

U. S. INDIVIDUAL INCOME TAX RETURN
For Calendar Year

1955

or other taxable year beginning _____, 1955, and ending _____, 1955
(Please type or print plainly)

NAME (IF THIS IS A JOINT RETURN OF HUSBAND AND WIFE, USE FIRST NAMES OF BOTH)

HOME ADDRESS (NUMBER AND STREET OR RURAL ROUTE) (CITY OR POST OFFICE) (ZONE) (COUNTY) (STATE)

YOUR SOCIAL SECURITY NO. AND OCCUPATION

WIFE'S SOCIAL SECURITY NO. AND OCCUPATION

If Income Was All From Wages, Use Pages 1 and 2 Only. If Such Income Was Less Than \$5,000, You May Need to Use Page 1 Only. See Page 3 of the Instructions.

Exemptions

- Check blocks which apply. Check for wife if she had no income or her income is included in this return.

Regular \$600 exemption	<input type="checkbox"/> Yourself	<input type="checkbox"/> Wife
65 or over at end of taxable year	<input type="checkbox"/> Yourself	<input type="checkbox"/> Wife
Blind at end of taxable year	<input type="checkbox"/> Yourself	<input type="checkbox"/> Wife
- List names of your children who qualify as dependents; give address if different from yours.
- Enter number of exemptions claimed for other persons listed at top of page 2.
- Enter the total number of exemptions claimed on lines 1, 2, and 3.

Enter number of boxes checked →

Enter number of children listed →

Income

- Enter all wages, salaries, bonuses, commissions, and other compensation received in 1955, before payroll deductions. Outside salesmen and persons claiming traveling, transportation, or reimbursed expenses, see instructions, page 5.

Employer's Name	Where Employed (City and State)	Wages, etc.	Income Tax Withheld
		\$	\$
Enter totals here →		\$	\$
- Less: Excludable "Sick Pay" in line 5 (See instructions, page 5. Attach required explanation.)
- Balance (line 5 less line 6)
- Profit (or loss) from business (from separate Schedule C)
- Profit (or loss) from farming (from separate Schedule F)
- Other income (or loss) from page 3
- ADJUSTED GROSS INCOME** (sum of lines 7, 8, 9, and 10)

Special computation

Unmarried or legally separated persons qualifying as "Head of Household," see instructions, page 14, and check here Widows and widowers who are entitled to the special tax computation, see instructions, page 14, and check here

IF INCOME ON LINE 11 IS UNDER \$5,000, AND YOU DO NOT ITEMIZE DEDUCTIONS, USE TAX TABLE ON PAGE 16 OF INSTRUCTIONS. IF INCOME WAS \$5,000 OR MORE, OR IF YOU ITEMIZE DEDUCTIONS, COMPUTE YOUR TAX ON PAGE 2.

Tax due or refund

- Enter tax from the Tax Table, or from line 9, page 2. Please check if you use Tax Table

	\$	
--	----	--
- | | | | |
|--|--|---|--|
| If income was all from wages, omit lines 13 through 16 | { | 13. (a) Dividends received credit (line 5 of Schedule J) . . . \$ | |
| | | (b) Retirement income credit (line 12 of Schedule K) . . . | |
| | 14. Balance (line 12 less line 13) | | |
15. Enter your self-employment tax from separate Schedule C or F
16. Sum of lines 14 and 15
- (a) Tax withheld (line 5 above). Attach Forms W-2 (Copy B) \$
- (b) Payments and credits on 1955 Declaration of Estimated Tax (See instructions, page 13.) \$
- District Director's office where paid _____
- If your tax (line 12 or 16) is larger than your payments (line 17), enter the balance here → Send this balance with your return to "Internal Revenue Service." If less than \$1.00, do not remit.
- If your payments (line 17) are larger than your tax (line 12 or 16), enter the overpayment here → If less than \$1.00, it will be refunded only upon application. See instructions, page 15.

