General Description Booklet

for the

1985 INDIVIDUAL TAX MODEL FILE

Compiled by
Michael Strudler
under the direction of Peter Sailer
Chief, Special Projects Section
Individual Statistics Branch
Statistics of Income Division

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The Internal Revenue Service 1985 Tax Model File (108,839 records) was selected as part of the Statistics of Income program that was designed to tabulate and present statistical information for the 101.7 million Form 1040, Form 1040A, and Form 1040EZ Federal Individual Income Tax Returns filed for Tax Year 1985.

The Tax Model 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 purchased in an unidentifiable form, with names, Social Security Numbers (SSN), and other similar 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 Model File is designed for making national level estimates. The 1985 Tax Model File can be purchased through the Internal Revenue Service, Statistics of Income Division at a cost of \$2,150. Any questions concerning the acquisition of the current tax model file should be directed to:

Dr. Fritz Scheuren, Director Statistics of Income Division TR:S Internal Revenue Service 1111 Constitution Ave., N.W. Washington, D.C. 20224 (202) 376-0216

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 Model.

First, in order to make sure that no record can be identified with 100 percent certainty, we have subsampled our 100 percent sample 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 (returns with an adjusted gross income of \$200,000 or more) 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 include: age and blindness indicators (for both primary and secondary taxpayers), total exemptions other than age or blindness, alimony paid, and alimony received. Also, certain codes (number of age exemptions, 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 of state and local income tax deductions. In this field, for every three records, in descending order, the average state and local income tax deduction has been determined and that value has been placed inthe 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 less than three, these records have been combined with the group of three immediately before it. This method of disguising data is called blurring. The field for personal property tax deductions has also been blurred exactly as described above for all high income returns.

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 is 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. 1/

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 sorted by State. After this sort, the records have been blurred for real estate tax deductions, alimony paid, alimony received, and state and local income taxes (State of Wisconsin, only, for this last item) in the same manner as described above. The only difference between these records and the high income returns is that the lower income returns have been sorted for each field by individual State with no records from two different states being combined when averaging a field over a series of records.

 $\frac{1}{2}$ For greater details on this and other disclosure protection techniques used by the Statistics of Income Division, see:

Strudler, Michael; Oh, H. Lock; and Scheuren, Fritz. (1987)
"Protection of Taxpayer Confidentiality on the IRS Tax Model." Statistics of Income and Related Administrative Record Research: 1987, Internal Revenue Service.

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

The fields containing total miscellaneous deductions, other net income less loss and total taxes paid deductions have been deleted and marked as "reserved." Motor vehicle tax deductions and general sales tax deductions have been combined and placed in the field for general sales tax deductions. For high income returns, this combined field has been blurred. 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).

Individual Tax Model Files for each of the Tax Years 1966 through 1978, and State Tax Model Files for Tax Years 1977 and 1978, are available through the National Archives and Records Service. Questions concerning cost, acquisition, and delivery of these historical tax model files, should be addressed to:

General Services Administration
Machine Readable Archives Division
National Archives and Records Service
Washington, D.C. 20408
(202) 523-3267

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 requestor 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 Model Sample Description" for a more detailed discussion of the Tax Model file.

CORE RECORD LAYOUT

(CODE AND AMOUNT ELEMENT DEFINITIONS)

```
Codes: (all codes are 2 characters in length - PIC 99)
               AGRY
          1.
                                        21.
                                              F2555.
          2.
               AGIR1
                                        22.
                                             SCHCF -
          3.
             CGIND
                                       23.
                                              SCHE
          4.
               RESERVED
                                      24.
                                             SCHW .
          5.
              CYCLE
                                      25.
                                             SPECIX
          6.
              DEPINC
                                     26.
27.
28.
                                             STATE 1/
          7.
              BIC
                                             TFORM
         8.
              ELECT
                                             TOTTESZ
         9.
              FDED
                                      29.
                                             TINT
         10. FLPDYR
                                      30.
                                             TXRT
         11. FLPDMO
                                      31.
                                             TXST
        . 12. F2119
                                      32.
                                             W2IND
       . 13. F2441
                                      33.
                                             XFPT 1/
         14. F5695
                                             XFST 1/
                                      34.
         15. F6251
                                      35.
                                             XOCAH
         16. GENBUS
                                      36.
                                             XOCAWH
         17. MARS
                                      37.
                                             XOODED
         18. PPREP
                                      38.
                                             XOPAR
         19. PSV
                                      39.
                                             XOTHER 1/
         20. REGION 1/
                                      40.
                                             XIOT
Amount Fields: (all amount fields are 10 characters in length - PIC S9(10) )
               ADJUSTED GROSS INCOME (DEFICIT) (AGI) (+/-)
        1.
        2.
               SALARIES AND WAGES 2/
        3.
               INTEREST RECEIVED
        4.
               DIVIDENDS RECEIVED
        5.
               DIVIDEND EXCLUSION
        6. DIVIDENDS INCLUDED IN AGI
        7.
               STATE INCOME TAX REFUNDS
        8.
               ALIMONY RECEIVED 3/
               BUSINESS OR PROFESSION (SCHEDULE C) NET PROFIT/LOSS (+/-)
        9.
        10.
               NET CAPITAL GAIN OR LOSS (+/-)
        11.
               CAPITAL GAIN DISTRIBUTIONS NOT REPORTED ON SCHEDULE D
        12.
               SUPPLEMENTAL SCHEDULE NET GAIN OR LOSS (+/-)
        13.
               PENSIONS AND ANNUITIES FULLY INCLUDED IN AGI
              TOTAL PENSIONS AND ANNUITIES NOT FULLY INCLUDED IN AGI
        14.
              PENSIONS AND ANNUITIES NOT FULLY INCLUDED IN AGI,
        15.
              THAT PART IN AGI
              SCHEDULE E NET INCOME OR LOSS (+/-)
              FARM (SCHEDULE F) NET PROFIT/LOSS (+/-)
       17.
              GROSS UNEMPLOYMENT COMPENSATION
       18.
       19.
              UNKHPLOYHENT COMPENSATION IN AGI
              GROSS SOCIAL SECURITY BENEFITS
       20.
       21.
              SOCIAL SECURITY BENEFITS IN AGI
```

STATUTORY ADJUSTMENTS

- MOVING RIPHNSE
- 23. KMPLOYKK BUSINESS EXPENSE
- PAYMENTS TO INDIVIDUAL RETIREMENT ACCOUNT (IRA) 24.
- 25. PAYMENTS TO KEOGH ACCOUNTS
- FORFEITED INTEREST PENALTY
- 27. ALIMONY PAID 3/
- DEDUCTION FOR WORKING MARRIED COUPLE 28.
- TOTAL SELF-EMPLOYMENT INCOME
- 30. SELF-EMPLOYMENT INCOME, SECONDARY TAXPAYER
- 31. SELF-EMPLOYMENT TAX, PRIMARY TAXPAYER
- 32.
- SELF-EMPLOYMENT TAX, SECONDARY TAXPAYER EXCESS ITEMIZED DEDUCTIONS (-) / UNUSED ZBA (+) 33.
 - 34. CHARITABLE CONTRIBUTIONS DEDUCTION FOR MONITEMIZERS
- 35. TAX TABLE INCOME BEFORE EXEMPTIONS

- 36. EXEMPTION AMOUNT
 37. ZERO BRACKET AMOUNT (ZBA)
 38. TAXABLE INCOME (OLD CONCEPT WITHOUT ZBA)
 39. TAXABLE INCOME
 40. TAX GENERATED

- 41. COMPUTED REGULAR TAX
- 42.
- INCOME TAX BEFORE CREDITS
 INCOME SUBJECT TO TAX (OLD CONCEPT) 43.
- 44. INCOME SUBJECT TO TAK

CREDITS

- 45. GENERAL BUSINESS
- 46. ELDERLY AND DISABLED
- 47.. FOREIGN TAX
- INVESTMENT (INCLUDED IN GENERAL BUSINESS CREDIT, TO CALCULATE 48. TOTAL TAX CREDITS, ONLY USE THE GENERAL BUSINESS CREDIT)
- 49. POLITICAL CONTRIBUTIONS
- 50. CHILD CARE
- JOBS (INCLUDED IN GENERAL BUSINESS CREDIT) 51.
- 52. RESIDENTIAL ENERGY
- 53. RESEARCH AND EXPERIMENTATION
- EIC USED TO OFFSET INCOME TAX BEFORE CREDITS 54.
- 55. OTHER 56. TOTAL TAX CREDITS (SOI)
- 57. TOTAL TAX LIABILITY (SOI)
- 58. TOTAL INCOME TAX
- INCOME TAX AFTER CREDITS (SOI) 59.
- 60. MARGINAL TAX BASE
- ALTERNATIVE MINIMUM TAX (SOI)
- SELF-EMPLOYMENT TAX

- 63. TAX FROM RECOMPUTING PRIOR YEAR INVESTMENT CREDIT
- 64. SOCIAL SECURITY TAX ON TIP INCOME
 65. PENALTY TAX ON IRA
 66. TOTAL TAX PAYMENTS (SOI)

- 67. INCOME TAX WITHHELD
- 68. ESTIMATED TAX PAYMENTS
- AMOUNT PAID WITH FORM 4868
- 70. EXCESS FICA/RRTA
- 71. CREDIT FOR FEDERAL TAX ON SPECIAL FUELS AND OILS
- REGULATED INVESTMENT COMPANY CREDIT 72.
- 73. BALANCE DUE (OVERPAYMENT) (+/-)
- 74. CREDIT ELECT
- EARNED INCOME FOR EARNED INCOME CREDIT (EIC) 75.
- EIC USED TO OFFSET ALL OTHER TAXES EXCEPT ADVANCE EIC 76.
- EIC REFUNDABLE PORTION 77.

GENERAL BUSINESS CREDIT: (FORM 3800)

- 78. JOBS CREDIT
- 79. ALCOHOL FUEL CREDIT
- 80. INVESTMENT TAX CREDIT
- 81. CURRENT YEAR GENERAL BUSINESS CREDIT
- 82. CREDITS CARRIED FORWARD FROM PREVIOUS YEAR
- 83. TENTATIVE GENERAL BUSINESS CREDIT
- 84. OTHER TAX CREDITS

ITEMIZED DEDUCTIONS:

MEDICAL AND DENTAL EXPENSE DEDUCTIONS

- 85. TOTAL MEDICAL AND DENTAL EXPENSE DEDUCTION
- 86. RESERVED
- 87. RESERVED
- EXPENSES SUBJECT TO REDUCTION BY 5% OF AGI 88.

89-90 RESERVED

TAXES PAID DEDUCTIONS

- 91. RESERVED
- STATE AND LOCAL INCOME TAXES 2/
- 93. REAL ESTATE TAX DEDUCTIONS 4/
- GENERAL SALES TAX 2/ (COMBINATION OF MOTOR VEHICLE TAX DEDUCTION AND GENERAL SALES TAX DEDUCTION)
- 95. RKSERVED
- 96. PERSONAL PROPERTY TAX 2/
- 97. OTHER
- 98. TOTAL INTEREST PAID DEDUCTION
- 99. HOME HORTGAGE INTEREST PAID DEDUCTION

CHARITABLE CONTRIBUTIONS DEDUCTIONS

- 100. TOTAL CONTRIBUTIONS
- 101. CASH UNDER \$3,000
- 102. CASH OF \$3,000 OR HORE
- 103. OTHER THAN CASH
- 104. CARRYOVER
- 105. RKSKRVED
- 106. NET CASUALTY OR THEFT LOSS
- 107. TOTAL ITEMIZED DEDUCTIONS

CAPITAL GAINS (SCHEDULE D)

- . 108. CURRENT SHORT-TERM GAINS
 - CURRENT SHORT-TERM LOSSES
 - 110. POST 1969 SHORT-TERM LOSS CARRYOVER
 - 111. RESIDENCE GAIN
 - 112. CURRENT LONG-TERM GAIN
 - 113. CURRENT LONG-TERM LOSSES
 - 114. POST 1969 LONG-TERM LOSS CARRYOVER
 - 115. SCHEDULE D LONG-TERM CAPITAL GAIN DISTRIBUTIONS 116. FORM 4797 GAINS

 - 117. ADDITIONAL LOSSES DUE TO PRE-1970 CARRYOVER COMBINED CAPITAL GAINS
 - 118. EXCLUDED LONG-TERM GAINS
- 119. COMBINED NET CAPITAL GAINS LESS LOSS (+/-)
- 120. COMBINED LONG-TERM GAIN INCLUDED IN AGI

SUPPLEMENTAL INCOME (SCHEDULE E)

RENT AND ROYALTIES

- 121. FARM RENT NET INCOME OR LOSS (+/-)
- 122. DEPRECIATION OR DEPLETION
- 123. RENT NET INCOME OR LOSS (+/-)
- 124. ROYALTY NET INCOME OR LOSS (+/-)

PARTNERSHIPS

- 125. TOTAL INCOME
- 126. TOTAL LOSS
- 127. EXPENSE DEDUCTION

ESTATE OR TRUST

- 128. TOTAL INCOME
- 129. TOTAL LOSS

SHALL BUSINESS CORPORATION

- 130. TOTAL INCOME
- 131. TOTAL LOSS

- 132. WINDFALL PROFIT TAX REFUND
- 133. WINDFALL PROFIT TAX DEDUCTION

CHILD CARE CREDIT (FORM 2441)

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- 135. EARNED INCOME
- 136. EARNED INCOME LIMITATION
- CREDIT BASED ON PRIOR YEAR EXPENSES 137.

