

List your exemptions and sign on other side.

U. S. INDIVIDUAL INCOME TAX RETURN—1956
For information and duplicate copy, see separate instruction sheet

Enclose Forms W-2, Copy B.
**PLEASE DO NOT BEND, PIN,
OR TEAR THIS CARD.**

Please print. →

1. Name (If this is a joint return of husband and wife, use first names of both)		2. Your Social Security No.		3. Wife's Social Security No.	
Home address (Number and street or rural route)					
City, town, or post office		Zone		State	
		4. Do you owe any Federal tax for years before 1956? ----- <input type="checkbox"/> Yes <input type="checkbox"/> No			
		5. Is your wife (husband) making a separate return? ----- <input type="checkbox"/> Yes <input type="checkbox"/> No			
		If "Yes," write her (his) name _____			
6. EMPLOYER'S NAME—Write (W) before name of each of wife's employers.		Where employed		7. WAGES, ETC.	
				\$ -----	
				\$ -----	
				\$ -----	
9. Other income (if over \$100, use Form 1040) →		a. Yours		X X X X X X X X X X X X X X	
		b. Wife's		X X X X X X X X X X X X X X	
10. Totals (if income is \$5,000 or more, use Form 1040) →		\$ -----		\$ -----	
11. Enter tax from Tax Table on instruction sheet →					
12. If tax (item 11) is larger than withholding (item 10, col. 8), enter balance here—Pay balance in full with return →					
13. If withholding (item 10, col. 8) is larger than tax (item 11), enter overpayment here →					

If you want the District Director of Internal Revenue to figure your tax, omit items 11, 12, and 13.

FORM 1040A

U. S. TREASURY DEPARTMENT

INTERNAL REVENUE SERVICE

14. EXEMPTIONS FOR YOURSELF AND WIFE

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

- (a) Regular \$600 exemption Yourself Wife
- (b) Additional exemption if 65 or over at end of 1956 Yourself Wife
- (c) Additional exemption if blind at end of 1956 Yourself Wife

Enter number of blocks checked
→

15. EXEMPTIONS FOR YOUR CHILDREN AND OTHER DEPENDENTS (List below)

NAME ▶ Enter figure 1 in the last column to right for each name listed (Give address if different from yours)	Relationship	ANSWER ONLY FOR DEPENDENTS OTHER THAN YOUR CHILDREN				→
		Number of months dependent lived in your home. If born or died during year also write "B" or "D"	Did dependent have gross income of \$600 or more?	Amount YOU spent for dependent's support. If 100% write "ALL"	Amount spent by OTHERS including dependent from own funds	
				\$	\$	→
						→
						→
						→
						→
						→

16. Enter total number of exemptions listed in items 14 and 15 above →

SIGN
HERE →

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

(Your signature)

(Date)

(If this is a joint return, wife's signature)

(Date)

● To assure split-income benefits, husband and wife must include all their income and, even though only one has income, BOTH MUST SIGN.