General Description Booklet for the 1991 INDIVIDUAL PUBLIC USE TAX FILE

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INTRODUCTION

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

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

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

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

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

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

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

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

DISCLOSURE AVOIDANCE PROCEDURES

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

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

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

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

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

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

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

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

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

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

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

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

1991 INDIVIDUAL PUBLIC USE TAX FILE SAMPLE

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

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

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

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

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

Codes: (all codes are 2 characters in length - PIC 99)
(For footnotes see page 9)

r ic	otholes see		
1.	AGEX		F2555
2.	AGIR1	22.	SCHCF
3.	CGIND	23.	SCHE
4.	RESERVED**		F8606
5.	CYCLE		SPECTX
6.	DSI	26.	STATE $^{1/}$
7.	EIC		TFORM
8.	ELECT	28.	TOTXSZ
9.	FDED	29.	TXNT
10.	FLPDYR	30.	TXRT
11.	FLPDMO	31.	TXST
12.	EFI		SCHB
13.	F2441	33.	XFPT $\frac{1}{1}$
14.	F8582	34.	XFST $^{1/}$
15.	F6251	35.	XOCAH
16.	F3800	36.	
17.	MARS		XOODEP
18.	PREP*		XOPAR
19.	PSV*		XBI
20.	REGION $^{1/}$	40.	TOTX

- *Indicates change from 1990 specifications.
- **CSAMP was moved to the end of the file because it is a larger code than in previous years.

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

- 1. ADJUSTED GROSS INCOME (DEFICIT) (AGI) (+/-)
- 2. SALARIES AND WAGES 21
- 3. TAXABLE INTEREST INCOME
- 4. TAX-EXEMPT INTEREST INCOME
- 5. DIVIDENDS INCLUDED IN AGI
- 6. STATE INCOME TAX REFUNDS
- 7. ALIMONY RECEIVED 3/
- 8. BUSINESS OR PROFESSION (SCHEDULE C) NET PROFIT/LOSS (+/-)
- 9. NET CAPITAL GAIN OR LOSS (+/-)
- 10. CAPITAL GAIN DISTRIBUTIONS NOT REPORTED ON SCHEDULE D
- 11. SUPPLEMENTAL SCHEDULE NET GAIN OR LOSS (+/-)
- 12. TAXABLE IRA DISTRIBUTION
- 13. TOTAL PENSIONS AND ANNUITIES RECEIVED
- 14. PENSIONS AND ANNUITIES INCLUDED IN AGI
- 15. SCHEDULE E NET INCOME OR LOSS (+/-)
- 16. FARM (SCHEDULE F) NET PROFIT/LOSS (+/-)

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

STATUTORY ADJUSTMENTS

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

CREDITS

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

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

ITEMIZED DEDUCTIONS SCHEDULE A:

MEDICAL AND DENTAL EXPENSE DEDUCTIONS

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

TAXES PAID DEDUCTIONS

- 75. RESERVED
- 76. STATE AND LOCAL INCOME TAXES 21
- 77. REAL ESTATE TAX DEDUCTIONS 4/
- 78. RESERVED

INTEREST PAID DEDUCTIONS

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

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

MISCELLANEOUS DEDUCTIONS (SUBJECT TO 2% LIMITATION)

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

COMBINED SCHEDULE C INCOME AND SOME DEDUCTION ITEMS

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

CAPITAL GAINS (SCHEDULE D)

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

SUPPLEMENTAL INCOME (SCHEDULE E) RENT AND ROYALTIES

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

PARTNERSHIPS

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

SMALL BUSINESS CORPORATION

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

ESTATE OR TRUST

- 139. TOTAL INCOME
- 140. TOTAL LOSS

SELF EMPLOYMENT INCOME (SCHEDULE SE)

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

MINIMUM TAX CREDIT (FORM 8801)

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

CHILD CARE CREDIT (FORM 2441)

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

ALTERNATIVE MINIMUM TAX COMPUTATION (FORM 6251)

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

PASSIVE ACTIVITY LOSS LIMITATION (FORM 8582)

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

EARNED INCOME CREDIT COMPUTATION

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

1991 INDIVIDUAL PUBLIC USE TAX FILE CODE DEFINITIONS

1. AGEX	ζ*	Age or Blindness Status:
(<i>I</i> (E (C	3) 2)	No Age or Blindness Status
*For his		income returns records with values greater than 1, this set equal to 1.
2. AGII	R1	Adjusted Gross Income Range 1:
₩₩₩₩₩₩₩₩₩₩₩₩₩₩₩₩₩₩₩₩₩₩₩₩₩₩₩₩₩₩₩₩₩₩₩₩₩	1 1 1 1 1 1 1 2 2 2 3 4 5 0 5 0 5 0 5 0 5 0 5 0 5 0 5 0 5 0 5	DJUSTED GROSS INCOME. 00 1 under \$ 1,000 01 1,000 under \$ 2,000 02 2,000 under \$ 3,000 03 2,000 under \$ 4,000 04 4,000 under \$ 5,000 05 5,000 under \$ 6,000 06 6,000 under \$ 7,000 07 7,000 under \$ 8,000 08 8,000 under \$ 10,000 09 9,000 under \$ 11,000 10 1,000 under \$ 12,000 12 2,000 under \$ 13,000 13 3,000 under \$ 14,000 14 44,000 under \$ 15,000 15 15,000 under \$ 16,000 16 16,000 under \$ 17,000 16 17,000 under \$ 18,000 16 18,000 under \$ 25,000 26 20,000 under \$ 30,000 26 20,000 under \$ 40,000 26 20,000 under \$ 100,000 26 200,000 under \$ 100,000 <
3. CGI	ND	Capital Gain Indicator:
(A) B) C)	No capital gain/loss

4.	RESERVED (See data field 171 explanation in the next	section)
5.	CYCLE Cycle Code	04-53
6.	DSI Dependent Status Indicator:	
	(A) Taxpayer not being claimed by another taxpayer (B) Taxpayer claimed by another taxpayer	
7.	EIC Earned Income Credit:	
	(A) Not present	
8.	ELECT President Elect Campaign Fund:	
	(A) No "yes" boxes checked	1
9.	FDED Form of Deduction Code:	
	(A) Itemized deductions(B) Standard deduction(C) Taxpayer did not itemize or claim standard deduction.	2
10	-11. FLPD Filing Period: (Accounting Period):	
	(A) YR - Calendar Year ended	78-92 01-12
12	E. EFI Electronic Filing Indicator:	
	(A) Return not filed electronically	

13.	F2441*	Child care credit:
	(A) (B)	No Form 2441 attached to return
		income returns records with values greater than 3, this set equal to 3.
14.	F8582	Passive Activity Loss Limitation:
	(A) (B)	No Form 8582 attached to return0 Form 8582 attached to return1
15.	F6251	Alternative Minimum Tax:
	(A) (B)	No Form 6251 attached to the return0 Form 6251 attached to the return1
16.	F3800	General Business credit:
	(A) (B)	and the second s
17.	MARS*	Marital Status:
	(A) (B) (C) (D) (E) (F)	Single
		income returns records with a value equal to 5, this code qual to 2.
18.	PREP	Tax Preparer:
	(A) (B) (C) (D) (E) (F) (G) (H)	No preparer other than taxpayer indicated on the form
1 ⊶	PSV	Primary Stratifying Variable:
±2.	(A) (B)	Positive Income GT OR EQ to Negative Income

20.	REGION	I* IRS Regions:
	(A) (B) (C) (D) (E) (F) (G)	Central
*For	high	income returns this code was set equal to zero.
21.	F2555	Foreign Earned Income:
	(A) (B)	No Form 2555 attached to the return0 Form 2555 attached to the return
22.	SCHCF	Schedule C or F Indicator:
	(A) (B) (C) (D)	Neither Schedule C or F present
23.	SCHE	Schedule E Indicator:
	(A)	No Schedule E Present0 Schedule E Present1
24.	F8606	Form 8606, Nondeductible IRA Contributions:
	(A)	No Form 8606 attached to return0 Number of Forms 8606 attached to return1-2
25.	SPECT	X Special Tax Computation:
	(A) (B) (C) (D) (E)	No entry

26. STATE*:

Code	STATE NAME	Code	STATE NAME
1	Alabama	29	Nevada
2	Alaska	30	New Hampshire
	Arizona	31	New Jersey
	Arkansas	32	New Mexico
	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	4 3	Tennessee
	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
24	Minnesota	52	APO/FPO
25	Mississippi	53	Puerto Rico
26	Missouri		U.S. Citizens Abroad
	Montana		Guam
28	Nebraska	54	Virgin Islands
*For high	income returns this c	ode w	as set equal to zero.
27. TFORM	Corrected Form of Re	turn:	
(A)	1040 Return		
(B)	1040A Return		
(C)	1040F7 Return		2

28. TOTXSZ Size of Total Income Tax:

		Returns with no total income tax
29. T	XNT	Taxable/Nontaxable Return:
	(A) (B)	Taxable Return
30. T	XRT	Marginal Tax Rate
31. T	XST	TAX STATUS:
(B) (C) (D) (E) (F) (C) (H)	Regula Taxes No tax Form 8 Form 8 Torm 3 Schedu	owed and IRS did not compute tax

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

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

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

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

37

tax.

