General Description Booklet for the

1991 INDIVIDUAL PUBLIC USE TAX FILE

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INTRODUCTION

The Internal Revenue Service 1991 Public Use Tax File, which contains 115,594, was selected as part of the Statistics of Income program that was designed to tabulate and present statistical information for the 114.7 million Form 1040, Form 1040A, and Form 1040EZ Federal Individual Income Tax Returns filed for Tax Year 1991.

The Tax Files which have been produced since 1960, consist of detailed information taken from actual tax returns. The public use versions of these sample files are sold in an unidentifiable form, with names, Social Security Numbers (SSN), and other identifying information omitted. The primary uses made of these files have been to simulate the administrative and revenue impact of tax law changes, as well as to provide general statistical tabulations relating to sources of income and taxes paid by individuals.

The Individual Tax File is designed for making national level estimates. The 1991 Tax File can be purchased through the Internal Revenue Service, Statistics of Income. Any questions concerning the cost and acquisition of the current Individual Tax File should be directed to:

Daniel F. Skelly, Acting Director Statistics of Income CP:S Internal Revenue Service P.O. BOX 2608 Washington, DC 20013-2608 (202) 874-0700 (202) 874-0922 (FAX)

Individual Tax Files for each of the Tax Years 1960, 1962, and 1966 through 1978 are available through the National Archives and Records Administration. Questions concerning cost, acquisition, and delivery of these historical tax files, should be addressed to:

Reference Services Center for Electronic Records, (NSXA) National Archives and Records Administration 8601 Adelphi Road College Park, MD 20740-6001 (301) 713-6630

The Archives order number for any of the above-mentioned historical Tax Model Files is 374-109-(A). In addition to the order number, the requester should also specify the tax year and version (Individual or State) of the file under consideration.

Please refer to the sections of this booklet titled "Individual Tax File Sample Description" for a more detailed discussion of the Tax File.

DISCLOSURE AVOIDANCE PROCEDURES

In order to preserve the character of the microdata file while also protecting the identity of individuals, we have incorporated the following procedural changes in the Individual Tax File.

First, in order to make sure that it will be impossible to ascertain whether a given taxpayer is represented in the sample, we have subsampled our 100 percent sample $^{1\prime}$ at a 33 percent rate.

Second, those records that remain in our file from the 100 percent sample have been combined with other high income returns for the following processing changes:

As in past years, the State codes and all other geographic indicators have been removed for all high income records. Other codes and fields that have been removed for these returns include: age and blindness indicators for both primary and secondary taxpayers; alimony paid, alimony received, and personal property tax. Also, certain codes (age status, marital status, and exemptions for children living at home) have been modified (see section on Code Definitions for specific changes).

Then, all of the high income returns have been sorted from largest to smallest for the field "State and local income taxes deductions". In this field, for every three records, in descending order, the <u>average</u> State and local income taxes deduction has been determined and that value has been placed in the State and local income tax deduction field for each of the three records. This has been done over that part of the sample containing non-zero values in these fields. If the last group of records contains fewer than three, these records have been combined with the group of three immediately before it. This method of disguising data is called "blurring".

PReturns sampled at 100 percent include those with total income or loss of \$5,000,000 or more; those with business plus farm receipts of \$50,000,000 or more; those with foreign earned income and total income of \$2,000,000 or more or total loss of \$250,000 or more; and nontaxable returns with adjusted gross incomes or expanded incomes of \$200,000 or more.

High income returns have then been separated into 35 different classes based on age, marital status, the number of children living at home, and the size of salaries and wages. Within each of these 35 classes, returns have been sorted on salaries and wages. This field has then been blurred over consecutive records as described above for State and local income tax deductions. However, records have only been averaged with other records in the same class. Therefore, records within one of the 35 classes have not been averaged with records in any of the other 34 classes. The file was then sorted on real estate tax deductions (again, within the 35 classes), and the same blurring procedure has been repeated for real estate tax deductions.

Third, all lower income returns (records with an adjusted gross income of less than \$200,000 and not from our 100 percent sample) have been blurred, nationally, for alimony paid and alimony received. Then, all lower income returns were sorted by State. After this sort, the records were blurred for real estate tax deductions, and State and local income taxes deduction (State of Wisconsin, only, for this last item) in the same manner as described above. The only difference between the processing of these records and that of the high income returns is that the lower income returns have been sorted for real estate tax deduction by individual state with no records from two different States being combined when averaging a field over a series of records.

Fourth, for all records on the file, the following changes have been made:

The fields containing other net income or loss, total adjustments, foreign housing adjustment, total taxes paid, personal property tax, industry code, primary social security number, and secondary social security number have been deleted and marked as "reserved." Also, all fields on the file have been rounded to the four most significant digits (e.g. \$14,371 = \$14,370 and \$228,867 = \$228,900).

The following table shows the number of returns in the sample for each State, as well as the number not State-coded for disclosure reasons as described above.

For greater details on this and other disclosure protection techniques used by the Statistics of Income, see: Strudler, Michael; Oh, H. Lock; and Scheuren, Fritz. "Protection of Taxpayer Confidentiality on the IRS Tax Model." Statistics of Income and Related Administrative Record Research: 1986, Internal Revenue Service.

1991 INDIVIDUAL PUBLIC USE TAX FILE SAMPLE

STATE:	NUMBER OF RECORDS	WEIGHTED TOTAL
ALABAMA ALASKA ARIZONA	945 261 1,015	1,773,941 281,706 1,584,636
ARKANSAS CALIFORNIA COLORADO CONNETICUT	548 10,234 1,122 1,073	947,012 13,915,575 1,672,088 1,631,596
DELAWARE DISTRICT OF COLUMBIA FLORIDA GEORGIA	196 200 3,780 1,652	329,609 340,799 5,972,219 2,869,258
HAWAII IDAHO ILLINOIS INDIANA	348 305 3,170 1,303	568,613 424,342 5,290,597 2,503,225 1,485,401
IOWA KANSAS KENTUCKY LOUISIANA	916 701 857 989	1,463,401 1,068,191 1,635,636 1,677,442 566,970
MAINE MARYLAND MASSACHUSETTS MICHIGAN	304 1,422 1,702 2,185 1,303	2,451,323 2,683,867 4,203,150 2,123,298
MINNESOTA MISSISSIPPI MISSOURI MONTANA	516 1,325 244 478	917,124 2,302,844 334,011 683,082
NEBRASKA NEVADA NEW HAMPSHIRE NEW JERSEY	410 337 2,303 430	613,039 567,764 3,701,172 717,143
NEW MEXICO NEW YORK NORTH CAROLINA NORTH DAKOTA	4,744 1,639 214 2,557	7,560,637 3,069,173 268,466 5,023,518
OHIO OKLAHOMA OREGON PENNSYLVANIA	2,337 816 860 3,068 261	1,251,603 1,329,033 5,481,217 456,746
RHODE ISLAND SOUTH CAROLINA SOUTH DAKCTA TENNESSEE	816 242 1,219	1,635,737 341,826 2,247,307

TEXAS UTAH VERMONT VIRGINIA WASHINGTON WEST VIRGINIA WISCONSIN WYOMING APO/FPO PUERTO RICO OTHER THAN ABOVE HIGH INCOME*	4,984 402 179 1,657 1,588 348 1,244 142 795 24 5,658 39,563	7,500,437 653,448 269,645 2,797,081 2,310,089 694,764 2,311,571 245,355 310,025 78,002 203,870 861,875
TOTAL	115,594	114,738,297

^{*}These returns do not include the State code.

Since individual records in this file may or may not contain data from just one tax return--and, in any case, never contain the full item content of any one tax return--we request that researchers make these facts clear in publishing their findings. In particular, they should refrain from using any language that would imply that they had access to individual taxpayers' records.

1991 INDIVIDUAL PUBLIC USE TAX FILE CORE RECORD LAYOUT (CODE AND AMOUNT FIELD DEFINITIONS)

Codes: (all codes are 2 characters in length - PIC 99)

(For footnotes see page 9)

- 21. F2555 1. AGEX 22. SCHCF 2. AGIR1 23. SCHE 3. CGIND 4. RESERVED** 24. F8606 5. CYCLE 25. SPECTX 5. CYCLE 25. SPECTX
 6. DSI 26. STATE 1/2
 7. EIC 27. TFORM
 8. ELECT 28. TOTXSZ
 9. FDED 29. TXNT
 10. FLPDYR 30. TXRT
 11. FLPDMO 31. TXST
 12. EFI 32. SCHB
 13. F2441 33. XFPT 1/2
 14. F8582 34. XFST 1/2
 15. F6251 35. XOCAH
 16. F3800 36. XOCAWH
 17. MARS 37. XOODEP
 18. PREP* 38. XOPAR
 19. PSV* 39. XBI
 20. REGION 1/2 40. XTOT
- *Indicates change from 1990 specifications.

20. REGION 1/ 40. XTOT

**CSAMP was moved to the end of the file because it is a larger code than in previous years.

Amount Fields: (all amount fields are 10 characters in length -PIC S9(10))

- ADJUSTED GROSS INCOME (DEFICIT) (AGI) (+/-)
- SALARIES AND WAGES 2/
- TAXABLE INTEREST INCOME
- TAX-EXEMPT INTEREST INCOME
- DIVIDENDS INCLUDED IN AGI
- STATE INCOME TAX REFUNDS 6.
- ALIMONY RECEIVED 3/
- BUSINESS OR PROFESSION (SCHEDULE C) NET PROFIT/LOSS (+/-)
- NET CAPITAL GAIN OR LOSS (+/-)
- 10. CAPITAL GAIN DISTRIBUTIONS NOT REPORTED ON SCHEDULE D
- 11. SUPPLEMENTAL SCHEDULE NET GAIN OR LOSS (+/-)
- 12. TAXABLE IRA DISTRIBUTION
- 13. TOTAL PENSIONS AND ANNUITIES RECEIVED
- 14. PENSIONS AND ANNUITIES INCLUDED IN AGI
- 15. SCHEDULE E NET INCOME OR LOSS (+/-)
- 16. FARM (SCHEDULE F) NET PROFIT/LOSS (+/-)

- 17. UNEMPLOYMENT COMPENSATION IN AGI
- 18. GROSS SOCIAL SECURITY BENEFITS
- 19. SOCIAL SECURITY BENEFITS IN AGI
- 20. RESERVED

STATUTORY ADJUSTMENTS

- 21. RESERVED
- 22. ONE-HALF OF SELF EMPLOYMENT TAX*
- 23. PAYMENTS TO INDIVIDUAL RETIREMENT ACCOUNT (IRA) (PRIMARY)
- 24. PAYMENTS TO INDIVIDUAL RETIREMENT ACCOUNT (IRA) (SECONDARY)
- 25. PAYMENTS TO KEOGH ACCOUNTS
- 26. FORFEITED INTEREST PENALTY
- 27. ALIMONY PAID $\frac{3}{2}$
- 28. SE HEALTH INSURANCE DEDUCTION
- 29. RESERVED
- 30. STANDARD DEDUCTION OR
 ITEMIZED DEDUCTIONS
 ITEMIZED DEDUCTIONS (TAXPAYER)
- 31. EXEMPTION AMOUNT
- 32. TAXABLE INCOME
- 33. COMPUTED INCOME TAX
- 34. INCOME TAX BEFORE CREDITS
- 35. INCOME SUBJECT TO TAX
- 36. MARGINAL TAX BASE
- 37. TAX GENERATED (TAX RATE TABLES)

CREDITS

- 38. TOTAL TAX CREDITS (SOI)
- 39. CHILD AND DEPENDENT CARE
- 40. ELDERLY AND DISABLED
- 41. FOREIGN TAX
- 42. GENERAL BUSINESS CREDIT
- 43. INVESTMENT (INCLUDED IN GENERAL BUSINESS CREDIT)
- 44. JOBS (INCLUDED IN GENERAL BUSINESS CREDIT) CREDIT
- 45. ALCOHOL USED AS FUEL (INCLUDED IN GENERAL BUSINESS CREDIT)
- 46. RESEARCH AND EXPERIMENTATION (INCLUDED IN GENERAL BUSINESS CREDIT)
- 47. LOW INCOME HOUSING (INCLUDED IN GENERAL BUSINESS CREDIT)
- 48. OTHER CREDIT
- 40. CREDIT FOR PRIOR YEAR MINIMUM TAX

