

U.S. Individual Income Tax Return 1987

OMB No. 1545-0085

Step 1 Label

Use IRS label. Otherwise, please print or type.

Your first name and initial (if joint return, also give spouse's name and initial) Last name Present home address (number and street). (If you have a P.O. Box, see page 9 of the instructions.) PLACE LABEL HERE City, town or post office, state, and ZIP code

Your social security no. Spouse's social security no. For Privacy Act and Paperwork Reduction Act Notice, see page 31.

Presidential Election Campaign Fund

Do you want \$1 to go to this fund? Yes No If joint return, does your spouse want \$1 to go to this fund? Yes No

Note: Checking "Yes" will not change your tax or reduce your refund.

Step 2 Check your filing status (Check only one)

- 1 Single (See if you can use Form 1040EZ.) 2 Married filing joint return (even if only one had income) 3 Married filing separate return. Enter spouse's social security number above and spouse's full name here. 4 Head of household (with qualifying person). If the qualifying person is your child but not your dependent, enter this child's name here.

Step 3 Figure your exemptions (See page 12 of instructions.)

If more than 7 dependents, attach statement.

Attach Copy B of Form(s) W-2 here.

Table with 5 columns: 1. Name (first, initial, and last name), 2. Check if under age 5, 3. If age 5 or over, dependent's social security number, 4. Relationship, 5. No. of months lived in your home in 1987

No. of boxes checked on 5a and 5b No. of children on 5c who lived with you No. of children on 5c who didn't live with you due to divorce or separation No. of parents listed on 5c No. of other dependents listed on 5c

d If your child didn't live with you but is claimed as your dependent under a pre-1985 agreement, check here Total number of exemptions claimed. (Also complete line 16.)

Add numbers entered on lines above

Step 4 Figure your total income

Attach check or money order here.

Table with 3 columns: Description, Line number, Amount. Rows include: 6 Wages, salaries, tips, etc. 7a Taxable interest income 7b Tax-exempt interest income 8 Dividends 9 Unemployment compensation 10 Add lines 6, 7a, 8, and 9. Enter the total.

Step 5 Figure your adjusted gross income

Table with 3 columns: Description, Line number, Amount. Rows include: 11a Your IRA deduction from applicable Worksheet. 11b Spouse's IRA deduction from applicable Worksheet. 11c Add lines 11a and 11b. Enter the total. 12 Subtract line 11c from line 10. Enter the result.

Step 6 13 Enter the amount from line 12. 13

Figure your standard deduction,

14a Check if: [] You were 65 or over [] Blind } Enter number of boxes checked 14a []
[] Spouse was 65 or over [] Blind }

b If you can be claimed as a dependent on another person's return (such as your parents' return), check here. 14b []

c If you are married filing separately and your spouse files Form 1040 and itemizes deductions, check here. 14c []

d Standard deduction. If you checked a box on line 14a, b, or c, see page 22 for amount to enter on line 14d. If no box is checked, enter amount shown below for your filing status.

Filing status from page 1 { Single or Head of household, enter \$2,540
Married filing joint return, enter \$3,760
Married filing separate return, enter \$1,880 } 14d

Exemption amount, and

15 Subtract line 14d from line 13. Enter the result. 15

16 Multiply \$1,900 by the total number of exemptions claimed on line 5e. Or, figure your exemption amount from the chart on page 24 of the instructions. 16

Taxable income

17 Subtract line 16 from line 15. Enter the result. This is your taxable income. 17

If You Want IRS To Figure Your Tax, See Page 24 of the Instructions.