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

<u>Field</u> <u>Number</u>	<u>Definition</u>
38	TOTAL TAX CREDITS (SOI) Total credits from Form 1040 (line 46) or 1040A (line 21) plus the amount of Earned Income Credit used to offset Income Tax before Credits.
50	TOTAL INCOME TAX Income Tax After Credits (F51) plus Alternative Minimum Tax (F52).
51	INCOME TAX AFTER CREDITS (SOI) Income Tax after Credits from Form 1040 or 1040A minus the amount of Earned Income Credit used to offset Income Tax Before Credits. For Form 1040EZ, which does not allow for any credits or any other taxes, this is the same as "Total Tax Liability."
ā7	TOTAL TAX LIABILITY (SOI) Total tax liability (form) minus Advance Earned Income Credit payments minus EIC used to offset Income Tax Before Credits minus EIC used to offset all other taxes except advance EIC.
64	TOTAL TAX PAYMENTS Total payments shown on the tax form, minus the total Earned Income Credit.
68	Earned Income used to calculate the Earned Income Credit For returns with the Earned Income Credit, the sum of salaries and wages and net earnings from self-employment.
69	Earned Income Credit Used to Offset Income Tax Before Credits This amount is the lesser of: Total Earned Income Credit or Income Tax Before Credits (F34) minus all credits except the Earned Income Credit.
70-71	If Total Earned Income Credit (EIC) is greater than Income Tax Before Credits (reduced by all credits except the Earned Income Credit), the following fields are computed:
	 Earned Income Credit Used to Offset All Other Taxes

56).

<u>Field</u> Number Definition

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

171 CSAMP Computed Sampled Code:

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

TECHNICAL DESCRIPTION OF THE FILE 1991 INDIVIDUAL PUBLIC USE TAX FILE

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

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

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

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

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

1991 INDIVIDUAL PUBLIC USE TAX FILE SAMPLE DESCRIPTION

Sources of the Data

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

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

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

Sample Design and Selection Criteria

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

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

Method of Estimation

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

Processing and Management of the Sample

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

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

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

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

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

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

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

FEDERAL TAX FORMS (WITH FIELD NUMBERS REFERENCED)

FIELD NUMBERS

Field Numbers presented on the tax forms and schedules lines can be used to cross reference to the Core Record Layout. An example of this is line 7 on the Form 1040 which has a field number of 2.
7 Wages, salaries, tips, 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 3. TAXABLE INTEREST INCOME 4. TAX-EXEMPT INTEREST INCOME
Another example, Line 8a, Taxable Interest Income, on the Form 1040 (see below) has a field number of 3. This field number is cross referenced to the Taxable Interest Income line on the 1991 Core Record Layout, which contains the number 3 to the left of the line (see above).

		Individual Income Tax Return		
	_	year Jan,-Dec. 31, 1991, or other tax year beginning 1991, enging first name and initial Last name	Your so	OMB No. 1545-0074
_abel	Your	first name and initial cast name	1001 30	cial security number
See L Astructions		oint return, spouse's first name and initial cast name	Spouse	's social security number
n page 11.)	:: a :	print return, appeade a list having and mindal continues.		;
Jse the IRS	ноп	e address (number and street). (If you have a P.O. box, see page 11). Apt. no.	For F	Privacy Act and
abel. H Otherwise, E				rwork Reduction
please print R	City.	town or post office, state, and ZIP code, ilf you have a foreign address, see page 11.)		lotice, see
or type. Presidential		STATE		uctions.
Election Campaign	\	Do you want \$1 to go to this fund? EL. E Yes Yes		Note: Checking "Yes" will not change your tax or
See page 11.)		If joint return, does your spouse want \$1 to go to this fund?	No	reduce your refund.
Tiline Clatus	1	Single MARS		
Filing Status	2	Married filing joint return (even if only one had income)		
31	3	Married filing separate return. Enter spouse's social security no. above and full name here.		
Check only one box.	4	Head of household (with qualifying person). (See page 12.) If the qualifying person is	a chiid	but not your dependent
	5	enter this child's name here. ► Qualifying widow(er) with dependent child (year spouse died ► 19). (See	page 12	?.)
	6a	Yourself. If your parent (or someone else) can claim you as a dependent on his or ner tax		No. of baxes
Exemptions	O.	return, do not check box 6a. But be sure to check the box on line 33b on page	2 .	checked on 6a and 6b
See page 12.)	b	Spouse	<u></u>	No. of your
	С	Dependents: (2) Check (3) if age 1 or older. (4) Dependent's (5) No. of it under dependent's social security relationship to ived in		children on 6c
		(1) Name (first, initial, and last name) age 1 number you home in		who: • lived with you Xoch
				didn't live with
If more than six dependents,				you due to XOCAU H
see page 13.				separation (see
				No. of other XOPA
				dependents on 6cX 00D
		1005 promote check here		Add numbers
		If your child didn't live with you but is claimed as your dependent under a pre-1985 agreement, check here Total number of exemptions claimed		entered on XT07
		Wages, salaries, tips, etc. (attach Form(s) W-2)	7	2
Income	7 8a	Taxable interest income (also attach Schedule B if over \$400)	8a	3
***	b	Tax-exempt interest income (see page 16). DON'T include on line 8a 8b 4	_\\\\\	_
Attach Copy B of your	9	Dividend income (also attach Schedule B if over \$400)	9	5
Forms W-2,	10	Taxable refunds of state and local income taxes, if any, from worksheet on page 16.	10	
W-2G, and 1099-R here.	11	Alimony received	11	
	12	Business income or (loss) (attach Schedule C)	12	8
If you did not get a W-2, see	13	Capital gain or (loss) (attach Schedule D)	13	9
page 10.	14	Capital gain distributions not reported on line 13 (see page 17).	14	11
A	15	Other gains or (losses) (attach Form 4797)	16b	12
Attach check or money order on	16a	Total IRA distributions . 16a 16b Taxable amount (see page 17) Total persons and annuities 17a 17b Taxable amount (see page 17)	17b	14
top of any	17a	Total pensions and annuities 17a 17b Taxable amount (see page 17) Rents, royalties, partnerships, estates, trusts, etc. (attach Schedule E)	18	15
Forms W-2, W-2G, or	18	Farm income or (loss) (attach Schedule F)	19	16
1099-A.	19 20	Unemployment compensation (insurance) (see page 18)	20	17
	21a	Social security benefits. 21a 18 21b Taxable amount (see page 18)	21b	19
	22	Other income (list type and amount—see page 19)	22	20
	23	Add the amounts shown in the far right column for lines 7 through 22. This is your total income	23	_
	24a	Your IRA deduction, from applicable worksheet on page 20 or 21 2:a 23	-₹/////	
Adjustments	b	Spouse's IRA deduction, from applicable worksheet on page 20 or 21	-₩/////	
to Income	25	One-half of self-employment tax (see page 21)	\/////	
(See page 19.)	26	Self-employed health insurance deduction, from worksheet on page 22. Self-employed health insurance deduction, from worksheet on page 22. 26 28	₩/////	
	27	Reogn retirement plan and self-employed SEI deduction	₩/////	%
	28	Penalty on early withdrawai of savings	₩	
	29 30	Alimony paid. Recipient's SSN ► 29 27 Add lines 24a through 29. These are your total adjustments		
Adjusted	31	Subtract line 30 from line 23. This is your adjusted gross income. If this amount is less than \$21,250 and a child lived with you, see page 45 to find out if you can claim the "Earned Income	,	
		- #04-050 and a shild lived with you, see page 45 to find out it you can claim the "Eamed Income	31	1

