General Description Booklet

for the

1986 INDIVIDUAL PUBLIC USE TAX FILE

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TABLE OF CONTENTS

INTRODUCTION	1
CORE RECORD LAYOUT	4
CODE DEFINITIONS	9
EXPLANATION OF ELEMENTS NOT ABSTRACTED DIRECTLY FROM	
TAX FORMS	16
TECHNICAL DESCRIPTION OF THE FILE	19
INDIVIDUAL TAX FILE SAMPLE DESCRIPTION	20
1986 FEDERAL TAX FORMS (WITH FLEMENT NUMBERS REFERENCED)	22

INTRODUCTION

The Internal Revenue Service 1986 Tax File (75,400 records) was selected as part of the Statistics of Income program that was designed to tabulate and present statistical information for the 103,045,186 Form 1040, Form 1040A, and Form 1040EZ Federal Individual Income Tax Returns filed for Tax Year 1986.

The Tax Files which have been produced since 1960 consist of detailed information taken from actual tax returns. The public use versions of these sample files are 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 File is designed for making national level estimates. The 1986 Tax File can be purchased through the Internal Revenue Service, Statistics of Income Division. Any questions concerning the cost and acquisition of the current tax 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 FILE.

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 in the state and local income tax deduction field for each of the three records. This has been done over that part of the sample containing non-zero values in these fields. If the last group of records contains less than three, these records have been combined with the group of three immediately before it. This method of disquising 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.

1/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: 1986, 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." General sales tax and general sales tax on motor vehicles have also been blurred for high income returns. 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 General Services Administration 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 File Sample Description" for a more detailed discussion of the Tax File.

CORE RECORD LAYOUT (CODE AND AMOUNT ELEMENT DEFINITIONS)

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

1.	AGEX	21.	F2555
2.	AGIR1	22.	SCHOF
3.	CGIND	23.	SCHE
4.	RESERVED	24.	SCHW
5.	CYCLE	25.	SPECTX
6.	RESERVED	26.	STATE 1/
7.	EIC	27.	TFORM
8.	ELECT	28.	TOTXSZ
9.	FDED	29.	TXNT
10.	FLPDYR	<i>3</i> 0.	TXRT
11.	FLPDM0	31.	TXST
12.	F2119	<i>3</i> 2.	RESERVED
13.	F2441	<i>3</i> 3.	XFPT $\frac{1}{2}$
14.	RESERVED	34.	XFST \underline{I}'
15.	F6251	35.	XOCAH
16.	GENBUS	<i>3</i> 6.	XOCAWH
17.	MARS	<i>3</i> 7.	X00DEP
18.	PREP	<i>3</i> 8.	XOPAR
19.	PSV	<i>3</i> 9.	XOTHER $\frac{1}{2}$
20.	REGION $\frac{1}{2}$	40.	XTOT

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

- ADJUSTED GROSS INCOME (DEFICIT) (AGI) (+/-) SALARIES AND WAGES $\frac{2}{}$
- 3. INTEREST RECEIVED
- 4. DIVIDENDS RECEIVED
- DIVIDEND EXCLUSION 5.
- 6. DIVIDENDS INCLUDED IN AGI
- STATE INCOME TAX REFUNDS 7.
- ALIMONY RECEIVED 3/ 8.
- 9. BUSINESS OR PROFESSION (SCHEDULE C) NET PROFIT/LOSS (+/-)
- 10. NET CAPITAL GAIN OR LOSS (+/-)
- CAPITAL GAIN DISTRIBUTIONS NOT REPORTED ON SCHEDULE D 11.
- SUPPLEMENTAL SCHEDULE NET GAIN OR LOSS (+/-) 12.
- 13. PENSIONS AND ANNUITIES FULLY INCLUDED IN AGI
- TOTAL PENSIONS AND ANNUITIES NOT FULLY INCLUDED IN AGI 14.
- 15. PENSIONS AND ANNUITIES NOT FULLY INCLUDED IN AGI, THAT PART IN AGI
- 16. SCHEDULE E NET INCOME OR LOSS (+/-)
- 17. FARM (SCHEDULE F) NET PROFIT/LOSS (+/-)
- 18. GROSS UNEMPLOYMENT COMPENSATION
- 19. UNEMPLOYMENT COMPENSATION IN AGI
- 20. GROSS SOCIAL SECURITY BENEFITS
- 21. SOCIAL SECURITY BENEFITS IN AGI

STATUTORY ADJUSTMENTS

- 22. MOVING EXPENSE
- 23. EMPLOYEE BUSINESS EXPENSE
- 24. PAYMENTS TO INDIVIDUAL RETIREMENT ACCOUNT (IRA)
- 25. PAYMENTS TO KEOGH ACCOUNTS
- 26. FORFEITED INTEREST PENALTY
- 27. ALIMONY PAID 3/
- 28. DEDUCTION FOR WORKING MARRIED COUPLE
- 29. TOTAL SELF-EMPLOYMENT INCOME
- 30. SELF-EMPLOYMENT INCOME, SECONDARY TAXPAYER
- 31. SELF-EMPLOYMENT TAX, PRIMARY TAXPAYER
- 32. SELF-EMPLOYMENT TAX, SECONDARY TAXPAYER
- 33. EXCESS ITEMIZED DEDUCTIONS (-) / UNUSED ZBA (+)
- 34. CHARITABLE CONTRIBUTIONS DEDUCTION FOR NON-ITEMIZERS
- 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 (SOI)
- 43. PREDETERMINED ESTIMATED TAX PENALTY
- 44. INCOME SUBJECT TO TAX

CREDITS

- 45. GENERAL BUSINESS
- 46. ELDERLY AND DISABLED
- 47. FOREIGN TAX
- 48. INVESTMENT (INCLUDED IN GENERAL BUSINESS CREDIT, TO CALCULATE TOTAL TAX CREDITS, ONLY USE THE GENERAL BUSINESS CREDIT)
- 49. POLITICAL CONTRIBUTIONS
- 50. CHILD CARE
- 51. JOBS (INCLUDED IN GENERAL BUSINESS CREDIT)
- 52. RESIDENTIAL ENERGY
- 53. RESEARCH AND EXPERIMENTATION
- 54. EIC USED TO OFFSET INCOME TAX BEFORE CREDITS
- 55. OTHER
- 56. TOTAL TAX CREDITS (SOI)
- 57. TOTAL TAX LIABILITY (SOI)
- 58. TOTAL INCOME TAX
- 59. INCOME TAX AFTER CREDITS (SOI)
- 60. MARGINAL TAX BASE
- 61. ALTERNATIVE MINIMUM TAX (SOI)
- 62. 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
- 69. AMOUNT PAID WITH FORM 4868
- 70. EXCESS FICA/RRTA
- 71. CREDIT FOR FEDERAL TAX ON SPECIAL FUELS AND OILS
- 72. REGULATED INVESTMENT COMPANY CREDIT
- 73. BALANCE DUE (OVERPAYMENT) (+/-)
- 74. CREDIT ELECT
- 75. EARNED INCOME FOR EARNED INCOME CREDIT (EIC)
- 76. EIC USED TO OFFSET ALL OTHER TAXES EXCEPT ADVANCE EIC
- 77. EIC REFUNDABLE PORTION