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- SECONDARY QUALIFIED EARNED INCOME 139.

FORM 6251

- ALTERNATIVE MINIMUM TAX TOTAL DEDUCTIONS 140.
- TOTAL TAX PREFERENCES FROM FORM 6251 141.
- 142. EXCLUDED LONG-TERM CAPITAL GAINS
- 143. ACCELERATED DEPRECIATION

RESIDENTIAL ENERGY (FORM 5695)

- CURRENT EXPENDITURES, ENERGY CONSERVATION 144.
- PRIOR YEAR EXPENDITURES, ENERGY CONSERVATION 145.
- ADDITIONAL FEDERAL SUBSIDIES, ENERGY CONSERVATION 146.
- 147. CREDIT (BEFORE LIMITATION), ENERGY CONSERVATION
- CURRENT EXPENDITURES, RENEWABLE ENERGY 148.
- 149. PRIOR YEAR EXPENDITURES, RENEWABLE ENERGY
- -150. ADDITIONAL FEDERAL SUBSIDIES, RENEWABLE ENERGY
- 151. CARRYOVER FROM 1984
- 152. RESERVED
- 153. RESERVED
- 154. RESERVED
- 155. RESERVED
- 156. RETURN ID
- 157. RESERVED
- 158. RESERVED
- 159. DECIMAL WEIGHT
- 160. INTEGER WEIGHT

1 Only for lower income returns (returns with AGI less than \$200,000 and

 2^{\prime} Blurred for high income returns (note: State and local income taxes is also blurred for low income returns in Wisconsin) see the Introduction for a more complete explanation.

3/ Blurred for lower income returns, reserved for high income returns. 4 Blurred for all returns

CODE DEFINITIONS

AGEA.	Age	Riesb	tions			•						
	(A)	No e	Temption	lg				· · .				-
	(8)	One	ezemntid	n (Prima	ew anlw		• • • • •	·. · · · ·.	• • • • •	• • • • •		• • • • • •
	(C)	One	ezemptic	- (Coope	ty outy	'/ · · · · · · · · · · ·	• • • • •	• • • • •	• • • • •	• • • • •		• • • • •
	(D)				uart on							
	(0)	TMO	exembero	28	• • • • • •	• • • • •						
							•					
AGIR1	4.4.5		_				•					
AGIAI	Adju	sted (Gross In	come Rang	se B:		•	•				
				•	•						•	
	NO A	DJUSTI	ed gross	INCOME.		• • • • • • •						
	•	•	- angat	≠ 1,00	<i></i>							
	\$		under	• 2.00	0				• • • • •	• • • • •	• • • • •	0.
	, \$		under	9 3.00	0	• • • • • •		• • • • •		• • • • •	• • • • •	0
	\$	3,000	under :	• •. •	0		• • • • •	• • • • •	••••	• • • • •	• • • • •	0:
	\$	4,000	under :	5.00	0	• • • • • • • • • • •	••••	• • • • •	• • • •	• • • • •	• • • • •	04
	\$	5,000	under :		0	• • • • • • •	• • • • •	• • • • •	• • • •	• • • • •	• • • • •	05
	\$	6,000	under		0	• • • • • • •	• • • • •	• • • • • •	• • • •	• • • • •	• • • • •	06
•	\$		under	. , ,	0	• • • • • •	• • • • •	• • • • • •	• • • •	• • • •	• • • • •	07
	\$		under	,	0	•••••	• • • • •	• • • • • •	• • • • •	• • • •		:08
	\$		under	,	o	• • • • • •	• • • • •	• • • • • •	• • • • •			09
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	\$ 1	2 000	under 1	12,00	.					•		1 1
			under \$	13,00	U							1.2
	\$ 1	4 000	under 3	17,00	•							1 4
			under 3	13,000	U							7.0
				10,000	U							1.4
			under \$	1/,000	J							1 7
	• 1	7,000	under \$	10,000	J							10
	\$ 1	8,000	under \$	13,000	3			•				
	\$ 1	9,000	under \$	20,000								20
			under \$. 23,000								. 21
	3 . 2:	5,000	under \$	30,000					• •, • • •	• • • • •	• • • • •	21
			under \$	40,000) <i>.</i>			• • • • •	• • • • •	• • • • •	• • • • •	
			under \$	50,000				• • • • •	• • • • •	• • • • •	• • • • •	23
	\$ 50	0,000	under \$	75.000			• • • • • •	• • • • •	• • • • •	• • • • •	• • • • •	24
	\$ 75	5,000	under \$	100,000	1		• • • • •	• • • • •	• • • • •	• • • • •	• • • • •	25
	\$ 100	0,000	under \$	200,000)	• • • • • •	••••	• • • • •		• • • • •	• • • • •	26
	\$ 200	0.000	under \$	200,000	' • • • • • • • • • • • • • • • • • • •	• • • • • • •	• • • • •	• • • • • •	• • • •	• • • • •	• • • • •	27
	\$ 500	0.000	under \$	500,000		• • • • • •	• • • • •	• • • • • •	• • • •	• • • •	• • • • •	28
	\$1,000	000	OF BOTO	1,000,000	• • • • • •	• • • • • •	• • • • •	• • • • • •	• • • •			29
	72,550	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	- HOLE	• • • • • • • • • •	• • • • • • •	• • • • • •	• • • • •	• • • • • •	• • • • •	• • • •		30
GIND	Canita	1 04	oo Yodi.									
· · ·	AFATCE	- UE1	ns India	ECOL								
	/A\ =	la	. ويمد									
	(A) N	o cap	ital gai	n/loss	• • • • • •							n
	(2)	-yales	4 KEID D	resent								
•	(C) C	apita	l loss p	resent		• • • • •				••••	• • • •	٠٠٠٠
•						•			• • • • •	• • • • •	• • • •	2

*For high income returns, AGEX values of 2 or 3 have been changed to 1.

CYCL	Cycle Code
11:-	
EIC F	arned Income Credit
(A) Not present
	B) Present
ELEC1	The state of the s
	(A) No boxes checked
	(B) One "yes" box checked
	(C) Two "yes" boxes checked
	(D) Only "no" boxes checked
	(D) Only "no" boxes checked8
FDED	Form of Deduction Code:
. (A) Itemized deduction
i	3) No zero bracket amount or itemized deductions
ì	3) Zero bracket amount (STANDARD)
`	
	- " " TO TO TO TO THE TOUR TOUR TOUR TOUR TOUR TOUR TOUR TOUR
	2. With non-itemizer deduction4
FLPD	Filing Powind: (Assourting Pariod)
	Filing Period: (Accounting Period)
() ()	A) YR - Calendar Year ended
	Sale or Exchange of Principal Residence:
`` (<i>I</i>	No form attached
(1) Form present
F2441	Child Care Credit:
	Shild Cale Cledic.
(A	No Form 2441 attached
(E	One qualifying individual
()	
F5695	Form 5695 (Residential Energy Credit):
(A) No form attached
. (B) Number of principal residences occupied1-9
F6251	Alternative Minimum Tax
	No Form 6251 attached to the return
•	Form 6251 attached to the return

GENBUS	General Business Credit Form 3800 filed because more than one general business credit taken1 Jobs credit is only component of general business credit
MARS*	Marital Status:
(A) (B) (C) (D) (E) (F)	Single
PSV (A) (B) (C) (D) (E) (F)	Primary Stratifying Variable Sample Code 28 (AGI) and 38 (Schedule C net income)
REGION (A) (B) (C) (D) (E) (F) (G) (H)	IRS Regions Central

*For high income returns, MARS = 5 has been changed to MARS = 2.

£2555	Form 2555 (Foreign Earned Income) Indicator:
(▲	/ FVEM 2333 DDE RETREMAN
(B	Form 2555 not attached
•	Form 2555 present
SCHCF	Schedule C or f Indicator:
	solution of F indicator:
(▲)	Maithan Cabadula di an missi
(B)	Neither Schedule C or F present
, (C)	Schedule C present only
(Q)	Schedule F present only
(2)	Schedule C and F present
. (足)	Schedule C Gross Receipts Larger
(5)	Schedule C and F present
	Schedule F Gross Receipts Larger4
	•
SCHE	Mahada a a a
	Schedule E Indicator
(A)	No Schedule Present
(B)	Schedule E Present
SCHW	Schedule W Indicator
(▲)	No Schedule W
(8)	
(C)	Secondary Taxpayer Qualifying Income
	2
SPECTX	Special Tax Computation:
(A)	No entry
(B):	
(C)	Form 5544 tax used2
. (D)	Form 5544 tar need
(E)	
(F)	
(G)	Section 72(m)(5) penalty tax used. Any combination of Form A972 and other a
(H)	Any combination of Form 4972 and other taxes
, ,	Any combination of taxes excluding Form 4972

STATE

Code	STATE NAME	Códe	STATE NAME
1.	Alabama	29.	Nevada
2.	Alaska	30.	New Hampshire
3.	Arizona	31.	New Jersey
4.	Arkenses	32.	New Hexico
5.	California	33.	New York
· 6.	. Colorado	34.	North Carolina
7.	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 .	.43 .	Tennessee
16.	lome '	44.	Teras
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
24.	Minnesota	52.	APO/FPO
25.	Mississippi	53.	Puerto Rico
26.	Missouri .	54,	CP: 10
27.	Montana	54.	Guan
. 28.	Nebraska	54.	Virgin Islands
TFORM	Corrected Form of Return	I :	·
(▲)	1040 Return		
(B)	1040A Return		
(C)	1040EZ Return		

•	Returns with no total income tax	
	\$1 under \$50	00
	7 44446 AZUU. 1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.	
	7 4444 4300,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
	\$500 under \$600	06
	\$500 under \$600\$600 under \$700	07
	\$2,000 under \$2,250\$2.250 under \$2,500	15
	\$2.250 under \$2.500	16
	\$2,250 under \$2,500\$2,500 under \$2,750	17
• ,		
	\$10,000 under \$25,000 \$25,000 under \$50,000	24
	\$25,000 under \$50,000	25
	\$25,000 under \$50,000	26
	\$50,000 or more	27
•		
TXNT	Tamak 1 - m	
TANI	Taxable/Nontaxable Returns:	•
	-	
(A)		_
(B)	Nontaxable Return	1
		2
TXRT	Marrinal Tay Para /harad an 1997	
	Marginal Tax Rate (based on 1985 tax rate schedules)	1-50
TXST	TAY CTARRO	
-~~	TAX STATUS:	
	W. 	
(A)	No Tax	_
(8)		
(C)		
(D)	Non-Compute Nontarable. Schedule G (Income Areassias) To-	2
(E)	Schedule G (Income Averaging) Tax	3
, - ,		