Page	- 2

Form	1040	(1991

of this return for your records. Paid Preparer's	sign	arer's	Date	Check if self-employed		reparer's social sec	curity n
for your	<u> </u>		Date		i F	reparer's social sec	curity n
		openio a digitatore to leuri reservi e e come a e e e e e e e e e e e e e e e e e e	1				
Here Keep a copy		Your signature Spouse's signature (if joint return, BOTH must sign)	Date	Spouse's occur			
Sign	belie	f, they are true, correct, and complete. Declaration of preparer (other	r than taxpayer) is ba Date	sed on all information Your occupation	III OI WINCII	preparer has any kr	nowled
	65 Und	Estimated tax penalty (see page 28). Also include on liner penalties of perjury, I declare that I have examined this return and	arcompanying sche-	dules and statement	s, and to the	ne best of my know	ledge a
	~ -	name, address, social security number, daytime phone num	nber, and "1991 Fo	orm 1040" on it.	64	65(+	
IUU UWG	64	If line 53 is more than line 60, subtract line 60 from line 5 Attach check or money order for full amount payable to "I	53. This is the AM Internal Revenue S	CUNT YOU OWE ervice." Write you		~~.	
You Owe	63	Amount of line 61 to be APPLIED TO YOUR 1992 ESTIMATED T	~~				
Amount	62	Amount of line 61 to be REFUNDED TO YOU	AY - 63	66			
Refund or	61	If line 60 is more than line 53, subtract line 53 from line 60. This	s is the amount you	OVERPAID.	61	9 J (-)	-+
	60	Add lines 54 through 59. These are your total payment		. ,	+	65(-)	+
		b Form 4136	59				
front.	59	Other payments (see page 27). Check if from a Form	2439				
W-2G, and 1099-R to	58	Excess social security, Medicare, and RRTA tax withheld (see page		61			
Attach Forms W-2,	57	Amount paid with Form 4868 (extension request)	57	60			
	56	Earned income credit (attach Schedule EIC)	56				
Payments	54 55	*991 estimated tax payments and amount applied from 1990 re		59			
×		Federal income tax withheld (if any is from Form(s) 1099, check		58	11111		+
	52 53	Advance earned income credit payments from Form W-Add lines 46 through 52. This is your total tax .	2	_	53		-
	51	Tax on an IRA or a qualified retirement plan (attach Forr		· · · · · ·	51 52	<u> </u>	+
	50	Social security and Medicare tax on tip income not reported		ch Form 4137)	50	55 56	+-
IdX62	49	Recapture taxes (see page 26). Check if from a Form 425				54	+-
Other Taxes	48	Alternative minimum tax (attach Form 6251)	. <u>.</u>		48	<u>52</u>	-
Othor	47				1 1	53	
	46	Subtract line 45 from line 40. (If line 45 is more than line	40, enter -0)	<u> </u>	48		
	45	Add lines 41 through 44			45		
	44	b ☐ Form 8396 c ☐ Form 8801 d ☐ Form (specify)		5, 44, 45, 46	_//////	~~~ ~ T)	
See page (5.)	43 44	Other credits (see page 25). Check if from a Form 3		2 (Include	3	and 47)	
	42	Credit for the elderly or the disabled (attach Schedule R) Foreign tax credit (attach Form 1116)	43	41			
Credits	41	Credit for the alderly or the disabled (attach Schedule R)	1717	40			
	40		2441) 41	39	111111	<u> </u>	i
	3 9	Additional taxes (see page 24). Check if from a Form Add lines 38 and 39	n 49/0 b 🗀 For	m 4972 ▶	40	3 4	+
		or d Form 8615 (see page 24). (Amount, if any, from F	form(s) 8814 ▶ €		38		+
	38	Enter tax. Check if from a Tax Table, b Tax Ra		☐ Schedule D.	20		
	37	Taxable income. Subtract line 36 from line 35. (If line 36			37	32	-
		line 6e. If line 32 is over \$75,000, see page 24 for the an	nount to enter .		36		+
	36	if line 32 is \$75,000 or less, multiply \$2,150 by the total is	number of exemp	tions claimed on		31	1
	35				35		
		your: • Single—\$3,400 • Head of nouseric • Married filing jointly or Qualifying widow(er)—					
•	.	the checked any box on line 33a or b, go to p deduction. If you checked box 33c, your stan	page 23 to find you adard deduction is	our standard	34	30	:
ax, see page	34	Enter Standard deductions (from Schedule A, line 26 Standard deduction (shown below for your		ution: If you			:
you want ne IRS to gure your	C	If you are married filing a separate return and your spouse or you are a dual-status alien, see page 23 and check he	ere	ons. ▶ 33c □			!
		if your parent (or someone else) can claim you as a depe		~			
compu- ation		Add the number of boxes checked above and enter the t	otal here .// otal	1 ► 33b □	- //////		
ax `ampu-	3 3a	Check if: 🗌 You were 65 or older. 🗌 Blind: 🗍 Spous	e was 65 or older	Blind. X ▶ 33a			
fa.v	32	Amount from line 31 (adjusted gross income)			32		-

SCHEDULES A&B (Form 1040)

Schedule A—Itemized Deductions

(Schedule B is on back)

Sequence No. 07

OMB No. 1545-0074

Department of the Treasury internal Revenue Service

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

Name(s) shown on	Form	1040	Your	social security number
Medical and Dental	1 2	Caution: Do not include expenses reimbursed or paid by others. Medical and dental expenses. (See page 38.)		
Expenses	3 4	Multiply line 2 above by 7.5% (.075)	4	72
Taxes You Paid	5 6	State and local income taxes		
(See page 38.)	7	Other taxes. (List—include personal property taxes.) ▶ 7		
	8	Home mortnage interest and points reported to you on Form 1098 9a 81	8	
Interest You Paid (See page 39.)	9 a b	Home mortgage interest not reported to you on Form 1098. (If paid to an individual, show that person's name and address.) ▶		
Note: Personal interest is	10	Points not reported to you on Form 1098. (See instructions for special rules.)		
no longer deductible.	11	Investment interest (attach Form 4952 if required). (See page 40.)		79
	12	Add lines 9a through 11. Enter the total	12	7 1
Gifts to Charity		Caution: If you made a charitable contribution and received a benefit in return, see page 40.		
(See	13	Contributions by cash or check	-4////	
page 40.)	14	Other than cash or check. (You MUST attach Form 8283 if over \$500.).		
	15 16	Carryover from prior year	16	85
Casualty and Theft Losses	17	Casualty or theft loss(es) (attach Form 4684). (See page 40.).	17	90
Moving	40	Maying avanage (attach Form 2002 or 20025) (See page 41.)	18	91
Expenses	18	Moving expenses (attach Form 3903 or 3903F). (See page 41.)		
Job Expenses and Most Othe Miscellaneous	ř	Unreimbursed employee expenses—job travel, union dues, job education, etc. (You MUST attach Form 2106 if required. See instructions.) ▶		
Deductions	20	Other expenses (investment, tax preparation, safe deposit box, etc.). List type and amount ▶		
(See page 41 for expenses to		T 20		
deduct here.)	21	Add lines 19 and 20	_{/////	
	22	Enter amount from Form 1040, line 32 . 22		
	23 24	Multiply line 22 above by 2% (.02)		
Other	25	Other (from list on page 41 of instructions). List type and amount ▶		
Deductions			25	
Total Itemized	26	• If the amount on Form 1040, line 32, is \$100,000 or less (\$50,000 or less if married filing separately), add lines 4, 8, 12, 16, 17, 18, 24, and 25. Enter the total here.	26	
Deductions		• If the amount on Form 1040, line 32, is more than \$100,000 (more than \$50,000 if married filing separately), see page 42 for the amount to enter.		
		Caution: Be sure to enter on Form 1040, line 34, the LARGER of the amount on line 26 above or your standard deduction.		

• Expenses of producing tax-exempt acome.

Total Itemized Deductions

Line 26

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

Itemiz	zed Deductions Worksheet—Line 26 (keep for your records)	
1.	Add the amounts on Schedule A. lines 4, 8, 12, 16, 17, 18, 24, and 25	1
2.	Add the amounts on Schedule A, lines 4, 11, and 17, plus any gambling losses included on line 25	2
	Caution: Be sure your total gambling losses are clearly identified on the dotted line next to line 25.	
1	Subtract line 2 from line 1. (If the result is zero. STOP HERE ; enter the amount from line 1 above on Schedule A, line 26.)	3
4.	Multiply line 3 above by 80% (.80) 4	
5.	Enter the amount from Form 1040, line 32 5.	
i	Enter \$100,000 (\$50,000 if married filing separately) 6.	
	Subtract line 6 from line 5. (If the result is zero or less, STOP HERE; enter the amount from line 1 above on Schedule A, line 26.) 7	
8	. Multiply line 7 above by 3% (.03) 8.	. 72
9	Compare the amounts on lines 4 and 8 above. Enter the smaller of the two amounts here	9
10	 Total itemized deductions. Subtract line 9 from line 1. Enter the result here and on Schedule A, line 26 	10

SCHEDULE C (Form 1040)

Profit or Loss From Business

(Sole Proprietorship)