COMBINED SCHEDULE C INCOME AND SOME DEDUCTION ITEMS:

- 78. TOTAL INCOME OR LOSS (+/-)
- 79. NET RECEIPTS (+/-)
- 80. COST OF GOODS SOLD AND/OR OPERATIONS
- 81. BUSINESS RECEIPTS (+/-)
- 82. TOTAL DEDUCTIONS
- 83. BAD DEBTS
- 84. CAR AND TRUCK
- 85. DEPLETION
- 86. DEPRECIATION
- 87. COMMISSION
- 88. MORTGAGE

ITEMIZED DEDUCTIONS

MEDICAL AND DENTAL EXPENSE DEDUCTIONS

- 89. TOTAL MEDICAL EXPENSE DEDUCTIONS
- 90. EXPENSES SUBJECT TO REDUCTION BY 5% OF AGI

TAXES PAID DEDUCTIONS:

- 91. RESERVED
- 92. STATE AND LOCAL INCOME TAXES 2/
- 93. REAL ESTATE TAX DEDUCTIONS 4/
- 94. GENERAL SALES TAX (COMBINATION OF MOTOR VEHICLE SALES TAX DEDUCTION AND GENERAL SALES TAX DEDUCTION) 2/
- 95. RESERVED
- 96. PERSONAL PROPERTY TAX $\frac{2}{}$
- 97. OTHER

INTEREST PAID DEDUCTIONS

- 98. TOTAL INTEREST PAID DEDUCTION
- 99. HOME MORTGAGE INTEREST PAID DEDUCTION

CHARITABLE CONTRIBUTIONS DEDUCTIONS

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

CAPITAL GAINS (SCHEDULE D)

- 108. CURRENT SHORT-TERM GAINS
- 109. CURRENT SHORT-TERM LOSSES
- 110. POST 1969 SHORT-TERM LOSS CARRYOVER
- 111. RESIDENCE GAIN
- 112. CURRENT LONG-TERM GAINS
- 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. RESERVED
- 118. EXCLUDED LONG-TERM GAINS
- 119. COMBINED NET CAPITAL GAINS LESS LOSS (+/-)
- 120. COMBINED LONG-TERM GAINS 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

SMALL BUSINESS CORPORATION

- 130. TOTAL INCOME
- 131. TOTAL LOSS

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

CHILD CARE CREDIT (FORM 2441)

- 134. QUALIFYING INDIVIDUALS' LIMITATION
- 135. EARNED INCOME
- 136. EARNED INCOME LIMITATION
- 137. RESERVED

DEDUCTION FOR MARRIED COUPLE

- 138. PRIMARY QUALIFIED EARNED INCOME
- 139. SELECTED QUALIFIED EARNED INCOME

FORM 6251

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

COMBINED SCHEDULE C (DEDUCTIONS CONTINUED)

- 144. OTHER INTEREST
- 145. OFFICE EXPENSES
- 146. PENSIONS AND PROFIT SHARING PLANS
- 147. INSURANCE
- 148. RENT
- 149. EMPLOYEE BENEFIT PROGRAMS
- 150. RESERVED
- 151. NET WAGES
- 152. RESERVED
- 153. RESERVED
- 154. RESERVED
- 155. RESERVED
- 156. RETURN ID
- 157. RESERVED
- 158. RESERVED
- 159. DECIMAL WEIGHT
- 160. INTEGER WEIGHT

 $\underline{1}/$ Only for lower income returns (returns with AGI less than \$200,000 and not in 100% sample)

2/ Blurred for high income returns (note: State and local income taxes is also blurred for low income returns in Wisconsin) see Introduction for a more complete explanation.

complete explanation.

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

 $\frac{4}{4}$ / Blurred for all returns.

CODE DEFINITIONS

AGEX	been changed to 1)	
	(A) No exemptions	s
	(B) One exemption	n (Primary only)
	(C) One exemption	n (Secondary only)2
	(D) Two exemption	15
AOT01	Adiobad Casa Tas	nama Banga Ba
AGIR1	Adjusted Gross Inc	ome kange B:
		INCOME
	\$ 1 under \$	•
	\$ 1,000 under \$	
	\$ 2,000 under \$	
	\$ 3,000 under \$	
	\$ 4,000 under \$	
	\$ 5,000 under \$	
	\$ 6,000 under \$	
	\$ 1 under \$ 1,000 under \$ 2,000 under \$ 3,000 under \$ 4,000 under \$ 5,000 under \$ 6,000 under \$ 6,000 under \$ 7,000 under \$ 8,000 under \$ 9,000 under \$ 10,000 under \$ 11,000 under \$ 12,000 under \$ 12,000 under \$ 12,000 under \$ 12,000 under \$ 14,000 under \$ 15,000 under \$ 15,000 under \$ 16,000 under \$ 17,000 under \$ 17,000 under \$ 19,000 under \$ 19,000 under \$ 19,000 under \$ 20,000 under \$ 20,000 under \$ 20,000 under \$ 20,000 under \$ 30,000 under \$ 30,000 under \$ 50,000 under \$ 50,0	
	\$ 8,000 under \$	
	\$ 9,000 under \$ 10,000 under \$	
	\$ 11,000 under \$	
	\$ 12,000 under \$	13,000
	\$ 13,000 under \$	
	\$ 14,000 under \$	
	\$ 15,000 under \$	
	\$ 16,000 under \$	
	\$ 17,000 under \$	
	\$ 18,000 under \$	
	\$ 19,000 under \$	
	\$ 20,000 under \$	
	\$ 25,000 under \$	30,00022
	\$ 30,000 under \$	40,00023
	\$ 40,000 under \$	
	\$ 50,000 under \$	
	\$ 75,000 under \$	
	\$ 100,000 under \$	200,00027
	\$ 200,000 under \$	500,000
	\$ 500,000 under \$	1,000,000
	\$1,000,000 or more	e
CGIND	Capital Gains Indi	icator
	·	
	(A) No capital ga	in/loss
	(B) Capital gain	present
	(C) Capital loss	present

CYCLE	Cycle Code
(A)	ned Income Credit Not present0 Present
ELECT	President Elect Campaign Fund: (A) No boxes checked
FDED	Form of Deduction Code:
(B)	Itemized deduction
FLPD	Filing Period: (Accounting Period)
	YR - Calendar Year ended
F2119	Sale or Exchange of Principal Residence:
(A) (B)	No Form 2119 attached
F2441	Child Care Credit:
(A) (B) (C)	No Form 2441 attached
F6251	Alternative Minimum Tax No Form 6251 attached to the return

GEN	BUS	General Business Credit Form 3800 filed because more than one general business credit taken Jobs credit is only component of general business credit
MAR	S	Marital Status (for high income returns, MARS = 5 has been changed to MARS = 2):
	(A) (B) (C) (D) (E) (F)	Single
PREF	>	Tax Preparer
	(A) (B) (C) (D) (E) (F) (G) (H)	No preparer other than taxpayer
PSV	(A) (B) (C) (D) (E) (F)	Primary Stratifying Variable Sample Code 28 (AGI) and 38 (Schedule C net income)
	(A) (B) (C) (D) (E) (F) (G) (H)	IRS Regions Central