- 50. TOTAL INCOME TAX
- 51. INCOME TAX AFTER CREDITS (SOI)
- 52. ALTERNATIVE MINIMUM TAX (SOI)
- 53. SELF-EMPLOYMENT TAX
- 54. RECAPTURE TAXES, INCLUDES FORM 4255, RECAPTURE INVESTMENT CREDIT AND FORM 8611, RECAPTURE OF LOW INCOME HOUSING CREDIT
- 55. SOCIAL SECURITY TAX ON TIP INCOME
- 56. PENALTY TAX ON IRA
- 57. TOTAL TAX LIABILITY (SOI)
- 58. INCOME TAX WITHHELD
- 59. ESTIMATED TAX PAYMENTS
- 60. AMOUNT PAID WITH FORM 4868
- 61. EXCESS FICA/RRTA
- 62. CREDIT FOR FEDERAL TAX ON SPECIAL FUELS AND OILS
- 63. REGULATED INVESTMENT COMPANY CREDIT
- 64. TOTAL TAX PAYMENTS (SOI)
- 65. BALANCE DUE (OVERPAYMENT) (+/-)
- 66. CREDIT ELECT
- 67. PREDETERMINED ESTIMATED TAX PENALTY
- 68. EARNED INCOME FOR EARNED INCOME CREDIT (EIC)
- 69. EIC USED TO OFFSET INCOME TAX BEFORE CREDITS
- 70. EIC USED TO OFFSET ALL OTHER TAXES EXCEPT ADVANCE EIC
- 71. EIC REFUNDABLE PORTION

ITEMIZED DEDUCTIONS SCHEDULE A:

MEDICAL AND DENTAL EXPENSE DEDUCTIONS

- 72. TOTAL DEDUCTION
- 73. ITEMIZED DEDUCTION LIMITATION
- 74. MEDICAL AND DENTAL EXPENSES SUBJECT TO REDUCTION BY AGI LIMIT

TAXES PAID DEDUCTIONS

- 75. RESERVED
- 76. STATE AND LOCAL INCOME TAXES 21
- 77. REAL ESTATE TAX DEDUCTIONS $\frac{4}{}$
- 78. RESERVED

INTEREST PAID DEDUCTIONS

- 79. TOTAL INTEREST PAID DEDUCTION
- 80. TOTAL HOME MORTGAGE
- 81. HOME MORTGAGE FINANCIAL
- 82. DEDUCTIBLE POINTS
- 83. INVESTMENT INTEREST PAID
- 84. PERSONAL INTEREST PAID

- 85. CONTRIBUTIONS DEDUCTION, TOTAL
- 86. CARRYOVER
- 87. NON-LIMITED MISCELLANEOUS DEDUCTIONS
- 88. OTHER THAN CASH
- 89. CASH CONTRIBUTIONS
- 90. NET CASUALTY OR THEFT LOSS
- 91. MOVING EXPENSES

MISCELLANEOUS DEDUCTIONS (SUBJECT TO 2% LIMITATION)

- 92. NET LIMITED MISCELLANEOUS DEDUCTIONS
- 93. UNREIMBURSED EMPLOYEE BUSINESS EXPENSE
- 94. TAX PREPARATION FEE
- 95. MISCELLANEOUS DEDUCTIONS SUBJECT TO AGI LIMITATION, TOTAL

COMBINED SCHEDULE C INCOME AND SOME DEDUCTION ITEMS

- 96. TOTAL INCOME OR LOSS (+/-)
- 97. NET RECEIPTS (+/-)
- 98. COST OF GOODS SOLD AND/OR OPERATIONS
- 99. TOTAL DEDUCTIONS
- 100. CAR AND TRUCK
- 101. DEPRECIATION
- 102. COMMISSIONS
- 103. MORTGAGE INTEREST
- 104. OTHER INTEREST
- 105. OFFICE EXPENSES
- 106. INSURANCE
- 107. RENT
- 108. NET WAGES
- 109. BUSINESS RECEIPTS (+/-)
- 110. RESERVED

CAPITAL GAINS (SCHEDULE D)

- 111. SHORT-TERM GAINS
- 112. SHORT-TERM LOSSES
- 113. SHORT-TERM LOSS CARRYOVER
- 114. RESIDENCE GAIN
- 115. CURRENT LONG-TERM GAIN
- 116. CURRENT LONG-TERM LOSSES
- 117. LONG-TERM LOSS CARRYOVER
- 118. SCHEDULE D CAPITAL GAIN DISTRIBUTIONS
- 119. FORM 4797 GAINS

SUPPLEMENTAL INCOME (SCHEDULE E) RENT AND ROYALTIES

- 120. RENT/ROYALTY NET INCOME
- 121. RENT/ROYALTY NET LOSS
- 122. FARM RENT NET INCOME OR LOSS (+/-)
- 123. TOTAL RENTS RECEIVED
- 124. TOTAL ROYALTIES RECEIVED
- 125. ROYALTY DEPLETION
- 126. RENTAL DEPRECIATION
- 127. DEDUCTIBLE RENTAL LOSS
- 128. RENT NET INCOME OR LOSS (+/-)
- 129. ROYALTY NET INCOME OR LOSS (+/-)

PARTNERSHIPS

- 130. TOTAL PASSIVE INCOME
- 131. TOTAL NON-PASSIVE INCOME
- 132. TOTAL PASSIVE LOSS
- 133. TOTAL NON-PASSIVE LOSS

SMALL BUSINESS CORPORATION

- 134. TOTAL PASSIVE INCOME
- 135. TOTAL NON-PASSIVE INCOME
- 136. TOTAL PASSIVE LOSS
- 137. TOTAL NON-PASSIVE LOSS
- 138. COMBINED PARTNERSHIP AND S CORPORATION NET INCOME/LOSS (+/-)

ESTATE OR TRUST

- 139. TOTAL INCOME
- 140. TOTAL LOSS

SELF EMPLOYMENT INCOME (SCHEDULE SE)

- 141. TOTAL SELF-EMPLOYMENT INCOME
- 142. SELF-EMPLOYMENT INCOME, SECONDARY TAXPAYER

MINIMUM TAX CREDIT (FORM 8801)

- 143. CARRY FORWARD MINIMUM TAX CREDIT FROM 1989
- 144. CARRY FORWARD OF MINIMUM TAX CREDIT TO 1991

CHILD CARE CREDIT (FORM 2441)

- 145. QUALIFYING INDIVIDUALS' LIMITATION
- 146. EARNED INCOME
- 147. EARNED INCOME LIMITATION

ALTERNATIVE MINIMUM TAX COMPUTATION (FORM 6251)

- 148. TAXABLE INCOME PLUS NET OPERATING LOSS
- 149. ALTERNATIVE MINIMUM TAX TOTAL ADJUSTMENTS
- 150. TOTAL TAX PREFERENCES
- 151. ACCELERATED DEPRECIATION ON REAL PROPERTY

PASSIVE ACTIVITY LOSS LIMITATION (FORM 8582)

- 152. TOTAL PASSIVE LOSSES
- 153. TOTAL LOSSES ALLOWED FROM ALL PASSIVE ACTIVITIES FOR 1989
- 154. RETURN ID
- 155. RESERVED
- 156. RESERVED
- 157. DECIMAL WEIGHT
- 158. RESERVED
- 159. SAMPLE COUNT
- 160. POPULATION COUNT
- 161. RENT/ROYALTY EXPENSES MORTGAGE INTEREST FINANCIAL, SCHEDULE E
- 162. RENT/ROYALTY EXPENSES OTHER INTEREST, SCHEDULE E
- 163. DISALLOWED INVESTMENT INTEREST, FORM 4952
- 164. ALLOWED INVESTMENT INTEREST, FORM 4952
- 165. NONDEDUCTIBLE SUSPENDED LOSS CARRYOVER
- 166. TOTAL PASSIVE NET INCOME (FORM 8582 LINES 1A, 1D, 2A, AND 2D)
- 167. SUM OF PRIOR YEAR UNALLOWED LOSSES (FORM 8582 LINES 1H AND 2H)
- 168. TAX ON TAXABLE INCOME*

EARNED INCOME CREDIT COMPUTATION

- 169. HEALTH INSURANCE CREDIT*
- 170. EXTRA CREDIT FOR CHILD BORN IN 1991*
- 171. CSAMP SAMPLE CODE**
- *Indicates change from 1990 specifications.
- **Moved to the end because it is a larger code than in previous years.
- Only for lower income returns (returns with AGI less than \$200,000 and not in 100% sample).
- Blurred for high income returns (note: State and local income taxes deduction is also blurred for low income returns in **Wisconsin**); see the section on Disclosure Avoidance Procedures for a more complete explanation.
- Blurred for lower income returns, reserved for high income returns.
- 4 Blurred for all returns

1991 INDIVIDUAL PUBLIC USE TAX FILE CODE DEFINITIONS

1. AGEX	Age or Blindness Status:	
(A (B (C (D	Only primary taxpayer claims Age or Blindness Status1 Only secondary taxpayer claims Age or Blindness Status.2	L 2
*For hi code wa	gh income returns records with values greater than 1, this set equal to 1.	7
2. AGIR	Adjusted Gross Income Range 1:	
□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□<	ADJUSTED GROSS INCOME. 1 under \$ 1,000. 1,000 under \$ 2,000. 2,000 under \$ 3,000. 3,000 under \$ 4,000. 4,000 under \$ 5,000. 5,000 under \$ 6,000. 6,000 under \$ 7,000. 7,000 under \$ 9,000. 9,000 under \$ 10,000. 11,000 under \$ 11,000. 11,000 under \$ 12,000. 11,000 under \$ 13,000. 12,000 under \$ 14,000. 13,000 under \$ 14,000. 14,000 under \$ 15,000. 15,000 under \$ 16,000. 16,000 under \$ 17,000. 17,000 under \$ 18,000. 10,000 under \$ 17,000. 11,000 under \$ 18,000. 20,000 under \$ 20,000. 21,000 under \$ 20,000. 22,0000 under \$ 30,000. 23,0000 under \$ 30,000. 24,0000 under \$ 40,000. 25,0000 under \$ 75,000. 275,000 under \$ 75,000. 20,0000 under \$ 100,000. 20,0000 under \$ 500,000. 20,0000 under \$ 500,0	12345678901234567890123456789
3. CGIN	D Capital Gain Indicator:	
(<i>I</i> (E) Capital gain present	1

4.	RESERV	VED (See data field 171 explanation in the next section)
5.	CYCLE Cycl	e Code04-53
6.	DSI	Dependent Status Indicator:
	(A) (B)	Taxpayer not being claimed by another taxpayer
7.	EIC	Earned Income Credit:
	(A) (B)[Not present
8.	ELECT	President Elect Campaign Fund:
	(B)	No "yes" boxes checked
9.	FDED	Form of Deduction Code:
	(A) (B) (C)	Standard deduction2
10	-11. F	LPD Filing Period: (Accounting Period):
	(A) (B)	YR - Calendar Year ended
12	. EFI	Electronic Filing Indicator:
	(A) (B)	Return not filed electronically0 Return filed electronically1

13.	F2441*	Child care credit:
	(A) (B)	No Form 2441 attached to return0 Number of qualifying individuals1-9
		income returns records with values greater than 3, this set equal to 3.
14.	F8582	Passive Activity Loss Limitation:
	(A) (B)	No Form 8582 attached to return0 Form 8582 attached to return1
15.	F6251	Alternative Minimum Tax:
	(A) (B)	No Form 6251 attached to the return0 Form 6251 attached to the return1
16.	F3800	General Business credit:
	(A) (B)	No Form 3800 attached
17.	MARS*	Marital Status:
	(A) (B) (C) (D) (E) (F)	Single
*Fo: was	r high set e	income returns records with a value equal to 5, this code qual to 2.
18.	PREP	Tax Preparer:
	(A) (B) (C) (D) (E) (F) (G) (H)	No preparer other than taxpayer indicated on the form
19.	PSV	Primary Stratifying Variable:
	(A) (B)	Positive Income GT OR EQ to Negative Income1 Negative Income GT Positive Income2

20.	REGION	<pre>I* IRS Regions:</pre>
	(A) (B) (C) (D) (E) (F) (G)	Central. 1 Mid-Atlantic. 2 Midwest. 3 North Atlantic 4 Southeast. 5 Southwest. 6 Western. 7
*For	high	income returns this code was set equal to zero.
21.	F2555	Foreign Earned Income:
	(A)	No Form 2555 attached to the return0 Form 2555 attached to the return1
22.	SCHCF	Schedule C or F Indicator:
	(A) (B) (C) (D)	Neither Schedule C or F present
23.	SCHE	Schedule E Indicator:
	(A) (B)	No Schedule E Present
24.	F8606	Form 8606, Nondeductible IRA Contributions:
	(A) (B)	No Form 8606 attached to return
25.	SPECT	X Special Tax Computation:
	(A) (B) (C) (D) (E)	No entry

26. STATE*:

	Code	STATE NAME	Code	STATE NAME
	1	Alabama	29	Nevada
		Alaska	30	New Hampshire
	3	Arizona	31	New Jersey
	4	Arkansas	32	New Mexico
	5	California	33	New York
		Colorado	34	North Carolina
		Connecticut	35	North Dakota
	8	Delaware	36	Ohio
	9	District of Columbia	37	Oklahoma
	10	Florida	38	Oregon
	11	Georgia	39	Pennsylvania
	12	Hawaii	40	Rhode Island
	13	Idaho	41	South Carolina
	14	Illinois	42	South Dakota
	15	Indiana	4 3	Tennessee
	16	Iowa	44	Texas
	17	Kansas	45	Utah
	18	Kentucky	46	Vermont
	19	Louisiana	47	Virginia
	20	Maine	48	Washington
	21	Maryland	49	West Virginia
	22	Massachusetts	50	Wisconsin
	23	Michigan	51	Wyoming
		Minnesota	52	APO/FPO
		Mississippi	53	Puerto Rico
		Missouri	54	U.S. Citizens Abroad
		Montana	54	Guam
	28	Nebraska	54	Virgin Islands
*For	high	income returns this c	ode w	as set equal to zero.
27.	TFORM	Corrected Form of Re	turn:	
	(A)	1040 Return		
	(B)	1040A Return		
	(C)	1040EZ Return		2