Size of Total Income Tax

ASIND	WZ Indicator
, (A) Number of Forms W2 Present00-99
XFPT	Primary Taxpayer Exemption:
(▲	
(3	/ ••• •• • • • • • • • • • • • • • • •
(C	
(D)	Regular and Blind4
	•
1000 com	
xfst	Secondary Tarpayer Exemption:
(A)	A secondary respectively to the second secon
(B)	vePrigg
(C)	waterer and was
(D)	AWBULER, Age and blind
(E)	Regular and Blind4

XOCAH*	Exemptions for Children Living at Home:
Act	ual number entered0-99
XOCAWH	WYOMATIONS for Children Limits
	Exemptions for Children Living Away from Home:
	ual number entered0-99
IOODEP	Exemptions of Other Dependents:
Acti	ial number claimed
	number claimed0-99
•	
KOPAR	Exemptions for Paragraph Liming to
Actu	Exemptions for Parents Living at Home or Away from Home:
	al number entered0-9
	·
Kother	Exemptions Other than Age or Blind
(A)	
(8)	
(C)	Three2
(D)	Four
(E)	Five
(F)	Five
(.,	Six or more6
TOT	Total Exemptions:
	1 sushes succeed
AC-14	al number punched01-99
For hich	1800Me Metudes Vogar
to 3.	income returns, XOCAH with values greater than 3 have been changed
••	

EXPLANATIONS OF ELEMENTS NOT ABSTRACTED DIRECTLY FROM TAX FORMS

EXPLANATIONS OF ELEMENTS NOT ABSTRACTED DIRECTLY FROM TAX FORMS

The following explanations define data elements contained in the 1985 Individual Tax Model File that have not been abstracted directly from a specific line on Forms 1040, 1040A, 1040EZ or the accompanying Schedules and Forms. Element 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 "1985 Federal Tax Forms" section of this booklet for further information.

Element Number

Definition

- Zero Bracket Amount
 This amount was limited to the smaller of the statutory limit or Taxable Income (E39).
- Taxable Income, Old Concept
 This is a computed amount equal to Adjusted Gross Income minus (Zero Bracket Amount or Total Itemized Deductions) minus Exemption Amount, but never less than zero. This concept does not include the Zero Bracket Amount, and as such is comparable to taxable income as shown for Tax Years prior to 1977. See (E39).
- Taxable income
 This is a computed amount equal to Adjusted Gross income minus Excess
 Itemized Deductions (or plus unused Zero Bracket Amount) minus
 Exemption Amount. This concept includes the Zero Bracket Amount
 (Equivalent of the former Standard Deduction) and is thus not
 comparable to taxable income as shown for Tax Years prior to 1977.
 See (E38).
- 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.
- Income Subject to Tax (Old Concept)
 Income Subject to Tax (see E44) minus the Zero Bracket Amount.
- for taxpayers filing current year returns and using regular tax computation methods, income subject to tax is the same as taxable income. For prior year returns or taxpayers using the income averaging method (Schedule G), income subject to tax is a reduced amount of taxable income computed for the statistics by working backwards from the tax itself.

Element Number

Definition

- Earned Income Credit Used to Offset Income Tax Before Credits
 This amount was computed based on the lesser of: Karned Income Credit
 or Income Tax Before Credits minus all credits except the Earned
 Income Credit.
- Total Tax Credits (SOI)
 Total credits from Form 1040 (line 46 plus line 49) or 1040A (line
 22) plus the amount of Earned Income Credit used to offset Income Tax
 before Credits.
- Total Income TaxElement (59) plus element (61).
- 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.
- Marginal Tax Base
 This is the amount of income subject to tax at the highest tax rate applicable to the return (TXRT), using the 1985 tax rate schedules
- Total Tax Payments
 Total payments from 1040 or 1040A minus the total Earned Income
 Credit.
- 75 Earned Income for Earned Income Credit
 This consists of all wages, any other compensation from an employer,
 plus all other self-employment income or losses.
- 76-77 If Earned Income Credit (EIC) is greater than Income Tax Before Credits (E42), the following fields are computed:
 - 76. Earned Income Credit used to offset all other taxes. This value depends on whether the difference between EIC and EIC used to offset Income Tax Before Credit (E54) is less than the value calculated by Total Tax Liability minus Income Tax After Credits minus Advance Earned Income Credit payments.

If it is less than this value, this field equals EIC minus E54. Also, E77 equals 0. If this is not true, this field equals the value calculated by Total Tax Liability minus Income Tax After Credits minus Advance Earned Income Credit payments. Also, E77 is calculated (see below).

77. Earned Income Credit Refundable Portion
This equals EIC minus E54 minus E76 (see above for definitions and conditions).

Element Number									
	<u>Definition</u>								
117	Additional Losses Due to Pre-1970 Carryover. See Form 4798, Line 30. If Line 30, Form 4798 exceeds Line 19 of Schedule D, this is the value.								
118	Combined Capital Gains (Excluded Long-Term Gains). Sum of Line 22, Schedule D and 1.5 times Line 14, form 1040.								
119	Combined Capital Gains (combined net Capital Gain Less Loss). Sum of Line 19, Schedule D, plus 2.5 times Line 14, Form 1040.								
120	Combined Capital Gains (combined Long-Term Gains Included in AGI). If Net Short-Term Capital Gain are positive, the difference between Line 19, Schedule D and Excluded Long-Term Gains (El19 above). If Net Short-Term Capital Loss, subtract Line 8, Schedule D from above.								
159- 160	Weight:								
	(a) Decimal - A method of estimation by								

- (a) Decimal 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. If used, divide by 100.
- (b) Integer A method of estimation in which the decimal weight is converted to an integer weight and then applied to each return.

TECHNICAL DESCRIPTION OF THE FILE

TECHNICAL DESCRIPTION OF THE FILE

Each "data record" in the file, representing one tax return, is composed of 1,680 characters. Blocks are made up of 6 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 MBCDIC 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 zeroes. The fields in the file are 10 characters in lengthwith leading zeroes. Weight factors are provided to accommodate either a decimal or an integer weighting system.

The file is a single data set on multiple volumes and is UNLABELLED (EBCDIC) or LABELLED (ASCII).

INDIVIDUAL TAX MODEL SAMPLE DESCRIPTION

Sources of the Data

The data in the 1985 Individual Tax Model 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 National Computer Center and was processed in each of the ten Internal Revenue Service Centers during Calendar Year 1986. The total sample of 108,839 returns was selected from a population of 101.7 million returns.

The estimates that could be obtained from this file are intended to represent all returns filed for Income Year 1985. While most of the returns processed during 1986 were for Calendar Year 1985, a few were for prior years. Returns for prior years were used in place of 1985 returns received and processed after December 31, 1986. 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 1986.

All returns processed during 1986 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 Criteria and Selection

Form 1040, 1040A and 1040EZ returns filed and processed into the Internal Revenue Service's Individual Master File System at NCC during 1986 were stratified, by computer, into 33 sample strata based on: the presence or absence of a Schedule C, Profit (or Loss) from Business or Profession; presence of Schedule F, Profit (or Loss) from Farms; the larger of total income or loss, and the size of business plus farm receipts; size of Positive Amounts Total income (the sum of specified income amounts valued greater than zero) or the size of Negative Amounts Total income (the sum of loss amounts only). Returns were then selected from the sample strata using the coding digits of the Social Security Number (SSN) at rates ranging 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. All decimal sampling weights were then converted to "integer weighting factors," which were placed on each sample return. For example, if a decimal weight of 44.24 was computed for a stratum, 24 percent

of the sample returns in the stratum were systematically given a weighting factor of 45, and 76 percent a weight of 44. The file can be weighted with either decimal or integer weights.

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 1040 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 IRS Data Center, additional computer tests were applied to each return record to determine the need for adjustments to the data. Also, as a further check on processing, the IRS Data Center conducted an independent reprocessing of a small subsample of the returns previously processed for the study. 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 ELEMENT 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 2/
- 3. INTEREST RECKIVED
- 4. DIVIDENDS RECEIVED

Another example, Line 8, Interest Income, on the Form 1040 (see below) has a field number of 3. This field number is cross referenced to the Interest income line on the Core Record Layout, which contains the number 3 to the left of the line (see above).

8 Interest Income ---- 3

1040 U.S. Individual Income Tax Return

1985

For the year January	1-Dece	mber 31.	1965, or other tax year beginn		1985.	147.			- 10		
Use Your fo			tel (if joint return, also give sec			t name	_	-	. 19	OMB No. 1	
IRS	_								'	Annual Methods of	
Other- Preser	t heme	ome address (number and street, including apartment number, or rural route).								100's sectol securi	
010000					4	<u>.</u>					-,
or type.	men de :	out office	. state, and ZIP code		·.	Your occu					
Presidential	$\overline{}$	De wew		ATE		Semme's					
Election Campaig	,) .	If ident	want \$1 to go to this fu	ng? se want \$1 to go to this	449	_	(3)	ulig	No	Mote: Checking not change	
	1	Ť	Single	and want as to the turn			es //	7.11.	No	/educe you	e returne
Filing Status	2		7 " " "	m (even if only one had inc		many net t	749	Predit A	ABUCTION	Act Notice, see in	structions
Charles and	3			turn. Enter spouse's social sec							
Check anty one bax.	4		Head of household (with	h qualifying person). (See p	narky III. 45 nama 5 od le		I Rame	nore			
			ANY LICK LOST CONDENSCORE	. WITE CINS S Name here			r) ii tin	e quanti	ung pers	on is your units	וותם בחוו
MARS	5_		Qualifying widow(er) wi	th dependent child (year so	ouse died	▶19). (Se	e page (of Instr	uctions.)	
Exemptions	60	-	Yourself XFPT	65 or over			Blind) Enter number of	
eveniherand			Spouse XFST	65 or over			Blind			toxes checked	.
Always check	c	First M	imes of your dependent ch	ilidren who lived with you		OCAH				Ester number	
the box labeled Yourself,	_	Sient or				-				of children listed on 6c >	
Check other boxes if they	•	(If one-	imes of your dependent ch 1985 agreement, check he	ildren who did not live with) you (see p	6). X	CAW	<u> </u>		Enter number of children	
apply	•		ependents:		(3) Number of	(4) Oid dea	-	(5) Oid w		listed on 6d >	
			(1) Name	(Z) Relationable	menths inval	\$1,040 or		-	COP-Left of	Eater andler	
			XOPAR			1				of other dependents >	
			XOODEP							Add numbers	
	· · ·			red (also complete line 36)	,	. X1	OI.			.ontared is boxes above >	
Income	7		salames, tips, etc. (Attach						7	2	-
Please attach	8		income (also attach Sche						8.	3	1
Copy 8 of your	30		de (also attach Schedule 8 i		 . , %	Exclusion	_5		111,111	6	
Forms W-2, W-2G, and W-2P here.	10		t line 96 from line 96 and e						90		
If you do not have	11	Alimony	received . Fecalised .	come taxes, if any, from the	wartsheet	on page 9	of Instr	uctions.			
a W-2, see page 4 of	12	-	is income or (loss) (attach 5	Schoolsto (C)					11	8_	!
Instructions.	13		gain or (loss) (attach School		• • • •			• • •	13	9	
e.	14			ot reported on line 13 (see		 I nclu ence			14	10 11	
	15	Other g	ons or (losses) (attach for	m 4797)		HIGH GCOOL	➡/ .	• • •	15	12	
	16	Fully tax	rable pensions, IRA distribi	utions, and annuities not re	ported on	line 17 (se	 • • •	9).	16	13	
	17a	Other p	ensions and annuities, incl	uding rollovers. Total recei	vad 17a	14			Will. I	15	$\overline{}$
		Taxable	amount, if any, from the	worksheet on page 10 of I	nstructions	١			179	`	
	18	Form in	dyakies, partnerships, est	ates, trusts, etc. (attach Sc	hedule E7				18	16	
		i ineme	come or (loss) (attach Schi dyment compensation (insi	edule F)					19	<u> </u>]
Please	•	Taxable	SMOUNT, if you from the w	urance). I otal received orksheet on page 10 of Inst		18			Su Heli	19	1
ittach check or money	218	Social se	scurity benefits (see page	oridination page 10 or inst 10). Total received	ructions .	20	• •	1	206 ////////		_!
order here.	•	Taxable	amount, if any, from work	sheet on page 11					215	. 21	1
	22	Other in	come (list type and amount—:	no page () of (astructions)	· ——		1.	• • •	min .		
									22	÷	
			s 7 through 22. This is you						23		$\overline{}$
ldjustments	24	Moving (expense (artach Form 390	3 or 3903F)	24	22			Parties.		
e Income	25 26	EMPIOYE	e business expenses (atta	ch Form 2106).	25	23			destille		
			uction, from the worksheet stirement plan deduction		26	24		+	of the first		
See . Instructions			on early withdrawel of savi		28	25 26	- 	+		•	
n page 11.)			pard (received's last name			40	-	+	11117/		
			ray as		29	27			1.1		
	30	Deductio	in for a married couple who	n both work (attach Schedule)		28		+		•	
414	31 -	Add lines	24 through 30. These are	your total adjustments					31		
djusted	32	Subtract	line 31 from time 23. The	t at verse adjusted seems to	come if t	his line is	leas th	e n			+
ross Income				u. see "Earned Income Ci re your tax, see page 13 of			y 16	of _	32	1	

