Preparer's signature	Date	Check if self-employed <input type="checkbox"/>	Preparer's SSN
	Firm's name (or yours if self-employed) and address	EIN		ZIP code
		ZIP code		