28. TOTXSZ Size of Total Income Tax:

	Returns with no total income tax
29. TXNT	Taxable/Nontaxable Return:
(A) (B)	Taxable Return
30. TXRT	Marginal Tax Rate0, 15, 28, 31
31. TXST	TAX STATUS:
(B) Regula (C) Taxes (D) No tax (E) Form ((F) Form ((C) Total ((H) Sched Form	are owed and IRS did not compute tax

32.	SCHB	Schedule B Indicator:
	(A) (B)	No Schedule B attached to return0 Schedule B attached to return1
33.	XFPT	Primary Taxpayer Exemption:
	(A)	No exemption for primary taxpayer (dependent of another taxpayer)0 Regular taxpayer exemption1
34.	XFST	Secondary Taxpayer Exemption:
	(A)	No secondary taxpayer or joint return filed by dependents
35.	XOCAH*	Exemptions for Children Living at Home:
		Actual number entered0-99
cod	e was	income returns records with values greater than 3, this set equal to 3 wherever XOCAH was modified, XOODEP, and set equal to zero.
36.	XOCAWH	Exemptions for Children Living Away from Home:
		Actual number entered0-99
37.	XOODEP	Exemptions of Other Dependents:
		Actual number claimed0-99
38.	XOPAR	Exemptions for Parents Living at Home or Away from Home:
		Actual number entered0-9
39.	XBI	Primary or Secondary Blindness Indicator:
		Neither the primary nor secondary taxpayer is blind0 Either the primary or secondary taxpayer is blind1 Both the primary and secondary taxpayer is blind2
40.	XTOT	Total Exemptions:
		Actual number punched01-99

EXPLANATION OF FIELDS NOT ABSTRACTED DIRECTLY FROM TAX FORMS 1991 INDIVIDUAL PUBLIC USE TAX FILE

The following explanations define data fields contained in the 1991 Individual Tax File that have not been abstracted directly from a specific line on Forms 1040, 1040A, 1040EZ, or the accompanying schedules and forms. Field numbers not appearing in this section have been entered on the specific lines on the forms or schedules from which the data were abstracted. Refer to the "1991 Federal Tax Forms" section of this booklet for further information.

<u>Field</u> <u>Number</u>	<u>Definition</u>
30	DEDUCTIONS This is either Total Standard Deduction or Total Itemized Deduction. Only one can appear on each return. (Note: If the taxpayer had no income, but still included the total itemized deductions for which he/she was eligible, this amount is shown in Field 30.)
33	COMPUTED REGULAR TAX This is a computed amount arrived at by applying the Tax Rate Schedules to Taxable Income, without regard to the type of computation used by the taxpayer.
35	INCOME SUBJECT TO TAX For taxpayers filing current year returns, "income subject to tax" is identical to taxable income except for those upper income taxpayers paying 28% average and marginal tax and those dependents paying "kiddie" tax from Form 8615. For the upper income taxpayers the deduction for personal exemptions is phased out and their "income subject to tax" becomes taxable income plus the exemption amount. For dependents filing Form 8615 TXST = 4 or 8), this is the income taxed at child's rate. For prior year returns, "income subject to tax" is computed by using the tax rate schedule to impute a hypothetical taxable income amount necessary to yield the given amount of tax reported.
36	MARGINAL TAX BASE This is the amount of income subject to tax at the highest tax rate applicable to the return (TXRT), using the 1991 Tax Rate Schedules for all returns.

37

tax.

Tax generated (from tax rate tables) on income subject to

<u>Field</u> <u>Number</u>	<u>Definition</u>
38	TOTAL TAX CREDITS (SOI) Total credits from Form 1040 (line 46) or 1040A (line 21) plus the amount of Earned Income Credit used to offset Income Tax before Credits.
50	TOTAL INCOME TAX Income Tax After Credits (F51) plus Alternative Minimum Tax (F52).
51	INCOME TAX AFTER CREDITS (SOI) Income Tax after Credits from Form 1040 or 1040A minus the amount of Earned Income Credit used to offset Income Tax Before Credits. For Form 1040EZ, which does not allow for any credits or any other taxes, this is the same as "Total Tax Liability."
37	TOTAL TAX LIABILITY (SOI) Total tax liability (form) minus Advance Earned Income Credit payments minus EIC used to offset Income Tax Before Credits minus EIC used to offset all other taxes except advance EIC.
64	TOTAL TAX PAYMENTS Total payments shown on the tax form, minus the total Earned Income Credit.
68	Earned Income used to calculate the Earned Income Credit For returns with the Earned Income Credit, the sum of salaries and wages and net earnings from self-employment.
69	Earned Income Credit Used to Offset Income Tax Before Credits This amount is the lesser of: Total Earned Income Credit or Income Tax Before Credits (F34) minus all credits except the Earned Income Credit.
70-71	If Total Earned Income Credit (EIC) is greater than Income Tax Before Credits (reduced by all credits except the Earned Income Credit), the following fields are computed:
•	 Earned Income Credit Used to Offset All Other Taxes Except Advance EIC, which is the lesser of: Total EIC minus Earned Income Credit used to offset Income Tax Before Credits (F69), 32 The sum of all other taxes (fields 52 through 56).

<u>Field</u> Number Definition

- 71 Earned Income Credit Refundable Portion which equals EIC minus F69 minus F70 (see above for definitions and conditions).
- Total Home Mortgage
 Sum of Deductible home mortgage interest paid to financial institution(s), Schedule A line 9 (a), and deductible home mortgage interest, paid to individual(s), Schedule A line 9 (b).
- Total of Self-Employment Income
 The sum of amounts shown for primary and secondary taxpayers on their individual Schedule SE.
- Total Passive Losses (Form 8582)
 This is the combined amounts of line 1b, 1e, 2b, 2e, losses from Rental Real Estate Activities (with active participants) before 10/23/86, losses from Rental Real Estate Activities (with active participants) after 10/22/86, losses from All Other Passive Activities before 10/23/86, and losses from All Other Passive Activities after 10/22/86.
- Decimal Weight
 A method of estimation by dividing the computer population count of returns in a sample stratum by the number of sample returns for that stratum (carried to 2 decimal places). The decimal place is implied. All estimates derived with the help of this weight must be divided by 100.

171 CSAMP Computed Sampled Code:

(A)	Nonbusiness Nonfarm returns001-024
(B)	High Income Nontaxable (HINT) Returns101
	Expanded HINT, but not HINT129
(D)	PSAMP GE 101 and LE 124; Return is not a HINT130
	Large Business Returns201-224
	PSAMP GE 101 and LE 224; not a Large Business230
	Foreign Earned Income Returns301-324
	Business Foreign Tax Credit Returns401-424
	Nonbusiness Foreign Tax credit returns501-524
	Business Farm Returns601-624
	Business Nonfarm Returns701-724
(L)	Farm Nonbuginess Returns

TECHNICAL DESCRIPTION OF THE FILE 1991 INDIVIDUAL PUBLIC USE TAX FILE

Each "data record" in the file, representing one tax return, is composed of 1,790 characters. Blocks are made up of 12 data records and are separated by a 3/4 inch "inter record gap" (IRG). There is no special indication at the end of a block other than the IRG, and no indication of the end of a data record.

Tape characters are recorded in either EBCDIC or ASCII on standard 2,400 foot, 1/2 inch, nine-track tape, and a density of 6,250 bytes per inch (BPI). In this mode, a 1-bit and 0-bit are recorded as signals of opposite polarity in ODD parity (a parity bit is set to 1 or 0 so that there is always an ODD number of 1-bits in a nine-bit character).

Each code and data field is numeric and defined in character format. All codes are unsigned. The data fields are signed positive or negative, whichever is appropriate, in the last character position of the field.

Codes are defined as 2 characters in length. The largest decimal value is 99 with leading zeros. The fields in the file are 10 characters in length with leading zeros. Weight factors are provided to accommodate a decimal weighting system.

The file is a single data set on one reel of tape and is UNLABELLED (EBCDIC). It can also be produced in ASCII at the user's request.

1991 INDIVIDUAL PUBLIC USE TAX FILE SAMPLE DESCRIPTION

Sources of the Data

The data in the 1991 Individual Tax File were compiled from a stratified probability sample of unaudited individual income tax returns, Forms 1040, 1040A, and 1040EZ, filed by U.S. citizens and residents. The sample was designated at the Martinsburg Computing Center and was processed in each of the ten Internal Revenue Service Centers during Calendar Year 1992. The total sample of 115,594 returns was selected from a population of 114.7 million returns.

The estimates that are obtained from this file are intended to represent all returns filed for Income Tax Year 1991. While most of the returns processed during 1992 were for Calendar Year 1991, a few were for prior years. Returns for prior years were used in place of 1991 returns received and processed after December 11, 1991. This was done on the assumption that the characteristics of returns not yet filed could best be represented by the returns for previous income years that were processed in 1992.

All returns processed during 1992 were subjected to sampling except tentative and amended returns. Tentative returns were not subjected to sampling because the revised returns may have been sampled later on, while amended returns were excluded because the original returns had already been subjected to sampling.

Sample Design and Selection Criteria

Data from Forms 1040, 1040A, 1040EZ, 1040EZ-1, 1040PC, and 1040TEL processed to the IRS Individual Master File System at the Martinsburg Computing Center during Calendar Year 1992 were classified, by computer, into sample strata. Initially, these data were used to assign a return record to one of twenty four income classes based on the larger of positive income or negative income, and the usefulness of the return record for tax modeling purposes. The final sample strata were based on income class and the size of business plus farm receipts, or the presence or absence of one or more of the following forms: a Form 2555, Foreign Earned Income; a Form 1116, Computation of Foreign Tax Credit; a Schedule C, Profit or Loss from Business or Profession; and, a Schedule F, Farm Income and Expenses. Sixty variables were used to derive positive and negative income and thirty two variables were used to determine the usefulness for tax modeling purposes. The end result was 166 strata identified by the sample code.

Returns were then selected from the sample strata using two methodologies. One method used certain ending digits of the social security number (SSN), and the second method used ending digits of numbers generated from transformations of the SSN. The sampling rates for the various strata ranged from 0.02 percent to 100 percent.

Method of Estimation

Sampling weights were obtained by dividing the computer population count of returns filed per sample stratum by the number of sample returns actually received for that stratum (computation carried to two implied decimal places). The file can be weighted with decimal weights by dividing each weight by 100.

Processing and Management of the Sample

While the sample was being selected, the selection process was monitored by applying prescribed sampling rates for each stratum to the population count for that stratum. A follow-up was required to reconcile differences between the actual number of returns selected and the expected number.

In transcribing and tabulating the information from the returns in the sample, checks were imposed to improve the quality of the resulting estimates. Incorrect or missing entries on the sampled record were altered during statistical editing to make them consistent with other entries on the return and accompanying schedules. Data were also adjusted during editing in an attempt to achieve consistent statistical definitions. For example, a taxpayer may report director's fees on the other income line of the Form 1940 return. If this situation had been detected during statistical editing, the amount of director's fees would have been entered into the salaries and wages field to the sample record.

Quality of the basic data abstracted was controlled at the processing centers by means of a continuous verification system that used computer tests to check for mathematical errors and inconsistencies in the data. These tests were performed while the returns were still available to aid in resolving the error conditions. Prior to tabulation of the data at the Detroit Computing Center, additional computer tests were applied to each return record to determine the need for adjustments to the data. $\underline{1}$ /

For more details on the techniques used to process the returns in the sample, particularly those steps designed to ensure the quality of the statistical data, see:

Kilss, Beth and Scheuren, Fritz. "Statistics from Individual Income Tax Returns: Quality Issues," 1982 Proceedings, American Statistical Association, Section on Survey Research Methods, pp. 271-277.

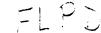
Sailer, Peter; Hicks, Charles; Watson, David; and Trevors, Dan, "Results of Coverage and Processing Changes to the 1980 Individual Statistics of Income Program," 1982 Proceedings, American Statistical Association, Section on Survey Research Methods, pp. 452-458.

Durkin, Thomas M. and Schwartz, Otto, "The SOI Quality Control Program," 1981 Proceedings, American Statistical Association, Section on Survey Research Methods, pp. 478-483.