	5) 33	Amount from time 39 (adjusted green increase)				0.0		2364
21	34a	Amount from line 32 (adjusted grass income)				33	1	-
OM 94-		If you itemize, attach Schedule A (Form 1040) and enter the amount Cautient If you have ungerned income and can be claimed as a	from	Schedule A, line	26	34a	33	7
tion		return, check here > and see page 13 of instructions. Also	-	aa 13 if wax aa				
		THING a separate return and your spouse itemizes deductions, or yo	n ale 1	duel-status and	II.			
N	b	If you do not itemize but you made charitable contributions, enter				Hijjiga		
tructions page 13.)		your cash contributions here. (If you gave \$3,000 or more to any		•		Zijilliji.		
		one organization, see page 14.)	346			idi do		İ
•		Enter your nancash contributions (yes meet attach Form 8283 if over 5500)	34e					
	•	Add lines 34b and 34c. Enter the total	344					1
	•	Divide the amount on line 34d by 2. Enter the result here				340	34	
	35	Subtract line 34e or line 34e, whichever applies, from line 33				35	35	
	36	Multiply \$1,040 by the total number of exemptions claimed on line 6	i (see	page 14)		36	36	
	37	Taxable Income. Subtract line 35 from line 35. Enter the result (but	not les	s than zero) .		37	39	
	38	Enter tex here. Check if from 🔲 Tex Table, 🔲 Tex Rate Schedule X	L, Y, or	Z, or 🔲 Sche	dule G	38	40	
	39	Additional taxes. (See page 14 of instructions.) Enter here and ch	ock of	tram 🔲 Form	4970.	$\neg \neg$		
		☐ Form 4972, or ☐ Form 5544			[39		•
	40	Add lines 38 and 39. Enter the total .		<u> </u>	<u> </u>	40	42	į
edits	41	Credit for child and dependent care expenses (attach Form 2441)	41	50		anny f		
MIG.	42	Credit for the elderly and the permanently and totally disabled						-
		(attach Schedule R)	42	46				1
tructions	43	Residential energy credit (attach Form 5695)	43	52				į
14.)	44	Pertial credit for political contributions for which you have receipts	44	49		Willia.		
	45	Add lines 41 through 44. These are your total personal credits				45		
	46	Subtract line 45 from line 40. Enter the result (but not less than zero)				46		
•	47	Foreign tax credit (attach Form 1116)	47	47				Ţ
	48	General business credit. Check if from Form 3800.		include	48,		51)	!
		☐ Form 3468, ☐ Form 5884, ☐ Form 6478.	48	- 45		1911/11	31)	i
	49	Add lines 47 and 48. These are your total business and other credits.	(inc	ludes 53	.55)	49		
	50	Subtract line 49 from line 46. Enter the result (but not less than zero))			50	59 *	-
	51	Self-employment tax (attach Schedule SE)	_			51	62	
her	52	Alternative minimum tax (attach Form 6251)				52	.61 *	
ies -	53	Tax from recapture of investment credit (attach Form 4255)		• • • • •		53	63	_
	54	Social security tax on tip income not reported to employer (attach For			· · · }	54	64	-
cluding rence EIC	55	Tax on an IRA (attach Form 5329)	m +13		}	55	65	<u> </u>
ments)	56	Add lines 50 through 55. This is your total tax		,		56	57 *	-
	57			67	- 	Tillitte.	<u></u>	
rmests	58	Federal income tax withheld	57	68	+			
			58		+	74		1
ch forms	59	Earned income credit (see page 16).	59	69	+ -	hillion		ł
2. W·2G, I W·2P	40	Amount paid with Form 4868	60	0.7		gggan. u Lig		
ront.	61	Excess social security tax and RRTA tax withheld (two or more	_	/0				
		employers)	61		+	dir il		-
	62 63	Credit for Federal tax on gasoline and special fuels (attack Ferm 4135)	62	71 -	+ 8	Section 1		
	4	Regulated Investment Company credit (attach Form 2439). Add lines 57 through 63. These are your total payments	63	. 2			, , ,	
			<u> </u>	<u> </u>		64	66_*	!
fund or	65	If line 64 is larger than line 56, enter amount OVERPAID	. : .		. ▶	65	<u> </u>	<u> </u>
iene ui	44 -	Amount of line 65 to be REFUNDED TO YOU				66		-
i Ove	67	Amount of line 65 to be applied to your 1986 estimated tax	.67	14		944.		
. UNE	68	If line 56 is larger than line 64, enter AMOUNT YOU OW'L Attack check a	mene	y order for full as	nount	910		
		payable to "Internal Revenue Service." Write your securi security number and "	1905 F	orm 1040" an it .		68	73 (+)	
		Check. ► U If Ferm 2210 (2210F) is attached. See page 17. Penelty:	\$					
	Under beind.	parallies of parjury, I declare that I have examined this return and accompanitiely are true, current, and complete. Declaration of preparer (other than tempoyal	And R	namins and state	Ments, and	to the	best of my knowle	dge and
n			- / - / / - / - / - / - / - / - / -			-	THE BITY KNOWLED	£0
)- Te) .							
· · · · · · · · · · · · · · · · · · ·	y Y	our signature. Coto	-	Spouse's sign	Sture (if Mir	g journity	y. BOTH must sign)	
_ - -	Proper					Pres	erer's social s~	
i	Marat	* 7		Check if self-empley	_ [: • :	
						_		
perer's Cely	Firm's	nome (or if self-employed)			J. No.		:	

SCHEDULES A&B (Form 1040)

Ospertment of the Treasury Internal Revenue Service (D)

Schedule A—itemized Deductions (Schedule 8 is on back) Attach to Form 1040. See Instructions for Schedules A and 8 (Form 1040).

resmet(5) as shown o	n Fan	m 1040		,	Y	Nor security number
Medical and	1	Prescription medicines and drugs; and insulin	1,	<u> </u>	+	Westerne a notation
Dontal Exponses	2	a Doctors, dentists, nurses, hospitals, insurance premiums		+	- 	
(Do not include		you peid for medical and dental care, etc.	9.	1		The mouth to the flithing gray.
expenses		b Transportation and lodging	2a 2b		+-	
reimbursed or		c Other (list-include hearing aids, dentures, eyeglasses, etc.)	148	 	+-	
poid by others.)			1	i	ł	
See	•	***************************************			-	
natrue-	. 3	Add lines 1 through 2c, and write the total here	20		+	
tions on page 19.)	4	Multiply the amount or Form 1040, line 33, by 5% (.05)		88 ==	+	
	5	Subtract line 4 from line 3. If zero or less, write -0. Total med	4	<u> </u>	+-	
Taxes Yee	6	State and local income taxes			5	85 Miled (
Paid .	7	Real estate taxes	7	92	┿	
	•		<u> </u>	93		
See		General sales tax (see sales tax tables in instruction booklet) General sales tax on a sales tax tables.	130	94	┿	
nstruc-	9	b General sales tax on motor vehicles	-	94		
page 20.)	•	Other taxes (list—include personal property taxes)		96		
	10	Add the amounts on lines & thereath & William	3	97_	+	
	11	the total her		tal taxes . >	10	
nterest You	••		11a	99	┷_	
Paid		b Home mortgage interest you paid to individuals (show that	Ì	99	1	
See		person's name and address)	1. 1	ı	1	
nstruc-	12	Patel and the second se	115		ᆚ	
ions on lace 20.)	12	Total credit card and charge account interest you paid	12		_	
- LO./	13	Other interest you paid (list)				
		***************************************			1	
•		***************************************			1	
					.	
	14	Add the amounts on lines 11a through 13. Write the total here.	13	1:	<u> </u>	
entribetions	15	a Cash contributions. (If you gave \$3,000 or more to any one	190	i imterest . ▶	14	98
on Made		organization, report those contributions on line 15b.)	15a	101	1	
		b Cash contributions totaling \$3,000 or more to any one		. 101	 	
See Mittue:		organization. (Show to whom you gave and how much you			[
STE ON		gave.) >		100		
ago 21.)		gave.) >	156	102		
	16	Other than cash. (You must attach Form 8283 if over \$500.)		102	├ ─	
	17	Commence from pales were	16 17	103		
	18	Add the amounts on lines 15a through 17. Write the total here. Total	- 	104		
asualty and	19	Total casualty or theft loss(es). (You must attach Form 4684 or sim	COM	UIDUCIONS . P	18	100
boft Losses		(See page 21 of Instructions.)	HIBF ST	_		ARROMANIAMININA PROMININA
Iscallageous	20	Union and professional dues	20	<u> </u>	19	106
eductions	21	Tax return preparation fee	21			
	22	Other (list type and amount)	+			
ee struc-		The type wife minusity		•		
ons on						
21.)		***************************************				
		***************************************	22			
	23	Add the amounts on lines 20 through 22. Write the total here. Total	Sie or	diament.	22	
IMMATY of			maç	RIBNIGOUS . P	23	
mized	24	Add the amounts on lines 5, 10, 14, 18, 19, and 23. Write your answ	ver he	n	24	107
AND CEDORS	·	(B:Ha= 01-4 - 1 - 0 - 0 - 1 - 0 - 0 - 0 - 0 - 0 - 0				<u> </u>
ee struc:	25 ·	If you checked Form 1040 Filing Status box 2 or 5, write \$3,540 Filing Status box 1 or 4, write \$2,390	\ .		25	3 7
ns on		(Filing Status box 3, write \$1,770	1			
(m) 22.)	26	Subtract line 25 from line 24. Write your answer here and on Form 1	()4()	line 24 - 44		
•		line 25 is more than line 24, see the instructions for line 25 as asset	, , , , ,	mm 345. (IT	امما	

SCHEDULE D (Form 1040)

Capital Gains and Losses and Reconciliation of Forms 1099—B

► Attach to Form 1040. > See Instructions for Schedule D (Form 1040). OMB No. 1545-0074

Department of the Treesury Internal Revenue Service (X)
Name(s) as shown on Form 1040