(A) (B)	No Form 2555 attached to the return
SCHCF	Schedule C or F Indicator:
(A) (B) (C) (D)	Neither Schedule C or F present
SCHE (A) (B)	Schedule E Indicator No Schedule Present
SCHW (A) (B) (C)	Schedule W Indicator No Schedule W
SPECTX	Special Tax Computation:
(A) (B) (C) (D) (E) (F) (G) (H)	No entry Form 4970 tax used

STATE

Code	STATE NAME	Code	STATE NAME
1	Alabama	29	Nevada
2	Alaska	30	New Hampshire
3	Arizona	31	New Jersey
4	Arkansas	32	New Mexico
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	Iowa	44	Texas
17	Kansas	45	Utah
18	Kentucky	46	Vermont
19	Louisiana	47	Virginia
20	Maine	48	Washington
21	Maryland	49	West Virginia
22	Massachusetts	50	Wisconsin
23	Michigan	51	Wyoming
	Minnesota	52	APO/FPO
25	Mississippi	53	Puerto Rico
	Missouri	54	CP: IO
27	Montana	54	Guam
28	Nebraska	54	Virgin Islands
TFORM	Corrected Form of Re	turn:	
(A) (B) (C)	1040A Return		

TOTXSZ Size of Total Income Tax

		Returns with no total income tax
		\$1 under \$5001
		\$50 under \$10002
		\$100 under \$200
		\$200 under \$30004
		\$300 under \$400
		\$400 under \$500
		\$500 under \$60007
		\$600 under \$70008
		\$700 under \$800
		\$800 under \$900
		\$900 under \$1,000
		\$1,000 under \$1,250
		\$1,250 under \$1,500
		\$1,500 under \$1,750
		\$1,750 under \$2,000
		\$2,000 under \$2,250
		\$2,250 under \$2,500
		\$2,500 under \$2,750
		\$2,750 under \$3,000
		\$3,000 under \$3,50020
		\$3,500 under \$4,00021
		\$4,000 under \$5,00022
		\$5,000 under \$7,50023
		\$7,500 under \$10,00024
		\$10,000 under \$25,000
		\$25,000 under \$50,000
		\$50,000 or more27
TXNT		Taxable/Nontaxable Returns:
		.
	(A)	Taxable Returns
	(B)	Nontaxable Return2
		0.11.50
TXRT		Marginal Tax Rate (Based on 1986 tax rate schedules)0, 11-50
TXST		TAX STATUS:
	(A)	No Tax
	(B)	Regular Tax
	(C)	Non-Compute Regular Tax
	(D)	Non-Compute Nontaxable
	(E)	Schedule G (Income Averaging) Tax4

XFPT		Primary Taxpayer Exemption:
	(A) (B) (C) (D)	Regular
XFST		Secondary Taxpayer Exemption:
	(A) (B) (C) (D) (E)	No Secondary Taxpayer
XOCAH		Exemptions for Children Living at Home (for high income returns, XOCAH with values greater than 3 have been changed to 3): al number entered0-99
XOCAW		Exemptions for Children Living Away from Home: al number entered0-99
XOODE	P Actua	Exemptions of Other Dependents: al number claimed0-99
XOPAF		Exemptions for Parents Living at Home or Away from Home: al number entered0-9
XOTHE	(A) (B) (C) (D) (E) (F)	Exemptions Other than Age or Blind One
хтот	Actus	Total Exemptions:

EXPLANATION OF ELEMENTS NOT ABSTRACTED DIRECTLY FROM TAX FORMS

The following explanations define data elements contained in the 1986 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 "1986 Federal Tax Forms" section of this booklet for further information.

Element Number	<u>Definition</u>
37	Zero Bracket Amount This amount was limited to the smaller of the statutory limit or Taxable Income (E39).
38	Taxable Income, (Old Concept without ZBA) This is a computed amount equal to Adjusted Gross Income minus (Zero

1.

, **j**r,

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.

Element Number	Definition
54	Earned Income Credit Used to Offset Income Tax Before Credits This amount was computed based on the lesser of: Earned Income Credit or Income Tax Before Credits minus all credits except the Earned Income Credit.
56	Total Tax Credits (SOI) Total credits from Form 1040 (line 44 plus line 49) or 1040A (line 22) plus the amount of Earned Income Credit used to offset Income Tax before Credits.
58	Total Income Tax Element (59) plus element (61).
59	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.
60	Marginal Tax Base This is the amount of income subject to tax at the highest tax rate applicable to the return (TXRT), using the 1986 tax rate schedules for all returns.
66	Total Tax Payments Total payments from 1040 or 1040A minus the total Earned Income Credit.
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 O. 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).

118 Combined Capital Gains (Excluded Long-Term Gains).
Sum of Line 22, Schedule D and 1.5 times Line 14, Form 1040.

Element Number	<u>Definition</u>
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 Gains are positive, the difference between Line 19, Schedule D and Excluded Long-Term Gains (El19 above). If Net Short-Term Capital Losses, subtract Line 8, Schedule D from above.
159	Decimal Weight: A method of estimation by dividing the computer population count of returns in a sample stratum by the number of sample returns for that stratum (carried to 2 decimal places) The decimal place is implied. If used, divide by 100.
160	Integer Weight: 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

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

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

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

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

INDIVIDUAL TAX FILE SAMPLE DESCRIPTION

Sources of the Data

The data in the 1986 Individual Tax File were compiled from a stratified probability sample of unaudited individual income tax returns, Forms 1040, 1040A, and 1040EZ, filed by U.S. citizens and residents. The sample was designated at the National Computer Center and was processed in each of the ten Internal Revenue Service Centers during Calendar Year 1986. The total sample of 75,400 returns was selected from a population of 103.0 million returns.

The estimates that could be obtained from this file are intended to represent all returns filed for Income Tax Year 1986. While most of the returns processed during 1987 were for Calendar Year 1986, a few were for prior years. Returns for prior years were used in place of 1986 returns received and processed after December 31, 1987. 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 1987.