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

Department of the Treasury internal Revenue Service

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

Attachment Sequence No. **09**

0MB No. 1646-3314

Nam	e of proprietor					Social	security number	(SSN)
Ā	Principal business or professio	n, includir	ng product or service	e (see insti	ructions)	B Ent	er principal bus m page 2) ▶	iness cod
c	Business name					D Emp	ployer ID number	(Not SSN)
E	Business address iincluding su City, town or post office, state	ite or roo	m no.) ▶					
— F				(3)	☐ Other (specify) ►			
G	Method(s) used to value closing inventory: (1)		Lower of c	ost	Other (attach	Does not a	only (if	Yes
Н	Was there any change in determini		• •			"Yes." attac	h explanation.)	
1	Did you "materially participate" in t	the operation	on of this business dur	ing 1991? (If "No," see instructions for limit	ations on lo	sses.)	1 1
J	If this is the first Schedule C fil	ed for this	business, check he		<u></u>			
Pa	rt I Income					 	T	
1	Gross receipts or sales. Cautio "Statutory employee" box on th	n: If this in at form w	ncome was reported as checked, see the	d to you or instructio	n Form W-2 and the			
2								
3	Subtract line 2 from line 1						97	
4	Cost of goods sold (from line 4						92	
5	Subtract line 4 from line 3 and	enter the	gross profit here .			. 5		
6	Other income, including Federa	al and stat	e gasoline or fuel ta	x credit or	refund (see instructions)	. 6		
7	Add lines 5 and 6. This is your	aross in					96	
	Add lines 5 and 6. This is your Expenses (Cautio				use of your home on lin		70	
8		1 - 1	expenses for bo				T	
_	Advertising			1	Repairs and maintenance .			
9	Bad debts from sales or services (see instructions).	9			Supplies (not included in Part I Taxes and licenses		 	
0	Car and truck expenses (see				Travel, meals, and entertainmen	. 777777		-
	instructions—also attach Form 4562)	10	100	1	Travel	1	1	
1	Commissions and fees,	11	102			.		
2	Depletion	12		t	Meals and entertainment	ļ		
3	Depreciation and section 179 expense deduction (not included in		101		Enter 20% of line		7	
	Part III) (see instructions).	13	101		24b subject to limitations (see	1	i	i
4	Employee benefit programs				instructions) .		1	
	(other than on line 19)	14			Subtract line 24c from line 24b	24d		
5	Insurance (other than health).	15	106	25	Utilities			
6	Interest:		103	26	Wages (less jobs credit) .	. 26	108	
a	Mortgage (paid to banks, etc.)	16a 16b	104	278	Other expenses (list type and a	mount):		
ь	Other	17	104		•••••			
7 8	Legal and professional services .	18	165		·			
9	Office expense	19	100		•••••••••••••••••••••••••••••••••••••••			
20	Rent or lease (see instructions):							
а	Vehicles, machinery, and equipment	20a			***************************************			
b	Other business property	20b	107	27t	Total other expenses	27b		
28	Add amounts in columns for lin business use of your home	es 8 thro	ugh 27b. These are	your tetal	expenses before expenses	for 28	99	7
9	Tentative profit (loss). Subtract					~		
10	Expenses for business use of y Net profit or (loss). Subtract line enter the net profit on Schedule go on to line 32 (fiduciaries, see	our home ne 30 from e SE, line	(attach Form 8829) t line 29. If a profit, e 2 (statutory employe	enter here es. see in	and on Form 1040, line 12. A structions). If a loss, you MU	. 30 ST		
2	If you have a loss, you MUST chec					$\overline{}$	All investmen	it is at risk
-	if you checked 32a, enter the ic		•		, , , , , , , , , , , , , , , , , , , ,	7	Some investment	

33

SCHEDULE D

(Form 1040)

Capital Gains and Losses

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

➤ Attach to Form 1040.

► See Instructions for Schedule D (Form 1040).

1991

CMB No. 1545-0074

Attachment Sequence No. 12A

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

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

Your social security number

transa	ctions	involvir	na stocks	s, bonds, a	and of	ther secu	irities.	and (b) gro	oss proce	9-B and 1099 eds from rea tach a statem	i estate	transac	tions no	ot repo	ents): (a) proce Inted on anothe	eds from r form or
Par	1 1	Shor	t-Term	n Capital	l Gai	ins and	Los	ses—As	sets He	ld One Ye	ar or	Less				
(a) (Ex	Descrip ample.	tion of p 100 shared of "Z"	roperty es 7%	(b) Date ac (Mo., day	quired		e sold	(d) Sale	es price ructions)	(e) Cost other ba (see instruc	or sis	lf (e) is	f) LOSS more things ct (d) fro		(g) GAII if (d) is more t subtract (e) fr	han (e).
	Stoc	ks. Bon	ds, Oth	er Securi	ties,	and Rea	l Esta	te. Includ	e Form 1	099-B and	1099-S	Transa	ctions	. See	instructions.	
											:					
									:		:			:		:
														:		
									:		:			;		
											:			<u>:</u>		
									<u> </u>					<u>:</u>		
											:		<u>-</u> -	:		
											;				_	
1 b	Amou	nts from	Schedule	D-1, line 1b	attac	n Scheau	e D-1)						,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	· · · · · · · · · · · · · · · · · · ·	**************************************	
1c	Total	of All	Sales P	rice Amoi	unts.				:					X /////		
				nes 1a and			1c		<u> </u>					<i>8411111</i>		
1d	Othe	r Trans	actions	(Do NOT	inclu	ide real	estate	e transact	tions from	n Forms 10	99-S o	n this li	ne. Re	port t	hem on line 1	a.)
										-	-					
								-	- !		<u>:</u>			;		
				L		l					1_			DUIIII	-	- :
2										e 10 or 14c	2			<i>XIIII</i>		
3		-	•					6252, line			3			<u> </u>	1	
4										fiduciaries .	4		3	:		uiisuun
5								dule D, lin			5 6		<u>ラ</u> バン	: \		
6								s (f) and (g			-	11 1		7	117	<u>.</u>
7 Par								columns (f		id More T	han O	ne Ye	ar	1 !	1	
														. See	instructions.	
	0.00	10, 50,	100, 04.								,					
				 		 		1	:		:					:
										1	:			:		:
						-			:	<u> </u>	:			:		
						<u> </u>					;					1
														:		:
						1			-		1			:		
																:
8b	Amou	nts from	Schedule	D-1, line 8b	attac	h Schedu	ie D-1)									
8c	Tota	l of All	Sales P	rice Amo	unts.	,			-							
				nes 8a an			- 8c		1							
8d	Othe	r Trans	sactions	(Do NOT	[incl	ude rea	estat	e transac	tions fro	m Forms 10)99-S o	n this l	ine. Re	port 1	them on line 8	3a.)
									:			<u> </u>		:		<u> </u>
				i								ļ <u> </u>				:
											-;	,,,,,,,,,	mm	, , , , , , , , , , , , , , , , , , ,		
9	Long	-term ga	ain from	sale or exc	chang	e of your	home	from Form	2119, lin	e 10 or 14c	9			<i> }} </i>	114	-
10	•	_			_	-		6252, line			10				4	
11	•	, .	•							iduciaries .	11	mm	mm	: mann		<u> </u>
12		•	•	, ,	•						12				118	
13		-		97, line 7 d	or 9						13				119	
14						om 1990) Sche	dule D, lin	ie 36		14	 	17			
15								ns (f) and		ļ <u>.</u> .	15	1(116	- 	115	

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

SCHEDULE E (Form 1040)