Enter amount of line 19 you want: Credited on 1956 estimated tax \$ _____; Refunded \$ _____

Is your wife (husband) making a separate return for 1955? Yes No If "Yes," write her (his) name. Did you pay or agree to pay anyone for assistance in the preparation of your return? Yes No If "Yes," enter his name and address. Do you owe any Federal tax for prior years? Yes No

Taxpayer sign here

I declare under the penalties of perjury that this return (including any accompanying schedules and statements) has been examined by me and to the best of my knowledge and belief is a true, correct, and complete return.
(Your signature) (Date) (If this is a joint return, wife's signature) (Date)

Preparer (other than taxpayer) sign here

To assure split-income benefits, husband and wife must include all their income and, even though only one has income, BOTH MUST SIGN. I declare under the penalties of perjury that I prepared this return for the person(s) named herein; and that this return (including any accompanying schedules and statements) is, to the best of my knowledge and belief, a true, correct, and complete return based on all the information relating to the matters required to be reported in this return of which I have any knowledge.
(Individual or Firm Signature) (Address) (Date)

● ATTACH COPY B OF FORMS W-2 HERE ●

EXEMPTIONS FOR PERSONS OTHER THAN YOUR WIFE AND CHILDREN

Name	Relationship	Did dependent live in your home?	Did dependent have gross income of \$630 or more?	Amount YOU spent for dependent's support. If 100% write "All"	Amount spent by OTHERS including dependent from own funds
				\$	\$

Enter on line 3, page 1, the number of exemptions claimed above.
 → If an exemption is based on a multiple-support agreement of a group of persons, attach information described on page 5 of instructions.

ITEMIZED DEDUCTIONS—IF YOU DO NOT USE TAX TABLE OR STANDARD DEDUCTION

If Husband and Wife (Not Legally Separated) File Separate Returns and One Itemizes Deductions, the Other Must Also Itemize

Describe deductions and state to whom paid. If more space is needed, attach additional sheets. Please put your name and address on any attachments.

Contributions			
	Total Contributions (not to exceed 20 percent of line 11, page 1, except in special cases described on page 11 of instructions).....		\$
Interest			
	Total		
Taxes			
	Total		
Medical and dental expense (If 65 or over, see instructions, page 12)	Submit itemized list. Do not enter any expense compensated by insurance or otherwise.		
	1. Cost of medicines and drugs, in excess of 1 percent of line 11, page 1	\$	
	2. Other medical and dental expenses		
	3. Total	\$	
	4. Enter 3 percent of line 11, page 1		
	5. Allowable amount (excess of line 3 over line 4). (See instructions, page 12, for limitations.)		
Child care	Expenses for care of children and certain other dependents not to exceed \$600 (See page 13 of instructions and attach statement)		
Losses from fire, storm, or other casualty, or theft			
	Total losses (not compensated by insurance or otherwise)		
Miscellaneous			
	Total		
TOTAL DEDUCTIONS (Enter on line 2 of Tax Computation, below)			\$

TAX COMPUTATION—IF YOU DO NOT USE THE TAX TABLE

1. Enter Adjusted Gross Income from line 11, page 1	\$
2. If deductions are itemized above, enter total of such deductions. If deductions are not itemized and line 1, above, is \$5,000 or more: (a) married persons filing separately enter \$500; (b) all others enter 10 percent of line 1, but not more than \$1,000.	
3. Balance (line 1 less line 2)	\$
4. Multiply \$600 by total number of exemptions claimed on line 4, page 1	
5. TAXABLE INCOME (line 3 less line 4)	\$
6. Tax on amount on line 5. Use appropriate Tax Rate Schedule on page 14 of instructions.	\$
7. If you had capital gains and the alternative tax applies, enter the tax from separate Schedule D	\$
8. Tax credits. If you itemized deductions, enter:	
(a) Credit for income tax payments to a foreign country or U. S. possession (Attach Form 1116)	\$
(b) Income tax paid at source on tax-free covenant bond interest and credit for partially tax-exempt interest	\$
9. Enter here and on line 12, page 1, the amount shown on line 6 or 7 less amount claimed on line 8	\$

IF INCOME WAS ALL FROM SALARIES AND WAGES, TEAR OFF THIS PAGE AND FILE ONLY PAGES 1 AND 2.