All returns processed during 1987 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 1987 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

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, etc2
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 RECEIVED 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 Department of the Treasury—Internal Revenue Service U.S. Individual Income Tax Return 1986

For the year	r January 1-	Decem	ber 31, 1986, or other tax year beginning		, 1986, en	ding		, 19	. OMB No. 154	5-0074
Use IRS	Your firs	t name	and initial (if joint return, also give spouse	s name and initial)	Last	name		Yours	ocial security num	
label. Other- wise,	Present	home a	address (number and street or rural route).	(If you have a P.O. Box, se	e page 4 of Ins	tructions.)		Spous	e's social security	number
please print or type.	City, tow	n or po	st office, state, and ZIP code 5 TATE	-		1			from the one	
President	tial		Do you want \$1 to go to this fund?		7	Yes W			Note: Checking "Ye	es" will
Election (Campaign		fjoint return, does your spouse	want \$1 to go to this	fund?.	Yes		No	not change yo	our tax or
		1	Single		For Pri	vacy Act and Pag	erwork Red	luction A	ct Notice, see Inst	ructions.
Filing S	tatus	2	Married filing joint return (even if only one had inc	come)	-				
Ohaali aal	h	3	Married filing separate return	•	' - '	ve and full name	here			
Check onli one box.	ıy	4	Head of household (with qu							ed child
	400		but not your dependent, er	iter child's name here.						
	<u>14 R S</u>	5	Qualifying widow(er) with o	lependent child (year s	pouse died	▶ 19). (S	e page 6	of Instru	ctions.)	
Europh		6a	Yourself XFPT	65 or over		Blind		}	Enter number of boxes checked	
Exempti	1002	ь	Spouse XFST	65 or over		Blind		}	on 6a and b	
Always ch	neck	c	First names of your dependent child	ren who lived with you,	XOCA	4 <i>H</i>		}	Enter number of children	
the box la								!	listed on 6c 🕨	
Yourself. Check oth	ner	đ	First names of your dependent child	ren who did not live wit	h you (s ee pa	age 6). XOC	AWH	}	Enter number of children	
boxes if th			(If pre-1985 agreement, check here	<u>▶∟ .)</u>	(3) Number of	(4) Did dependent	(5) Did you	nrowdo.	listed on 6d 🕨	
apply.		•	Other dependents: (1) Name	(2) Relationship	months lived	have income of	more than or	e-half of	Enter number	
					in your home	\$1,080 or more?	dependent's	support!	of other	
			XO PAR				<u> </u>		dependents Add numbers	<u> </u>
			X00 OE P Total number of exemptions claimed	Loles complete line 36			V	,	entered in	
								7	boxes above >	╄╼
Income	ŀ	7	Wages, salaries, tips, etc. (attach Fo					8	<u>2</u>	+
Please att		8	Interest income (also attach Schedul		1	Exclusion	''انے			
Copy B of	your		Dividends (also attach Schedule B if o			· · · · · · · · · · · · · · · · · · ·	2	9c	6	}
Forms W-3			Subtract line 96 from line 9a and ent					10	7	┿
		10	Taxable refunds of state and local inco	•		. •		11	8	
If you do r a W-2, see		11 12	Alimony received . Business income or (loss) (attach Sch					12	9	
page 4 of Instruction		13	Capital gain or (loss) (attach Schedu					13	10	+
mstruction	ii 13.	14	40% of capital gain distributions not	·				14	//	
		15	Other gains or (losses) (attach Form	•	. •	•		15	12	1
		16	Fully taxable pensions, IRA distributi	•				16	/3	
			Other pensions and annuities, include			7	- . •	William .		
			Taxable amount, if any, from the wo					17b	15	
		18	Rents, royalties, partnerships, estate	es, trusts, etc. (attach	Schedule E)			18	/6	
		19	Farm income or (loss) (attach Sched	lule F)				19	17	
		20a	Unemployment compensation (insur	ance). Total received	20a	12	<u> </u>	YIIIIIIIA.		
Please		b	Taxable amount, if any, from the wor	ksheet on page 10 of Ir	structions			206	19	
attach che or money		21=	Social security benefits (see page 10))	218	20				
order here		b	Taxable amount, if any, from workst	leet on page $11.ig\{ rac{Tax-er}{inter}$	rest	} .		21b	21	
		22	Other income (list type and amount—see	page 11 of Instructions) _						
								22		-
-		23	Add the amounts shown in the far right	t column for lines 7 thro				23		
Adjustn	nente	24	Moving expenses (attach Form 390.	3 or 3903F)	. 24	2;		1/2 1		
to incom		25	Employee business expenses (attac	•	25	23				1
CV IIICUI		26	IRA deduction, from the worksheet	. •	27	20				
		27_	Kench.retirement plan and self-emn	inved SEP deduction] 47	2.5	ì	·,		1

♥	33	Amount from line 32 (adjusted gross income) •					33	
Tax Comon	34	Amount from line 32 (adjusted gross income). If you itemize, attach Schedule A (Form 1040) and enter	the amoun	· · ·	obsedulo A. Koo O.		34a	
Compu-		versions if you have uncarried income and can be a	laimed ee					33
tation		CONTRACT TO ALLINSTITUTION SHIP CHACK DAVE IN	J I Bleck		. 19 24			
'See	ı	filing a separate return and your spouse itemizes deductify you do not itemize but you made charitable contribution	TIARR A-146	u are a	Jual-status alien.			
nstructions	•	your cash contributions here. (If you gave \$3,000 or more	ns, enter	1 1			The s	
on page 13.)		one organization, see page 14.)	e to arry	34b			14.	
	•	Enter your noncash contributions (you must attach Form 8283 in	over \$500)	34c				
	•	The title of the city of the colding of the colding of the coldinary of th					344	34
	35	Subtract line 34a or line 34d, whichever applies, from line	e 33				35	35
	36	Multiply \$1,080 by the total number of exemptions claims	d on line 6	f (see na	on 14\		36	36
	37	Taxable Income. Subtract line 36 from line 35. Enter the	result (hut	nat lace	than seed		37	39
	38	Enter tax here. Check if from L. Tax Table, L. Tax Rate	Schedule X	(Y 027	Or Schoolul	- ^	38	40
	39	Additional taxes (see page 14 of Instructions). Enter he	re and che	eck if fr	om Form 49	70		
	40	☐ Form 49/2, or ☐ Form 5544					39	
		THE INTER COURT OF THE COLOR.		<u>.</u>		. •	40	42
redits	41	Credit for child and dependent care expenses (attach Forn	2441)	41	50			
	42	Credit for the elderly or for the permanently and totally	disabled	Ī	·			
See Instructions		(attach Schedule R)		42	46			
n page 14.)	43	Partial credit for political contributions for which you have	receipts	43	49			
	44	Add lines 41 through 43. Enter the total					44	
	45	Subtract line 44 from line 40. Enter the result (but not less	than zero)	٠			45	
	46	Foreign tax credit (attach Form 1116)		46	47			
	47	General business credit. Check if from Form 3800,	-		chudes 48,	51)		İ
	48	Form 3468, Form 5884, Form 6478, or Fo	rm 6765 L	47	45			1
	49	Add lines 46 and 47. Enter the total	cades.	53 _j .	<i>55</i>		48	
Aba-		Subtract line 48 from line 45. Enter the result (but not less	tnan zero)	<u></u>		<u>. ▶</u>	49	59
ther	50	Self-employment tax (attach Schedule SE)					50	62
axes	51	Alternative minimum tax (attach Form 6251)					51	61
	52 53	Tax from recapture of investment credit (attach Form 4255	5)				52	63
ncluding dvance EIC	53 54	Social security tax on tip income not reported to employer (attach Fori	n 4137))		53	64
syments)	55	Tax on an IRA (attach Form 5329) Add lines 49 through 54. This is your betallow					54	65
	56	Add lines 49 through 54. This is your total tax	· · ·		· · · · ·	<u>. </u>	55	51
ayments	57	Federal income tax withheld		56	67			
	5 <i>8</i>	1986 estimated tax payments and amount applied from 198	5 return	57	68	<u> </u>		
tach Forms	59	Earned income credit (see page 16)	· · ·	58	25			}
·2. W·2G, id W·2P	60	Amount paid with Form 4868	· · ·	59	69			İ
front.	•	Excess social security tax and RRTA tax withheld (two complexes)			_	i]
	61	employers)		60			yyyy 2. Yafrin:	į
	62	Credit for Federal tax on gasoline and special fuels (attach For Regulated investment company credit (attach Form 2439)	rm 4136)	61	7/			
	63	Add lines 56 through 62. These are your total payments	🗀	62	72		lilliani.	
	64		· · · ·	• •	· · · · · ·	_	63	66
efund or	65	If line 63 is larger than line 55, enter amount OVERPAID Amount of line 64 to be REFUNDED TO YOU				•	64	73(-)
nount	66			ee i '		•	65	
ou Owe	67	Amount of line 64 to be applied to your 1987 estimated tax .	– 🗀	66	74			1
		If line 55 is larger than line 63, enter AMOUNT YOU OWE	- Attach ci	eck or r	money order for		40 m	
		full amount payable to "Internal Revenue Service." Wr daytime phone number, and "1986 Form 1040" on it	ite your s	ocial se	curity number,			2-(1)
_		Check ▶ ☐ if Form 2210 (2210F) is attached. See page 17.					67	73(+)
	Under	penalties of periury. I declare that I have everying this setum and	Penalty:		73		199	
ease	belief,	penalties of perjury, I declare that I have examined this return and they are true, correct, and complete. Declaration of preparer (other th	accompany an taxpayer)	is based	ums and statemen on all information o	ts, and fwhic	to the best h precerer hi	of my knowledge
		ur signature	Date				FP	
gn	7				Your occupation			
ere	Sp	ouse's signature (if joint return, BOTH must sign)	Date		Spouse's occupat	ior		
	7					mps ?		,
id	Prepare	r's L	Date				- Description	s social security no