FEDERAL TAX FORMS (WITH FIELD NUMBERS REFERENCED)

FIELD NUMBERS

Field Numbers presented on the tax forms and schedules lines can be used to cross reference to the Core Record Layout. An example of this is line 7 on the Form 1040 which has a field number of 2.
7 Wages, salaries, tips, etc 2
On the Core Record Layout it would appear as 2 to the left of the Salaries and Wages line. See example below.
Core Record Layout
1. ADJUSTED GROSS INCOME (DEFICIT) (AGI) (+/-) 2. SALARIES AND WAGES 3. TAXABLE INTEREST INCOME 4. TAX-EXEMPT INTEREST INCOME
Another example, Line 8a, Taxable Interest Income, on the Form 1040 (see below) has a field number of 3. This field number is cross referenced to the Taxable Interest Income line on the 1991 Core Record Layout, which contains the number 3 to the left of the line (see above).
8a Taxable Interest Income3



		Individual Income Tax Return		0145	202:
		year Jan,-Dec, 31, 1991, or other tax year beginning 1991, ending first name and initial Last name	Your so	OMB No. 1545- cial security numb	
abel	Tour	hist rane and mida	,		-
ee A A B B page 11.) E	if a :	oint return, spouse's first name and initial cast name	Spouse	's social security nu	ımber
se the IRS	нот	e address (number and street). (If you have a P.O. box, see page 11). Apt. no.	For P	rivacy Act and	
pel, therwise, E ease print R		town or post office, state, and ZIP code, (if you have a foreign address, see page 11.)	Pape	rwork Reduction	
type.	- /	ST4TE	instru	ictions.	
esidential				Note: Checking "Yes	
ection Campaign: ee page 11.)		Do you want \$1 to go to this fund?		oot change your tax educe your ref <u>und.</u>	or
	1	Single MARS			
iling Status	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.	-		
heck only	4	Head of household (with qualifying person). (See page 12.) If the qualifying person is		out not your deper	ndent
ne box.		enter this child's name here.			
	5	Qualifying widow(er) with dependent child (year spouse died ► 19). (See		<u></u>	
xemptions	6a	Yourself. If your parent (or someone else) can claim you as a dependent on his or ner tax return, do not check box 6a. But be sure to check the box on line 33b on page	2 .	No. of boxes checked on 6a and 6b	
See page 12.)	b	Spouse (2) Check (3) if age 1 or older (4) Dependent's (5) No. of	months	No. of your	
	C	Dependents: dependent's social security relationship to lived in		children on 6c who:	
		(1) Name (first, initial, and last name) age 1 number you home in	1991	• lived with you X	OCA
mare then div				 didn't live with 	
more than six ependents,				you due to XOCA	3U F
ee page 13.				separation (see page 14)	
				Wantanaa Xe	PA
				dependents on 6cX	000
		If your child didn't live with you but is claimed as your dependent under a pre-1985 agreement, check here	$\overline{}$	Add numbers entered on	V +
		Total number of exemptions claimed	; ; ,	lines above ▶	XTOT
	7	Wages, salaries, tips, etc. (attach Form(s) W-2)	7	<u>2</u> 3	-
ncome	8a	Taxable interest income (also attach Schedule B if over \$400)	8a		+
ttach	b	Tax-exempt interest income (see page 16). DON'T include on line 8a	9	5	
opy B of your	9	Dividend income (also attach Schedule B if over \$400)	10		+
orms W-2, V-2G, and	10	Taxable refunds of state and local income taxes, if any, from worksheet on page 16,	11	_	+
099-R here.	11	Alimony received	12	3	<u> </u>
vou did not	12	Business income or (loss) (attach Schedule C)	13	9	1
et a W-2, see	13	Capital gain or (loss) (attach Schedule D)	14	10	
age 10.	14	Capital gain distributions not reported on line 13 (see page 17)	15	/1	
ttach check or	15	Other gains or (losses) (attach Form 4797)	16b	12	
noney order on	16a	17 13 17 17 17 17 17 17 17 17 17 17 17 17 17	17b	14	
op of any forms W-2,	17a 18	Rents, royalties, partnerships, estates, trusts, etc. (attach Schedule E)	18	15	
V-2G. or	19	Farm income or (loss) (attach Schedule F)	19	16	<u> </u>
099-R.	20	Unemployment compensation (insurance) (see page 18)	20	17	<u> </u>
	21a	Social security benefits. 21a 18 21b Taxable amount (see page 18)	21b	19	↓ _
	22	Other income (list type and amount—see page 19)	22	20_	+-
_	23	Add the amounts shown in the far right column for lines 7 through 22. This is your total income.	23		+
	24a	Your IRA deduction, from applicable worksheet on page 20 of 21 22a 23	-₹//////		
Adjustments	ь	Spouse's IRA deduction, from applicable worksheet on page 20 or 21	-₩//////		
o income	25	One-half of self-employment tax (see page 21)	-{//////		
See page 19.)	26	Self-employed health insurance deduction, from worksheet on page 22 . 26 28	-₩/////		
	27	Keogh retirement plan and self-employed SEP deduction 27 25 28 26	-₹//////	4	
	28	Penalty on early withdrawai or savings	₩/////	4	
		Afficial said Desiringto CON N		1	1
	29	Add lines 24a through 29. These are your total adjustments	30		1
Adjusted	29 30 31	Add lines 24a through 29. These are your total adjustments Subtract line 30 from line 23. This is your adjusted gross income. If this amount is less than \$21,250 and a child lived with you, see page 45 to find out if you can claim the "Earned Income	+		+

Page 2

Form	1040	(1991

-0rm :040 (99)		Amount from line 31 (adjusted gross income)				32 :		
Tax	32	• =		. D Blin				
Compu-	33a	Check if: You were 65 or older. Blind: Spouse	was 65 or older.	, <u>∟</u> Billi X ⊾ 31	3a			
tation		Add the number of boxes checked above and enter the to	otal nere .//	· ·				
tation	b	if your parent (or someone else) can claim you as a deper	ndent, check here	₽ ⊅30	3b 📙 🦠			
If you want the IRS to	С	If you are married filing a separate return and your spouse or you are a dual-status alien, see page 23 and check her	itemizes deduction	ons.				
figure your		/ Itemized deductions (from Schedule A. line 26)			\		1	
tax, s ee page 24.	34	Enter Standard deduction (shown below for your fi		ution: If	vou 🖔			
		the checked any box on line 33a or b, go to postarger adduction. If you checked box 33c, your stand	age 23 to find yo	our stanc	dard	////) 34	30	
		of Single—\$3,400 • Head of househol						
		 Married filing jointly or Qualifying widow(er)— Married filing separately—\$2.850 	\$5.700			35		
	3 5	Subtract line 34 from line 32			:	33		
	36	if line 32 is \$75,000 or less, multiply \$2,150 by the total n		ions clair	med on	26	31	
		line 6e. If line 32 is over \$75,000, see page 24 for the am				36	32	
	37	Taxable income. Subtract line 36 from line 35. (If line 36				37		
	38	Enter tax. Check if from a Tax Table, b Tax Ra		∟ Sche	1	20		
		or d Form 8615 (see page 24). (Amount, if any, from Fo	orm(s) 8814 > •		┵ / ト	38		
	39	Additional taxes (see page 24). Check if from a \square Form		n 4972		39	3 +	-
	40_	Add lines 38 and 39		39		40	<u> </u>	
Cradita	41	Credit for child and dependent care expenses (attach Form 2-	46		- 			
Credits	42	Credit for the elderly or the disabled (attach Schedule R)						
(See page	43	Foreign tax credit (attach Form 1116)			0			
25.)	44	Other credits (see page 25). Check if from a Form 3	113		1		and 47)	
		b Form 8396 c Form 8801 d Form (specify)	44 7 -	, , , , ,	3, 			
	45	Add lines 41 through 44				•		+
	48_	Subtract line 45 from line 40. (If line 45 is more than line	40, enter -0)	• •	•		F 2	┼
Other	47	Self-employment tax (attach Schedule SE)						┼
Taxes	48	Alternative minimum tax (attach Form 6251)	. <u></u>	47 53 48 52 yer (attach Form 4137) 50 55 51 56 52 54 58 55 5 9				
Idve2	49	Recapture taxes (see page 26). Check if from a Torm 4255						-
	50	Social security and Medicare tax on tip income not reported		th Form 4	1137) .			+
	51	Tax on an IRA or a qualified retirement plan (attach Form	1 5329)				56	+
	52 53	Advance earned income credit payments from Form W-2 Add lines 46 through 52. This is your total tax		 <u>.</u>	•			
	54	Federal income tax withheld (if any is from Form(s) 1099, check	54	<u> 58</u>				
Payments	5 5	1991 estimated tax payments and amount applied from 1990 ret		59				
	56	Earned income credit (attach Schedule EIC)	56					1
Attach Forms W-2,	57	Amount paid with Form 4868 (extension request)	57	60				
W-2G, and	58	Excess social security, Medicare, and ARTA tax withheld (see page	27) 58	61				
1099-R to front.	59	Other payments (see page 27). Check if from a Form 2						
mornt.	Ja	b Form 4136	59					
	60	Add lines 54 through 59. These are your total payments	·		•	60		
	61	If line 60 is more than line 53, subtract line 53 from line 60. This		OVERPAI	D ▶	61	65(-)	
Refund or	62	Amount of line 61 to be REFUNDED TO YOU			•	62		
Amount		Amount of line 61 to be APPLIED TO YOUR 1992 ESTIMATED TA	AY > 63	66	• <u> </u>			
You Owe	63	If line 53 is more than line 60, subtract line 60 from line 53						
	64	Attach check or money order for full amount payable to "Ir	ntemai Revenue S	ervice." V	Vrite vour			
		name, address, social security number, daytime phone num	ber, and "1991 Fo	rm 1040"	on it.	64	65(+))
	65	Estimated tax penalty (see page 28). Also include on line	e 64. 65		. .			
Sign	Und	er penalties of perjury, I declare that I have examined this return and if they are true, correct, and complete. Declaration of preparer (other	accompanying sched	dules and s	statements, a information of	nd to the	he best of my knowk preparer has any kn	edge and owledge
Here) Delik	Your signature	Date		ccupation			
Keep a copy								
of this return	7	Consolidation of the street return ROTH must sign	Date	Spouse	e's occupation			
for your records.		Spouse's signature (if joint return, BOTH must sign)		-				
			Date	 	_	į F	reparer's social sec	urity no.
Paid		parer's hature	· 	Check	if — nplayed _	_		-
Preparer's	: <u> </u>	<u></u>		3611-611	E.I. No.		:	
Use Only	7 10 0	n's name (or yours)			ZIP code			

SCHEDULES A&B (Form 1040)

Department of the Treasury (X)

internal Revenue Service

Schedule A—Itemized Deductions

(Schedule B is on back)

▶ Attach to Form 1040. ▶ See Instructions for Schedules A and B (Form 1040).

OMB No. 1545-0074 199 Sequence No. 07

Name(s) shown on Form 1040 Your social security number Caution: Do not include expenses reimbursed or paid by others. Medical 74 1 Medical and dental expenses. (See page 38.) and Dentai Enter amount from Form 1040, line 32 | 2 | 2 3 Expenses Multiply line 2 above by 7.5% (.075) . . . チヱ Subtract line 3 from line 1. Enter the result. If less than zero, enter -0-5 Taxes You 5 State and local income taxes 6 Paid 6 Other taxes. (List—include personal property taxes.) ▶ (See 7 page 38.) Add lines 5 through 7. Enter the total 8 Я 81 9a 9a Home mortgage interest and points reported to you on Form 1098 Interest b Home mortgage interest not reported to you on Form 1098. (If You Paid paid to an individual, show that person's name and address.) (See page 39.) 9b Note: Personal Points not reported to you on Form 1098. (See 82 interest is 10 instructions for special rules.) no longer Investment interest (attach Form 4952 if required). (See deductible. 11 79 12 12 Add lines 9a through 11. Enter the total Gifts to Caution: If you made a charitable contribution and received a benefit in return, see page 40. Charity 89 13 Contributions by cash or check 13 (See page 40.) Other than cash or check. (You MUST attach Form 8283 88 14 86 15 15 Carryover from prior year. 85 16 Add lines 13 through 15. Enter the total. 16 Casualty and 90 Theft Losses 17 Casualty or theft loss(es) (attach Form 4684). (See page 40.). ▶ Moving Expenses Moving expenses (attach Form 3903 or 3903F). (See page 41.) 18 Unreimbursed employee expenses—job travel, union Job Expenses 19 and Most Other dues, job education, etc. (You MUST attach Form 2106 93 19 Miscellaneous if required. See instructions.) ▶ **Deductions** Other expenses (investment, tax preparation, safe deposit box, etc.). List type and amount ▶..... (See T page 41 for expenses to 21 deduct here.) 21 Add lines 19 and 20 Enter amount from Form 1040, line 32 . 22 22 23 23 Multiply line 22 above by 2% (.02), 24 Subtract line 23 from line 21. Enter the result. If less than zero, enter -0-24 Other Other (from list on page 41 of instructions). List type and amount ▶ 25 (discallaneous **Deductions** ▶ 25 • If the amount on Form 1040, line 32, is \$100,000 or less (\$50,000 or 26 Total less if married filing separately), add lines 4, 8, 12, 16, 17, 18, 24, and **Itemized** 25. Enter the total here. 26 **Deductions** • If the amount on Form 1040, line 32, is more than \$100,000 (more than \$50,000 if married filing separately), see page 42 for the amount to enter. Caution: Be sure to enter on Form 1040, line 34, the LARGER of the amount on line 26 above or your standard deduction.

