1045 Form

Than Taxpayer

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Application for Tentative Refund

▶ Before you fill in this form, read the separate instructions.

OMB No. 1545-0098

1999

► Do not attach to your income tax return—mail in a separate envelope.

Department of the Treasury Internal Revenue Service For use by individuals, estates, or trusts.										
	I Revenue Service	of spouse if filing jointly)	For use by II	naiviauais, esta	tes, or trusts.	Social secu	rity or om	nlover ide	entification number	
print	Name (and name	or spouse in ming jointry)						pioyer luc		
Please type or							social security number (SSN)			
e typ										
ease	City, town or post office, state, and ZIP code. If you have a foreign address, see page 2 of the instructions.						Telephone number (optional)			
⊒						()				
1	This application	n is filed to carry back:	Net operating los	ss (from Schedule	A, page 2, line 27)	b Unused \$	general k	Jusiness o	credit	
1 2a		year 1999, or other tax year	Φ			▶ b Date tax	x return w	as filed		
	beginning	, 1999, ending	ı							
3	If this applica	tion is for an unused crea	dit created by a	another carryb	ack, enter yea	r of the first ca	arrybac	k ▶		
4	If you filed a	joint return (or separate r	eturn) for some	e, but not all, c	of the tax years	s involved in fi	guring	the carr	yback, list the	
		ecify whether joint (J) or s								
5		yback year is different from								
6		d your accounting period	• ·							
7 8		d a petition in Tax Court f the decrease in tax due								
9		rying back a net operating								
	of other credi	ts due to the release of t	he foreign tax	credit? See pa	ge 2 of the ins	structions		<u> [</u>	Yes 🗌 No	
	Computatio	on of Decrease in Tax	tax year ended		tax year ended		tax ve	_ precedin ar ended		
		the instructions.	Before	After	Before	After	Bet	fore	After	
		lank, skip lines 10 through 16.	carryback	carryback	carryback	carryback	carry	/back	carryback	
10		s income								
11		loss deduction after page 2 of the instructions								
12	•	11 from line 10		1						
13		page 3 of the instructions								
14		13 from line 12								
15	Exemptions. See	e page 3 of the instructions								
16	Taxable incom	ne. Line 14 minus line 15								
17		See page 3 of the								
10		nd attach an explanation ness credit. See page 3							<u> </u>	
18	of the instruct									
19	Other credits.									
20	Total credits.	Add lines 18 and 19 .								
21		20 from line 17								
22		kes								
23 24	Alternative mi									
24 25		ent tax								
26		l lines 21 through 25								
27		nount from the "After								
-		olumn on line 26 for								
20	each year .									
28		ix. Line 26 minus line 27	 				<u> </u>			
29 30		of tax due to a claim of esearch credit allowed for					•	· ·		
Sig	•	penalties of perjury, I declare	•						to the best of my	
Hei		edge and belief, they are true, c			. ,				5	
	a copy of	our signature						Date		
this a	pplication	nousola cignatura /if E 1045	is filed isintly. DO	[H must size-)				Dat-		
101 90	Sin records.	pouse's signature (if Form 1045	is nied jointly, BO	i h must sign)				Date		
Pren	arer Other	lame 🕨						Date		

For Privacy Act and Paperwork Reduction Act Notice, see page 5 of the instructions.

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Schedule A—Net Operating Loss (NOL). See page 4 of the instructions.

1	Adjusted gross income from your 1999 Form 1040, line 34. Estates and trusts, skip lines 1 and 2	1
2	Deductions (individuals only):	
а	Enter the amount from your 1999 Form 1040, line 36	
b	Enter your deduction for exemptions from your 1999 Form 1040, line 38 . 2b	
	Add lines 2a and 2b	2c ()
3	Combine lines 1 and 2c. Estates and trusts, enter taxable income increased by the sum of the charitable deduction and income distribution deduction	3
	Note: If line 3 is zero or more, do not complete the rest of the schedule. You do not have an NOL.	
4	Deduction for exemptions from line 2b above. Estates and trusts, enter the exemption amount from tax return	4
5	Total nonbusiness capital losses before limitation. Enter as a positive number. 5	
6	Total nonbusiness capital gains (without regard to any section 1202 exclusion) 6	
7	If line 5 is more than line 6, enter the difference; otherwise, enter -0 7	
8	If line 6 is more than line 5, enter the difference;	
_	otherwise, enter -0	
9		
10	Nonbusiness income other than capital gains. See page 4 of the instructions	
11	Add lines 8 and 10	
12	If line 9 is more than line 11, enter the difference; otherwise, enter -0	12
13	If line 11 is more than line 9, enter the difference;	
	otherwise, enter -0 But do not enter more 13	
1 /	than line 8 1 13 Total business capital losses before limitation. Enter as a positive number 14	
14 15	Total business capital gains (without regard to	
15	any section 1202 exclusion)	
16	Add lines 13 and 15	
17	If line 14 is more than line 16, enter the difference; otherwise, enter -0 17	
	10	
18	Add lines 7 and 17	
19	Enter the loss, if any, from line 17 of Schedule D (Form 1040). (Estates and	
	trusts, enter the loss, if any, from line 16, column (3), of Schedule D (Form 1041).) Enter as a positive number. If you do not have a loss on that line	
	(and do not have a section 1202 exclusion), skip lines 19 through 24 and	
	enter on line 25 the amount from line 18	
20	Section 1202 exclusion. Enter as a positive number	20
21	Subtract line 20 from line 19. If zero or less, enter -0	
22	Enter the loss, if any, from line 18 of Schedule D (Form 1040). (Estates and	
	trusts, enter the loss, if any, from line 17 of Schedule D (Form 1041).) Enter as a positive number	
23	If line 21 is more than line 22, enter the difference; otherwise, enter -0-	
24	If line 22 is more than line 21, enter the difference; otherwise, enter -0	24
25	Subtract line 23 from line 18. If zero or less, enter -0	25
26	Net operating loss deduction for losses from other years. Enter as a positive number	26
27	Net operating loss. Combine lines 3, 4, 12, 20, 24, 25, and 26. If the result is less than zero, enter it here and on page 1, line 1a. If the result is zero or more, you do not have a net operating loss	27