E.I. No. ZIP code

Firm's name (or yours, if self-employed) and address

Form 1040A Department of the Treasury—Internal Revenue Service
U.S. Individual

Income Tax Return «

1986

		the IRS mailing label. If you don't have one, print or type:		MD N. STAT COOK
Step 1		et name and initial (if joint return, also give spouse's name and initial)		MB No. 1545-0066
Name and			:	:
address	Present	home address (number and street). (If you have a P.O. Box, see page 7 of the instructions.)	Spouse's soci	al security no.
	City, to	wn or post office, state, and ZIP code If this address is d STATE shown on your 196		
	Pre	sidential Election Campaign Fund		
	Do y	ou want \$1 to go to this fund?	•	
Step 2 Check your filing status (Check only one)	1 2 3	 □ Single (See if you can use Form 1040EZ.) □ Married filing joint return (even if only one had income) □ Married filing separate return. Write spouse's social security number abo and spouse's full name here. □ Head of household (with qualifying person). If the qualifying person is yo but not your dependent, write this child's name here. 		d child
Step 3		Always check the exemption box labeled Yourself. Check other boxes if they		
Figure your	VERTER	Yourself 65 or over Blind		
exemptions		☐ Spouse ☐ 65 or over ☐ Blind	Write number of boxes checked on 5a a	- 4 L
	YL2,	First names of your dependent children who lived with you XOCAH	CHECKED ON SEE	
			Write number of children listed o	f n 5c
	d	First names of your dependent children who did not live with		
Attach Copy B of Form(s) W-2 here		you (see page 11). (If pre-1985 agreement, check here .) XOCAWH	Write number o	ıt
	•	Other dependents: 3. Number of 4. Did dependent 5. Did you provide more	children listed o	na 5d
		Uther dependents: 3. Number of months lived in your home. 3. Number of months lived in your home. 4. Did dependent have income of than one-half of dependent's support?		
		XOPAR	Write number o	r
		XOODEP	other dependen listed on 5e	
	•	Total number of exemptions claimed. (Also complete line 18.) X TO T	Add numbers entered	
		Total wages, salaries, tips, etc. This should be shown in Box 10	on lines above	
Step 4	•	of your W-2 form(s). (Attach Form(s) W-2.)	6	2.
Figure your total income	. 7	Interest income. (If the total is over \$400, also attach Schedule 1,		
total illouid		Part III.)	7	<u> 3.</u>
Attach check or money order here	8a	Dividends. (If the total is over \$400, also attach Schedule 1, Part IV.) Total. 8a 4. 8b Exclusion (see page 16). 8b 5.		
	c	Subtract line 8b from line 8a. Write the result on line 8c.	8c	6.
		Unemployment compensation (insurance), from		
		Form(s) 1099-G. Total received. 9a / 8 .		
	b	Taxable amount, if any, from the worksheet on page 17 of the instructions.	9b	19.
	10	Add lines 6, 7, 8c, and 9b. Write the total. This is your total income.	10	
Step 5	11	Individual retirement arrangement (IRA)		
-		deduction, from the worksheet on page 19. 11 24.		
Figure your adjusted	12	Deduction for a married couple when both work.		
41088		Complete and attach Schedule 1, Part I. 12 28.		
ICOMO	12	Add lines 11 and 19 Write the total These are your total adjustments	13	
	13 14	Add lines 11 and 12. Write the total. These are your total adjustments. Subtract line 13 from line 10. Write the result. This is your adjusted	10	•
	47	gross income.	14	1.
			(0404

Department of the Treasury - Internal Revenue Service Form Income Tax Return for 1040EZ 1986 Single filers with no dependents (a) OMB No. 1545-0675 Use the IRS mailing label. If you don't have one, please print. Please print your numbers like this. Name & If your address is different from the one shown on your 1985 address return, check here . Your social security number Print your name above (first, initial, last) Present home address (number and street). (If you have a P.O. box, see instructions.) STATE City, town, or post office, state, and ZIP code Yes No Presidential Election Campaign Fund ELECT Do you want \$1 of your tax to go to this fund? **Dollars** Cents Report 1 Total wages, salaries, and tips. This should be shown in Box 10 your of your W-2 form(s). (Attach your W-2 form(s).) income Interest income of \$400 or less. If the total is more 3 than \$400, you cannot use Form 1040EZ. Attach Add line 1 and line 2. This is your adjusted gross income. Copy B of Form(s) Enter your cash charitable contributions. W-2 here 34 See the instructions for line 4 on the back of this form. 35 s Subtract line 4 from line 3. 36 6 Amount of your personal exemption. 7 Subtract line 6 from line 5. If line 6 is larger than line 5, enter 0 on line 7. This is your taxable income. **Figure** 8 Enter your Federal income tax withheld. This should be your shown in Box 9 of your W-2 form(s). tax Use the single column in the tax table on pages 31-36 of the Form 1040A instruction booklet to find the tax on

Refund or amount vou owe Attach tax

payment here

10 If line 8 is larger than line 9, subtract line 9 from line 8. 73(-)10 Enter the amount of your refund.

your taxable income on line 7. Enter the amount of tax.

11 If line 9 is larger than line 8, subtract line 8 from line 9. Enter the amount you owe. Attach check or money order 73(+)for the full amount, payable to "Internal Revonue Service."

