INSTRUCTIONS TO PRINTERS

MARGINS: TOP 13 mm (1⁄2”), CENTER SIDES. PRINTS: HEAD TO HEAD

PAPER: WHITE WRITING, SUB. 20. INK: BLACK

FLAT SIZE: 203 mm (8”) x 279 mm (11”)

PERFORATE: (NONE)

---

Your social security number

Last name

Your first name and initial

Use the IRS label. Otherwise, please print or type.

Label

(See page 16.)

Your first name and initial

Last name

If a joint return, spouse’s first name and initial

Last name

Home address (number and street). If you have a P.O. box, see page 17.

Apt. no.

City, town or post office, state, and ZIP code. If you have a foreign address, see page 17.

Presidential Election Campaign Fund

(See page 17.)

Do you want $3 to go to this fund?

If a joint return, does your spouse want $3 to go to this fund?

Check the box for your filing status

(See page 17.)

Check only one box.

1 □ Single

2 □ Married filing joint return (even if only one had income)

3 □ Married filing separate return. Enter spouse’s social security number above and full name here. ►

4 □ Head of household (with qualifying person). (See page 18.) If the 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.)

Figure your exemptions

(See page 20.)

If more than seven dependents, see page 23.

6a □ You yourself. If your parent (or someone else) can claim you as a dependent on his or her tax return, do not check box 6a. But be sure to check the box on line 18b on page 2.

6b □ Spouse

c Dependents:

(1) Name (first, initial, and last name)

(2) Check if under age 1

(3) If age 1 or older, dependent’s social security number

(4) Dependent’s relationship to you

(5) No. of months lived in your home in 1994

6c If your child didn’t live with you but is claimed as your dependent under a pre-1985 agreement, check here ►

7 Wages, salaries, tips, etc. This should be shown in box 1 of your W-2 form(s). Attach Form(s) W-2.

7

8a Taxable interest income (see page 25). If over $400, attach Schedule 1.

8a

8b Tax-exempt interest. DO NOT include on line 8a.

8b

9 Dividends. If over $400, attach Schedule 1.

9

10a Total IRA distributions. 10a

10b Taxable amount (see page 26).

10b

11a Total pensions and annuities. 11a

11b Taxable amount (see page 27).

11b

12 Unemployment compensation (see page 30).

12

13a Social security benefits. 13a

13b Taxable amount (see page 31).

13b

14 Add lines 7 through 13b (far right column). This is your total income. ►

14

15a Your IRA deduction (see page 34). 15a

15b Spouse’s IRA deduction (see page 34).

15b

15c Add lines 15a and 15b. These are your total adjustments. 15c

16 Subtract line 15c from line 14. This is your adjusted gross income. If less than $25,296 and a child lived with you (less than $9,000 if a child didn’t live with you), see “Earned income credit” on page 44. ►

16
### Figure your standard deduction, exemption amount, and taxable income

17. Enter the amount from line 16.

18a. Check if:  
- You were 65 or older  
- Blind  
- Spouse was 65 or older  
- Blind  
- If you parent (or someone else) can claim you as a dependent, check here.  
- If you are married filing separately and your spouse files Form 1040 and itemizes deductions, see page 38 and check here.

18b. Enter number of boxes checked.

18c. Enter number of boxes checked.

19. Enter the standard deduction shown below for your filing status. But if you checked any box on line 18a or b, go to page 38 to find your standard deduction. If you checked box 18c, enter -0-.

- Single—$3,800  
- Married filing jointly or Qualifying widow(er)—$6,350  
- Head of household—$5,600  
- Married filing separately—$3,175

20. Subtract line 19 from line 17. If line 19 is more than line 17, enter -0-.

21. Multiply $2,450 by the total number of exemptions claimed on line 6e.  
22. Subtract line 21 from line 20. If line 21 is more than line 20, enter -0-. This is your taxable income.

### Figure your tax, credits, and payments

23. Find the tax on the amount on line 22. Check if from:  
- Tax Table (pages 62–67) or  
- Form 8615 (see page 40).

24a. Credit for child and dependent care expenses.  
- Attach Schedule 2.

24b. Credit for the elderly or the disabled.  
- Attach Schedule 3.

24c. Add lines 24a and 24b. These are your total credits.

25. Subtract line 24c from line 23. If line 24c is more than line 23, enter -0-.

26. Advance earned income credit payments from Form W-2.

27. Add lines 25 and 26. This is your total tax.

28a. Total Federal income tax withheld. If any tax is from Form(s) 1099, check here.

28b. 1994 estimated tax payments and amount applied from 1993 return.

28c. Earned income credit. If required, attach Schedule EIC (see page 44).  
- Nontaxable earned income: amount and type.

28d. Add lines 28a, 28b, and 28c (don’t include nontaxable earned income). These are your total payments.

### Figure your refund or amount you owe

29. If line 28d is more than line 27, subtract line 27 from line 28d. This is the amount you overpaid.

30. Amount of line 29 you want refunded to you.

31. Amount of line 29 you want applied to your 1995 estimated tax.

32. If line 27 is more than line 28d, subtract line 28d from line 27. This is the amount you owe. For details on how to pay, including what to write on your payment, see page 52.

33. Estimated tax penalty (see page 52).  
Also, include on line 32.

### Sign your return

Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and accurately list all amounts and sources of income I received during the tax year. Declaration of preparer (other than the taxpayer) is based on all information of which the preparer has any knowledge.

| Your signature | Date | Your occupation |
| Spouse’s signature. If joint return, BOTH must sign. | Date | Spouse’s occupation |

**Paid preparer’s use only**

| Preparer’s signature | Date | Check if self-employed | Preparer’s social security no. |
| Firm’s name (or yours if self-employed) and address | | | E.I. No. |

Printed on recycled paper