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

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

CMB No. 1545-6074

1991
Attachment
Sequence No. 13

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

Your social security number

	Show the kind and location of each rental property:				- 1		did you or yo		ty listed on		Yes	140
A							ersonal purp					
В	than the greater of 14 day							ys or				
		10% of the total days re fair rental value during the						ys rer	nted at	В		
C							(See instructi		етах			
	atal and Davathy Income:			F	ropert	es				C	ls	
E	ital and Royalty Income:		Α		В		C		(Add	columns	A, B, ar	nd C
3	Rents received	3						ļ	3	12		L_
4	Royalties received	4						<u> </u>	4	12	.4	
ler	ntal and Royalty Expenses:											
5	Advertising	5										
6	Auto and travel	6		_		1 1		-				
7	Cleaning and maintenance	7				+		 				<i>\\\\\</i>
8	Commissions	8			_	+ +		 				
9	Insurance	9				+ +		-				
0	Legal and other professional fees	10			-	+		-				
1	Mortgage interest paid to banks, etc. (see instructions)	11					161		11		*******	
2	Other interest	12					162	<u> </u>				
3	Repairs	13				1		<u> </u>				
4	Supplies	14				\perp		ļ				
5	Taxes	15				\perp		ļ				
6	Utilities	16				1		ļ				
7	Wages and salaries	17						+-				
8	Other (list) ▶					1		┼	<i>4000</i>			
		₄₀				_		-				
		18						+	<i>\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\</i>			
								+	<i>\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\</i>			
		19						-	19			Y ////
9	Add lines 5 through 18	19	-				-		19			\vdash
:0	Depreciation expense or depletion	20							20	125,	126	,
	(see instructions)	21						+	111111111111111111111111111111111111111			
	Total expenses. Add lines 19 and 20						120	+-				
2	Income or (loss) from rental or royalty properties. Subtract line 21						128					XIII
	from line 3 (rents) or line 4											X ///
	(royalties). If the result is a (loss),						129					X
	see instructions to find out if you must file Form 6198	22					•					X ///
			Suspe	ded to	r Car	Nove	165					X///
3	Deductible rental loss. Caution:		·			ן ו	103					X
	Your rental loss on line 22 may be limited. See instructions to find out		1				127					X///
	if you must file Form: 8582	23 () (····)	(X///
4	Income. Add rental and royalty income.	ome from	line 22. Ent	ter the tot	al incon	ne here			24		-0	↓
5	Losses. Add royalty losses from lin							nere	25		21	\perp
	• •											
6	Total rental and royalty income or (I	oss). Cor	nbine lines 2	24 and 25.	Enter 1	he resi	ilt here. If Pa	rts II.	1 1			

schedule E rolling of the not enter name and social security number if shown on other side.)

Your social security number

	s) snown on return. (Do not ent							1001 30	Jerai Security II	
Note:	If you report amounts from	farming or fis	hing on Sched	dule E, you m	nust enter your	gross income	from those ac	tivities o	on line 41 belo	ow.
	If you report amounts from Income or Loss report a loss from an ar	From Par	tnersnips a	ina 3 Corp	Jurations					
f you activi	report a loss from an all ty. See instructions. If yo	ou check col	umn (f), you	must attaci	1 1 01111 0 130	,				
27	- <u></u> -	(a) Name			(b) Enter P for partnership; S or S corporation	(c) Check if foreign partnership	(d) Empli identifica numbi	ition	!nvestment (e) All is (f at risk	
A L										
3										
) E										
	Passive Income	e and Loss			No		ncome and L	.035		
(8	(g) Passive loss allowed attach Form 8582 if required)		ive income hedule K-1		passive loss hedule K-1	"	deduction m Form 4562		(k) Nonpassive from Schedu l	
4										
В										
<u>C</u>										
D E										
	Totals	130	134						131 135	
b.	Totals 132/136			133/13				00		
	Add columns (h) and (k)							29 30 (
30	Add columns (g), (i), and Total partnership and S	(i) of line 20	Bb. Enter the	total nere .	 ne lines 29 a	 and 30. Enter		-		
31	here and include in the	total on line	40 below .			211G 00: E110		31	138	
	III Income or Loss			rusts						
32			(a) Nar	me				id	(b) Employer entification num	
										· · · · · · · · · · · · · · · · · · ·
A B			<u></u>							
C										
	Pass	ive Income	and Loss				npassive Inc			
	(c) Passive deduction or loss (attach Form 8582 if requ			Passive income 		(e) Deduction from Sche		(1)	Other income to Schedule K-	
	(attach Form 6362 in requ	711-647								
A B										
c										
	Totals		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,							
	Totals						L	34	<u> </u>	
34	Add columns (d) and (f)	of line 33a.	Enter the to	tal income l	nere ,			35	140	2
35 36	Add columns (c) and (e) Total estate and trust inc	or line 330 come or (los:	. Enter the to s) Combine I	lines 34 and	35. Enter the	e result here :	and include			
30	in the total on line 40 b	elow			<u>, , ,</u>	<u></u>	<u> </u>	36	-111-1-1	
Pa	t IV Income or Los	s From Re	al Estate M						ual Holder	
37	(a) Name		mployer tion number	Schedule	s inclusion from • Q, line 2c (see structions)		income (net loss)	(e) inc	come from Scho	edules Q,
								+		
38	Combine columns (d) a	nd (e) only. I	Enter the res	ult here and	include in tr	ne totai on iir	ne 40 below	38		
	rt V Summary							39	122	
Pa						- halam)		1 325	, _	
2a 39	Net farm rental income	or (loss) fro	m Form 483	5. (Also con	nplete line 4	Delow.)		-		
	Net farm rental income TOTAL income or (loss) 1040, line 18	. Combine li	nes 26, 31, 3	36, 38, and 3	39. Enter the	result here a	nd on Form	40		

SCHEDULE SE

(Form 1040)

Self-Employment Tax

► See Instructions for Schedule SE (Form 1040).

OMB No. 1545-0074 Sequence No. 17

Department of the Treasury Internal Revenue Service

▶ Attach to Form 1040.

Name of person with self-employment income (as shown on Form 1040) Social security number of person with self-employment income ▶

Who Must File Schedule SE

You must file Schedule SE if:

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

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

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

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

Who MUST Use Long Schedule SE (Section B)

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

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

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

		1 1		
1	Net farm profit or (loss) from Schedule F (Form 1040), line 37, and farm partnerships, Schedule K-1 (Form 1065), line 15a	1		
2	Net profit or (loss) from Schedule C (Form 1040), line 31, and Schedule K-1 (Form 1065), line 15a (other than farming). See instructions for other income to report	2		
3	Combine lines 1 and 2	3		
4	Net earnings from self-employment. Multiply line 3 by .9235. If less than \$400, do not file this schedule; you do not owe self-employment tax. Caution: If you received wages or tips, and the total of your wages (and tips) subject to social security, Medicare, or railroad retirement tax plus the amount on line 4 is more than \$53,400, you cannot use Short Schedule SE. Instead, use Long Schedule SE on the back	4		
5	Self-employment tax. If the amount on line 4 is: \$ \$53,400 or less, multiply line 4 by 15.3% (.153) and enter the result. More than \$53,400, but less than \$125,000, multiply the amount in excess of \$53,400 by 2.9% (.029). Add \$8,170.20 to the result and enter the total. \$ \$125,000 or more, enter \$10,246.60.	5	141	
	Also enter this amount on Form 1040, line 47		L	

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

Form

Child and Dependent Care Expenses

➤ Attach to Form 1040.

OMB No. 1545-0068 199 Sequence No.

Your social security number

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

➤ See separate instructions.

If you are claiming the child and dependent care credit, complete Parts I and II below. But if you received employer-provided dependent care benefits, first complete Part III on the back. • If you are not claiming the credit but you received employer-provided dependent care benefits, only complete Part I below and Part III Caution: If you have a child who was born in 1991 and the amount on Form 1040, line 32, is less than \$21,250, see page 1 of the instructions before completing this form. Persons or Organizations Who Provided the Care—You must complete this part. (See the instructions. If you need more space, use the bottom of page 2.) (b) Address (c) Identifying number (d) Amount paid 1 (a) Name (number, street, apt. no., city, state, and ZIP code) (SSN or EIN) (see instructions) 2 Add the amounts in column (d) of line 1 Note: If you paid cash wages of \$50 or more in a calendar quarter to an individual for services performed in your home, you must file an employment tax return. Get Form 942 for details. Part II Credit for Child and Dependent Care Expenses Enter the number of qualifying persons cared for in 1991. (See the instructions for the definition of a qualifying person.) Caution: To qualify, the person(s) must have shared the same home with you in 1991 Enter the amount of qualified expenses you incurred and actually paid in 1991. See the instructions to find out which expenses qualify. Caution: If you completed Part III on page 2, do not include on this line any excluded benefits shown on line 25 Enter \$2,400 (\$4,800 if you paid for the care of two or more If you completed Part III on page 2, enter the excluded benefits, Subtract line 6 from line 5. (If the result is zero or less, skip lines 8 through 13. Enter -0- on 8 Compare the amounts on lines 4 and 7. Enter the smaller of the two amounts here 9 146 You must enter your earned income. (See the instructions for the definition of earned income.) Note: If you are not filing a joint return, skip line 10 and go to line 11. If you are married filing a joint return, you must enter your spouse's earned income. (If your 10 147 10 spouse was a full-time student or disabled, see the instructions for the amount to enter.) . . . • If you are married filing a joint return, compare the amounts on lines 8, 9, and 10. Enter the smallest of the three amounts here. • All others, compare the amounts on lines 8 and 9. Enter the smaller of the two amounts here. 12 Enter the amount from Form 1040, line 32 13 X Enter the decimal amount from the table below that applies to the amount on line 12 Decimal amount is: If line 12 is: Decimal amount is: If line 12 is: **But not** Over- But not OVE OVET-\$0-10 000 -22,000 าก \$20,000-22,000-24,000 10,000-12,000 29 12,000—12,000 12,000—14,000 14,000—16,000 16,000—18,000 18,000—20,000 24,000—26,000 26,000—28,000 28 .27 28,000-No limit .25 Multiply line 11 above by the decimal amount on line 13 14 Multiply any qualified expenses for 1990 that you paid in 1991 by the decimal amount that

applies to the amount on your 1990 Form 1040, line 32, or Form 1040A, line 17. (You must

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

15 16

Department of the Treasury

Internal Revenue Service

General Business Credit

► Attach to your tax return.

