Form **1040** Department of the Treasury — Internal Revenue Service

U.S. Individual Income Tax Return 2002

(99) IRS use only — Do not write or staple in this space.

For the year Jan 1 - Dec 31, 2002, or other tax year beginning , 2002, ending , 20

OMB No. 1545-0074

Label (See instructions.)

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

Your first name / MI: Bob	Last name: Smith	Your social security number: 555-45-5555
If a joint return, spouse's first name / MI: Betty	Last name: Smith	Spouse's social security number: 555-33-3333
Home address (number and street). If you have a P.O.box, see instructions.: 123 Lakeview	Apartment no.	**Important!** You **must** enter your social security number(s) above.
City, town or post office. If you have a foreign address, see instructions.: Lakeview	State: WA ZIP code: 99999	

Presidential Election Campaign (See instructions.)

Note: Checking 'Yes' will not change your tax or reduce your refund.
Do you, or your spouse if filing a joint return, want $3 to go to this fund? . . . . ► You: ☐ Yes ☒ No Spouse: ☐ Yes ☒ No

Filing Status

Check only one box.

1 ☐ Single
2 ☒ Married filing jointly (even if only one had income)
3 ☐ Married filing separately. Enter spouse's SSN above & full name here. ►
4 ☐ Head of household (with qualifying person). (See instructions.) 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 . . ►). (See instructions.)

Exemptions

6a ☒ **Yourself.** If your parent (or someone else) can claim you as a dependent on his or her tax return, **do not** check box 6a . . . .

b ☒ **Spouse** . . . .

No. of boxes checked on 6a and 6b . . . 2

c **Dependents:**

(1) First name	Last name	(2) Dependent's social security number	(3) Dependent's relationship to you	(4) ✓ if qualifying child for child tax credit (see instrs)
				☐
				☐
				☐
				☐
				☐

No. of children on 6c who:
• lived with you . . .
• did not live with you due to divorce or separation (see instrs) . .
Dependents on 6c not entered above .

If more than five dependents, see instructions.

d Total number of exemptions claimed . . . . Add numbers on lines above . . . ► 2

Income

Attach Forms W-2 and W-2G here. Also attach Form(s) 1099-R if tax was withheld.

If you did not get a W-2, see instructions.

Enclose, but do not attach, any payment. Also, please use Form 1040-V.

7	Wages, salaries, tips, etc. Attach Form(s) W-2		7	
8 a	**Taxable** interest. Attach Schedule B if required		8 a	100,000.
b	**Tax-exempt** interest. **Do not** include on line 8a	8 b		
9	Ordinary dividends. Attach Schedule B if required		9	
10	Taxable refunds, credits, or offsets of state and local income taxes (see instructions)		10	
11	Alimony received		11	
12	Business income or (loss). Attach Schedule C or C-EZ		12	
13	Capital gain or (loss). Att Sch D if reqd. If not reqd, ck here ► ☐		13	
14	Other gains or (losses). Attach Form 4797		14	
15 a	IRA distributions	15 a	b Taxable amount (see instrs) 15 b	
16 a	Pensions and annuities	16 a	b Taxable amount (see instrs) 16 b	
17	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E		17	
18	Farm income or (loss). Attach Schedule F		18	
19	Unemployment compensation		19	
20 a	Social security benefits	20 a	b Taxable amount (see instrs) 20 b	
21	Other income		21	
22	Add the amounts in the far right column for lines 7 through 21. This is your **total income** ►		22	100,000.

Adjusted Gross Income

23	Educator expenses (see instructions)	23			
24	IRA deduction (see instructions)	24			
25	Student loan interest deduction (see instructions)	25			
26	Tuition and fees deduction (see instructions)	26			
27	Archer MSA deduction. Attach Form 8853	27			
28	Moving expenses. Attach Form 3903	28			
29	One-half of self-employment tax. Attach Schedule SE	29			
30	Self-employed health insurance deduction (see instructions)	30			
31	Self-employed SEP, SIMPLE, and qualified plans	31			
32	Penalty on early withdrawal of savings	32			
33 a	Alimony paid b Recipient's SSN . . . ►	33 a			
34	Add lines 23 through 33a			34	
35	Subtract line 34 from line 22. This is your **adjusted gross income** ►			35	100,000.

Tax and Credits

36	Amount from line 35 (adjusted gross income)			36	100,000.
37a	Check if: [X] **You** were 65/older, [ ] Blind; [X] **Spouse** was 65/older, [ ] Blind. Add the number of boxes checked above and enter the total here ►	37a	2		
b	If you are married filing separately and your spouse itemizes deductions, or you were a dual-status alien, see instructions and check here ►	37b	[ ]		
38	**Itemized deductions** (from Schedule A) **or** your **standard deduction** (see left margin)			38	9,650.
39	Subtract line 38 from line 36			39	90,350.
40	If line 36 is $103,000 or less, multiply $3,000 by the total number of exemptions claimed on line 6d. If line 36 is over $103,000, see the worksheet in the instructions			40	6,000.
41	**Taxable income.** Subtract line 40 from line 39. If line 40 is more than line 39, enter -0-			41	84,350.
42	**Tax** (see instrs). Check if any tax is from a [ ] Form(s) 8814 b [ ] Form 4972			42	16,577.
43	**Alternative minimum tax** (see instructions). Attach Form 6251			43	
44	Add lines 42 and 43 ►			44	16,577.
45	Foreign tax credit. Attach Form 1116 if required	45			
46	Credit for child and dependent care expenses. Attach Form 2441	46			
47	Credit for the elderly or the disabled. Attach Schedule R	47			
48	Education credits. Attach Form 8863	48			
49	Retirement savings contributions credit. Attach Form 8880	49			
50	Child tax credit (see instructions)	50			
51	Adoption credit. Attach Form 8839	51			
52	Credits from: a [ ] Form 8396 b [ ] Form 8859	52			
53	Other credits. Check applicable box(es): a [ ] Form 3800 b [ ] Form 8801 c [ ] Specify	53			
54	Add lines 45 through 53. These are your **total credits**			54	
55	Subtract line 54 from line 44. If line 54 is more than line 44, enter -0- ►			55	16,577.

