

1040 A U.S. Individual Income Tax Return

If item 7 is \$10,000 or more, or if interest, dividends, and nonwithheld wages are over \$200, use Form 1040.

1966

U.S. Treasury Department
Internal Revenue Service

Please print.

1. Name (If a joint return of husband and wife, use first names and middle initials of both)

Home address (Number and street or rural route)

City, town or post office, State and ZIP code

2. Your social security number (Husband's if joint return)

3. Wife's number, if joint return

4. Check one:

a. Single;

b. Married filing joint return (even if only one had income);

c. Married filing separately — If your husband or wife is also filing a return give his or her first name and social security number.

Enter the name and address used on your return for 1965. (If the same as above, write "Same.") If none filed, give reason. If changing from separate to joint or joint to separate returns, enter 1965 names and addresses.

5. Enter total wages, salaries, tips, etc. Enclose Forms W-2, Copy B. If not shown on enclosed Forms W-2 attach explanation.	Yours ▶	
	Wife's ▶	
6a. Interest	Yours ▶	
	Wife's ▶	
6b. Dividends: Yours—before exclusion \$..... After ▶		
(See inst.) Wife's—before exclusion \$..... After ▶		
7. Total income (add items 5, 6a, and 6b)	▶	
8. Tax from Tax Table or tax computation schedule	▶	
9. Total Federal income tax withheld (from Forms W-2)	▶	
10. If item 8 is larger than item 9, enter Balance due ▶		
11. If item 9 is larger than item 8, enter Refund ▶		

If your income was \$5,000 or more, you must compute your tax. If income was less than \$5,000, you may have the Internal Revenue Service compute your tax by omitting items 8, 10, and 11 (but, complete item 9). If you compute your own tax, pay balance (item 10) in full with return to your District Director.

Apply refund to: U.S. Savings Bonds, & excess refunded; or Refund only.

LIST YOUR EXEMPTIONS AND SIGN ON OTHER SIDE.

12. EXEMPTIONS FOR YOURSELF—AND WIFE (only if all her income is included in this return, or she had no income)
 Check boxes which apply →

		Regular	65 or over	Blind	
Yourselves	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	} Enter number of exemptions checked ▶▶▶
Wife	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

13. First names of your dependent children who lived with you _____
 Enter number ▶

14. DEPENDENTS OTHER THAN THOSE CLAIMED IN ITEM 13.

(a) NAME ▶ Enter figure 1 in the last column to right for each name listed (if more space is needed, attach schedule)	(b) Relationship	(c) Months lived in your home. If born or died during year also write "B" or "D"	(d) Did dependent have income of \$600 or more?	(e) Amount YOU furnished for dependent's support. If 100% write "ALL"	(f) Amount furnished by OTHERS including dependent. See instruction 14
				\$	\$

15. TOTAL EXEMPTIONS FROM ITEMS 12, 13, AND 14 ABOVE _____ ▶

Your present employer	Wife's present employer
City and State where employed	City and State where employed

If you had an expense allowance or charged expenses to your employer, see instructions for "Reimbursed Expenses" and check here if appropriate.

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

If joint return, BOTH HUSBAND AND WIFE MUST SIGN even if only one had income. Date o