	· · · · · · · · · · · · · · · · · · ·	-8 for Sales of						
confirmation-stat	on Form(s) 10 tement	99-8 or an equi	valent substitute st	atement(s), such	as a broker's	18		
Note: Also comp for 1985, fo		Alfrujeth An 251 Alf Alfrigation (17 200) Alfrumanien						
Part II Short-term	Capital Gains	and Losses-Ass	ets Held Six Mon	ths or Less (one	year or less if a	cquir	ed before 6/2	3/84
(a) Description of property (Example, 100 shares 7% preferred of "Z" Co.)	(b) Date acquired (Mo., day, yr.)	(c) Oate sold (Mo., day, yr.)	(d) Gross sales price	(e) Cost or other base (see instructions)	(f) LOSS if column (e) is m then (d) subtract from (e)		(g) GAIN If column (d) is then (e) subtrac from (d)	more it (e)
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			ice from Form 2119, li		yayi sanakanin karin da karin Karin karin da karin	Million.		
			252, lines 22 or 30			1. 191		
4 Net short-term ga	in or (loss) from p	partnerships, S co	orporations, and fidu	iciaries . 4				
5 Add lines 1h throu	and A in anii. man	/A / / - \		151	(109	1. 11	108	i
			•••••		`		- 100	.
6. Combine columns	(f) and (g) of line	5 and enter the	net gain or (loss)	<u></u>		6	. — —	
6. Combine columns7. Short-term capita	(f) and (g) of line I loss carryover fr	5 and enter the om years beginn	ing after 1969			7	(110	
6. Combine columns7. Short-term capita8. Net short-term ga	s (f) and (g) of line I loss carryover from or (loss), comb	5 and enter the om years beginn ine lines 6 and 7	ing after 1969	han Siv Months		-		
6. Combine columns 7. Short-term capita 8. Net short-term ga	s (f) and (g) of line I loss carryover from or (loss), comb	5 and enter the om years beginning lines 6 and 7 and Losses-Ass	ing after 1969 Sets Held More T	han Six Months		7		
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Sombine columns Short-term capita Net short-term ga arctill Long-term (more than be long-term gain from Long-term gain from Long-term gain from	s (f) and (g) of line I loss carryover fr In or (loss), comb Capital Gains I one year if ac	e 5 and enter the om years beginns the lines 6 and 7 and Losses-Assquired before to principal residence less from Form 62	trom Form 2119, lines 252, lines 22 or 30	6, 8, or 12 10		7 8		
S. Combine columns Short-term capita Net short-term ga artill Long-term (more than) Long-term gain from Long-term gain from Net long-term gain	s (f) and (g) of line I loss carryover fr In or (loss), comb Capital Gains I one year If ac I one year if ac I on installment sa In or (loss) from pa	e 5 and enter the om years beginns the lines 6 and 7 and Losses-Assquired before to principal residence les from Form 62 artnerships, 5 cor	sets Heid More T 6/23/84)	6, 8, or 12 10		7 8	(110	
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Long-term gain from Combine columns Capital gain distrit Enter gain from Fo Combine lines 14	s (f) and (g) of line I loss carryover fro In or (loss), comb Capital Gains I one year if ac I one year if a	s 5 and enter the om years beginning lines 6 and 7 and Losses-Assquired before (approximately principal residence les from Form 62 artnerships, 5 cor (f) and (g) and enter the or 8b	from Form 2119, lines 252, lines 22 or 30 porations, and fiduces after 1969	6, 8, or 12 10 11 12 12	OF THE STATE STATE OF THE STATE	7 8	111	

SCHEDULE E (Form 1040)

Supplemental Income Schedule

(From rents and royalties, partnerships, estates, and trusts, etc.)

➤ Attach to Form 1040. ➤ See Instructions for Schedule E (Form 1040).

1985

internal Revenue Service (X)
Neme(s) as shown on Ferm 104

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In the space provided below, show to kind and location of each rental property.		For each property lis of the properties for air rental value durin		ber of your family r of 14 days or 1	use for personal purposes : 0% of the total days rented
Property A			<u> </u>	· · · · · ·	Yes M
Property A			*********		
Property C		*****************	****************	**************	
ental and Royalty Income			Properties		<u>-</u>
since and Royalty Income		A	8	С	Totals (Add columns A, B, and
a Rents received					3
ental and Royalty Expenses			1		A SEPSHIMANINE WING AN
Advertising	. 4				
Auto and travel	. 5				- Committee Supplement of the Committee
Cleaning and maintenance	. 6	·			We allow in the substitute of hill
Commissions	. 7	-			
Insurance	. 8			· · ·	The standard of South
Legal and other professional fees .	. 9				
Mortgage interest paid to financial					4.5.7.5 500 (11.5.7.5 50/900.50)
institutions (see instructions)	10		<u> </u>		10
Other interest	. 11				200 deserve eminine eminine
Repairs	. 12				
Supplies	. 13	1			
Taxes (Do net include Windfall Profit	:		•		The wife polling for dring
Tax here. See Part III, line 34.).	14	· .		1	The San Ta epolyon; Sing
Utilities	15				The May I wante of the
Wages and salaries	16				The little production of the state of
Other (list) ▶					
					
					The say that and I freyer
			·		The Property Property in the State of State
					- Jan I Santager 19 19 19 19 19
					The the Million Deployed to
					Pro the Section of the Control of the Control
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Total expenses other than depreciation	.				Policife C. "off" Plintallillichanis
and depletion. Add lines 4 through 17.	18				
Depreciation expense (see Part V	1 1				18
nstructions), or depletion	19			İ	19 122
	[2 19 122
otal. Add lines 18 and 19	20				The state of the state of the
ncome or (loss) from rental or		rental resolute			The Cheroken Heate Charle
oyalty properties. Subtract line 20	1 4.	123, 124	1 1	1	Sometime to the Colory of White Court
rom line 3a (rents) or 3b (royalties).		1 1		.	The Sold of the Sold of the
	and write	the total profits here			22
dd properties with profits on line 21, a		the total dames he		• • • • • •	
add properties with profits on line 21, and properties with losses on line 21, and	and write	다 (10대 (((((((((((((((((((
combine amounts on lines 22 and 23.	and write	the net neaft or /lo-	is) here	• • • • • •	23 (
combine amounts on lines 22 and 23, let farm rental profit or (loss), from For	and write	the net profit or (los	s) here	· · · · · ·	24
combine amounts on lines 22 and 23, a let farm rental profit or (loss) from For otal rental or royalty income or (loss)	and write rm 4835,	the net profit or (los	s) here	• • • • • • • • • • • • • • • • • • •	24 25 121 pm
combine amounts on lines 22 and 23.	and write rm 4835, . Combin	line 35	s) here	the total here. If	24 25 121 pm

dulo E (Form 1040) a(s) as shown on Form 1040 (Do n

a.irt II									
you re	port a loss below, and have amoun	ts invested in that a	(b) Check if fereign pertnersive	you are not at nak. (e) Employer dentification num	•	(d) Met to (d) Met to (see instruction at-mak inmitted		(e) Not inco	
		·							
. [<u> </u>		•					
	<u></u>			·			\perp	•	
			1				↓ _↓		<u>i</u>
	25 Add amounts in columns (d	l) and (e) and write	the total(s) her	•	26	125))	125	<u>:</u>
- 1	27 Combine amounts in calum			•			. 27		t
	28 Deduction for section 179 p	- , ,		, ,			1	127	+
	29 Total partnership income o include in line 39 below.	r (loss). Combine a		27 and 28. Writi	the t	otal here and	29		
			and the same of						
	<u> </u>	-				_	1 1		į.
Trusts							1		
ا ڪر	30 Add amounts in columns (d				30		1 1	<u> 128</u>	\downarrow
	31 Total estate or trust income total here and include in lin			olumns (d) and (e), line	30. Write the	31	<u> </u>	
		<u> </u>	millon or						į
,			Windows.			_			
ļ			522 E. C. S.						!
	32 Add amounts in columns (d) and (e) and write	the total(s) her	•	32	(131	 	130	-
	33 Combine amounts in colum		· .				. 33		-↓
- 1	34 Deduction for section 179 pr	· . · · ·						<u> </u>	
-	35 Total S corporation income and include in line 39 below		e amounts on l		Write 1	the total here	35		
	Windfall Profit Tax Summ						1 00 1	120	
	idfall profit tax credit or refund r						36	132	+-
AAIL	ndfall profit tax withheld in 1984	(see instructions)					. 37	<u>(133</u>	+-
C~	mbine amounts on lines 36 and 3	17 Water the term !	haan aad iaaliid	s in line 20 below			38		
	Summary	77 . 111104 0.74 0.5041		F /// /// 23 54-0-0-	•		, 55		
	- Comment						1		ī
TO	TAL income or (loss). Combine lir	es 25, 29, 31, 35,	and 38. Write to	otal here and on F	orm 10	340. line 18 I	> 39	16	
	rmers and fishermen: Write y							11 11 11	
IN	COME applicable to Parts I and I				40				£
art V	Depreciation Claimed in separate sheet. If you placed a								
		(b) Coso	(e) Cost or	(d) Degracution	_	paracrapas	(f) Life	(g) Degrees	
i	(a) Description of preparty	acquares	OFFICE BARBA	state in prior years		nothed	or rece	for this yes	
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Toron	NS (Property A)								
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	its (Property C)			· ·	L				
	ine to loberty by							•	

SCHEDULE SE (Form 1040)

Computation of Social Security Self-Employment Tax

▶ See Instructions for Schedule SE (Form 1040),

Department of the Treasury

Name of a	(A)	Attach to Form 1040.				_
	olf-employed person (as shown o		Social security number .self-employed person 8	of .	18	
Part I	Regular Computation of	Net Earnings From Self-Employment				
Note:	If you performed services for ster or a member of a religious rm profit or (less) from Services	certain churches or church-controlled orga	nizations and you are not	11 /11/	tti ti Siyaftiya k	This was
1 Net fa:	rm profit or (loss) from Schedi 1065), line 13a	s order, see the instructions. ule F (Form 1040), line 39, and farm partne	rahins. Schodule K., 1			
	•			1		
than fa	ont or (1988) from Schedule Carming), and Form W-2 was	(Form 1040), line 33, Schedule K-1 (Form 1040), line 33, Schedule K-1 (Form 1040), line 33, Schedule K-1 (Form 1040), line 33, Schedule K-1 (Form 1040), line 33, Schedule K-1 (Form 1040), line 33, Schedule K-1 (Form 1040), line 33, Schedule K-1 (Form 1040), line 33, Schedule K-1 (Form 1040), line 33, Schedule K-1 (Form 1040), line 33, Schedule K-1 (Form 1040), line 33, Schedule K-1 (Form 1040), line 33, Schedule K-1 (Form 1040), line 33, Schedule K-1 (Form 1040), line 33, Schedule K-1 (Form 1040), line 33, Schedule K-1 (Form 1040), line 33, Schedule K-1 (Form 1040), line 33, Schedule K-1 (Form 1040), line 33, Schedule K-1 (Form 1040), line 34, Schedule K-1 (Form 1040), lin	m 1065), line 13a (other			
				2		
membi	Check here if you are e	mempt from self-employment tax on your	earnings as a minister.	Marinity.		
See in:	structions for kinds of incom	to record if you have not	form 4361.			
Subject		and control descripting Off Hills 5.				
Part II	Optional Computation of (See "Who Can Use School	Net Earnings From Self-Employment		William Al		
	Generally, this part may be us	sed only if you meet any of the following too				
•	L LARI RIARE ISLUI IUCOMIG ()	Schedule F (Form 1040) line 12\				
	D. Gost (Bill) HICOHIA (SCREGULE F (FORM 1040) line 19\ was mass	than \$2,400 and your ne	t farm o	radida (Cabada)	4
	of your gross nonfarm inc	(Schedule C (Form 1040), line 33) were less come (Schedule C (Form 1040), line 5).	s than \$1,600 and also les	is than ti	wo-thirds (3/5)	•
	See instructions for other limit	tations.	•		, ,	
3 Maximu	im income for optional metho	ds		3	\$1 600	- 24
Fram O	ptional Method—if you meet	test A or R shows actors the amount	thirds (%) at gross form		\$1,600	1 00
13b; or)), line 12, and farm pertnerships, Scheduk	K-1 (Form 1065), line			1.
Subtract	t line 4 from line 3			4	<u> </u>	
Nonfarn	Optional Method—If you n	neet test C above, enter: the smallest of	Anna Abrilla (84)	5		-
than fari) income from Schedule C (Fo ming); or \$1,600; or lifyou all	orm 1040), line 5, and Schedule K-1 (Form	1 1065), line 13c (other		•	
		orm 1040), line 5, and Schedule K-1 (Form acted the farm optional method, the amoun curity Self-Employment Tax	t on line 5	6		
Enter the	amount from Part I, line 1, o	r, if you elected the farm optional method, i	Part II, line 4	7		T
		r, if you elected the farm optional method, if not fill in the rest of the schedule because you		8		
					includes	30
The large	ontrolled organization, complete	the schedule unless this line is a loss. See in	tructions)			
_	est amount of combined wa etirement tax (Tier 1) for 198		t to social security or		29	
a Total	SOCIAL SOCIETY WHERE AND AND A			10	\$39,600	00
. comp	ensation (Tier 1). Note: U.S. G	overnment employees whose wages are	1			
emplo	Vees of certain church or chi	insurance penems tax (Medicare) and			i	
			•	92911		
b Unreg	ported tips subject to social se	scurity tax from Form 4137, line 9, or		1. 19. 19. 19. 19. 19. 19. 19. 19. 19. 1		ı
	road retirement tax (Tier 1) nes 11a and 11b	· · · · · · · · · · · · · · · · · · ·		Million .		
a Subtra	act line 11c from line 10			lic]	
b Enter	your "qualified" U.S. Govern	ment wages if you are required to use the v		125	Tulit semma	_
		r electing church or church-controlled organ	ization.			
	smaller of line 9 or line 12a			13		
it fine 13	is \$39,600, fill in \$4,672,80	on line 14. Otherwise multiply line 13 a				

*4 Self-employment tax. Enter this amount on Form 1040, line 51 (comprised of 31,32)

For Paperwork Reduction Act Notice, see Ferm 1040 Instructions.