31

Schedule A (Form 1040) 1991

• Expenses of producing tax-exempt acome.

Total Itemized Deductions

Line 26

People with higher incomes may not be able to deduct all of their itemized deductions. If the amount on Form 1040, line 32, is more than \$100.000 (\$50,000 if married filing separately), use the worksheet on this page to figure the amount you may deduct.

Iten	temized Deductions Worksheet—Line 26 (keep for your records)					
1		Add the amounts on Schedule A. lines 4, 8, 12, 16, 17, 18, 24, and 25	1			
2	2.	Add the amounts on Schedule A. lines 4, 11, and 17, plus any gambling losses included on line 25	2			
		Caution: Be sure your total gambling losses are clearly identified on the dotted line next to line 25.				
}		Subtract line 2 from line 1. (If the result is zero. STOP HERE ; enter the amount from line 1 above on Schedule A. line 26.)	3			
	4.	Multiply line 3 above by 80% (.80) 4				
	5.	Enter the amount from Form 1040, line 32 5.				
	6.	separately)				
	7.	Subtract line 6 from line 5. (If the result is zero or less, STOP HERE; enter the amount from line 1 above on Schedule A, line 26.) 7				
	8.	Multiply line 7 above by 3% (.03) 8.		72		
		Compare the amounts on lines 4 and 8 above. Enter the smaller of the two amounts here	9	TJ		
.	10.	Total itemized deductions. Subtract line 9 from line 1. Enter the result here and on Schedule A, line 26	10			

SCHEDULE C (Form 1040)

Department of the Treasury

Profit or Loss From Business

(Sole Proprietorship)

▶ Partnerships, joint ventures, etc., must file Form 1065.

► Attach to Form 1040 or Form 1041. ► See Instructions for Schedule C (Form 1040).

OMB No. 1545 0014

internal Revenue Service Sequence No. 09 Name of proprietor Social security number (SSN) Principal business or profession, including product or service (see instructions) B Enter principal business code (from page 2) ▶ (Rusiness name D Employer ID number (Not SSN) Business address (including suite or room no.) ▶ Ε City, town or post office, state, and ZIP code F Accounting method: (1) Cash (2) Accrual (3) ☐ Other (specify) ► G Method(s) used to Lower of cost Other (attach Does not apply (if value closing inventory: (1) Cost (2) or market (3) applanation) (4) Checked, skip line H) Yes No Was there any change in determining quantities, costs, or valuations between opening and closing inventory? (If "Yes." attach explanation.) Did you "materially participate" in the operation of this business during 1991? (If "No," see instructions for limitations on losses.) If this is the first Schedule C filed for this business, check here Part I Income Gross receipts or sales. Caution: If this income was reported to you on Form W-2 and the "Statutory employee" box on that form was checked, see the instructions and check here Returns and allowances . 2 3 Subtract line 2 from line 1. 3 Cost of goods sold (from line 40 on page 2) . . . 4 5 Subtract line 4 from line 3 and enter the gross profit here . 5 6 Other income, including Federal and state gasoline or fuel tax credit or refund (see instructions). 6 96 Add lines 5 and 6. This is your gross income. 7 Part II Expenses (Caution: Enter expenses for business use of your home on line 30. 8 Advertising 21 21 Repairs and maintenance . 22 22 Supplies (not included in Part III), 9 Bad debts from sales or 9 services (see instructions). 23 Taxes and licenses 10 Car and truck expenses (see 100 24 Travel, meals, and entertainment: instructions—also attach 10 Form 4562) 24a a Travel . . 102 11 11 Commissions and fees. b Meals and 12 12 Depletion entertainment Depreciation and section 179 c Enter 20% of line expense deduction (not included in loi 13 24h subject to Part III) (see instructions). limitations (see instructions). Employee benefit programs 14 24d (other than on line 19). d Subtract line 24c from line 24b 15 106 15 Insurance (other than health). 25 25 Utilities / O 🗣 Interest: 16 26 Wages (less jobs credit) 103 16a a Mortgage (paid to banks, etc.) 27a Other expenses (list type and amount): 104 16b **b** Other. 17 17 Legal and professional services 18 65 18 Office expense 19 Pension and profit-sharing plans, 19 20 Rent or lease (see instructions): 20a a Vehicles, machinery, and equipment **b** Other business property 20b 107 27b Total other expenses . . 28 Add amounts in columns for lines 8 through 27b. These are your total expenses before expenses for 28 business use of your home 29 29 Tentative profit (loss). Subtract line 28 from line 7 30 Expenses for business use of your home (attach Form 8829) . 30 31 Net profit or (loss). Subtract line 30 from line 29. If a profit, enter here and on Form 1040, line 12. Also enter the net profit on Schedule SE, line 2 (statutory employees, see instructions). If a loss, you MUST go on to line 32 (fiduciaries, see instructions) . . . If you have a loss, you MUST check the box that describes your investment in this activity (see instructions) 32a All investment is at risk. if you checked 32a, enter the loss on Form 1040, line 12, and Schedule SE, line 2 (statufory 32b Some investment is not at risk

employees, see instructions). If you checked 32b, you MUST attach Form 6198.

SCHEDULE D

(Form 1040)

Capital Gains and Losses

(And Reconciliation of Forms 1099-B for Bartering Transactions)

► Attach to Form 1040.

See Instructions for Schedule D (Form 1040).

CMB No. 1545-0074

Sequence No. 12A Your social security number

Department of the Treasury Internal Revenue Service (X) Name(s) snown on Form 1040

▶ For more space to list transactions for lines 1a and 8a, get Schedule D-1 (Form 1040).

Caution: Add the following amounts reported to you for 1991 on Forms 1099-B and 1099-S for on substitute statements): (a) proceeds from transactions involving stocks, bonds, and other securities, and (b) gross proceeds from real estate transactions not reported on another form or schedule. If this total does not equal the total of lines 1c and 8c, column (d), attach a statement explaining the difference. Short-Term Capital Gains and Losses—Assets Held One Year or Less (a) Description of property (e) Cost or (f) LOSS (g) GAIN (d) Sales price (b) Date acquired (c) Date sold If (e) is more than (d), Example, 100 shares 7% other basis If (d) is more than (e), (see instructions) (Mo., day, yr.) (Mo., dav. vr.) subtract (d) from (e) subtract (e) from (d) preferred of "Z" Co.) see instructions) 1a Stocks, Bonds, Other Securities, and Real Estate. Include Form 1099-B and 1099-S Transactions. See instructions. **1b** Amounts from Schedule D-1, line 1b (attach Schedule D-1) 1c Total of All Sales Price Amounts. Add column (d) of lines 1a and 1b . 1d Other Transactions (Do NOT include real estate transactions from Forms 1099-S on this line. Report them on line 1a.) 2 Short-term gain from sale or exchange of your home from Form 2119, line 10 or 14c 3 Short-term gain from installment sales from Form 6252, line 22 or 30 4 Net short-term gain or (loss) from partnerships, S corporations, and fiduciaries. 5 Short-term capital loss carryover from 1990 Schedule D, line 29 6 Add lines 1a, 1b, 1d, and 2 through 5, in columns (f) and (g). 7 Net short-term capital gain or (loss). Combine columns (f) and (g) of line 6 Long-Term Capital Gains and Losses—Assets Held More Than One Year 8a Stocks, Bonds, Other Securities, and Real Estate. Include Form 1099-B and 1099-S Transactions. See instructions. 8b Amounts from Schedule D-1, line 8b (attach Schedule D-1) 8c Total of All Sales Price Amounts. Add column (d) of lines 8a and 8b -8d Other Transactions (Do NOT include real estate transactions from Forms 1099-S on this line. Report them on line 8a.) 9 Long-term gain from sale or exchange of your home from Form 2119, line 10 or 14c 10 Long-term gain from installment sales from Form 6252, line 22 or 30 . . . 11 Net long-term gain or (loss) from partnerships, S corporations, and fiduciaries 11 12 Capital gain distributions . . . 12

Long-term capital loss carryover from 1990 Schedule D, line 36.

Net long-term capital gain or (loss). Combine columns (f) and (g) of line 15

Add lines 8a. 8b, 8d, and 9 through 14, in columns (f) and (g)

Gain from Form 4797, line 7 or 9

13

14

15

13

14

15

117

116

16

SCHEDULE E (Form 1040)

Supplemental Income and Loss (From rents, royalties, partnerships, estates, trusts, REMICs, etc.)

► Attach to Form 1040 or Form 1041.

CMB No. 1545-6074

Department of the Treasury Internal Revenue Service (X) Name(s) shown on return

► See instructions for Schedule E (Form 1040).

Attachment Sequence No 13

Your social security number

Pa	rt I Income or Loss From Rentals	and Ro	yalties No	te: Report i	arm rental	l income or loss	from Fo	rm 4835	on page 2	2. line 39.
1	Show the kind and location of each					For each rental				es No
Α					li li	ine 1, did you	or your fa	amily us	se	
						t for personal han the greate			re A	<u> </u>
В						10% of the total			t	
_					f	air rental value	during t	the tax	В	
C					У	/ear? (See inst	ructions.)	С	
					Properties			\top	Totals	
Re	ntal and Royalty Income:		Α		В	1	С	(Add	columns A.	B, and C.)
3	Rents received	3						3	123	
4		4						4	120	†
Re	ntal and Royalty Expenses:									
5	Advertising	5						-/////		
6	Auto and travel	6						-////		
7	Cleaning and maintenance	7			-			-(////		
8	Commissions	8						-////		
9	Insurance	10						-/////		
10	Legal and other professional fees	10								
11	Mortgage interest paid to banks, etc. (see instructions)	11				16	1	11		
12		12				16	v			
13	Repairs	13	_							
14	Supplies	14					ĺ			
15	Taxes	15								
16	Utilities	16								
17		17						_/////		
18	Other (list)							-/////		
								-/////		
		18 _					<u> </u>	-/////		
		-						-////		
_		40			_			////// 19		
	Add lines 5 through 18	19		-				+		
20	Depreciation expense or depletion	20						20	125,1	26
-4	(see instructions)	21								
	Total expenses. Add lines 19 and 20					15	2			
22	income or (loss) from rental or royalty properties. Subtract line 21					12	8			
	from line 3 (rents) or line 4				•		_			
	(royalties). If the result is a (loss), see instructions to find out if you					12	7			
	must file Form 6196	22						_/////		
			suspe	aded to	is Carr	165	-			
23	Deductible rental loss. Caution:			}		12	>			
	Your rental loss on line 22 may be limited. See instructions to find out					16	7			
	if you must file Form: 8582	23 (<u> </u>		<u>i)I(</u>				
24	income. Add rental and royalty inc							. 24	12	
25	Losses. Add royalty losses from lin	e 22 and	rental loss	es from line	e 23. Ente	er the total loss	ses here	25	1 -	-
				04			f Dame II			
26	Total rental and royalty income or (IIII, IV, and line 39 on page 2 do no	ioss). Co	moine lines	24 and 25 or the amo	. ⊏⊓ter th	e result nere. I	1 Marts II	'		
	line 18. Otherwise, include the amo	or abbia	line 26 in t	he total or	line 40 c	n page 2	1070	. 26	}	

Schedule El Form 1040) 1991 return, (Do not enter name and social security number if shown on other side.)