► See separate instructions.

OMB No. 1545-0895

Attachment Sequence No. 22

Name(s) as shown on return

Identifying number

Pa	art I	Tentative Credit		
18	Currer	it year investment credit (Form 3468, Part I)	1a	43
Ł	Currer	it year jobs credit (Form 5884, Part I)	1b	44
c	: Currer	t year credit for alcohol used as fuel (Form 6478)	1c	45
d	Curren	t year credit for increasing research activities (Form 6765, Part III)	1d	46
е	Curren	t year low-income housing credit (Form 8586, Part I)	1e	47
f	Curren	t year ennanced oil recovery credit (Form 8830, Part I)	1f	
9	Curren	t year disabled access credit (Form 8826, Part I)	1g	
h	Currer	it year general business credit. Add lines 1a through 1a	1h	
2	Passiv	activity credits included on lines 1a through 1a (see instructions)	2	
3	Subtra	ct line 2 from line 1n	3	
4	- 4331V	activity credits allowed in 1991 (see instructions).	4	
5	Carryto	rward of general business credit, WIN credit, or ESOP credit to 1991 (see instructions)	5	
6	Carryb	ack of general business credit to 1991 (see instructions)	6	
7		ve general business credit. Add lines 3 through 6	7	
Pa		General Business Credit Limitation Based on Amount of Tax	·	
8a		uals. Enter amount from Form 1040, line 40		
b	Corpor	ations. Enter amount from Form 1120, Schedule J, line 3 (or Form 1120-A, Part I,	8	
C	Other f	lers. Enter regular tax before credits from your return		
9	Credits	that reduce regular tax before the general business credit—		
а	Credit f	or child and dependent care expense (Form 2441) 9a		
b	Credit f	or the elderly or the disabled (Schedule R (Form 1040))	-/////	
C	Foreign	tax credit (Form 1116 or Form 1118)		
d	Posses	sions tax credit (Form 5735)		
	Mortga			
f		or fuel from a nonconventional source.		
	Orphan	drug credit (Form 6765)		
h	Add line	es 9a through 9g	9h	
10	Net reg	ular tax. Subtract line 9h from line 8	10	
11	Tentativ	e minimum tax (see instructions):		
а	Individu	als. Enter amount from Form 6251, line 20		
b	Corpora	tions. Enter amount from Form 4626, line 14	11	
c	Estates	and trusts. Enter amount from Form 8656, line 37		
12		ome tax:		
а	Individu	als. Add line 10 above and line 22 of Form 6251		·
ь	Corpora	tions. Add line 10 above and line 16 of Form 4626	12	
C	Other fil	ers. See instructions		
) is more than \$25,000, enter 25% (.25) of the exacts	13	
14	Subtract	line 11 or line 13, whichever is greater, from line 12. If less than zero, enter -0-	14	
			' 	
	enter th Part I, Iii instruction instruction	business credit allowed for current year. Enter the smaller of line 7 or line 14. Also is amount on Form 1040, line 44; Form 1120, Schedule J, line 4e; Form 1120-A, the 2a; or on the appropriate line of your return. (Individuals, estates, and trusts, see ons if the credit for increasing research activities is claimed. C corporations, see ons for Schedule A if any regular investment credit carryforward is claimed or if the ion has undergone a post-1986 "ownership change.")		
		The state of the s	15	1

Department of the Treasury Internal Revenue Service

Investment Interest Expense Deduction

➤ See separate Instructions.

➤ Attach to your tax return.

OMB No. 1545-0191

Sequence No. 72 Name(s) shown on return identifying number 1 Investment interest expense paid or accrued in 1990. See Instructions . 2 Investment income minus investment expenses. See Instructions . 3 Phase-in adjustment from passive activities. See Instructions 3 5 Subtract line 4 from line 1. If zero or less, enter -0- here and on line 13, and skip lines 6 through 12 . . . 5 6 Enter the amount from line 1, minus the interest expense from certain trade or businesses. See Instructions 6 7 Enter the amount from line 2, without the income or expenses from certain trade or businesses. See Instructions 8 Phase-in ceiling amount: Individuals (not married filing separately) and estates, enter \$10,000 Married individuals filing separately, enter \$5,000 10 Subtract line 9 from line 6. If zero or less, enter -0- 10 11 Subtract line 10 from line 5. If zero or less, enter -0-12 Multiply line 11 by 90% (.9) 12 13 16 17 Disallowed investment interest expense from 1989 Form 4952, line 23. If zero, enter -0- here and on lines 21 and 22, and skip lines 18 through 20 17 18 Enter the amount from line 4. If line 4 is zero, enter -0here and on line 20 and skip line 19 20 Subtract line 19 from line 18. If zero or less, enter -0- . . . 20 21 Enter the smaller of line 17 or line 20 163 23 Disallowed investment interest expense to be carried forward to 1991. Add lines 15 and 22 24 Investment interest expense deduction. Add lines 16 and 21. See Instructions . 24

Form 6251

Department of the Treasury

internal Revenue Service

Alternative Minimum Tax—Individuals

See separate instructions.

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

CMB No. 1545-0227

1991
Attachment
Sequence No. 32

Name(s) shown on Form 1040 Your social security number Enter the amount from Form 1040, line 35. (If Form 1040, line 35 is less than zero, enter as a negative amount.) 1 Net operating loss deduction, if any, from Form 1040, line 22. (Enter as a positive amount.) 2 2 Overall itemized deductions limitation (see instructions) 3 3 Combine lines 1, 2, and 3 4 Adjustments: (See instructions before completing.) Medical and dental expenses. (Enter the smaller of the amount from Schedule A (Form 1040), line 4 or 21/2% of Form 1040, line 32.) 5b c Miscellaneous itemized deductions from Schedule A (Form 1040), line 24. 5c 5d 5e Certain home mortgage interest . . . Circulation and research and experimental expenditures paid or incurred after 1986 Mining exploration and development costs paid or incurred after 1986. . . . 5i 5k 51 Pollution control facilities placed in service after 1986. Adjusted gain or loss and incentive stock options 50 Tax shelter farm loss 5p Passive activity loss 5a 149 Tax preference items: (See instructions before completing.) 6**a** b Tax-exempt interest from private activity bonds issued after 8/7/86. 6b d Accelerated depreciation of real property placed in service before 1987 . . . 6d Accelerated depreciation of leased personal property placed in service before 1987 Amortization of certified pollution control facilities placed in service before 1987. q Intangible drilling costs 150 h Add lines 6a through 6g 7 8 Energy preference adjustment for certain taxpayers. (Do not enter more than 40% of line 7.) See instructions . 8 9 9 10 10 Alternative minimum taxable income. Subtract line 10 from line 9. If married filing separately, see instructions 11 12 Enter: \$40,000 (\$20,000 if married filing separately; \$30,000 if single or head of household) 12 Enter: \$150,000 (\$75,000 if married filling separately; \$112,500 if single or head of household). 13 13 14 Subtract line 13 from line 11. If zero or less, enter -0- here and on line 15 and go to line 16 . . . 14 15 15 Exemption. Subtract line 15 from line 12. If zero or less, enter -0-. If completing this form for a child under age 16 16 17 Subtract line 16 from line 11. If zero or less, enter -0- here and on line 22 and skip lines 18 through 21. 17 18 18 19 19 20 20 21 Enter your tax from Form 1040, line 38, minus any foreign tax credit on Form 1040, line 43. If an amount is 21 22 Alternative minimum tax. Subtract line 21 from line 20. If zero or less, enter -0-. Enter this amount on Form 1040, line 48. If completing this form for a child under age 14, see instructions for amount to enter. 22

Form 8582

Passive Activity Loss Limitations

structions.

Department of the Treasury Internal Revenue Service ➤ See separate instructions.

➤ Attach to Form 1040 or Form 1041.