Standard Deduction for –
- People who checked any box on line 37a or 37b **or** who can be claimed as a dependent, see instructions.
- All others:

Single, $4,700

Head of household, $6,900

Married filing jointly or Qualifying widow(er), $7,850

Married filing separately, $3,925

Other Taxes

56	Self-employment tax. Attach Schedule SE			56	
57	Social security and Medicare tax on tip income not reported to employer. Attach Form 4137			57	
58	Tax on qualified plans, including IRAs, and other tax-favored accounts. Attach Form 5329 if required			58	
59	Advance earned income credit payments from Form(s) W-2			59	
60	Household employment taxes. Attach Schedule H			60	
61	Add lines 55-60. This is your **total tax** ►			61	16,577.

Payments

If you have a qualifying child, attach Schedule EIC.

62	Federal income tax withheld from Forms W-2 and 1099	62			
63	2002 estimated tax payments and amount applied from 2001 return	63			
64	**Earned income credit (EIC)**	64			
65	Excess social security and tier 1 RRTA tax withheld (see instructions)	65			
66	Additional child tax credit. Attach Form 8812	66			
67	Amount paid with request for extension to file (see instructions)	67			
68	Other pmts from: a [ ] Form 2439 b [ ] Form 4136 c [ ] Form 8885	68			
69	Add lines 62 through 68. These are your **total payments** ►			69	

Refund

Direct deposit? See instructions and fill in 71b, 71c, and 71d.

70	If line 69 is more than line 61, subtract line 61 from line 69. This is the amount you **overpaid**			70	
71a	Amount of line 70 you want **refunded to you** ►			71a	
► b	Routing number ► c Type: [ ] Checking [ ] Savings				
► d	Account number				
72	Amount of line 70 you want **applied to your 2003 estimated tax** ►	72			

Amount You Owe

73	**Amount you owe.** Subtract line 69 from line 61. For details on how to pay, see instructions ►			73	17,131.
74	Estimated tax penalty (see instructions)	74	554.		

Third Party Designee

Do you want to allow another person to discuss this return with the IRS (see instructions)? [ ] **Yes.** Complete the following. [X] **No**

Designee's name ► Phone no. ► Personal identification number (PIN) ►

Sign Here

Joint return? See instructions.

Keep a copy for your records.

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 complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Your signature	Date	Your occupation	Daytime phone number
		retired	
Spouse's signature. If a joint return, **both** must sign.	Date	Spouse's occupation	
		retired	

Paid Preparer's Use Only

Preparer's signature ►	Date	Check if self-employed [ ]	Preparer's SSN or PTIN
Firm's name (or yours if self-employed), address, and ZIP code ►	Self-Prepared		EIN
			Phone no.

Name(s) shown on Form 1040.: Bob & Betty Smith

Your social security number: 555-45-5555

Schedule B – Interest and Ordinary Dividends

08

Part I Interest

(See instructions for Form 1040, line 8a.)

Note. If you received a Form 1099-INT, Form 1099-OID, or substitute statement from a brokerage firm, list the firm's name as the payer and enter the total interest shown on that form.

			Amount
1	List name of payer. If any interest is from a seller-financed mortgage and the buyer used the property as a personal residence, see the instructions and list this interest first. Also, show that buyer's social security number and address ►		
	Interest	1	100,000.00
2	Add the amounts on line 1	2	100,000.00
3	Excludable interest on series EE and I U.S. savings bonds issued after 1989 from Form 8815, line 14. You **must** attach Form 8815	3	
4	Subtract line 3 from line 2. Enter the result here and on Form 1040, line 8a ►	4	100,000.00

Note. If line 4 is over $1,500, you must complete Part III.

Part II Ordinary Dividends

(See instructions for Form 1040, line 9.)

Note. If you received a Form 1099-DIV or substitute statement from a brokerage firm, list the firm's name as the payer and enter the ordinary dividends shown on that form.

			Amount
5	List name of payer. Include only ordinary dividends. If you received any capital gain distributions, see the instructions for Form 1040, line 13 ►	5	
6	Add the amounts on line 5. Enter the total here and on Form 1040, line 9 ►	6	

Note. If line 6 is over $1,500, you must complete Part III.

Part III Foreign Accounts and Trusts

(See instructions.)

		Yes	No
	You must complete this part if you **(a)** had over $1,500 of taxable interest or ordinary dividends; OR **(b)** had a foreign account; or **(c)** received a distribution from, or were a grantor of, or a transferor to, a foreign trust.		
7 a	At any time during 2002, did you have an interest in or a signature or other authority over a financial account in a foreign country, such as a bank account, securities account, or other financial account? See instructions for exceptions and filing requirements for Form TD F 90-22.1		X
b	If 'Yes,' enter the name of the foreign country ►		
8	During 2002, did you receive a distribution from, or were you the grantor of, or transferor to, a foreign trust? If 'Yes,' you may have to file Form 3520. See instructions		X