Schedule W

(Form 1040)

Department of the Treasu Internal Revenue Service

Names as shown on Form 1040

Deduction for a Married Couple When Both Work

Reduction Act Notice, see Form 1040 instructions. Attach to Form 1040.

OMB No. 1545-0074

Step 1 Figure your earned income

1	Wages salaries time etc. from Sour 1040 III -		(a) You		(b) Your spous	-
2	Wages, salaries, tips, etc., from Form 1040, line 7. (Do not include nondisability pensions or annuities.) Net profit or (loss) from self-amount of the continuous self-amount of the con	1		1		
	Net profit or (loss) from self-employment (from Schedules C and F (Form 1040). Schedule K-1 (Form 1065), and any other earned income):	2		2		
<u>3</u>	Add lines 1 and 2. This is your total earned income.	3		3		+-
	tep 2 Figure your qualified earned income					
4	Adjustments from Form 1040, lines 25, 26, 27, and any repayment of sub-pay included on line 31. (See instructions below.)					
5	Subtract line 4 from line 3. This is your qualified earned income. If the amount in column (a) or (b) is zero (-0-) or less, stop here. You may not take this deduction	5	138	4.		
51	tep 3 Figure your deduction		130	5	139	
5	Compare the amounts in columns (a) and (b) of line 5 above. Write (Write either amount if 5(a) and 5(b) are the same.) Do not write n	the sma	niler amount her	e. 6		T-
,	Percentage used to figure the deduction (10%)		•			.10
,	Multiply the amount on line 6 by the percentage on line 7. This is the tion. Write the answer here and on Form 1040; line 30		int of your dedu	c.	28	1

Instructions

Complete this schedule and attach it to your Form 1040 if you take the deduction for a married couple when both work. You may take the deduction if both you and your spouse:

- work and have qualified earned income, and
- file a joint return, and
- do not file Form 2555 to exclude income or to exclude or deduct certain housing costs, and
- do not file Form 4563 to exclude income

There are three steps to follow in figuring the deduction on Schedule W.

Step 1 (lines 1, 2, and 3).—Figure earned income separately for yourself and your spouse.

Step 2 (lines 4 and 5).—Figure alified earned income separately for irself and your spouse by subtracting tain adjustments from earned

Step 3 (lines 6, 7, and 8).—Figure the deduction based on the smaller of:

- the qualified earned income entered in column (a) or (b) of line 5, whichever is less, OR
- \$30,000.

Earned income.—This is generally income you receive for services you provide. It includes wages, salaries, tips, commissions, certain disability income, sub-pay, etc. (from Form 1040, line 7). It also includes income earned from self-employment (from Schedules C and F of Form 1040 and Schedule K-1 of Form 1065), and net earnings and gains (other than capital gains) from the disposition, transfer, or licensing of property that you created. Earned income does not include interest, dividends, social security or tier 1 railroad retirement benefits, IRA distributions, unemployment compensation, deferred compensation, or nontaxable income. It also does not include any amount your spouse paid

Caution: Do not consider community property laws in figuring your earned income.

Qualified earned Income. —This is the amount on which the deduction is based. Figure it by subtracting certain adjustments from earned income.

These adjustments (and the related lines on Form 1040) are:

Employee business expenses (from line 25).

28

- IRA deduction (from line 26).
- Keogh retirement plan deduction (from line 27).
- Repayment of supplemental unemployment benefits (sub-pay) included in the total on line 31. See the instructions on repayment of sub-pay on page 12 of the Form 1040 Instructions.

Enter the total of any adjustments that apply to your or your spouse's earned income in the appropriate column of line 4.

Example. — You earned a salary of \$20,000 and had \$3,000 of employee business expenses (Form 1040, line 25). Your spouse earned \$17,000 and had an IRA deduction of \$1,000 (Form 1040, line 26). Your qualified earned income is \$17,000 (\$20,000 minus \$3,000) and your spouse's is \$16,000 (\$17,000 minus \$1,000). Because your spouse's qualified earned income is less than yours, the deduction is figured on your spouse's income. Therefore, the deduction is \$1,600 (\$16,000 x .10).

1040A		US Individual Income Tax Return (a) 1985	
Step 1		Use the IRS mailing label. If you don't have one, print or type:	OMB No. 1545-0
Name and	;	Your first same and install (if Joint states, also give operate's name and install)	<u> </u>
		Last name	Your social assurity
	ì	'reveat home addres (number and screet)	
	•		Sprume's enemal security
-	C	AV. turns or past office, state, and ZIP major	
		STATE	,
	•	Presidential Election Campaign Fund	
	ī	Oo you want \$1 to go to this fund? ELECT Yes No	•
		f joint return, does your spouse want \$1 to go to this fund? Yes No	
Step 2		1 Single (See if you can use Form 1040EZ.)	<u> </u>
Check your		2 Married filing joint return (even if only one had income) 3 Married filing joint return (even if only one had income)	
filing status		wattred thing separate return. Enter enouse's social as well	
Check only ones			
1ARS		4 Head of household (with qualifying person). If the qualifying person is but not your dependent, write this child's name here.	*****
		but not your dependent, write this child's name here.	your unmarned child
Step 3		Always check the exemption has labeled Warren to go	
Figure your oxemptions	XFPT	Always check the exemption box labeled Yourself. Check other boxes if the	ey apply.
· SIMILATIONS	XFST	b ☐ Spouse ☐ 65 or over ☐ Blind	Write musicar
`		e First names of your dependent children who lived with you XOCAH	of boses checked on 5e and b
•			Write number of
Uses Com. B. d		d First names of your dependent children who did not live with	chairtren insection Sc
trach Copy B of irm +- W-2 here	•	you (see page 11). (If pre-1985 agreement, check here .) XOCAWH	
		Other dependence:	Write number of
		Other dependents: 1. Number of 4. Did dependent 5. Did yes provide many in the second state of th	Write number of children listed on 5d
		Other dependents: 1. Name 2. Relationship u year hous. 4. Did dependent. here usome of thes one-half of dependent is appear. \$1.040 or user?	Write mamber of chaldren listed on 5d
		1. Name 2. Relationship months lived have master of then one half of	Write number of chaidren listed on 5d
		1. Name 2. Relationship in year hous. \$1.040 or more? dependent appear.	children listed on 5d
		1. Name 2. Relationship in year hous. \$1.040 or more? dependent appear.	children listed on 5d
		I. Name 2. Relationship the poor home. 3. Did you provide man than the poor home. 3. Did you provide man than one-half of the one-half of t	write number of
ten 4		1. Name 2. Relationship mentles from here transfers then control of the control	Write number of other dependents listed on 5e
•		I. Name 2. Relationship 1. Name 2. Relationship 2. Relationship 3. Did you provide many there. 31.040 or many? 4. Did you provide many there. 5. Did you provide many there. 5. Did you provide many there. 5. Did you provide many there were the control of the control of dependent to respect to the control of the control of dependent to respect to the control of the contr	Write number of other dependents listed on the Add number entered
gure your	· · ·	f Total number of exemptions claimed. (Also complete line 18.) XTOT Total wages, salaries, tips, etc. This should be shown in Box 10 of your W-2 form(s). (Attach Form(s) W-2.)	Write number of other dependents listed on the Add interberg entered
gure your	.7	f Total number of exemptions claimed. (Also complete line 18.) XTOT Total wages, salaries, tips, etc. This should be shown in Box 10 of your W-2 form(s). (Attach Form(s) W-2.) Interest income. (If the total is over \$400, also attach Schedule 1, Part III.)	Write number of other dependents lasted on the Add numbers entered on lines above
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gure your cherking income	7 8 9; 10 11 12	I Name 2. Relationship 2. Relationship 2. Relationship 2. Relationship 3. Lood or mase? 3. Lood or mase? 4. Lood or mase? 4. Lood or mase? 4. Lood or mase? 4. Lood or mase? 5. Lood or mase? 6. Lood or mase? 7. Lood or mase? 7. Lood or mase? 8. Lood	Write number of other dependents listed on the dependents listed on the entered on inner above
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gure your tal income	7 8 9; 10 11 12	Total number of exemptions claimed. (Also complete line 18.) XTOT Total wages, salaries, tips, etc. This should be shown in Box 10 of your W-2 form(s). (Attach Form(s) W-2.) Interest income. (If the total is over \$400, also attach Schedule 1, Part III.) Dividends. (If the total is over \$400, also attach Schedule 1, Part IV.) Total. 8a 4 89 Exclusion (see page 16). 8b 5 Subtract line 8b from line 8a. Write the result on line 8c. Unemployment compensation (insurance), from Form(s) 1099-G. Total received. Add lines 6, 7, 8c, and 9b. Write the total. This is your total income. Individual retirement arrangement (IRA) deduction, from the worksheet on page 19. Deduction for a married couple when both work. Complete and arrange agency of the instruction of the worksheet on page 19.	Write number of other dependents listed on the dependents listed on the entered on inner above

1392	POI	m 1040A		Page 2
Step 6	. 15	Write the amount from line 14.		
Figure your		If you made charitable contributions, write your	15	1
taxable	100	cash contributions. (If \$3,000 or more to any one		
income		0. 1.		
			_	
	b	Write your noncash contributions. If over \$500,		
		you must attach Form 8283. 16b	_	
	C	Add lines 16a and 16b. Write the total. 16c		
	d	Divide the amount on line 16c by 2 and write the result.	<u> 16d</u>	34 .
	17	Subtract line 16d from line 15. Write the result.	17	35 .
	18	Multiply \$1,040 by the total number of exemptions claimed on line 5f.		
•		See the chart on page 22 of the instructions.	18	<u> 36 · </u>
	19	Subtract line 18 from line 17. Write the result. This is your taxable income.	▶ 19	39
Step 7	If Yo	ou Want IRS to Figure Your Tax, See Page 22 of the Instructions.		
Figure your	20	Find the tax on the amount on line 19. Use the tax table, pages 31-36.	20	_ 40 .
tax. credits,	21a	Credit for child and dependent care expenses.		
and		Complete and attach Schedule 1, Part II. 21a 50		
payments	h	Partial credit for political contributions for	_	
including advance	. •	which you have receipts. See page 24 of the		
EiC payments)		instructions. 21b 49		56 */
•	20		–	56
	22	Add lines 21a and 21b. Write the total.	22	
	23	Subtract line 22 from line 20. Write the result. (If line 22 is more than line 20, write -0- on line 23.) This is your total tax.	▶ 23	5; * /
	248	Total Federal income tax withheld. This should		
		be shown in Box 9 of your W-2 form(s). (If line	Ţ	
		6 is more than \$39,600, see page 25 of the	•	
- -		instructions.) 24a 67		
•	_		_	
	9	Earned income credit, from the worksheet on		
		page 27 of the instructions. See page 26 of the		
		instructions. 24b .	_	
•		t and the second second second second second second second second second second second second second second se		`*/
	<u> 25</u>	Add lines 24a and 24b. Write the total. These are your total payments.	▶ 25	66 * /
Step 8	26	If line 25 is larger than line 23, subtract line 23 from line 25. Write the result.		
Figure your		This is the amount of your refund.	26	73 (-)
rigure your refund	27	If line 23 is larger than line 25, subtract line 25 from line 23. Write the result.		•
or amount		This is the amount you owe. Attach check or money order for full amount		
you owe		payable to "Internal Revenue Service." Write your social security number	•	_
		and "1985 Form 1040A" on it.	27	<u> </u>
	Unde	er penalties of perjury. I declare that I have examined this return and accompanying schedule y knowledge and belief, they are true, correct, and complete. Declaration of preparer (other	m and states	pents, and to the bes
Step 9	infor	mation of which the preparer has any knowledge.		, _, <u>_</u>
Sign your return	Your	nignature Date	Your occu	petion
•	x			
•	Spina	ne's sugmatture (if jount rettern, both must sign)	Spound's o	ccupation
-		•		-
•	×		· .	
• •		preparer's Dete	Preparer's	social security no.
	11000			
•	x			
			Parala:	vientification po.
		s name.(nr . if self-emphysed)	Cimbooket	MANUFACTURE DO.
	Addin	res and ZIP code	Check if a	elf-employed
	·			•

lamets) as shown on Form 1040A.