Caution: If you are under age 14 and have more than \$1,000 of investment income, see page 24 of the instructions and check here. []

18 Find the tax on the amount on line 17. Check if from: [] Tax Table (pages 32-37); or [] Form 8615, Computation of Tax for Children Under Age 14 Who Have Investment Income of More Than \$1,000. 18

19 Credit for child and dependent care expenses. Complete and attach Schedule 1, Part I. 19

20 Subtract line 19 from line 18. Enter the result. (If line 19 is more than line 18, enter -0- on line 20.) This is your total tax. 20

21a Total Federal income tax withheld. This should be shown in Box 9 of your W-2 form(s). (If line 6 is more than \$43,800, see page 26.) 21a

b Earned income credit, from the worksheet on page 28 of the instructions. Also see page 27. 21b

22 Add lines 21a and 21b. Enter the total. These are your total payments. 22

Step 8

Figure your refund or amount you owe

23 If line 22 is larger than line 20, subtract line 20 from line 22. Enter the result. This is the amount of your refund. 23

24 If line 20 is larger than line 22, subtract line 22 from line 20. Enter the result. This is the amount you owe. Attach check or money order for full amount payable to "Internal Revenue Service." Write your social security number, daytime phone number, and "1987 Form 1040A" on it. 24

Step 9

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

Your signature Date Your occupation

X

Spouse's signature (if joint return, both must sign) Date Spouse's occupation

X

Paid preparer's use only

Preparer's signature Date Preparer's social security no.

X Firm's name (or yours if self-employed) Employer identification no.

Address and ZIP code Check if self-employed []

Name(s) as shown on Form 1040A

Your social security number

You MUST complete and attach Schedule 1 to Form 1040A only if you:

- Claim the credit for child and dependent care expenses (complete **Part I**)
- Have over \$400 of taxable interest income (complete **Part II**)
- Have over \$400 of dividend income (complete **Part III**)

Part I Credit for child and dependent care expenses (see page 24 of the instructions)

Complete this part to figure the amount of credit you can take on Form 1040A, line 19. Attach Schedule 1 to Form 1040A.

Note: If you paid cash wages of \$50 or more in a calendar quarter to an individual for services performed in your home, you must file an employment tax return. Get **Form 942** for details.

| | | |
|------------|---|----|
| 1 | Enter the number of qualifying persons who were cared for in 1987. (See the instructions for the definition of a qualifying person.) | 1 |
| 2 | Enter the amount of qualified expenses you incurred and actually paid in 1987 for the care of the qualifying person. (See the instructions for which expenses qualify for the credit.) DO NOT enter more than \$2,400 (\$4,800 if you paid for the care of two or more qualifying persons). | 2 |
| 3 a | You must enter your earned income on line 3a. | 3a |
| b | If you are married, filing a joint return for 1987, you must enter your spouse's earned income on line 3b. (If spouse is a full-time student or is disabled, see the instructions for amount to enter on this line.) | 3b |
| c | If you are married, compare the amounts on lines 3a and 3b, and enter the smaller of the two amounts on line 3c. | 3c |
| 4 | If you were unmarried at the end of 1987, compare the amounts on lines 2 and 3a, and enter the smaller of the two amounts on line 4. | |
| | ● If you are married, filing a joint return for 1987, compare the amounts on lines 2 and 3c, and enter the smaller of the two amounts on line 4. | 4 |
| 5 | Enter the percentage from the table below that applies to the amount on Form 1040A, line 13. | |

| If line 13 is: | Percentage is: | If line 13 is: | Percentage is: |
|------------------------|----------------|------------------------|----------------|
| But not Over— over— | | But not Over— over— | |
| \$0—10,000 | 30% (.30) | \$20,000—22,000 | 24% (.24) |
| 10,000—12,000 | 29% (.29) | 22,000—24,000 | 23% (.23) |
| 12,000—14,000 | 28% (.28) | 24,000—26,000 | 22% (.22) |
| 14,000—16,000 | 27% (.27) | 26,000—28,000 | 21% (.21) |
| 16,000—18,000 | 26% (.26) | 28,000 | 20% (.20) |
| 18,000—20,000 | 25% (.25) | | |

| | | | |
|----------|--|---|--|
| 5 | | x | |
| 6 | Multiply the amount on line 4 by the percentage on line 5. Enter the result here and on Form 1040A, line 19. | = | |