Your social security number

	(s) snown on return. 100 hot one				_							_
Note:	: If you report amounts from	farming or fishir	ng on Sched	ule E, you	must en	er your	gross inco	me from the	se acti	vities (on line 41 b	elow.
	Income of LOSS	From Partne	ersnips a	na s co	rporau	0113						
If you	u report a loss from an at ity. See instructions. If yo	-risk activity, y	you MUST nn (f) vou	must atta	ner colu .ch Forr	mn (e) n 6198	or (1) of 11	ne 27 to a	escribe	e you	r investme	ent in the
activ			(17,)		(D)Ente	r P for [(C) Check) Emplo			ent At Risk?
27		a) Name			partners for S cor		foreign partnership		entificati number		at risk	not at risk
A												
В											-	-
c _								- 			+	
D L		<u> </u>									+	
E	Passive Income	and loss				No	npassive	Income a	and Lo	98		1
	(q) Passive loss allowed	(h) Passive	income	(i) No	npassive I	oss	(j) S	ection 179 ex	pense		(k) Nonpassi	/e income
(attach Form 8582 if required)	from Sche			Schedule			from Form 45	562		from Scheo	dule K-1
A												
В						_				-		_
C _						-+-	 			-+		
D						+-	-	<u> </u>		+		_
E L	Totale William	130/1	34								131/13	5
	Totals 132 136			133	37							
_	Add columns (h) and (k)	of line 28a. Er	nter the tot	al income	here .	_, .	_,		. L	29		
30	Add columns (g), (i), and	(j) of line 28b	. Enter the	total here	•				· -	30		_
31	Total partnership and S	corporation in	come or (lo	oss). Com	bine line	s 29 a	nd 30. En	ter the res	ult	.	138	₹
_	here and include in the t				<u> </u>		· · <u>·</u>	<u> </u>	· 1	31		1
Par	t III Income or Loss	From Estat	tes and i	rusis				<u> </u>			(b) Employ	
32			(a) Nan	ne						id	lentification n	
A												
В												
c						- T		lonpassiv			and Lose	
	Passi	ve Income a						·	e inco		Other incom	e from
	(c) Passive deduction or loss (attach Form 8582 if requ			Passive inco 1 Schedule I				ction or loss		(i)	Schedule I	
A	(41140)							_				
A												
c									,,,,,,,	_		
	Totals											
b	Totals										<u> </u>	
34	Add columns (d) and (f)	of line 33a. E	nter the to	tal income	here			• • •	• •	34 35	(14	
35	Add columns (c) and (e)	of line 33b. E	nter the to	tal here .								
36	Total estate and trust incin the total on line 40 be	come or (loss).	Combine	ines 34 ar	10 35. EI	nter trie	result nei	e and men		36		
Pa	rt IV Income or Los	s From Real	Estate N	Nortgage	Inves	tment	Conduit	s (REMIC)F	Resid	lual Hold	er
		(b) Emp		(c) Exc	ess inclus	ion from	(d) Taxa	able income (ne	et loss)	(e) ind	come from Se	
37	(a) Name	identification	number		nstruction		from S	chedules Q, li	ne 1b		line 3b	· [
				<u> </u>					1			-+
			4 4ba	بماعلة		10 ID 10	a 1013, 00	line an rie	low	38		
38	Combine columns (d) ar	nd (e) only. En	ter the resi	it ne e ar	ia inclue	ie iii ui	e total on	11110 40 90	1011			
	ort V Summary	(loop) from	Form 492	F (Also o		line 41	below)			39	122	
39	Net farm rental income TOTAL income or (loss).	Or (IOSS) ITOM	rum 463 e 26 21 2	u, ₍ misu ci 6 38 and	139 Fn	er the	result here	and on F	orm			
40	TOTAL income or (loss).	· · · · ·		• • •		• • •			. ▶	40		
41		ning and Fish	nina Incon	ne: Enter	your g i	7088						
71	farming and fishing inco	ome reported	in Parts II	and III an	d on line	B 39	.					
	(see instructions)	<u></u> .	<u> </u>	<u> </u>	<u></u>	<u> </u>	11					

SCHEDULE SE

(Form 1040)

Self-Employment Tax

► See Instructions for Schedule SE (Form 1040).

CMB No 1545-3074

1991

Attachment
Sequence No. 17

Department of the Treasury Internal Revenue Service ()

► Attach to Form 1040.

Name of person with **self-employment** income (as shown on Form 1040)

Social security number of person with **self-employment** income ▶

Who Must File Schedule SE

You must file Schedule SE if:

- Your net earnings from self-employment from other than church employee income (line 4 of Short Schedule SE or line 4c of Long Schedule SE) were \$400 or more; OR
- You had church employee income (as defined in the instructions) of \$108.28 or more;

AND

 Your wages (and tips) subject to social security AND Medicare tax (or railroad retirement tax) were less than \$125,000.

Exception: If your only self-employment income was from earnings as a minister, member of a religious order, or Christian Science practitioner, AND you filed Form 4361 and received IRS approval not to be taxed on those earnings, DO NOT file Schedule SE. Instead, write "Exempt-Form 4361" on Form 1040, line 47.

Note: Most people can use Short Schedule SE on this page. But you may have to use Long Schedule SE on the back.

Who MUST Use Long Schedule SE (Section B)

You must use Long Schedule SE if ANY of the following apply:

- You received wages or tips and the total of all of your wages (and tips) subject to social security, Medicare, or railroad retirement tax plus your net earnings from self-employment is more than \$53,400;
- You use either "optional method" to figure your net earnings from self-employment (see Section B, Part II, and the instructions);
- You are a minister, member of a religious order, or Christian Science practitioner and you received IRS approval (by filing Form 4361) not to be taxed on your earnings from these sources, but you owe self-employment tax on other earnings;
- You had church employee income of \$108.28 or more that was reported to you on Form W-2; OR
- You received tips subject to social security, Medicare, or railroad retirement tax, but you did not report those tips to your employer.

Section A-Short Schedule SE (Read above to see if you must use Long Schedule SE on the back (Section B).)

Net farm profit or (loss) from Schedule F (Form 1040), line 37, and farm partnerships, Schedule K-1 (Form 1065), line 15a	1		
Net profit or (loss) from Schedule C (Form 1040), line 31, and Schedule K-1 (Form 1065), line 15a (other than farming). See instructions for other income to report	2		
Combine lines 1 and 2	3		
Net earnings from self-employment. Multiply line 3 by .9235. If less than \$400, do not file this schedule; you do not owe self-employment tax. Caution: If you received wages or tips, and the total of your wages (and tips) subject to social security, Medicare, or railroad retirement tax plus the amount on line 4 is more than \$53,400, you cannot use Short Schedule SE. Instead, use Long Schedule SE on the back	4		
Self-employment tax. If the amount on line 4 is: • \$53,400 or less, multiply line 4 by 15.3% (.153) and enter the result. • More than \$53,400, but less than \$125,000, multiply the amount in excess of \$53,400 by 2.9% (.029). Add \$8,170.20 to the result and enter the total. • \$125,000 or more, enter \$10,246.60.	5	141	
	Net profit or (loss) from Schedule C (Form 1040), line 31, and Schedule K-1 (Form 1065), line 15a (other than farming). See instructions for other income to report Combine lines 1 and 2. Net earnings from self-employment. Multiply line 3 by .9235. If less than \$400, do not file this schedule; you do not owe self-employment tax. Caution: If you received wages or tips, and the total of your wages (and tips) subject to social security, Medicare, or railroad retirement tax plus the amount on line 4 is more than \$53,400, you cannot use Short Schedule SE. Instead, use Long Schedule SE on the back Self-employment tax. If the amount on line 4 is: \$53,400 or less, multiply line 4 by 15.3% (.153) and enter the result. More than \$53,400, but less than \$125,000, multiply the amount in excess of \$53,400 by 2.9% (.029). Add \$8,170.20 to the result and enter the total.	Net profit or (loss) from Schedule C (Form 1040), line 31, and Schedule K-1 (Form 1065), line 15a (other than farming). See instructions for other income to report	Net profit or (loss) from Schedule C (Form 1040), line 31, and Schedule K-1 (Form 1065), line 15a (other than farming). See instructions for other income to report Combine lines 1 and 2 Net earnings from self-employment. Multiply line 3 by .9235. If less than \$400, do not file this schedule; you do not owe self-employment tax. Caution: If you received wages or tips, and the total of your wages (and tips) subject to social security, Medicare, or railroad retirement tax plus the amount on line 4 is: Self-employment tax. If the amount on line 4 is: \$53,400 or less, multiply line 4 by 15.3% (.153) and enter the result. More than \$53,400, but less than \$125,000, multiply the amount in excess of \$53,400 by 2.9% (.029). Add \$8,170.20 to the result and enter the total.

Note: Also enter one-half of the amount from line 5 on Form 1040, line 25.

Form

Child and Dependent Care Expenses

➤ Attach to Form 1040.

OMB No. 1545-0068 199 Sequence No.

Your social security number

Department of the Treesury internal Revenue Service Name(s) shown on Form 1040

➤ See separate instructions.

If you are claiming the child and dependent care credit, complete Parts I and II below. But if you received employer-provided dependent care benefits, first complete Part III on the back. • If you are not claiming the credit but you received employer-provided dependent care benefits, only complete Part I below and Part III Caution: If you have a child who was born in 1991 and the amount on Form 1040, line 32, is less than \$21,250, see page 1 of the instructions before completing this form. Persons or Organizations Who Provided the Care—You must complete this part. (See the instructions. If you need more space, use the bottom of page 2.) (b) Address (c) Identifying number (d) Amount paid 1 (a) Name (number, street, apt. no., city, state, and ZIP code) (SSN or EIN) (see instructions) 2 Add the amounts in column (d) of line 1 Note: If you paid cash wages of \$50 or more in a calendar quarter to an individual for services performed in your home, you must file an employment tax return. Get Form 942 for details. Part II Credit for Child and Dependent Care Expenses Enter the number of qualifying persons cared for in 1991. (See the instructions for the definition of a qualifying person.) Caution: To qualify, the person(s) must have shared the same home with you in 1991 Enter the amount of qualified expenses you incurred and actually paid in 1991. See the instructions to find out which expenses qualify. Caution: If you completed Part III on page 2, do not include on this line any excluded benefits shown on line 25 Enter \$2,400 (\$4,800 if you paid for the care of two or more If you completed Part III on page 2, enter the excluded benefits, Subtract line 6 from line 5. (If the result is zero or less, skip lines 8 through 13. Enter -0- on 8 Compare the amounts on lines 4 and 7. Enter the smaller of the two amounts here 8 9 146 You must enter your earned income. (See the instructions for the definition of earned income.) Note: If you are not filing a joint return, skip line 10 and go to line 11. If you are married filing a joint return, you must enter your spouse's earned income. (If your 10 147 10 spouse was a full-time student or disabled, see the instructions for the amount to enter.) . . . 11 • If you are married filing a joint return, compare the amounts on lines 8, 9, and 10. Enter the smallest of the three amounts here. • All others, compare the amounts on lines 8 and 9. Enter the smaller of the two amounts here. 12 Enter the amount from Form 1040, line 32 12 X Enter the decimal amount from the table below that applies to the amount on line 12 Decimal amount is: If line 12 is: Decimal amount is: <u>If line 12 is:</u> **But not** Over- But not OVE OVET-\$0-10 000 -22,000 าก \$20,000-22,000-24,000 10,000-12,000 29 12,000—12,000 12,000—14,000 14,000—16,000 16,000—18,000 18,000—20,000 24,000—26,000 26,000—28,000 .28 .27 28,000-No limit .25

14

Multiply line 11 above by the decimal amount on line 13

complete Part I and attach a statement. See the instructions.)

Add lines 14 and 15. See the instructions for the amount of credit you can claim.

Multiply any qualified expenses for 1990 that you paid in 1991 by the decimal amount that applies to the amount on your 1990 Form 1040, line 32, or Form 1040A, line 17. (You must

15 16

Department of the Treasury

General Business Credit

► Attach to your tax return.

► See separate instructions.

OMB No. 1545-0895

Attachment Sequence No. 22

Internal Revenue Service Name(s) as shown on return

Identifying number

Pa	Tentative Credit		
18	Current year investment credit (Form 3468, Part I)	1a	43
Ł	Current year jobs credit (Form 5884, Part I)	1b	44
c	: Current year credit for alcohol used as fuel (Form 6478)	1c	45
d	Current year credit for increasing research activities (Form 6765, Part III)	1d	46
е	Current year low-income housing credit (Form 8586, Part I)	1e	47
f	Current year ennanced oil recovery credit (Form 8830, Part I)	1f	·
g	Current year disabled access credit (Form 8826, Part I)	1g	
h	Current year general business credit. Add lines 1a through 1g	1h	
2	Passive activity credits included on lines 1a through 1g (see instructions)	2	
3	Subtract line 2 from line 1n.	3	
4	rassive activity credits allowed in 1991 (see instructions).	4	
5	Carrytorward of general business credit, WIN credit, or ESOP credit to 1991 (see instructions)	5	
6	Carryback of general business credit to 1991 (see instructions)	6	
7	Tentative general business credit. Add lines 3 through 6	7	
Pa	General Business Credit Limitation Based on Amount of Tax		
8a	Individuals. Enter amount from Form 1040, line 40		
b	Corporations. Enter amount from Form 1120, Schedule J, line 3 (or Form 1120-A, Part I,	8	
C	Other filers. Enter regular tax before credits from your return		
9	Credits that reduce regular tax before the general business credit—		
а	Credit for child and dependent care expense (Form 2441) 98		
b	Credit for the elderly or the disabled (Schedule R (Form 1040))	<i>-/////</i> //	
C	Foreign tax credit (Form 1116 or Form 1118)		
d	Possessions tax credit (Form 5735)		
•	Mortgage interest credit (Form 8396)		
f	Credit for fuel from a nonconventional source.		
g	Orphan drug credit (Form 6765)		
h	Add lines 9a through 9g	9h	
10	Net regular tax. Subtract line 9h from line 8	10	
11	Tentative minimum tax (see instructions):	·•	
а	Individuals. Enter amount from Form 6251, line 20		
b	Corporations. Enter amount from Form 4626, line 14	11	
C	Estates and trusts. Enter amount from Form 8656, line 37		
12	Net income tax:		
а	Individuals. Add line 10 above and line 22 of Form 6251		
Ь	Corporations. Add line 10 above and line 16 of Form 4626	12	
C	Other filers. See instructions		
13	If line 10 is more than \$25,000, enter 25% (.25) of the exacts	13	
14	Subtract line 11 or line 13, whichever is greater, from line 12. If less than zero, enter -0-	14	
5	General business credit allowed for current year. Enter the smaller of line 7 or line 14. Also		
	enter this amount on Form 1040, line 44; Form 1120, Schedule J, line 4e; Form 1120-A, Part I, line 2a; or on the appropriate line of your return. (Individuals, estates, and trusts, see instructions if the credit for increasing research activities is claimed. C corporations, see instructions for Schedule A if any regular investment credit carryforward is claimed or if the corporation has undergone a post-1986 "ownership change.")		
	poot 1000 Ownership Change.)	15	į.

