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For the year January 1—December 31, 1973, or other taxable year beginning \_\_\_\_\_, 1973, ending \_\_\_\_\_, 19\_\_\_\_\_

Please print or type	Name (If joint return, give first names and initials of both)	Last name	COUNTY OF RESIDENCE	Your social security number
	Present home address (Number and street, including apartment number, or rural route)			Spouse's social security no.
	City, town or post office, State and ZIP code		Occupation	Yours ▶ Spouse's ▶

Filing Status—check only one:

- 1  Single
- 2  Married filing joint return (even if only one had income)
- 3  Married filing separately. If spouse is also filing give spouse's social security number in designated space above and enter full name here ▶ \_\_\_\_\_
- 4  Unmarried Head of Household
- 5  Widow(er) with dependent child (Year spouse died ▶ 19 \_\_\_\_\_)

Exemptions

- |   |  |                                 |
|---|--|---------------------------------|
|   | Regular / 65 or over / Blind   |                                 |
| 6a Yourself . . . . .   | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | Enter number of boxes checked ▶ |
| b Spouse . . . . .  | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |                                 |
| c First names of your dependent children who lived with you _____ |  |                                 |
| d Number of other dependents (from line 27) . . . . .             |  | Enter number ▶                  |
| 7 Total exemptions claimed . . . . .                              |  | ▶                               |

8 Presidential Election Campaign Fund.—Check  if you wish to designate \$1 of your taxes for this fund. If joint return, check  if spouse wishes to designate \$1. Note: This will not increase your tax or reduce your refund. See note below.

Income	9 Wages, salaries, tips, and other employee compensation. (Attach Forms W-2. If unavailable, attach explanation)	9	
	10a Dividends (See instructions on page 6.) \$....., 10b Less exclusion \$....., Balance ▶	10c	
	10d (Gross amount received, if different from line 10a . . . . . \$.....)		
	11 Interest income . . . . .	11	
	12 Income other than wages, dividends, and interest (from line 38) . . . . .	12	
	13 Total (add lines 9, 10c, 11, and 12) . . . . .	13	
	14 Adjustments to income (such as "sick pay," moving expenses, etc. from line 43) . . . . .	14	
15 Subtract line 14 from line 13 (adjusted gross income) . . . . .	15		

- If you do not itemize deductions and line 15 is under \$10,000, find tax in Tables and enter on line 16.
- If you itemize deductions or line 15 is \$10,000 or more, go to line 44 to figure tax.
- CAUTION. If you have unearned income and can be claimed as a dependent on your parent's return, check here  and see instructions on page 7.

Tax, Payments and Credits	16 Tax, check if from: Tax Tables 1-12, Tax Rate Schedule X, Y, or Z, Form 4726 OR Form 4972	16	
	<input type="checkbox"/> Schedule D <input type="checkbox"/> Schedule G		
	17 Total credits (from line 54) . . . . .	17	
	18 Income tax (subtract line 17 from line 16) . . . . .	18	
	19 Other taxes (from line 61) . . . . .	19	
	20 Total (add lines 18 and 19) . . . . .	20	
	21a Total Federal income tax withheld (attach Forms W-2 or W-2P to front) . . . . .	21a	
b 1973 estimated tax payments (include amount allowed as credit from 1972 return) . . . . .	b		
c Amount paid with Form 4868, Application for Automatic Extension of Time to File U.S. Individual Income Tax Return . . . . .	c		
d Other payments (from line 65) . . . . .	d		
22 Total (add lines 21a, b, c, and d) . . . . .	22		

Balance Due or Refund	23 If line 20 is larger than line 22, enter BALANCE DUE IRS (Check here <input type="checkbox"/> if Form 2210, Form 2210F, or statement is attached. See instructions on page 8.) Pay in full with return. Make check or money order payable to Internal Revenue Service ▶	23	
	24 If line 22 is larger than line 20, enter amount OVERPAID . . . . . ▶	24	
	25 Amount of line 24 to be REFUNDED TO YOU . . . . . ▶	25	
	26 Amount of line 24 to be credited on 1974 estimated tax . . . . . ▶	26	

Note: 1972 Presidential Election Campaign Fund Designation.—Check  if you did not designate \$1 of your taxes on your 1972 return, but now wish to do so. If joint return, check  if spouse did not designate on 1972 return but now wishes to do so.

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which he has any knowledge.