1991 Attachment Sequence No. 88

OMB No. 1545-1008

For P	aperwork Reduction Act Notice, see separate instructions.	+	Cat. No. 63704F		Form 85 8	32 (1991
11	Total losses allowed from all passive activities for 1991. Adinstructions to find out how to report the losses on your tax return	d lines	9 and 10. See	the 1	1 153	
10	Add the income, if any, on lines 1a and 2a and enter the total .			1	0	
Par	Total Losses Allowed					
9	Enter the smaller of line 4 or line 8		· · · · · · · · · · · · · · · · · · ·		9	
	Multiply line 7 by 50% (.5). Do not enter more than \$25,000. If n instructions			,	8	
7	Subtract line 6 from line 5	7				
	8, enter -0- on line 9, and then go to line 10. Otherwise, go to line 7.					
	Note: If line 6 is equal to or greater than line 5, skip lines 7 and					
6	Enter modified adjusted gross income, but not less than -0- (see instructions)	6				
5	Enter \$150,000. If married filing separately, see the instructions .	5		+		
4	Enter the smaller of the loss on line 1d or the loss on line 3				4	
	Note: Treat all numbers entered in Part II as positive amount	its. (Se	e instructions or	page 8	for examples.)	
Par	Special Allowance for Rental Real Estate With Act	ive Pa	rticipation		3	
3	Combine lines 1d and 2d. If the result is net income or -0-, see the line and line 1d are losses, go to line 4. Otherwise, enter -0- on line	instruc	ctions for line 3. I	f this		
<u>d</u>	Combine lines 2a, 2b, and 2c	<u> </u>	<u></u>		2d	
	Prior year unallowed losses (from Worksheet 2, column (c))		-			
b	Activities with net loss (from Worksheet 2, column (b))	2b	, 152	1		
2 a	Activities with net income (from Worksheet 2, column (a))	28	1.62	+		
	Other Passive Activities					
<u>d</u>	Combine lines 1a, 1b, and 1c			1	14	
c	Prior year unallowed losses (from Worksheet 1, column (c))	1c	(
b	Activities with net loss (from Worksheet 1, column (b))	1b	(152	1)		
1a	Activities with net income (from Worksheet 1, column (a))	1a		 		
S 9 6	e Active Participation in a Rental Real Estate Activity in the instr	nition (uctions	of active particip s.)	ation		X
Re	Caution: See the instructions for Worksheets 1 and 2 on partial Real Estate Activities With Active Participation (For the define Active Participation in a Rental Real Estate Activity in the instructions.)	nition (of active particip		Part I.	

.... 8801

Credit For Prior Year Minimum Tax—Individuals and Fiduciaries

► Attach to your tax return.

OMB No. 1545-1073

1991
Attachment
Sequence No. 74

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

Identifying number

Pa	rt I Net Minimum Tax on Exclusion Items			
1	Enter the amount from line 3 of 1990 Form 6251. Form 1041 filers, see instructions	1		
2	Enter adjustments and tax preference items treated as exclusion items. See instructions	2		
3	Minimum tax credit net operating loss deduction. See instructions	3 ()
4	Combine lines 1, 2, and 3. If zero or less, enter -0- here and on line 15 and go to Part II. If more			
	than \$155,000 and you are married filing separately, see instructions	4		
5	Enter the amount from line 9 of 1990 Form 6251. Form 8656 filers, enter \$20,000	5		
6	Enter the amount from line 10 of 1990 Form 6251. Form 8656 filers, enter \$75,000	6		
7	Subtract line 6 from line 4. If zero or less, enter -0- here and on line 8 and go to line 9	7		
8	Multiply line 7 by 25% (.25)	8		
9	Subtract line 8 from line 5. If zero or less, enter -0 If completing for a child under 14, see instructions	9	_	
10	Subtract line 9 from line 4. If zero or less, enter -0- here and on line 15, and go to Part II	10		
11	Multiply line 10 by 21% (.21)	11		
12	Minimum tax foreign tax credit on exclusion items. See instructions	12		<u> </u>
13	Tentative minimum tax on exclusion items. Subtract line 12 from line 11	13		<u> </u>
14	Enter the amount from line 18 of 1990 Form 6251, or line 38c of 1990 Form 8656	14		
15	Net minimum tax on exclusion items. Subtract line 14 from line 13. If zero or less, enter -0-	15		
Pa	Minimum Tax Credit and Carryforward to 1992			
16	Enter the amount from line 19 of 1990 Form 6251, or line 39 of 1990 Form 8656	16		
17	Enter the amount from line 15 above	17		<u> </u>
18	Subtract line 17 from line 16. If line 17 is greater than line 16, enter the result as a negative amount	18		
19	Carryforward of minimum tax credit from 1990. Enter the amount from line 26 of 1990 Form 8801	19	143	
20	Enter your 1990 unallowed credit for fuel produced from a nonconventional source, and 1990 unallowed credit See instructions	20		
21	unallowed orphan drug credit. See instructions	21		
22	Enter your 1991 regular income tax liability minus allowable tax credits. See instructions	22		\vdash
	,	23		\vdash
23	Enter the amount from line 20 of 1991 Form 6251, or line 37 of 1991 Form 8656 Subtract line 23 from line 22. If zero or less, enter -0	24		
24 25	Minimum tax credit. Enter the smaller of line 21 or line 24. Also enter this amount on the	-		
23	appropriate line of your 1991 tax return. See instructions	25		
26	Minimum tax credit carryforward to 1992. Subtract line 25 from line 21. See instructions	26	144	

General Instructions

(Section references are to the Internal Revenue code.)

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

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

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

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

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

Purpose of Form

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

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

Who Should File

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

• An AMT liability in 1990 and

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

Cat. No. 10002S

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

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

Specific Instructions

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

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

1040A

U.S. Individual Income

0.0	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
Tax	Return (X)	

1991

OMB No. 1545-0085

Step 1	Your first name and initial Last name	Your social security no.
(See page 16.) Use the IRS	E Sast italia	Spouse's social security no.
label. Otherwise. please print E	Home address (number and street). (If you have a P.O. box, see page 16.) Apt. no.	For Privacy Act and Paperwork
or type.	STATE	Reduction Act Notice, see page 3.
	Presidential Election Campaign Fund (see page 17) Do you want \$1 to go to this fund?	
Step 2 Check your	 Single Married filing joint return (even if only one had income) Married filing separate return. Enter spouse's social security numbers. 	MARS
filing status (Check only one.)	above and spouse's full name here ▶	e qualifying person is a
	child but not your dependent, enter this child's name here ▶ _ 5 ☐ Qualifying widow(er) with dependent child (year spouse died ▶	19). (See page 19.)
Step 3 Figure your	6a Vourself. If your parent (or someone else) can claim you as a dependent on his or he return, do not check box 6a. But be sure to check the box on line 18b on parents. b Spouse	No. of boxes checked on 6a and 6b
exemptions (See page 20.)	C Dependents: (2) Check (3) If age 1 or older, (4) Dependent's (5) N dependent's social relationship to liv	No. of months red in your children on 6c who:
If more than seven dependents,		• lived XOCAH with you • didn't live
see page 23.		with you due to divorce or separation (see page 23) X OCAC
	d If your child didn't live with you but is claimed as your	No. of other dependents XOOD
	dependent under a pre-1985 agreement, check here D e Total number of exemptions claimed.	Add numbers entered on lines above
Step 4 Figure your	7 Wages, salaries, tips, etc. This should be shown in Box 10 of your W-2 form(s). (Attach Form(s) W-2.)	7 2
total income	 8a Taxable interest income (see page 26). (If over \$400, also complete and attach Schedule 1, Part I.) b Tax-exempt interest. (DO NOT include on line 8a.) 8b 	e 8a 3
Attach Copy B of your Forms	9 Dividends. (If over \$400, also complete and attach Schedule 1, Part II 10a Total IRA 10b Taxable amount	
W-2 and 1099-R here.	distributions. 10a (see page 27). 11a Total pensions 11b Taxable amount	10b
Attach check or money order on	and annuities. 11a (see page 27). 12 Unemployment compensation (insurance) from Form(s) 1099-G.	11b 12 /7
top of any Forms W-2 or 1099-R.	13a Social security benefits. 13a Taxable amount (see page 31).	
	14 Add lines 7 through 13b (far right column). This is your total income.	▶ 14
Step 5 Figure your	b Spouse's IRA deduction from applicable worksheet. 15a b Spouse's IRA deduction from applicable worksheet. Note: Rules for IRAs begin on page 33. 15b	
adjusted gross income	Add lines 15a and 15b. These are your total adjustments. Subtract line 15c from line 14. This is your adjusted gross income. (If less than \$21,250, see "Earned income credit" on page 41.)	15c