Sign your return 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. Your signature

Date

Form 1040EZ (1986)

For IRS Use Only-Please

do not write in boxes below.

Name(s) as shown on Form 1040A

Your social security number

You MUST complete and attach Schedule 1 to Form 1040A only 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.

			(a) You	(b) Y	our spouse
1	Wages, salaries, tips, etc., from Form 1040A, line 6.	1			
2	IRA deduction, if any, from Form 1040A, line 11.	2 -		_	
3	Subtract line 2 from line 1. Write the result.	3 =	/38 ·	=	
4	Write the amount from line 3, column (a) or (b) abov	e, whic	hever is smaller.	4	139 .
5	Percentage used to figure the deduction (10%).			5	× .10
6	Multiply the amount on line 4 by the percentage answer here and on Form 1040A, line 12.	on lir	ne 5. Write your	6 =	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.

Note: If you paid cash wages of \$50 or more in a calendar quarter to an individual for services performed in your home, you must file an employment tax return. Get **Form 942** for details.

- 1 Write the number of qualifying persons who were cared for in 1986. (See the instructions for the definition of a qualifying person.)
- Write the amount of qualified expenses you incurred and actually paid in 1986 for the care of the qualifying person. (See the instructions for which expenses qualify for the credit.) DO NOT write more than \$2,400 (\$4,800 if you paid for the care of two or more qualifying persons).

134 .

136.

3**a**

3b

3с

5

- 3 a You must write your earned income on line 3a.

 b If you are married, filing a joint return for 1986, you must write your spouse's earned income on line 3b.
 - c If you are married, compare the amounts on lines 3a and 3b, and write the smaller of the two amounts on line 3c.
- 4 If you were unmarried at the end of 1986, compare the amounts on lines 2 and 3a, and write the smaller of the two amounts on line 4.
 - If you are married, filing a joint return for 1986, compare the amounts on lines 2 and 3c, and write the smaller of the two amounts on line 4.
- 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 is:
But not		But not	
Over over		Over— over—	
\$010,000	30% (.30)	\$20,000-22,000	24% (.24)
10,000—12,000	29% (.29)	22,000-24,000	23% (.23)
12,000-14,000	28% (.28)	24,00026,000	22% (.22)
14,000—16,000	27% (.27)	26,000-28,000	21% (.21)
16,000—18,000	26% (.26)	28,000	20% (.20)
18,000-20,000	25% (.25)		
		28,000	20

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

6 = 50.

SCHEDULE C (Form 1040)

Profit or (Loss) From Business or Profession (Sole Proprietorship)

Partnerships, Joint Ventures, etc., Must File Form 1065.

OMB No 1545 0074 1986

Department of the Treasury

Internal Revenue Service (L) Attach to Form 1040, Form 1041, or Form 1041S. S.

Name of proprietor	tructions for Schedule C (Form 1040). Attachment Sequence No. 09
——————————————————————————————————————	Social security number
Principal business or profession, including product or service (see Instructions)	
•	B Principal business code
Business name and address	
Business name and address	(from page 2) ▶
Method(s) used to value closing inventory:	D Employer ID number
(1) Cost (2) Lower of cost or market (3) Other (attach exp	
Account	Sidilation)
<u>, </u>	
· ·	

SCHEDULES A&B (Form 1040)

Department of the Treasury Internal Revenue Service (L

Schedule A—Itemized Deductions

(Schedule B is on back)

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

OMB No. 1545-0074

1986
Attachment
Sequence No. 07

Your social security number Name(s) as shown on Form 1040 Prescription medicines and drugs; and insulin Medical and **Dental Expenses** Doctors, dentists, nurses, hospitals, insurance premiums 2 2a you paid for medical and dental care, etc. (Do not include 2ь Transportation and lodging expenses reimbursed or Other (list—include hearing aids, dentures, eyeglasses, etc.) paid by others.) 2c (See 3 instruc-Add lines 1 through 2c, and enter the total here tions on 4 4 Multiply the amount on Form 1040, line 33, by 5% (.05) page 19.) 89 Subtract line 4 from line 3. If zero or less, enter -0-. Total medical and dental 92 6 6 Taxes You 7 Paid 94 8a General sales tax (see sales tax tables in instruction booklet) 86 (See Înstruc-96 Other taxes (list—include personal property taxes) tions on 97 9 page 20.) Add the amounts on lines 6 through 9. Enter the total here. Total taxes 10 10 Home mortgage interest paid to financial institutions (report 99 Interest You 11a deductible points on line 13) Paid b Home mortgage interest you paid to individuals (show that 99 person's name and address) (See 11b Instructions on 12 12 Total credit card and charge account interest you paid page 20.) 13 Other interest you paid (list payee's name and amount) ▶ 98 14 Add the amounts on lines 11a through 13. Enter the total here. Total interest Cash contributions. (If you gave \$3,000 or more to any one Contributions 101 15a organization, report those contributions on line 15b.) You Made Cash contributions totaling \$3,000 or more to any one organization. (Show to whom you gave and how much you (See înstrucgave.) > tions on 15b /02 page 21.) 16 103 16 Other than cash. (You must attach Form 8283 if over \$500.). 104 17 Carryover from prior year Add the amounts on lines 15a through 17. Enter the total here. Total contributions. 100 Total casualty or theft loss(es). (You must attach Form 4684 or similar statement.) Casualty and 106 19 Theft Losses (See page 21 of Instructions.) 20 20 Union and professional dues Miscellaneous 21 21 Tax return preparation fee **Deductions** 22 Other (list type and amount) (See Instructions on page 22.) Add the amounts on lines 20 through 22. Enter the total here. Total miscellaneous . Summary of 07 24 24 Add the amounts on lines 5, 10, 14, 18, 19, and 23. Enter your answer,here. Itemized **Deductions** Filing Status box 2 or 5, enter \$3,670) 25 25 If you checked Form 1040 (See Filing Status box 1 or 4, enter \$2,480 Instruc-Filing Status box 3, enter \$1,835 tions on Subtract line 25 from line 24. Enter your answer here and on Form 1040, line 34a. (If page 22.) 33 26 line 25 is more than line 24, see the Instructions for line 26 on page 22.)

SCHEDULE SE (Form 1040) Department of the Treesury Senuce (L)

Internal Revenue Service

Computation of Social Security Self-Employment Tax

► See instructions for Schedule SE (Form 1040).

► Attach to Form 1040.