Sign here ▶ Your signature \_\_\_\_\_ Date \_\_\_\_\_

Preparer's signature (other than taxpayer) \_\_\_\_\_ Date \_\_\_\_\_

Spouse's signature (if filing jointly, BOTH must sign even if only one had income) \_\_\_\_\_

Address (and ZIP Code) \_\_\_\_\_ Preparer's Emp. Ident. or Soc. Sec. No. \_\_\_\_\_

Please attach Copy B of Forms W-2 here

Write spec. sec. no. on Check or Money Order. Attach here

Other Dependents	(a) NAME	(b) Relationship	(c) Months lived in your home. If born or died during year, write B or D.	(d) Did dependent have income of \$75 or more?	(e) Amount YOU furnished for dependent's support. If 100% write ALL.	(f) Amount furnished by OTHERS including dependent.
					\$	\$

27 Total number of dependents listed in column (a). Enter here and on line 6d

**Part I Income other than Wages, Dividends, and Interest**

28 Business income or (loss) (attach Schedule C)	28	
29 Net gain or (loss) from sale or exchange of capital assets (attach Schedule D)	29	
30 Net gain or (loss) from Supplemental Schedule of Gains and Losses (attach Form 4797)	30	
31 Pensions, annuities, rents, royalties, partnerships, estates or trusts, etc. (attach Schedule E)	31	
32 Farm income or (loss) (attach Schedule F)	32	
33 Fully taxable pensions and annuities (not reported on Schedule E—see instructions on page 8)	33	
34 50% of capital gain distributions (not reported on Schedule D)	34	
35 State income tax refunds (does not apply if refund is for year in which you took the standard deduction—others see instructions on page 8)	35	
36 Alimony received	36	
37 Other (state nature and source)	37	
38 Total (add lines 28, 29, 30, 31, 32, 33, 34, 35, 36, and 37). Enter here and on line 17	38	

**Part II Adjustments to Income**

39 "Sick pay." (From Forms W-2 and W-2P. If not shown on Forms W-2 or W-2P, attach Form 2440 or statement.)	39	
40 Moving expense (attach Form 3903)	40	
41 Employee business expense (attach Form 2106 or statement)	41	
42 Payments as a self-employed person to a retirement plan, etc. (see Form 4848)	42	
43 Total adjustments (add lines 39, 40, 41, and 42). Enter here and on line 14	43	

**Part III Tax Computation (Do not use this part if you use Tax Tables 1-12 to find your tax.)**

44 Adjusted gross income (from line 15)	44	
45 (a) If you itemize deductions, enter total from Schedule A, line 41 and attach Schedule A (b) If you do not itemize deductions, enter 15% of line 44, but do NOT enter more than \$2,000. (\$1,000 if line 3 checked)	45	
46 Subtract line 45 from line 44	46	
47 Multiplying total number of exemptions claimed on line 7, by \$750	47	
48 Taxable income. Subtract line 47 from line 46	48	

(Figure your tax on the amount on line 48 by using Tax Rate Schedule X, Y, or Z, or if applicable, the alternative tax from Schedule D, income averaging from Schedule G, maximum tax from Form 4726, or special averaging from Form 4972.) Enter tax on line 16.

**Part IV Credits**

49 Retirement income credit (attach Schedule R)	49	
50 Investment credit (attach Form 3468)	50	
51 Foreign tax credit (attach Form 1116)	51	
52 Credit for contributions to candidates for public office—see instructions on page 9		
53 Work Incentive (WIN) credit (attach Form 4874)		
54 Total credits (add lines 49, 50, 51, 52, and 53). Enter here and on line 17		

**Part V Other Taxes**

55 Self-employment tax (attach Schedule SE)	55	
56 Tax from recomputing prior-year investment credit (attach Form 4255)	56	
57 Tax from recomputing prior-year Work Incentive (WIN) credit (attach schedule)	57	
58 Minimum tax. Check here <input type="checkbox"/> if Form 4625 is attached	58	
59 Social security tax on tip income not reported to employer (attach Form 4137)	59	
60 Uncollected employee social security tax on tips (from Forms W-2)	60	
61 Total (add lines 55, 56, 57, 58, 59, and 60). Enter here and on line 19	61	

**Part VI Other Payments**

62 Excess FICA tax withheld (two or more employers—see instructions on page 9)	62	
63 Credit for Federal tax on special fuels, non-highway gasoline, and lubricating oil (attach Form 4136)	63	
64 Credit from a Regulated Investment Company (attach Form 2439)	64	
65 Total (add lines 62, 63, and 64). Enter here and on line 21d	65	

**Foreign Accounts** Did you, at any time during the taxable year, have an interest in or signature or other authority over a bank, securities, or other financial account in a foreign country (except in a U.S. military banking facility operated by a U.S. financial institution)?  Yes  No  
If "Yes," attach Form 4683. (For definitions, see Form 4683.)