1991	For	m 1040A					Page 2
Char G	17	Enter the amount from line 16.			17		
Step 6	b	Check \[\begin{array}{ c c c c c c c c c c c c c c c c c c c	ed ▶ 1 dent, . ▶ 1 Form	8a 8b	AG DS	EX I	
Figure your standard deduction,	19	Enter the standard deduction shown below for your But if you checked any box on line 18a or b, go to find your standard deduction. If you checked box 18e Single—\$3,400 • Head of household—\$5,000 • Married filing jointly or Qualifying widow(er)—\$5,700	page 3 c, enter	7 to		3 <i>0</i>	
		• Married filing separately—\$2,850			19		
	20	Subtract line 19 from line 17. (If line 19 is more than line	e 17, en	ter -0)	20		
exemption amount, and	21	Multiply \$2,150 by the total number of exemptions claims			21	31	
taxable income	22	Subtract line 21 from line 20. (If line 21 is more than line 20 This is your taxable income.	U, enter	-0) -	22	32	
Step 7	23	Find the tax on the amount on line 22. Check if from: Tax Table (pages 44-49) or Form 8615 (see page			23	34	
Figure your tax, credits, and payments		Credit for child and dependent care expenses. Complete and attach Schedule 2. 24a Credit for the elderly or the disabled.	39				
If you want the IRS to figure	<u>c</u> 25	Complete and attach Schedule 3. 24b Add lines 24a and 24b. These are your total credits. Subtract line 24c from line 23. (If line 24c is more than line	23. ente	er -0)	24c 25	51	-
your tax, see the instructions	26	Advance earned income credit payments from Form W		, <u>, , , , , , , , , , , , , , , , , , ,</u>	26		1
for line 22 on	27	Add lines 25 and 26. This is your total tax.	•	>	27		
page 38.	28a	Total Federal income tax withheld. (If any tax is from Form(s) 1099, check here ▶ □ .) 28a	58		60	Amount	
		1991 estimated tax payments and amount applied from 1990 return. Earned income credit. Complete and attach Schedule EIC. 28c	<u> </u>		48.	l with Fi 68	Orm
	d	Add lines 28a, 28b, and 28c. These are your total pay	ments	. >	28d		1
Step 8 Figure your	29	If line 28d is more than line 27, subtract line 27 from lin This is the amount you overpaid.	·		29	65(-)	
refund or	30	Amount of line 29 you want refunded to you.			30		
amount you owe	31	Amount of line 29 you want applied to your 1992 estimated tax. 31	66		-		
Attach check or money order on top of Form(s) W-2, etc., on page 1.	32	If line 27 is more than line 28d, subtract line 28d from line, amount you owe. Attach check or money order for full amount the "Internal Revenue Service." Write your name, address, snumber, daytime phone number, and "1991 Form 1040A" or Estimated tax penalty (see page 43).	ount pay social se	yable to	32	65(+)	
	33	altice of naming. I dealers that I have examined this return and accompanying ac	hedules an	nd statement	s, and to th	e best of my kı	nowledg
Step 9 Sign your return	and belief, has any k	they are true, correct, and complete. Declaration of preparer (other than the tax	xpayer) is i	based on all ecupation	information	n of which the	prepare
Keep a copy of this return for your records.	Spous	e's signature (if joint return, BOTH must sign) Date	Spouse	's occupation	1		
Paid preparer's	Preparer's	Date	Check self-em	if ployed 🔲	Prepare	r's social secui	rity no.
use only		me (or yours ployed) and		I. No. P code		1	

Child and Dependent Care Expenses for Form 1040A Filers ×

1991

OMB No. 1545-0085

ame(s) shown on For	m 1040A					Your socia	al security nu	mber
	you • If y	received employer-	provided deper the credit but	endent care credit, condent care benefits, f	irst compiete ra	art III o	n the back	•
	C	ly complete Part I be tion: If you have a compact than \$21,250, see I	hild who was i	born in 1991 and the instructions before co	amount on For	m 10402 chedule.	A , line 17,	
art I	15 125	(a) Name	(b) Address (number, street, apt. no., ate, and ZIP code)	(c) Identifying number (SSN or F	5 (0	d) Amount pasee instruction	
ersons or								
ganizations ho provided ne care								
ou MUST	2	If you need more sp Add the amounts in	column (d) of l	line 1.		2		
art. (See age 52.)		Note: If you paid case performed in you	h wages of \$50 our home, you n	or more in a calendar nust file an employme:	ti tux return. Ge	dividual t Form	l for service 942 for deta	s 1ils.
Part II	3	have shared the sam	ne home with t	rsons cared for in 19th the qualifying person	91. You must (s).	3		
redit for child		(See page 53 for the	definition of a	nonees you incurred	and actually	<u> </u>		
and dependent are expenses	4	noid in 1991 See na	ge 54 to find (penses you incurred to but which expenses q	uanry.			
		Caution: If you com	ipleted Part II.	l on page 2, DO NOI	include on	4	145	
		this line any exclude	ed benefits show	wn on line 23.		4		
	5	Enter \$2,400 (\$4,80 of two or more qual	U if you paid it ifving persons)	or the care				
		If you completed Pa	rt III on page	2. enter		_		
		the excluded bene	fits, if any, ire	om Mne 23. 6		_		ı
		Subtract line 6 from STOP HERE; you c	n line 5. (If line annot claim th	e 6 is equal to or more credit.)		7		
		Compare the amount two amounts here.	nts on lines 4 a	and 7. Enter the sma		8		-
	9	definition of earned	income.)	ome. (See page 54 fo		9	146	
		Note: If you are not	filing a joint re	turn, skip line 10 and	go to line 11.	_		
		spouse's earned inc	ome. (II your s structions for	eturn, you must enter spouse was a full-tim the amount to enter.)	10		•
	11	• If you are marrie	d filing a joint . Enter the sn	return, compare the nallest of the three a	amounts on amounts here.			1
		• All others, compassmaller of the tw	re the amount vo amounts he	ts on lines 8 and 9. E ere.	Inter the	11_	147	
	12	Enter the amount	from Form 104	10A, line 17. 12	ii	_		
	13	amount on line 12.	amount from t	he table below that a	_			
		If line 12 is—	Decimal	But not	Decimal amount			
		But not Over over	amount is—	Owen over	:s			
		\$0—10,000	.30	\$20,000—22,000				
		10,000—12,000	.29	22,000-24,000	.23			
		12,000—14,000	.28	24,000—26,000				
		14,000—16,000	.27	26,000—28,000 28,000—No lim				
		16,000—18,000	.26 .25	20,000—140 IIII	.20	13	>	<
		18,000-20,000		oimal amount on line	e 13 Enter the		- 39	
	14	Multiply line 11 a result here and on	bove by the de Form 1040A	cimal amount on line		14		
		result here and on	FOIR 1040A	Co: No	. 10749I S	chedule :	2 (Form 104	0A)

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Department of the Treasury-Internal Revenue Service Income Tax Return for FLPD Form 1991 Single Filers With No Dependents 1040EZ OMB No. 1545-0675 Use the IRS label (see page 10). If you don't have one, please print. Please print your numbers like this: Name & address LABEL Print your name (first, initial, last) Your social security number Home address inumber and street), iff you have a P.O. box, see page 11. H City town or post office, state, and ZIP code. If you have a foreign address, see page 11 Please see instructions on the back. Also, see the Yes No Form 1040EZ booklet. Presidential Election Campaign (see page 11) Note: Checking Yes" will not change your tax or reduce your refund. Do you want \$1 to go to this fund? Cents Report your Total wages, salaries, and tips. This should be shown in Box 10 of your W-2 form(s). (Attach your W-2 form(s).) income Attach Copy B of Taxable interest income of \$400 or less. If the total is more Form(s) than \$400, you cannot use Form 1040EZ. W-2 here. Attach tax payment on top of Form(s) W-2. Add line 1 and line 2. This is your adjusted gross income. Can your parents (or someone else) claim you on their return? Note: You Yes. Do worksheet on back; enter amount from line E here. 31 must check No. Enter 5,550.00. This is the total of your Yes or No. standard deduction and personal exemption. 351 4 5 Subtract line 4 from line 3. If line 4 is larger than line 3 enter 0. This is your taxable income. EXCESS **Figure** Enter your Federal income tax withheld from Box 9 of your your W-2 form(s). tax 7 Tax. Use the amount on line 5 to find your tax in the tax table on pages 16-18 of the booklet. Enter the tax from the table on this line. 65(-) Refund If line 6 is larger than line 7, subtract line 7 from line 6. This is your refund. amount you If line 7 is larger than line 6, subtract line 6 from line 7. This is the amount you owe. Attach your payment for full amount payable to the "Internal Revenue Service." Write your name, address, social security number, daytime phone number, and "1991 Form 1040EZ" on it.

9 owe I have read this return. Under penalties of perjury, I declare Sign that to the best of my knowledge and belief, the return is For IRS Use Only - Please YOUT do not write in boxes below true, correct, and complete.

Date

Your occupation

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return

for your records.

Keep a copy of this form

Your signature