Your social security number

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You MUST complete and attach Schedule 1 to Form 1040A if you:

- Claim the deduction for a working married couple (complete Part I)
- Claim the credit for child and dependent care expenses (complete Part II)
- Have over \$400 of interest income (complete Part III)
- Have over \$400 of dividend income (complete Part IV)

Part I Deduction for a married couple (filing a joint return) when both work (see page 20)

Complete this part to figure the amount you can deduct on Form 1040A, line 12. Attach Schedule 1 to Form 1040A.

Wages, salaries, tips, etc., from Form 1040A, line 6.	1	(a) You	()) Your spouse
IRA deduction, if any, from Form 1040A, line 11.	2 —			<u>·</u>
Subtract line 2 from line 1. Write the result.	3 =	138 .	-	139
Write the amount from line 3, column (a) or (b) above Percentage used to figure the deduction (10%).	e. whic	hever is smaller	. 4	
and the deaderion (10%).			5	× .1

6 Multiply the amount on line 4 by the percentage on line 5. Write your answer here and on Form 1040A, line 12. 28

Part II

Credit for child and dependent care expenses (see page 23)

Complete this part to figure the amount of credit you can take on Form 1040A, line 21a. Attach Schedule 1 to Form 1040A.

- Write the number of qualifying persons who were cared for in 1985. (See the instructions for the definition of a qualifying person.)
- 2 Write the amount of qualified expenses you incurred and actually paid in 1985 for the care of the qualifying person, but DO NOT write more than \$2,400 (\$4,800 if you paid for the care of two or more qualifying persons).
- 3 If unmarried at the end of 1985, write your earned income on line 3c, OR
 - If married, filing a joint return for 1985, you must complete lines 3a and 3b. a. Write your earned income 3a b. Write your spouse's earned income
 - c. Compare the amounts on lines 3a and 3b, and write the smaller of the two amounts on line 3c.
- 135 Compare the amounts on lines 2 and 3c. Write the smaller of the two 3с 136
- Write the percentage from the table below that applies to the amount on Form 1040A, line 15.

If line 15 is:	Percentage is:	If line 15 is:	Percentage
But not Over— over— \$0—10,000 10,000—12,000 12,000—14,000 14,000—16,000 16,000—18,000 18,000—20,000	30% (.30) 29% (.29) 28% (.28) 27% (.27) 26% (.26) 25% (.25)	But not Over— over— \$20,000—22,000 22,000—24,000 24,000—26,000 26,000—28,000 28,000	24% (.24) 23% (.23) 22% (.22) 21% (.21) 20% (.20)

6 Multiply the amount on line 4 by the percentage on line 5. Write the result here and on Form 1040A, line 21a.

50 6 =

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1040EZ	Department of the Treasury - Internal Revenue Service Income Tax Return for Single filers with no dependents. (x) 1985	010 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Name & address	Use the IRS mailing label. If you don't have one, please print:	Please print your numbers like this.
	Print your name obove (first, initial, last)	Your social security number
	Present home address (number and street)	
-	Presidential Election Campaign Fund	čes No
Figure your tax	Do you want \$1 of your tax to go to this fund? ELECT 1 Total wages, salaries, and tips. This should be shown in Box 10 of your W-2 form(s). (Attach your W-2 form(s).) 2 1	Dollars Cents
	2 Interest income of \$400 or less. If the total is more than \$400, you cannot use Form 1040EZ. 3 2	
Attach Copy B of Form(s)	3 Add line 1 and line 2. This is your adjusted gross in forms	一种种
W-2 here	Allowable part of your cash charmable contributions. See instructions for line of back of this form. 34	
•	5 Subtract lim 4 hand line 3.	PO GOILA
	6 Amount of your personal examption.	040.00
	Subtract tips of convines living of starger than line 5, enter e en line 7 pus is your taxable income. 39 7	
	8 Enter your Federal income tax withheld. This should be shown in Box 9 of your W-2 form(s). 67 8 9 Use the single column in the tax table on pages 31-36 of	
Refund	the Form 1040A instruction booklet to find the tax on your taxable income on line 7. Enter the amount of tax. 40 9	

10 amount you owe

10 If line 8 is larger than line 9, subtract line 9 from line 8. Enter the amount of your refund. 11 If line 9 is larger than line 8, subtract line 8 from line 9.

·73 (-)10 Enter the amount you owe. Attach check or money order 73 (+)

Attach tax payment here Sign

your

eturn

for the full amount, payable to "Internal Revenue Service." 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.

For IRS Use Only-Please do not write in boxes below.

Credit for Child and Dependent Care Expenses

al Revenue Service (X)

(s) as shown on Form 1040

► Attack to Form 1040. > See instructions bei

_	<u> </u>			1			
	Write the number of qualifying persons who were cared for in 1985. (See the instruct qualifying persons.)	ions below for the de	efiniti	on of	,		
2	If payments listed on line 3 were made to an individual, complete the following:		•			Yes	No
	a If you paid \$50 or more in a calendar quarter to an individual, were the services perf	ormed in your home	,		22		140
	b If "Yes," have you filed appropriate wage tax returns on wages for services in your h	ome (see the instruc	tions	for		<u> </u>	_
	line 2)?	• • • • • • •			23	[
	•			-	7 1D av		Ь
	c If the answer to b is "Yes," write your employer identification number		2c		···		
3	3 Write the amount of qualified expenses you incurred and actually paid in 1985 to	r the care of the					_
	qualifying person, but de net write more than \$2,400 (\$4,800 if you paid for the ca						
	qualifying persons)		3		134		l
4	4 You must write your earned income on line 4c. See the instructions for line 4 for	the definition of		_			-
·	earned income.	THE OBSTRACTOR OF	وأفتر			•	
	e If you were unmarried at the end of 1985, write your earned income on line 4c, OR	-	11				
	e if you are married, filing a joint return for 1985, you must complete lines 4s and 4b	_					
	a Write your serned income	, ,	All the				}
	b Write your spouse's earned income 4b		1 199				
	c Compare amounts on lines 4s and 4b, and write the smaller of the two amounts		4¢		135	}	
5	Compare amounts on lines 3 and 4c, and write the smaller of the two amounts on line	On line 4C	5	\vdash			-
	Write the percentage from the table below that applies to the adjusted gross incom		. 3	 	136		<u>L</u>
	line 33	- wii wiii 10-0,	6	ľ			
	If line 33 is: Percentage is: If line 33 is: Percentage	la:	<u>/</u>				
	Over- But not Over- But not	=	, i.				
	WW						
	\$0-10,000 30% (.30) \$20,000-22,000 24% (.24		(. · ·				
	10,000-12,000 29% (.29) 22,000-24,000 23% (.23		1. 1.			•	
	12,000-14,000 28% (.28) 24,000-26,000 22% (.22) 14,000-16,000 27% (.27) 26,000-28,000 21% (.21)	•	1.7				
		•	llist il				
	16,000–18,000 25% (.26) 28,000 20% (.20 18,000–20,000 25% (.25))					
7	Multiply the amount on line 5 by the percentage shown on line 6, and write the result.		7				
			1. 182				
_	Multiply any child and dependent care expenses for 1984 that you perd in 1985 by the	percentage that	alitelje j				
	applies to the adjusted gross income on Form 1040, line 33, for 1984. Write the rinstructions for the required statement.)	BELITE (See line 8		1	37		
9	Add amounts on lines 7 and 8. Write the total here and on Form 1040, line 41. This is		•	<u> </u>	<i>.</i> .		
_	amount of your credit for child and dependent care expenses	DIO UNIQUENU			50		
_							į

General Instructions

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

What is the Child and Dependent Care Expenses Credit?

You may be able to take a tax credit for amounts you paid someone to care for your child or other qualifying person so you could work or look for work in 1985. The credit will lower the amount of your tax. The credit is based on a percentage of the amount you paid during the year. The most you may take as a credit is \$720 if you paid for the care of one qualifying person, or \$1,440 if you paid for the care of two or more qualifying persons.

ittienal information.—For more information about the credit, please get Publication 503, Child and Dependent Care Credit, and Employment Taxes for Household Employers.

Who is a Qualifying Person? A qualifying person is any one of the following persons:

- Any person under age 15 whom you claim as a dependent (but see the special rule later for Children of diverced or separated perents).
- Your disabled spouse who is mentally or physically unable to care for himself or herself.
- Any disabled person who is mentally or physically unable to care for himself or herself and whom you claim as a dependent, or could claim as a dependent except that he or she had income of \$1,040 or more.

Note: You must have shared the same home with any person you claim as a qualifying person.

Children of divorced or separated parents.--- if you were divorced, legally separated, or lived apart from your spouse during the last 6 months of 1985, you may be able to claim the credit even if your child is not your dependent. If your child is not your dependent, he or she is a qualifying person if all five of the following apply:

- 1. You had custody of the child for the longer period during the year; and
- 2. The child received over half of his or her support from one or both of the parents;
- 3. The child was in the custody of one or both of the parents over half of the year;
- 4. The child was under age 15, or was physically or mentally unable to care for himself or herself; and

(Continued on back)

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3800

Department of the Treasury Internal Revenue Service

ne(s) as shown on return

General Business Credit

Attach to your tax return.

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dentifying no Part | Tentative Credit Jobs credit (Form 5884, line 7) 80 Credit for alcohol used as fuel (Form 6478, line 11) 78 Employee stock ownership plan (ESOP) credit (Form 8007, line 3) 79 Current year general business credit—Add lines 1 through 4 4 Carryforward of general business credit (or investment, WIN, jobs, alcohol fuel, or ESOP credits) 81 Carryback of general business credit to 1985 82 8 Tentative general business credit—Add lines 5, 6, and 7 7 Part II Tax Liability Limitations 8 b Corporations — From Form 1120, Schedule J, enter tax from line 3 (or Form 1120-A, Part I, 9 10 a Individuals—From Form 1040, enter credit from line 47, plus any orphan drug, nonconventional source fuel, and research credits included on line 49 b Corporations—From Form 1120, Schedule J, enter credits from lines 4(a) through 4(e) (Form 1120-A filers, enter zero) 11 Income tax liability as adjusted—Subtract line 10 from line 9 10 12 a Enter smaller of line 11 or \$25,000 (See instructions for line 12). 11 b If line 11 is more than \$25,000—Enter 85% of the excess. 12a 13 Credit limitation—Add lines 12a and 12b . 12b General business credit—Enter smaller of line 8 or line 13 here and on Form 1040, line 48; Form 1120. Schedule J, line 4(f); Form 1120-A, Part I, line 2; or the proper line on other returns

General Instructions

(Section references are to the Internal Revenue Code.)