Schedule A.—INCOME FROM DIVIDENDS

1. Name of qualifying corporation declaring dividend (See instructions, page 6, for definition of qualifying corporation):
2. Total
3. Exclusion of \$50 (If both husband and wife received dividends, each is entitled to exclude not more than \$50 of his (her) dividends)
4. Enter excess, if any, of line 2 over line 3
5. Name of nonqualifying corporation declaring dividend:
6. Enter total of lines 4 and 5

Schedule B.—INCOME FROM INTEREST

Table with 4 columns: Name of payer, Amount, Name of payer, Amount. Includes 'Enter total here ->'

Schedule D Summary.—GAINS AND LOSSES FROM SALES OR EXCHANGES OF PROPERTY

1. From sale or exchange of capital assets (from separate Schedule D)
2. From sale or exchange of property other than capital assets (from separate Schedule D)

Schedule E.—INCOME FROM PENSIONS OR ANNUITIES (See instructions, page 8)

Part I.—General Rule

1. Investment in contract
2. Expected return
3. Percentage of income to be excluded (line 1 divided by line 2)
4. Amount received this year
5. Amount excludable (line 4 multiplied by line 3)
6. Taxable portion (excess, if any, of line 4 over line 5)

Part II.—Where your cost will be recovered within three years and your employer has contributed part of the cost

1. Cost of annuity (amounts paid in)
2. Cost received tax-free in past years
3. Remainder of cost (line 1 less line 2)
4. Amount received this year
5. Taxable portion (excess, if any, of line 4 over line 3)

Schedule G.—INCOME FROM RENTS AND ROYALTIES

Table with 5 columns: 1. Kind and location of property, 2. Amount of rent or royalty, 3. Depreciation (explain in Sch. 1) or depletion, 4. Repairs (attach itemized list), 5. Other expenses (attach itemized list). Includes Totals and Net profit (or loss) row.

Schedule H.—INCOME FROM PARTNERSHIPS, ESTATES, TRUSTS, AND OTHER SOURCES

1. Partnership (Name and address)
2. Estate or trust (Name and address)
3. Other sources (state nature)

Total income (or loss) from above sources (Enter here and on line 10, page 1).

Schedule I.—EXPLANATION OF DEDUCTION FOR DEPRECIATION CLAIMED IN SCHEDULE G

Table with 7 columns: 1. Kind of property (if buildings, state material of which constructed). Exclude land and other nondepreciable property, 2. Date acquired, 3. Cost or other basis, 4. Depreciation allowed (or allowable) in prior years, 5. Method of computing depreciation, 6. Rate (%) or life (years), 7. Depreciation for this year.

IF INCOME WAS ALL FROM SALARIES AND WAGES, TEAR OFF THIS PAGE AND FILE ONLY PAGES 1 AND 2.

Schedule J.—DIVIDENDS RECEIVED CREDIT

(See instructions, page 15)

1. Amount of dividends on line 4, Schedule A.
2. Tentative credit (4 percent of line 1).
LIMITATIONS ON CREDIT
3. Tax shown on line 12, page 1, plus amount, if any, shown on line 8(b), page 2.
4. 4 percent of taxable income.
5. Dividends received credit. Enter here and on line 13(a), page 1, the smallest of the amounts on lines 2, 3, or 4, above.

Schedule K.—RETIREMENT INCOME CREDIT (See instructions, page 15)

This credit does not apply:

- 1. If you received Social Security or Railroad Retirement pensions or annuities of \$1,200 or more, OR
2. If you are under 75 years of age and had "earned income" of \$2,100 or more.

If separate return, use column B only. If joint return, use column A for wife and column B for husband ->
Did you receive earned income in excess of \$600 in each of any 10 calendar years before the taxable year 1955? Widow or widowers see instructions, page 15.

Table with columns A and B for Yes/No responses to earned income question.

If answer above is "Yes" in either column, furnish all information below in that column.

1. Retirement income for taxable year which is included in line 11, page 1, of this return:
(a) For taxpayers under 65 years of age:
(b) For taxpayers 65 years of age and older:

LIMITATION ON RETIREMENT INCOME

2. Maximum amount of retirement income for credit computation
3. Deduct:
(a) Amounts received in taxable year as pensions or annuities under the Social Security Act...
(b) Compensation in excess of \$900 received in the taxable year 1955 for personal services...
4. Total of lines 3(a) and 3(b).
5. Balance (line 2 minus line 4).
6. Line 5 or line 1, whichever is lesser.

7. Tentative credit (20 percent of line 6).
8. Total tentative credit on this return (total of amounts on line 7, columns A and B).

LIMITATION ON RETIREMENT INCOME CREDIT

9. Amount of tax shown on line 12, page 1.
10. Less: Dividends received credit from line 5, Schedule J, above.
11. Balance (line 9 less line 10).
12. Retirement income credit. Enter here and on line 13(b), page 1, the amount on line 8 or line 11, whichever is smaller.