Schedule B-Net Operating Loss Carryover. See the instructions beginning on page 4.

Complete one column before going to the next column. Start with the earliest		preceding		preceding		preceding	
carryback year.		tax year ende	d 🕨	tax year ended		tax year ende	d 🅨
1	Net operating loss deduction. See page 4 of the instructions						
2	Taxable income before 1999 NOL carryback. Estates and trusts, increase this amount by the sum of the charitable deduction and income distribution deduction. See page 4 of the instructions						
3	Net capital loss deduction. See page 4 of the instructions						
4	Section 1202 exclusion. Enter as a positive number						
5	Adjustments to adjusted gross income. See page 4 of the instructions						
6	Adjustment to itemized deductions. See page 4 of the instructions						
7	Deduction for exemptions. Estates and trusts, enter exemption amount						
8	Modified taxable income. Combine lines 2 through 7. If zero or less, enter -0-						
9	Net operating loss carryover. Subtract line 8 from line 1. If zero or less, enter -0 See page 5 of the instructions						,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	Adjustment to Itemized Deductions (Individuals Only)						
	Complete lines 10 through 34 for the carryback year(s) for which you itemized deductions ONLY if line 3 or line 4 above is more than zero.						
10	Adjusted gross income before 1999 NOL carryback						
11	Add lines 3 through 5 above						
12	Modified adjusted gross income. Add lines 10 and 11						
13	Medical expenses from Sch. A (Form 1040), line 4 (or as previously adjusted)						
14	Medical expenses from Sch. A (Form 1040), line 1 (line 2 for 1989) (or as previously adjusted)						
15 16	Multiply line 12 by 7.5% (.075) Subtract line 15 from line 14. If zero						
<u>17</u>	or less, enter -0						

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Schedule B-Net Operating Loss Carryover (Continued)

Complete one column before going to the next column. Start with the earliest carryback year.		preceding tax year ended ►		preceding tax year ended ►		preceding tax year ended ►	
18	Modified adjusted gross income from line 12 on page 3.						
19	Enter as a positive number any NOL carryback from a year before 1999 that was deducted in figuring line 10 on page 3						
20	Add lines 18 and 19						
21	Charitable contributions from Sch. A (Form 1040), line 18 (line 17 for 1989-90, line 16 for 1991-93) (or as proviously adjusted)						
22	previously adjusted)						
23 24	Subtract line 22 from line 21 Casualty and theft losses from Form 4684, line 18 (or as previously						
25	adjusted) Casualty and theft losses from Form 4684, line 16 (or as previously adjusted)						
26 27	Multiply line 18 by 10% (.10) Subtract line 26 from line 25. If zero or less, enter -0						
28 29	Subtract line 27 from line 24 Miscellaneous itemized deductions						
27	from Sch. A (Form 1040), line 26 (line 24 for 1989 and 1991-93, line 25 for 1990) (or as previously adjusted).						
30	Miscellaneous itemized deductions from Sch. A (Form 1040), line 23 (line 22 for 1989-90, line 21 for 1991-93)						
31 32	(or as previously adjusted) Multiply line 18 by 2% (.02) Subtract line 31 from line 30. If zero						
33 34	or less, enter -0						//////////////////////////////////////
	the instructions if line 18 is more than the applicable amount shown below (more than one-half that amount if married filing congratuly for that year)						
	 married filing separately for that year). \$100,000 for 1991. \$105,250 for 1992. 						
	 \$108,450 for 1993. \$111,800 for 1994. \$114,700 for 1995. 						
	\$117,950 for 1996.\$121,200 for 1997.						
	• \$124,500 for 1998. Otherwise, combine lines 17, 23, 28, and 33; enter the result here and on line 6 (page 3)						

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