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

Purpose of Form.—The general business credit consists of the investment credit (Form 3468), jobs credit (Form 5884), alcohol fuel credit (Form 6478), and employee stock ownership plan (ESOP) credit (Form 8007). If you have more than one of these credits, or a carryback or carryforward of any of these credits, you must summarize them here on Form 3800. if you have only one of these credits for 1985, you do not have to file Form 3800. Instead, use that particular form to claim the credit. For example, if you have only a 1985 investment credit, you may use Form 3468 to claim your credit for 1985. You do not have to file Form 3800 in this case.

Please note that you do not have to take the jobs, alcohol fuel, or ESOP credits if you do not wish to.

For more information on the investment credit, see Form 3468, Computation of Investment Credit, or Publication 572, Investment Credit.

For more information on the jobs credit, see Ferm 5884, Jobs Credit, or Publication 906, Jobs and Research Credits.

For more information on the alcohol fuel credit, see Form 6478, Credit for Alcohol Used as Fuel.

For more information on the ESOP credit, see Form 8007, Credit for Employee Stock Ownership Plan.

Carrybeck and Carryforward of Unused Credit.—If you cannot use part or all of the credit on line 5 because of the tax liability-limitation on line 13 or the operation of the alternative minimum tax, you may carry any excess back to each of the three preceding tax years, beginning with the earliest. If you have an unused credit after carryback, it may be carried forward to each of the 15 years after the year of the credit. Credits unused after 15 years may be educted at that time (or earlier if the taxpayer dies or goes out of business). (But see sections 196 and 404(i) for certain limitations.)

Although the investment, jobs, alcohol fuel, and ESOP credits are aggregated as the general business credit, you may want to keep separate records of these credits to ensure that no credits or deductions are lost.

Specific instructions

Line 6.—All carryforwards of unused investment credit, jobs credit (and WIN credit carryover), alcohol fuel credit, and ESOP credit are added together and become a business credit carryforward to 1985.

Line 10c.—Other filers. —Before you can claim the general business credit against your income tax liability, you must reduce this tax liability by the following credits

- Personal credits
- Foreign tax credit
- Possessions corporation tax credit
- Orphan drug credit
- Nonconventional source fuel credit
- Research credit

Line 12.—If your adjusted tax liability (line 11) is \$25,000 or less, your general business credit is limited to that liability if the tax liability is more than \$25,000 your credit is limited to \$25,000 plus 85% of the excess.

If you and your spouse file separate returns, each must use \$12,500 instead of \$25,000. However, if only one has any business credit, that one may use the entire \$25,000.

Controlled corporate groups must divide the \$25,000 among all component members. See section 38(c)(3)(B).

Estates and trusts must first determine what percentage of the total income is allocable to the estate or trust itself, then apply that same percentage to the \$25,000 amount on line 12a.

See section 38(c)(3)(C) for limitations on the credit for mutual savings institutions, regulated investment companies, and real estate investment trusts.

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Residential Energy Credit

> Attach to Form 1040,

See Instructions on book

For Paperwork Reduction Act Notice, see instructions on back.

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Name(s) as shown as Form 1040

Your secial commits assessed

Ente	r the address of your principal residence on which the credit is claimed if it is different from the address shawn on Form 1040.	<u> </u>	<u></u>	
if ye	u have an energy credit carryover from a previous tax year and no energy savings costs this year, stop to Part III, line 24.			
μ_d	Fill in your energy conservation costs (but do not include repair or maintenance costs).			
	the second secon			
1	Was your principal residence substantially completed before April 20, 1977? (See instructions)		l [7
	Note: You MUST answer this question. Failure to do so will delay the processing of your many.		Y 06	No
	CANNOT claim an energy credit under Part I and you should not fill in lines 2a through 12 of this fol	CTIOCH TTT	red the "No" b	ex, you
2	a Insulation	<u> 2a</u>		
	b Storm (or thermal) windows or doors.	2b	 	
	c Caulking or weatherstripping	2e		-
	d A replacement burner for your existing furnace that reduces fuel use	20	+	
	A device for modifying flue openings to make a heating system more efficient	20	†	+
	f An electrical or mechanical furnace ignition system that replaces a gas pilot light	21		$\overline{}$
	g A thermostat with an automatic setback	22		+-
	h A meter that shows the cost of energy used	2h	 	+
3	Total (add lines 2a through 2h).	3		- -
ı	Enter the part of expanditures made from nontaxable government grants and subsidized financing	4		+-
5	Subtract line 4 from line 3	5	144	+-
5	Maximum amount of cost on which credit can be figured	6	\$2,000	0.0
,	Enter the total energy conservation costs for this residence. Add lines 2 of your 1978, 1979, and 1980.	_	12.000	+ 00
	Forms 5695 and line 3 of your 1981, 1982, 1983, and 1984 Forms 5695	7	145	
1	Subtract line 7 from line 6. If line 7 exceeds line 6, enter zero here and on line 12	8		+
	Enter the nontaxable grants and subsidized financing shown on line 4 of this form	.9	146	1
t	Subtract line 9 from line 8. If zero or less, do not complete the rest of Part I	10		
	Enter the amount on line 5 or line 10, whichever is less	11		_
	Enter 15% of line 11 here and include in amount on line 23 below Fill in your renewable energy source costs (but do not include months)	12	14/	
-	Service cases (set so not include repair or maintenance of	osts)) <u>. </u>	
	a Solar 13b Geothermal 13c Wind Total >	134		
	Enter the part of expenditures made from nontaxable government grants and subsidized financing	14		
	Subtract line 14 from line 13d	15	148	
	Maximum amount of cost on which the credit can be figured	16	\$10.000	00
	Enter the total renewable energy source costs for this residence. Add line 5 of your 1978 Form 5695,			
	line 9 of your 1979 and 1980 Forms 5695, and line 13d of your 1981, 1982, 1983, and 1984 Forms 5695	17 -	149	
	Subtract line 17 from line 16. If line 17 exceeds line 16, enter zero here and on line 22	18		
	Enter the nontaxable grants and subsidized financing shown on line 14 of this form	19	150	
	Subtract line 19 from line 18. If zero or less, do not complete the rest of Part II	20		
	Enter the amount on line 15 or line 20, whichever is less	21		
	Enter 40% of line 21 here and include in amount on line 23 below	22		
	Fill in this part to figure the limitation.			
	Add lines 12 and 22. If less than \$10, enter zero .	23		
	Enter your energy credit carryover from a previous tax year. Cautien—De not make an entry on this line			
	" your 1909 Form 1040, line 49, showed an amount of more than years	24	151	
	Add lines 23 and 24	25		
	Sinds the emount of tex shown on Porth 1040, line 40	26		
	Add lines 41, 42, and 44 from Form 1040 and enter the total.	27		
	Subtract line 27 from line 26. If zero or less, enter zero	28		
	resolventual energy credit. Enter the amount on line 25 or line 28 whichever is less 14 less than 250			
	enter zero. Also, enter this amount on Form 1040, line 43. Complete Part IV below if this line is less than			-
J		29	52	
•	Fill in this part to figure your carryover to 1986 (complete only if line 29 is less than lin	10 25)	
	Enter amount from Part III, line 25	30		
	Enter amount from Part III, line 29 Credit carryover to 1985 (subtract line 31 from line 30).	31		
_	and the same of subtract time 31 morn line 30).	32		

Alternative Minimum Tax Computation

Attach to Forms 1040, 1040NR, 1041 or 990-T (Treet).

OMB No 1545-0227

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titl) as attacks on the course

1 Adjusted gross income t	rom Form 1040, line 33 or Form 104	OMP line 32 /ees issue			•		
2 Deductions (see instruc		1 1 01411 Wife 35 (388 HISTI	CLUCKS) .	What Cartalist	.1111111	estatta:::::::::::	unesumo.
	expense from Schedule A. line 5	2a(1)	<i>2</i> 2	dient to be in the	" policy		
• •	O. line 33 by 5% (.05)			the state of	21:11:11	જાણવામાં જુવા છે. જુવા જુવા જુવા જુવા જુવા જુવા જુવા જુવા	
	from line 2s(1). (If zero or less, enter		2=(3)				
b Contributions from Sc	hedule A, line 18		25				
	ses from Schedule A, line 19		28				
	roperty used as a residence from Sch		24				
	line 2d above, from Schedule A, line			bearing 4. 1 4.	dolph h		
	come (if zero or less, enter zero) .			John Jan Mary	qualpa,		Historia († 1848) Historia († 1848)
	of line 2e(1) or line 2e(2)		20(3)		1/4		
	extent of gambling winnings from Sc	herkule & line 22	21		7	Calletininininin	
g Estate tax allowable under section 691(c) from Schedule A				-			
g Estate tax allowable under section 691(c) from Schedule A h Estates and trusts only: Charitable deduction and income distribution deduction 28 21 21							
	i, e(3), f. g. and h				21	140 *	'#####################################
3 Subtract line 2i from line					3	140 "	
4 Tax preference items:	•• • • • • • • • • • • • • • •				7/		
a Dividend exclusion		,	49				
	iction		45	142 *			
	ion on nonrecovery real property or 15(· · · · · · · · · ·	. 4c				
	tion on leased personal property or I			143	- //		
other than 15 (or 18)		amen receivery proper	. 44				
	ed pollution control facilities		40				
f Mining exploration and			40		- 2		
_	ch and experimental expenditures		4g				
•	bed debts of financial institutions		40				
	OBS GEOGRAPHICAL HEST GROUPS		44				
			41	•	- "		Mit Million
k Intangible drilling cost	-		44		- 8		
• • •	n 4k		. 14		41	141 *	
	table income (add lines 3 and 4(l)) (sh				5		
			IIIST OCTION	3)	 +		-
Enter: \$40,000, if married filing joint return or Qualifying widow(er)					6		-
	ied filing separate return or estate or t		} · · ·				_
	 If zero or less, do not complete the 		<i>y</i> .	.	7		
A	3. If 2870 or less, on not complete the				8		
	0, line 50, or Form 1040NR, line 51.		1046 lina	30 as Farm			\rightarrow
					9		!
	8. If zero or less, enter zero				10		-i
					11		
	x (subtract line 11 from line 10). Enti		E2 5	MONE II	**+		-
52. Form 1041, line 31	or Form 990-T, page 1, line 14.	# On FORM 10=0, MN€	34, r um 1	UHUNIK, IINE	12		ļ
Instructions		tion, see Publication 90	Q	or into the como		of tay project	<u> </u>
Section References are to the	A		item	W.			
Code)		rred Free Earler		2) Beneficiary of	an est	Re or trust. s	80 .

the information to carry out the internal Revenue was of the United States. We need it to ensure that taxpayers are complying with these laws and to allow us to figure and collect the right amount of tax. You are required to give us this information. Who blust File, --File this form if : (a) You are lable for the atternative manufacturin tax; or (b.) you have one or more tax preference dems on ines 4c through 4k; or (c) you have an amount on time 2c(3), and line 2c(2) includes income other than interest and dividend income.

Individuals, estatus or trusts may be Hable if their adjusted gross income plus tax preference tems listed on line 4 total more than line 6.

Minimum Tax Deterred From Earlier Year(s).—If a not operating loss carryover from an earlier year(s) reduces taxable income for 1985, and the not operating loss giving rise to the carryover resulted in the deterral or minimum tax in that sentier year(s), all or part of the deterred minimum tax may be includible as tax liability for 1985. Figure the deterred minimum tax in the worksheet in Publication 909 and enter it on Form 1040, line 52, or Form 1041, line 31. Write "Deferred Minimum Tax."

Partners, Beneficiaries, etc.—If you are a:

(1) Partner or shereholder of an 5 corperation, take into account separately your distributive share of items of income and deductions that

(3) Particip int in a common trust fund. see section 58(e).

(4) Shareholder or holder of beneficial interest in a regulated investment company or a real estate investment trust, see section 58(f).

Carryback and Carryover of Unused Credits.—It may be necessary to figure the carryback or carryback or carryback or carryback or carryback or carryback of cartain unused credits. See section 55(c)(3),

Note: If you have an earned income credit, you must reduce that credit by any alternative minimum tail.

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