Department of the Treasury Internal Revenue Service Name(s) shown on return

Investment Interest Expense Deduction

▶ See separate instructions.▶ Attach to your tax return.

OMB No. 1545-0191

Attachment Sequence No. 72

identifying number

Subtract line 9 from line 6. If zero or less, enter -0- Subtract line 10 from line 5. If zero or less, enter -0- Multiply line 11 by 90% (.9) Add lines 10 and 12 Enter the amount from line 1 Enter the smaller of line 5 or line 13 Subtract line 15 from line 14 Disallowed investment interest expense from 1989 Form 4952, line 23. If zero, enter -0- here and on lines 21 and 22, and skip lines 18 through 20. Enter the amount from line 4. If line 4 is zero, enter -0- here and on line 20 and skip line 19. Enter the amount from line 1. Subtract line 19 from line 18. If zero or less, enter -0- 20 Enter the smaller of line 17 or line 20 Subtract line 21 from line 17	2 Investment income minus investment expenses. See Instructions	_				
2 Investment income minus investment expenses. See Instructions	2 Investment income minus investment expenses. See Instructions 2 3 Phase-in adjustment from passive activities. See instructions 4 4 Net investment income. Subtract line 3 from line 2. If zero or less, enter -0- 4 5 Subtract line 4 from line 1. If zero or less, enter -0- here and on line 13, and skip lines 6 through 12 5 6 Enter the amount from line 1, minus the interest expense from certain trade or businesses. See Instructions of Enter the amount from line 2, without the income or expenses from certain trade or businesses. See Instructions or subsinesses. See Instructions of the Instruction or expenses from certain trade or businesses. See Instructions of the Instruction of the Instruction or expenses from certain trade or businesses. See Instructions of the Instruction of the Instruction of the Instruction or expenses from certain trade or businesses. See Instructions of the Instruction of Instruction of the Instruction of the Instruction of Instruction or expenses from certain trade or businesses. See Instructions of the Instruction of the Instruction of the Instruction of Instruction of Instruction of Instruction of Instruction of Instructi	1	Investment interest expense paid or accrued in 1990. See Instructions	1		
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Alternative Minimum Tax—Individuals

► See separate instructions.

▶ Attach to Form 1040 or Form 1040NR. Estates and trusts, use Form 8656.

OMB No. 1545-0227

Department of the Treasury internal Revenue Service Name(s) shown on Form 1040 Attachment Sequence No.

Nam	e(s) shown on Form 1040		You	r social security n	umbei
_				<u>iii</u>	
1	Enter the amount from Form 1040, line 35. (If Form 1040, line 35 is less than zero, ent	er as a negative amount.)	1_		
2	Net operating loss deduction, if any, from Form 1040, line 22. (Enter as a positive am	ount.)	2		
3	Overall itemized deductions limitation (see instructions)	$(x_1, x_2, x_3, x_4, x_4, x_4, x_4, x_4, x_4, x_4, x_4$	_)
4	Combine lines 1, 2, and 3		4		
5	Adjustments: (See instructions before completing.)	- 1			
а		5a			
þ	Medical and dental expenses. (Enter the smaller of the amount from Schedule A				
	,	5b			
C	The second man condens of (Form 1949), line 24	5c			
đ	The state of the s	5d			
8		5e ()			
f	The state of the stage of the s	51			
g		5g			
h	The state of tenglish property placed in Service after 1900	5h			
į		5i			
1	The service of the service band of included after 1980.	5j			
K .	The second street and area areas are	5k			İ
_'	Property of the manager placed in Screece after 1900.	51			
m	- Contain property	5m			
n	The second of th	5n			
0		50			
P		5p			
q		5q			
r		5r		140	
. 5	Combine lines 5a through 5r		5s	149	
6	Tax preference items: (See instructions before completing.)	a. I I			
a		Sa .			
Đ	production production and the contract of the	6b			
C		8c			
a	The second of the property placed in service before 1987	3d) 15/			
e	Entered to the second personal property placed in Service beloff 1967	Se /			
T	below the second of the second	6f			
g		5g		150	
_n	Add lines 6a through 6g		6h	190	
7	Combine lines 4, 5s, and 6h		7	_	
8	Energy preference adjustment for certain taxpayers. (Do not enter more than 40% of I	ine 7.) See instructions	8		
9	Subtract line 8 from line 7	• • • • • • • •	9		
10	Alternative tax net operating loss deduction. See instructions for limitations		10		
11	Alternative minimum taxable income. Subtract line 10 from line 9. If married filing set	parately, see instructions	11		
12 13	Enter: \$40,000 (\$20,000 if married filing separately; \$30,000 if single or head of house	hold),	12		
4	Enter: \$150,000 (\$75,000 if married filing separately; \$112,500 if single or head of hou		14		
	Subtract line 13 from line 11. If zero or less, enter -0- here and on line 15 and go to li	ne 16	15	_	
5	Multiply line 14 by 25% (.25)		15	_	
6	Exemption. Subtract line 15 from line 12. If zero or less, enter -0 If completing this for		4.	i	
7	14, see instructions for amount to enter		16 17		-
7	Subtract line 16 from line 11. If zero or less, enter -0- here and on line 22 and skip line		 +		
8 9	Multiply line 17 by 24% (.24)		18		
.O	Alternative minimum tax foreign tax credit. See instructions		20	1	
1	Tentative minimum tax. Subtract line 19 from line 18		20		
•	Enter your tax from Form 1040, line 38, minus any foreign tax credit on Form 1040, entered on line 39 of Form 1040, see instructions		21		
2	Alternative minimum tax. Subtract line 21 from line 20. If zero or less, enter -0 Ent			+	
_	1040, line 48. If completing this form for a child under age 14, see instructions for amount		22		
_			L		

41

Passive Activity Loss Limitations

Identifying number

See separate instructions. Attach to Form 1040 or Form 1041. Attachment

OMB No. 1545-1008

Sequence No. 88

Form 8582 (1991)

Department of the Treasury nternal Revenue Service Name(s) shown on return

1991 Passive Activity Loss Part I Caution: See the instructions for Worksheets 1 and 2 on pages 7 and 8 before completing Part I. Rental Real Estate Activities With Active Participation (For the definition of active participation see Active Participation in a Rental Real Estate Activity in the instructions.) 1a Activities with net income (from Worksheet 1, column (a)) . . . 152 **b** Activities with net loss (from Worksheet 1, column (b)) . . 1b c Prior year unallowed losses (from Worksheet 1, column (c)) _1c d Combine lines 1a, 1b, and 1c All Other Passive Activities 2a Activities with net income (from Worksheet 2, column (a)) . 152 b Activities with net loss (from Worksheet 2, column (b)) . c Prior year unallowed losses (from Worksheet 2, column (c)) . . . d Combine lines 2a, 2b, and 2c 2d Combine lines 1d and 2d. If the result is net income or -0-, see the instructions for line 3. If this line and line 1d are losses, go to line 4. Otherwise, enter -0- on line 9 and go to line 10. Part II Special Allowance for Rental Real Estate With Active Participation Note: Treat all numbers entered in Part II as positive amounts. (See instructions on page 8 for examples.) Enter the smaller of the loss on line 1d or the loss on line 3. Enter \$150,000. If married filing separately, see the instructions . Enter modified adjusted gross income, but not less than -0- (see Note: If line 6 is equal to or greater than line 5, skip lines 7 and 8, enter -0- on line 9, and then go to line 10. Otherwise, go to line 7. Multiply line 7 by 50% (.5). Do not enter more than \$25,000. If married filing separately, see 8 Enter the smaller of line 4 or line 8 Part III Total Losses Allowed Add the income, if any, on lines 1a and 2a and enter the total . . . 10 Total losses allowed from all passive activities for 1991. Add lines 9 and 10. See the 153 instructions to find out how to report the losses on your tax return For Paperwork Reduction Act Notice, see separate instructions.

Cat. No. 63704F

8801

Credit For Prior Year Minimum Tax—Individuals and Fiduciaries

► Attach to your tax return.

OMB No. 1545-1073

1991

Attachment
Sequence No. 74

Department of the Treasury internal Revenue Service Name(s) shown on return

Identifying number

Pa	rt I Net Minimum Tax on Exclusion Items			
1	Enter the amount from line 3 of 1990 Form 6251. Form 1041 filers, see instructions	1		
2	Enter adjustments and tax preference items treated as exclusion items. See instructions	2		
3	Minimum tax credit net operating loss deduction. See instructions	3	()
4	Combine lines 1, 2, and 3. If zero or less, enter -0- here and on line 15 and go to Part II. If more			
	than \$155,000 and you are married filing separately, see instructions	4		
5	Enter the amount from line 9 of 1990 Form 6251. Form 8656 filers, enter \$20,000	5		
6	Enter the amount from line 10 of 1990 Form 6251. Form 8656 filers, enter \$75,000	6		
7	Subtract line 6 from line 4. If zero or less, enter -0- here and on line 8 and go to line 9	7_		
8	Multiply line 7 by 25% (.25)	8		
9	Subtract line 8 from line 5. If zero or less, enter -0 If completing for a child under 14, see instructions	9		
10	Subtract line 9 from line 4. If zero or less, enter -0- here and on line 15, and go to Part II	10	ļ	
11	Multiply line 10 by 21% (.21)	11		
12	Minimum tax foreign tax credit on exclusion items. See instructions.	12		
13	Tentative minimum tax on exclusion items. Subtract line 12 from line 11	13		<u> </u>
14	Enter the amount from line 18 of 1990 Form 6251, or line 38c of 1990 Form 8656	14		
15	Net minimum tax on exclusion items. Subtract line 14 from line 13. If zero or less, enter -0-	15	<u> </u>	<u> </u>
Pa	Minimum Tax Credit and Carryforward to 1992			
16	Enter the amount from line 19 of 1990 Form 6251, or line 39 of 1990 Form 8656	16		
17	Enter the amount from line 15 above	17		<u> </u>
18	Subtract line 17 from line 16. If line 17 is greater than line 16, enter the result as a negative amount	18		<u> </u>
19	Carryforward of minimum tax credit from 1990. Enter the amount from line 26 of 1990 Form 8801	19	143	
20	Enter your 1990 unallowed credit for fuel produced from a nonconventional source, and 1990			
	unallowed orphan drug credit. See instructions	20	-	—
21	Combine lines 18, 19, and 20. If zero or less, do not complete the rest of this form. See instructions	21		—
22	Enter your 1991 regular income tax liability minus allowable tax credits. See instructions	22		—
23	Enter the amount from line 20 of 1991 Form 6251, or line 37 of 1991 Form 8656	23		<u> </u>
24	Subtract line 23 from line 22. If zero or less, enter -0	24	ļ	—
25	Minimum tax credit. Enter the smaller of line 21 or line 24. Also enter this amount on the			
	appropriate line of your 1991 tax return. See instructions	25	1	—
<u> 26</u>	Minimum tax credit carryforward to 1992. Subtract line 25 from line 21. See instructions	26	144	$oldsymbol{ol}}}}}}}}}}}}}}}}}$

General Instructions

(Section references are to the Internal Revenue code.)

Paperwork Reduction Act Notice. We ask for the information on this form to carry out the Internal Revenue laws of the United States. You are required to give us the information. We need it to ensure that you are complying with these laws and to allow us to figure and collect the right amount of tax.

The time needed to complete and file this form will vary depending on individual circumstances. The estimated average time is:

Recordkeeping . . . 1 hr., 33 min.
Learning about the
law or the form . . . 1 hr., 3 min.
Preparing the form 1 hr.
Copying, assembling, and
sending the form to the IRS . 17 min.

If you have comments concerning the accuracy of these time estimates or suggestions for making this form more simple, we would be happy to hear from

you. You can write to both the IRS and the Office of Management and Budget at the addresses listed in the instructions of the tax return with which this form is filed.

Purpose of Form

Form 8801 is used by individuals, trusts, and estates to compute the minimum tax credit, if any, for alternative minimum tax (AMT) incurred in prior tax years after 1986. The form is also used to figure any minimum tax credit carryforward that may be used in future years.

New Form 8827, Credit for Prior Year Minimum Tax—Corporations, is used by corporations to compute the minimum tax credit and any minimum tax carryforward that may be used in future years.

Who Should File

Form 8801 should be completed by individuals, trusts, and estates that had:

• An AMT liability in 1990 and adjustments or tax preference items (other than exclusion items) in 1990;

Cat. No. 10002S

- A minimum tax credit carryforward from 1990 to 1991; or
- A 1990 unallowed nonconventional source fuel credit or unallowed orphan drug credit (see the instructions for line 20 of this form).