Name of person with self-employment income (as shown on social security card)

whose wages are only subject to the 1.45% medicare (hospital insurance

	with self-employment income	j		
Part	Regular Computation of Net Earnings From Self-Employment	<u>' </u>		
1 Ne (F	ofte: If you performed services for certain churches or church-controlled organizations and you are not a minister or a member of a religious order, see the instructions before completing the schedule, set farm profit or (loss) from Schedule F (Form 1040), line 38, and farm partnerships, Schedule K-1 orm 1065), line 13a	1	ladislaki hillililililililililililililililililil	
ch	therethere (loss) from Schedule C (Form 1040), line 32, and Schedule K-1 (Form 1065), line 13a therethere than farming). (See instructions for other income to report.) Employees of an electing church or urch-controlled organization do NOT enter your Form W-2 wages on line 2. See the instructions.	2		
	Check here if you are exempt from self-employment tax on your earnings as a minister, member of a religious order, or Christian Science practitioner because you filed Form 4361. See instructions for kinds of income to report. If you have other earnings of \$400 or more that are subject to self-employment tax, include those earnings on line 2.			
Part	Optional Computation of Net Earnings From Self-Employment	<u>yaaaaaa</u>		
<u></u>	(See "Who Can Use Schedule SE" in the Instructions. Also see instructions for other ally, this part may be used only if you meet any of the following tests:	limit	etions.)	
A Yo B Yo C Yo Note: 1 From 3 From 4 From 3 Ma 4 Fal	sur gross farm income ¹ was not more than \$2,400; or ur gross farm income ¹ was more than \$2,400 and your net farm profits ² were less than \$1,600; or ur net nonfarm profits ³ were less than \$1,600 and your net nonfarm profits ³ were also less than two-thirds (%) If line 2 above is two-thirds (%) or more of your gross nonfarm income ⁴ , or, if line 2 is \$1,600 or more, you ma Schedule F (Form 1040), line 12, and Schedule K-1 (Form 1065), line 13b. Schedule F (Form 1040), line 38, and Schedule K-1 (Form 1065), line 13a. Schedule C (Form 1040), line 32, and Schedule K-1 (Form 1065), line 13a. Schedule C (Form 1040), line 5, and Schedule K-1 (Form 1065), line 13c. Iximum income for optional methods Image: Schedule F (Form 1040), line 12, and farm partnerships, Schedule K-1 (Form 1065), line	of you	r gross nonfarm ini ise the optional mi	ethod.
13	b; or \$1,600 btract line 4 from line 3	4	1	
		5	·	
tha	infarm Optional Method—If you meet test C above, enter: the smallest of two-thirds (25) of gross infarm income from Schedule C (Form 1040), line 5, and Schedule K-1 (Form 1065), line 13c (other in farming); or \$1,600; or, if you elected the farm optional method, the amount on line 5	6		!
Part	Computation of Social Security Self-Employment Tax	<u> </u>	1	
7 En	ter the amount from Part I, line 1, or, if you elected the farm optional method. Part II, line 4	7		
8 En	ter the amount from Part I, line 2, or, if you elected the nonfarm optional method, Part II, line 6	8		
9 Add	d lines 7 and 8. If less than \$400, do not fill in the rest of this schedule because you are not subject to self- ployment tax. (Exception: If you are an employee of an electing church or church-controlled organization,		(includes 30)	
Sec	the instructions. You may owe self-employment tax on the amount you report on line 12c.)	9	29	
10 Th	e largest amount of combined wages and self-employment earnings subject to social security or	<u> </u>	47	
rail	road retirement tax (tier 1) for 1986 is	10	\$42.000	00
	Total social security wages and tips from Forms W-2 and railroad retirement	ijin ist	Suid May State Million	00
	compensation (tier 1). Note: Medicare qualified government employees	49,1699 49,192		

Fame(s) as shown on Form 1040. (Do not enter name and social security number if shown on other side.)

Your secial security number

Part II Income or (Loss) from Par you report a loss below, and have amounts			ay have to file For	n 6198. See Instruction
	Partnerships and		in the total of the total	ii o 13a. See iiisti uctiu
(a) Name	(b) Enter (c) Check appropriate foreign code partners	(d) Employer	(e) Net loss (see Instructions for at-risk limitations)	(f) Ner-ncome
	1			-
			-	
Codes P for partnership. S for S corporation		P	(126)	125,
7 Add amounts in columns (e) and (f) ar	nd enter the total(s) here	5 27	(/3/); /30
			i	o '
8 Combine amounts in columns (e) and 9 Deduction for section 179 property			· · · · · · · · · · · · · · · · · · ·	8
(See Instructions for limitations.)	(nom rom roos, schedule	N-1, and 1 orn 11203, 3		9 (/27
Total partnership and S corporation in	ncome or (loss). Combine amo	ounts on lines 28 and 29. E		•
here and include in line 36 below	Estates an	d Trusts		0
(a) Name	(b) (c)	(d) Employer	(e) Net loss (see Instructions fo	(f) Net noome
		identification number	atirisk mitations)	
	1995 (1995) 1995 1995 1995 1995 1995 1995 1995 1995 1995 1995 1995 1995 1995 1995 1995 199			
		<i>((()</i>)		
1 Add amounts in columns (e) and (f) a	nd anter the total(s) here	31	(/29) /28
2 Total estate and trust income or (los		mns (e) and (f), line 31. E		· · · · · · · · · · · · · · · · · · ·
here and include in line 36 below Part III Windfall Profit Tax Summ	arv	<u> </u>		12
3 Windfall profit tax credit or refund rec		ns)		3 /32
4 Windfall profit tax withheld in 1986 (4 (/33
5 Combine amounts on lines 33 and 34	1. Enter the total here and inc	ude in tine 36 helow	į .	35
Part IV Summary	+. Enter the total here and me	ade in fine 30 below.	<u> </u>	
			0. line 18 ► 🗀	ì ƙ
			U, fine 10	als illigio i anti
6 TOTAL income or (loss). Combine line 7 Farmers and fishermen: Enter you INCOME applicable to Parts I and II (ur share of GROSS FARMI		U, iiile 10	
7 Farmers and fishermen: Enter you INCOME applicable to Parts I and II (: Part V Optional Depreciation Wor	ur snare of GROSS FARMI see Instructions) ksheet.—You may use this w	NG AND FISHING 37 orksheet to figure deprecial	ion only on proper	
7 Farmers and fishermen: Enter you INCOME applicable to Parts I and II (ur share of GROSS FARMI see Instructions) ksheet.—You may use this win service after 1980, you must (b) Dare (c) Cost or	orksheet to figure deprecial use Form 4562 for all prop	ion only on proper	ty placed in service be
Farmers and fishermen: Enter you INCOME applicable to Parts I and II (: art V Optional Depreciation Wor 1981 If you placed any property	ur share of GROSS FARMI see Instructions) ksheet.—You may use this w in service after 1980, you must (b) Dare (c) Cost or	orksheet to figure depreciations (d) Depreciation (e)	ion only on proper erty. Depreciation (f) Li	ty placed in service be
7 Farmers and fishermen: Enter you INCOME applicable to Parts I and II (: Part V Optional Depreciation Wor 1981 If you placed any property (a) Description of property	ur share of GROSS FARMI see Instructions) ksheet.—You may use this w in service after 1980, you must (b) Dare (c) Cost or	orksheet to figure deprecial use Form 4562 for all prop	ion only on proper erty. Depreciation (f) Li	ty placed in service be
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SCHEDULE E (Form 1040)

Department of the Treasury Internal Revenue Service (0)

Supplemental income Schedule

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

▶ Attach to Form 1040, Form 1041, or Form 1041\$. ➤ See Instructions for Schedule E (Form 1040).

