				OMB No. 1545-0068		
		Attach to Form 1040.	to Form 1040.		1991	
ternal Reve	of the Treasury enue Service	See separate instructions.		Attachm Sequenc	ent e No. 21	
ame(s) sh	nown on Form 1040		N N	Your social security r	lumber	
aution: Part I	before completing Persons or O	who was born in 1991 and the amount on Form 1040, line 32, is this form. rganizations Who Provided the Care—You must co ore space, use the bottom of page 2.)				
1	(a) Name	(humber, street, apt. no., city, state, and ZIP code)	(c) Identifying num (SSN or EIN)	iber (d) Amour (see instru		

2	Add the amounts in column (d) of line 1	. 2				
	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.	•	5			
Da	rt II Credit for Child and Dependent Care Expenses					

Par	t II Credit for Child and Dependent Care Expenses	
3	Enter the number of qualifying persons cared for in 1991. (See the instructions for the definition person.) Caution : <i>To qualify, the person(s)</i> must have shared the same home with you in 1991	
4	Enter the amount of qualified expenses you incurred and actually paid in 1991. See the instructions to find out which expenses qualify. Caution: <i>If you completed Part III on page 2, do not <i>include on this line any excluded benefits shown on line 25</i></i>	4
5	Enter \$2,400 (\$4,800 if you paid for the care of two or more qualifying persons). 5	
6	If you completed Part III on page 2, enter the excluded benefits , if any, from line 25	
7	Subtract line 6 from line 5. (If the result is zero or less, skip lines 8 through 13. Enter -0- on line 14, and go to line 15.)	7
8	Compare the amounts on lines 4 and 7. Enter the smaller of the two amounts here	8
9	You must enter your earned income . (See the instructions for the definition of earned income.)	9
	Note: If you are not filing a joint return, skip line 10 and go to line 11.	
10	If you are married filing a joint return, you must enter your spouse's earned income. (If your	
	spouse was a full-time student or disabled, see the instructions for the amount to enter.)	10
11	If you are married filing a joint return, compare the amounts on lines 8, 9, and 10. Enter the smallest of the three amounts here.	11
	 All others, compare the amounts on lines 8 and 9. Enter the smaller of the two amounts here. 	
12	Enter the amount from Form 1040, line 32	
13	Enter the decimal amount from the table below that applies to the amount on line 12	13 ×
	If line 12 is: Decimal amount is: If line 12 is: Decimal amount is:	
	Over— But not Over— But not	
	over— over—	
	\$0—10,000 .30 \$20,000—22,000 .24 10,000—12,000 .29 22,000—24,000 .23	
	12,000—14,000 .28 24,000—26,000 .22	
	14,000—16,000 .27 26,000—28,000 .21 16,000—18,000 .26 28,000—No limit .20	
	18,000-20,000 .25	
14	Multiply line 11 above by the decimal amount on line 13	14
15	Multiply any qualified expenses for 1990 that you paid in 1991 by the decimal amount that	
	applies to the amount on your 1990 Form 1040, line 32, or Form 1040A, line 17. (You must	
	complete Part I and attach a statement. See the instructions.)	15
16	Add lines 14 and 15. See the instructions for the amount of credit you can claim.	16

For Paperwork Reduction Act Notice, see separate instructions. Cat. No. 11862M

Form	2441 (1991)	Page 2
Ра	t III Employer-Provided Dependent Care Benefits—Complete this part only if you red dependent care benefits. Also, be sure to complete Part I.	eceived employer-provided
17	Enter the total amount of employer-provided dependent care benefits you received for 1991. (This amount should be shown in Box 22 of your W-2 form(s).) Do not include amounts that were reported to you as wages in Box 10 of Form(s) W-2	17
18	Enter the amount forfeited, if any. Caution: See the instructions	18
19 20	Subtract line 18 from line 17	19 20
21	Compare the amounts on lines 19 and 20. Enter the smaller of the two amounts here	21
22	You must enter your earned income . (See the instructions for lines 9 and 10 for the definition of earned income.)	22
23	If you were married at the end of 1991, you must enter your spouse's earned income. (If your spouse was a full-time student or disabled, see the instructions for lines 9 and 10 for the amount to enter.)	23
24	 If you were married at the end of 1991, compare the amounts on lines 22 and 23. Enter the smaller of the two amounts here. If you were unmarried, enter the amount from line 22 here. 	24
25	 The amount from line 24, or \$5,000 (\$2,500 if married filing a separate return). 	25
26	Taxable benefits. Subtract line 25 from line 19. Enter the result, but not less than zero. Also, include this amount in the total on Form 1040, line 7. On the dotted line next to line 7, write "DCB"	26

Note: If you are also	claiming the chi	d and dependent	care credit, fill in	Form 1040 through	line 40. Then comp	olete Part II
of this form.	2			-		