Recordkeeping.—Use Form 8801 each year to see if you have a minimum tax credit and to keep track of any credit carryforward. (See line 26 of your 1990 Form 8801.)

Specific Instructions

The AMT is attributable to two types of adjustments and tax preference items—"exclusion items" and "deferral items." The minimum tax predit is allowed only on the AMT attributable to deferral items.

Deferral items are generally adjustments and tax preference items that do not cause a permanent difference in taxable income over a number of years. An example is depreciation. Exclusion items, on the other hand, cause a permanent

Form

1040A

U.S. Individual Income

•	•	
Tax	Return	(X)

1991

OMB No. 1545-0085

	Tax Trees.		0.012 .10. 1040	0000
Step 1	Your first name and initial Last name	Your so	cial security no.	
(See page 16.) Use the IRS	B If a joint retain, spouce a first finance and finite.	Spouse'	social security	no.
label. Otherwise. please print or type.	Home address (number and street). (If you have a P.O. box, see page 16.) Apt. no.		Privacy Act Paperwork	
S. S.F.	STATE	1	iction Act ce, see page 3	ı.
	Presidential Election Campaign Fund (see page 17) Do you want \$1 to go to this fund? If joint return, does your spouse want \$1 to go to this fund? Yes \(\subseteq \ N \)	o will i	: Checking "Yes not change your duce your refun	r tax
Step 2	 Single Married filing joint return (even if only one had income) 	MAR	 رح	
Check your filing status	3 ☐ Married filing separate return. Enter spouse's social security no above and spouse's full name here ▶	umber	<u>.</u>	
(Check only one.)	4 ☐ Head of household (with qualifying person). (See page 18.) If the child but not your dependent, enter this child's name here ▶ _			
	5 ☐ Qualifying widow(er) with dependent child (year spouse died ▶	19). (See page 1	. 9 .)
Step 3 Figure your	6a Vourself. If your parent (or someone else) can claim you as a dependent on his or leturn, do not check box 6a. But be sure to check the box on line 18b on	her tax page 2.	No. of boxes checked on 6a and 6b	
exemptions (See page 20.)	if under dependent's social relationship to liv	No. of months ved in your ome in 1991	No. of your children on 6c who:	
If more than	(1) Name (first, initial, and last name) age 1 security number you ho	Mar III 1991	• lived XOC with you	AH
seven dependents, see page 23.			 didn't live with you due to divorce or separation (see page 23) 	OCAL
			No. of other	OOD!
	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.		dependents X listed on 6c Add numbers entered on lines above	ХТЫ
Step 4 Figure your	7 Wages, salaries, tips, etc. This should be shown in Box 10 of your W-2 form(s). (Attach Form(s) W-2.)	7	2	
total income	8a Taxable interest income (see page 26). (If over \$400, also complet and attach Schedule 1, Part I.)	e 8a	3	
Attach Come B	 Tax-exempt interest. (DO NOT include on line 8a.) 8b Dividends. (If over \$400, also complete and attach Schedule 1, Part II 	<u>.)</u> 9 _	5	<u> </u>
Attach Copy B of your Forms W-2 and 1099-R here.	10a Total IRA distributions. 10a 10b Taxable amount (see page 27).	t 1 <u>0b</u>		
Attach check or	11a Total pensions and annuities. 11a (see page 27).	11b	7-2.	
money order on top of any Forms W-2 or 1099-R.	12 Unemployment compensation (insurance) from Form(s) 1099-G. 13a Social security benefits. 13a (see page 31).	12 t 13b	/7	
	14 Add lines 7 through 13b (far right column). This is your total income.	▶ 14		
Step 5 Figure your adjusted	b Spouse's IRA deduction from applicable worksheet. 15a Spouse's IRA deduction from applicable worksheet. Note: Rules for IRAs begin on page 33. 15b			ı
gross income	c Add lines 15a and 15b. These are your total adjustments. 18 Subtract line 15c from line 14. This is your adjusted gross income. (If less than \$21,250, see "Earned income credit" on page 41.)	15c ► 16_	/	

1991	For	m 1040A						Page 2
Cham G	17	Enter the amount from line 16.			1	L <u>7</u>		
Step 6	b	Check \[\subseteq \text{You} \text{ were 65 or older } \subseteq \text{Blind} \] \[\text{Enter number if:} \] \[\subseteq \text{Spouse was 65 or older } \subseteq \text{Blind} \] \[\text{boxes checked if your parent (or someone else) can claim you as a dependency of the check here.} \] If you are married filing separately and your spouse files if you and itemizes deductions, see page 37 and check here.	ed ► dent, . ► Form	18a 18b		A 6 Ds	iex iex	
Figure your standard deduction,	19	Enter the standard deduction shown below for your But if you checked any box on line 18a or b, go to find your standard deduction. If you checked box 18c Single—\$3,400 • Head of household—\$5,000 • Married filing jointly or Qualifying widow(er)—\$5,70	pago c, en	e 37 to			3 O	ł
		• Married filing separately—\$2,850			•	19	50	
	20	Subtract line 19 from line 17. (If line 19 is more than line	e 17,	enter -0	_	20		
exemption amount, and	21	Multiply \$2,150 by the total number of exemptions claims			. ;	21	31	
taxable income	22	Subtract line 21 from line 20. (If line 21 is more than line 20 This is your taxable income.), ent	er -0)	•	22	32	
Step 7	23	Find the tax on the amount on line 22. Check if from: Tax Table (pages 44-49) or Form 8615 (see page)	e 39)			23	34	
Figure your tax, credits, and payments		Credit for child and dependent care expenses. Complete and attach Schedule 2. 24a Credit for the elderly or the disabled.	39					
If you want the IRS to figure	<u>c</u> 25	Complete and attach Schedule 3. 24b Add lines 24a and 24b. These are your total credits. Subtract line 24c from line 23. (If line 24c is more than line	23. e	nter -0		24c 25	51	
your tax, see the instructions	26	Advance earned income credit payments from Form W			_	26		
for line 22 on	27	Add lines 25 and 26. This is your total tax.	•			27		
page 38.	b	1991 estimated tax payments and amount applied from 1990 return.	58			-	Amoun 1 with F	
	c	Earned income credit. Complete and attach Schedule EIC. 28c	_				67	
	<u>d</u>				> 2	28d		-
Step 8 Figure your	29 —	If line 28d is more than line 27, subtract line 27 from lin This is the amount you overpaid .	e 280	l. 		29	65(-)	
refund or	30	Amount of line 29 you want refunded to you.				30		
amount you owe	31	Amount of line 29 you want applied to your 1992 estimated tax. 31	60	9				
Attach check or money order on top of Form(s) W-2, etc., on page 1.	32	If line 27 is more than line 28d, subtract line 28d from line, amount you owe. Attach check or money order for full amount the "Internal Revenue Service." Write your name, address, snumber, daytime phone number, and "1991 Form 1040A" on	ount social	payable	to	32 _	65(+)	
	33	Estimated tax penalty (see page 43). 33 alties of perjury, I declare that I have examined this return and accompanying sci	hedule	s and state	ments.	and to t	he best of my k	nowleds
Step 9 Sign your return	and belief, has any k	they are true, correct, and complete. Declaration of preparer (other than the tax	xpayer)	is based o	n all in	formati	on of which the	prepare
Keep a copy of this return for your records.	Spous	e's signature (if joint return, BOTH must sign) Date	Spo	use's occup	ation			
Paid	Preparer's	Date		ck if employed		Prepar	er's social secu	irity no.
preparer's use only		me (or yours bloyed) and		E.I. No.				

Schedule 2 Department of the Treasury—Internal Revenue Service Child and Dependent Care Expenses for Form 1040A Filers ×

1991

OMB No. 1545-0085

ame(s) shown on Fort	n 1040A					Your social securi	ty number
	• If y	you are claiming the	nrovided depen	endent care credit, condent care benefits, fi	irst compiete r	art III on the t	Jack.
	onl	y complete Part I be	elow and Part I hild who was b	orn in 1991 and the	amount on For	rm 1040A, line	
Part I	is les	s than \$21,250, see p	(b) Address (r	nstructions before con number, street, apt. no., lite, and ZIP code)	(c) Identifying number (SSN or	g (d) Amou	•
	_1		City, sa				
ersons or rganizations ho provided							
ou MUST		If you need more sp	ace, use the bo	ottom of page 2.)			
omplete this	2	Add the amounts in	column (d) of l	ine 1.		<u>Z</u>	Fuicae
art. (See age 52.)		performed in yo	<u>our home, you m</u>	or more in a calendar oust file an employmer	tt tax retarit. Ge	et Form 942 for	details.
Part II	1	have shared the sam	ne home with t	sons cared for in 199 he qualifying person	91. You must (s).		
Credit for child	(See page 53 for the	definition of a	qualifying person.)		3	
ind dependent	<u> </u>	Enter the amount of	qualified ext	enses you incurred a	and actually		
are expenses	•	paid in 1991. See pa	ige 54 to find o	out which expenses q on page 2, DO NOT	uamy. ' include on	1	1
	,	this line any exclude	ed benefits show	vn on line 23.		4 145	
	5	Enter \$2,400 (\$4,80	0 if you paid fo	or the care			
		of two or more qual	ifying persons)	5		_	
are expenses	6	If you completed Pathe excluded bene	rt III on page : fits, if any, fro	2, enter om line 23. <u>6</u>		-	ı
	7	Subtract line 6 from STOP HERE; you c	ı line 5. (If line	e 6 is equal to or mor	re than line 5,	7	
	. 8	Compare the amount two amounts here.	nts on lines 4 a	nd 7. Enter the sma	ller of the	8	
	9	You must enter you definition of earned	ir earned inc	ome. (See page 54 fo	or the	9 146	
		Note: If you are not	filing a joint re	turn, skip line 10 and	go to line 11.	_	
	10	If you are married	filing a joint re ome. (If vour s	turn, you must ente pouse was a full-time	er your e student or	10	•
	11	a If were are marrie	d filing a joint	return, compare the	amounts on		
		lines 8, 9, and 10). Enter the sm	s on lines 8 and 9. E	mounts here.	. 147	7
		smaller of the ty	vo amounts he	re		11	
	12	Enter the amount	from Form 104	0A, line 17. 12	1: 4- 45-	_	
	13	Enter the decimal amount on line 12.	amount from t	he table below that a	applies to the		
		If line 12 is— But not	Decimal amount	If line 12 is— But not			
		Over over	is—	Ower over	<u>:s</u>		
		\$0—10,000	.30	\$20,000—22,000	.24		
		10,000—12,000	.29	22,000—24,000 24,000—26,000	.23 .22		
		12,000—14,000	28 27	26,000—28,000			
		14,000—16,000 16,000—18,000	.26	28,000—No lim	_		
		18,000—20,000	.25			13	×
	14	Multiply line 11 a	bove by the dec	cimal amount on line	e 13. Enter the	14 - 3	9
		result here and on	Form 1040A,	line 24a.		14 = Schedule 2 (Form	1040A) 15

Department of the Treasury-Internal Revenue Service Income Tax Return for FLPD Form 1991 Single Filers With No Dependents 1040EZ OMB No. 1545-0675 Use the IRS label (see page 10). If you don't have one, please print. Please print your numbers like this: Name & address LABEL Print your name (first, initial, last) Your social security number Home address inumber and street), iff you have a P.O. box, see page 11. H STAT E City town or post office, state, and ZIP code. If you have a foreign address, see page 11 Please see instructions on the back. Also, see the Form 1040EZ booklet. Yes No Presidential Election Campaign (see page 11) Note: Checking Yes" will not change your tax or reduce your refund. Do you want \$1 to go to this fund? Cents Report your Total wages, salaries, and tips. This should be shown in Box 10 of your W-2 form(s). (Attach your W-2 form(s).) income Attach Copy B of Taxable interest income of \$400 or less. If the total is more Form(s) than \$400, you cannot use Form 1040EZ. W-2 here. Attach tax payment on top of Form(s) W-2. Add line 1 and line 2. This is your adjusted gross income. Can your parents (or someone else) claim you on their return? Note: You Yes. Do worksheet on back; enter amount from line E here. 31 must check No. Enter 5,550.00. This is the total of your Yes or No. standard deduction and personal exemption. 5 Subtract line 4 from line 3. If line 4 is larger than line 3 enter 0. This is your taxable income. EXCESS **Figure** Enter your Federal income tax withheld from Box 9 of your your W-2 form(s). tax 7 Tax. Use the amount on line 5 to find your tax in the tax table on pages 16-18 of the booklet. Enter the tax from the table on this line 65(-) Refund If line 6 is larger than line 7, subtract line 7 from line 6. This is your refund. amount you If line 7 is larger than line 6, subtract line 6 from line 7. This is the amount you owe. Attach your payment for full amount payable to the "Internal Revenue Service." Write your name, address, social security number, daytime phone number, and "1991 Form 1040EZ" on it.

9 owe Sign For IRS Use Only - Please

VOUL return

Keep a copy of this form for your records.

I have read this return. Under penalties of perjury, I declare that to the best of my knowledge and belief, the return is true, correct, and complete.

Date Your signature Your occupation

do not write in boxes below