OMB No 1545-0074 1986 Attachment Sequence No 13

1 In the space provided below, show the wind and increase of the property listed, did you or a member of your family use for personal purposes a the wind and location of each rental property. Property A Property B Property C Rental and Royalty Income 3a Rents received 3b Royaltes received 3 A downtrising 5 Auto and travel 6 C cleaning and maintenance 7 Commissions 7 Commissions 7 S Insurance 9 Legal and other professional fees 10 Mortgage interest paid to financial institutions (see Instruments).	Name(s) as shown on Form 1040						Tour social secu	ity numb	10 7
the kind and location of each rental property is fair rental value during the tax year? Property A Property B Property C Rental and Royalty Income 3a Rents received b Royaltes received b Royaltes received c C Cleaning and maintenance 6 C Cleaning and maintenance 7 C Commissions 7 S Insurance 9 Legal and other professional fees 10 Mortgage interest paid to financial institutions (see Instructions).	Part I Rental and Royalty Income	or (Loss)						- <u>-</u>	
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institutions (see Instructions). 10	O Mortgage interest paid to financial		i	J	i	!			
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SUMEDULE D (Form 1040)

Capital Gains and Losses and Reconciliation of Forms 1099-B

► Attach to Form 1040. ► See Instructions for Schedule D (Form 1040).

Attachment Sequence No. 12

100. 646. ON BMC

Department of the Treasury Internal Revenue Service (L) Name(s) as shown on Form 1040 For Paperwork Reduction Act Notice, see Form 1040 Instructions.

TODA & OL SU GGR	ivaient substitute.	statement(s)	reported for 1986			ايها	e. See the instruction
		-or exemples				merenci	e. See the instruction
Part Short-term (a) Description of property	1	and Losses—	Assets Held Six				
Example, 100 shares 7% preferred of 12° Co.)	(b) Date acquired (Moliday, yr.)	(c) Date soid (Mo_day, yr.)	(d) Sales price (see instructions)	(e) Cost or other basis (see instructions)	(f) LOSS if (e) is more that subtract (d) fro		(g) GA(N If (d) is more than rej subtract (e) from (d)
2a Form 1099-8 Trans	ections (Sales of Sto	cks, Bonds, etc.):					Mathalia de la Companya de la Companya de la Companya de la Companya de la Companya de la Companya de la Compa
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2b Total (add column	r (d))	-				************	unianum en en en en en en en en en en en en en
2c Other Transactio		·		William Commence	Mille (fill) flythin i figle Mille (fill)	ite (filografi Grafii	Millian karihari
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3 Short-term gain from	sale or exchange of	a principal residen	ce from Form 2119.	ines 6 or 12 3	William William	2////////	
-	0	- p	20 1.0117 01111 2113,	e3 0 01 12	Printer and the state of the st		
4 Short-term gain fr	om installment sal	es from Form 6	252 lines 22 or 30	1 4			
4 Short-term gain fr	om installment sal n or (loss) from pa	les from Form 6 artnerships, Sico	252, lines 22 or 30 proporations, and fid	uciaries 5	Aliffieldigniklisis. Allifieldiga visioni.		
4 Short-term gain fr5 Net short-term gain	n or (loss) from pa	artnerships, Sico	orporations, and fid	uciaries <u>5</u>			MANUAL
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2441

Credit for Child and Dependent Care Expenses

OMB No. 1545-0068

➤ Attach to Form 1040. ► See instructions below.

Department of the Treasury Internal Revenue Service (L) Your social security number Name(s) as shown on Form 1040 Note: If you paid cash wages of \$50 or more in a calendar quarter to an individual for services performed in your home, you must file an employment tax return. Get Form 942, Employer's Quarterly Tax Return for Household Employees, for details. Enter the number of qualifying persons who were cared for in 1986. (See the instructions below for the definition of qualifying persons.) Enter the amount of qualified expenses you incurred and actually paid in 1986 for the care of the qualifying person. (See What Are Qualified Expenses in the instructions.) Do not enter more than 134 \$2,400 (\$4,800 if you paid for the care of two or more qualifying persons) 3a You must enter your earned income on line 3a. See the instructions for line 3 for the definition of earned income. If you are married, filing a joint return for 1986, you must enter your spouse's earned income on

Schedule W (Form 1040)

Department of the Treasury Internal Revenue Service (L)

Names as shown on Form 1040

Deduction for a Married Couple When Both Work

► For Paperwork Reduction Act Notice, see Form 1040 Instructions. ► Attach to Form 1040.

OMB No. 1545-0074

Attachment Sequence No. 20

(b) Your spouse

Your social security number

Figure your earned income Step 1

	(4)	(-) (-)	
1 Wages, salaries, tips, etc., from Form 1040, line 7. (Do not include pensions or annuities reported on Form 1040, line 16 or lines 17a and 17b.)	1 1	1	
2 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	
3 Add lines 1 and 2. This is your total earned income	3	3	
Step 2 Figure your qualified earned income			
4 Add amounts entered on Form 1040, lines 25, 26, 27, and any			

4

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(a) You

138

Figure your deduction Step 3

You may not take this deduction

repayment of supplemental unemployment benefits (sub-pay)

included on line 31. Enter the total (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.

6	Compare the amounts in columns (a) and (b) of line 5 above. Enter the smaller amount here. (Enter either amount if 5(a) and 5(b) are the same.) Do not enter more than \$30,000	6	139
7	 7 Percentage used to figure the deduction (10%) 8 Multiply the amount on line 6 by the percentage on line 7. This is the amount of your deduction. Enter the answer here and on Form 1040, line 30 	7	x .10
8		8	28

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.

Earned income. — This is generally income you receive for services you provide. It includes wages, salaries, tips, commissions, 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 benefits, IRA distributions, unemployment compensation. deferred compensation, or nontaxable income. It also does not include any amount your spouse paid you.

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

Step 2 (lines 4 and 5). — Figure qualified earned income separately for yourself and your spouse by subtracting certain adjustments from earned income.

Qualified earned income. —This is the amount on which the deduction is based. Figure it by subtracting the total of certain adjustments from earned income. These adjustments (and the related lines on Form 1040) are:

- Employee business expenses (from line 25).
- IRA deduction (from line 26).
- Keogh retirement plan and selfemployed SEP deduction (from line 27).

 Repayment of 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.

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

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.

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).

Alternative Minimum Tax Computation

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

IMB No 1345 0221

Identifying number Name(s) as shown on tax return 1 Adjusted gross income (see instructions) 2 Deductions (Individuals, attach Schedule A (Form 1040))(see instructions): a (1) Medical and dental expense from Schedule A, line 5 2a(2) (2) Multiply Form 1040, line 33, by 5% (.05) 2a(3) (3) Subtract line 2a(2) from line 2a(1). (If zero or less, enter zero.) 2b **b** Contributions from Schedule A, line 18, **OR** Form 1040, line 34d 2c c Casualty and theft losses from Schedule A, line 19 2d d Qualified interest on property used as a residence (see instructions) e (1) Interest, other than line 2d above, from Schedule A, line 14 (2) Net investment income (if zero or less, enter zero) 2e(3) (3) Enter the smaller of line 2e(1) or line 2e(2)