1040	-	rtment of the Treasury—Internal Revenue 5. Individual Income Tax Re	1111	02	(99)	IRS Use C	Only—Do no	t write or s	staple in thi	s space.			
	_	the year Jan. 1-Dec. 31, 2002, or other tax year beautiful to the state of the stat		, 2002, en	\ /		20	not write or staple in this space. OMB No. 1545-0074					
Label	_	ur first name and initial	Last name					Your social security number					
(See instructions on page 21.)	If a	oint return, spouse's first name and initial Last name							Spouse's social security number				
Use the IRS label. HOtherwise, E	Ho	Home address (number and street). If you have a P.O. box, see page 21. Apt. no.						▲ Important! ▲					
please print or type.	City	City, town or post office, state, and ZIP code. If you have a foreign address, see page 21.								You must enter your SSN(s) above.			
Presidential Election Campaigr (See page 21.)	1	Note. Checking "Yes" will not change Do you, or your spouse if filing a joint				12		You Yes		Spous Yes			
	1 [Totalli, Walley		_	of househousehousehousehousehousehousehouse	old (with c						
Filing Status	2	☐ Married filing jointly (even if only one	e had income)			ialifying pe							
Check only	3	☐ Married filing separately. Enter spou											
one box.		and full name here. ▶		5 [fying wide				-			
	6a	Yourself. If your parent (or some	na alsa) can cl	aim vou as		se died •			age 21.) No. of b				
Exemptions	oa	return, do not check be						}	checked	l on			
•	b	Spouse	<u> </u>				. /.	<u></u> J	No. of c	hildren			
	С	Dependents:	(2) Depe			nship to	(4) √ if qual child for chi		on 6c w lived w				
		(1) First name Last name	social securi	ity number		ou	credit (see pa		• did not	-			
If we are the end floor									you due to separa				
If more than five dependents,									(see page				
see page 22.			<u> </u>	<u> </u>					Depender				
				<u> </u>			<u> </u>		not enter	_	_		
				!			Ц		on lines	bers			
	d	Total number of exemptions claimed						 T - T	above ►	-			
Income	7	Wages, salaries, tips, etc. Attach Forn	n(s) W-2 .					7			-		
IIICOIIIE	8a	Taxable interest. Attach Schedule B i					·, ·	8a			-		
Attach	b	Tax-exempt interest. Do not include		8	D								
Forms W-2 and W-2G here.	9	Ordinary dividends. Attach Schedule I	9										
Also attach	10	Taxable refunds, credits, or offsets of state and local income taxes (see page 24)											
Form(s) 1099-R	11	Alimony received											
if tax was withheld.	12	Business income or (loss). Attach Schedule C or C-EZ											
	13	Capital gain or (loss). Attach Schedule D if required. If not required, check here ► ☐						13 14					
If you did not get a W-2, see page 23. Enclose, but do not attach, any payment. Also,	14	Other gains or (losses). Attach Form 4797						15b					
	15a 16a	TOT distributions			, ,	5 ,	16b						
	10a 17	Pensions and annuities 16a 5 b Taxable amount (see page 25) Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E											
	18	Farm income or (loss). Attach Schedule F											
	19	Unemployment compensation											
	20a	Social security benefits . 20a b Taxable amount (see page 27)											
please use Form 1040-V.	21	Other income. List type and amount (see page 29)						21					
	22	Add the amounts in the far right column	for lines 7 thro			total inc	ome ►	22			-		
Adjusted Gross	23	Educator expenses (see page 29) .											
	24	IRA deduction (see page 29)											
	25	Student loan interest deduction (see page 31)			5								
Income	26	Tuition and fees deduction (see page 32)			6								
	27	Archer MSA deduction. Attach Form 8853			7								
	28	Moving expenses. Attach Form 3903			8								
	29	One-half of self-employment tax. Attach Schedule SE			9								
	30	Self-employed health insurance deduc		۱ ۵									
	31	Self-employed SEP, SIMPLE, and qua		3									
	32	Penalty on early withdrawal of savings											
	33a	Alimony paid b Recipient's SSN ►						34					
	34 35	Add lines 23 through 33a						25			 		

Form 1040 (2002)			Page 2
Tax and	36	Amount from line 35 (adjusted gross income)	36
Credits	37a	Check if: \square You were 65 or older, \square Blind; \square Spouse was 65 or older, \square Blind.	
Standard		Add the number of boxes checked above and enter the total here ▶ 37a L	
Deduction	b	If you are married filing separately and your spouse itemizes deductions, or	_
for— ● People who		you were a dual-status alien, see page 34 and check here ▶ 37b [1 1
checkėd any	38	Itemized deductions (from Schedule A) or your standard deduction (see left margin) .	. 38 39
box on line 37a or 37b or	39	Subtract line 38 from line 36	
who can be claimed as a	40	If line 36 is \$103,000 or less, multiply \$3,000 by the total number of exemptions claimed line 6d. If line 36 is over \$103,000, see the worksheet on page 35	
dependent,	41	Taxable income. Subtract line 40 from line 39. If line 40 is more than line 39, enter -0-	
see page 34.All others:	42	Tax (see page 36). Check if any tax is from: a Form(s) 8814 b Form 4972	
Single,	43	Alternative minimum tax (see page 37). Attach Form 6251	43
\$4,700	44	Add lines 42 and 43	▶ 44
Head of household,	45	Foreign tax credit. Attach Form 1116 if required 45	
\$6,900	46	Credit for child and dependent care expenses. Attach Form 2441	
Married filing jointly or	47	Credit for the elderly or the disabled. Attach Schedule R 47	
Qualifying	48	Education credits. Attach Form 8863	
widow(er), \$7,850	49	Retirement savings contributions credit. Attach Form 8880 . 49	
Married	50	Child tax credit (see page 39)	
filing separately,	51	Adoption credit. Attach Form 8839	
\$3,925	52	Credits from: a Form 8396 b Form 8859 52	
	53	Other credits. Check applicable box(es): a Form 3800	
	ΕΛ	b Form 8801 c Specify 53. These are your total credits 55.	54
	54 55	Subtract line 54 from line 44. If line 54 is more than line 44, enter -0	
	56	Self-employment tax. Attach Schedule SE	
Other	57	Social security and Medicare tax on tip income not reported to employer. Attach Form 4137	
Taxes	58	Tax on qualified plans, including IRAs, and other tax-favored accounts. Attach Form 5329 if required	
	59	Advance earned income credit payments from Form(s) W-2	
	60	Household employment taxes. Attach Schedule H	60
	61	Add lines 55 through 60. This is your total tax	▶ 61
Payments	62	Federal income tax withheld from Forms W-2 and 1099 62	
	63	2002 estimated tax payments and amount applied from 2001 return . 63	
If you have a	64	Earned income credit (EIC)	
qualifying child, attach	65	Excess social security and tier 1 RRTA tax withheld (see page 56)	
Schedule EIC.		Additional child tax credit. Attach Form 8812	
	67	Amount paid with request for extension to file (see page 56) Other payments from: a Form 2439 b Form 4136 c Form 8885 . 68	
	68 69	Add lines 62 through 68. These are your total payments	► 69
Defined	70	If line 69 is more than line 61, subtract line 61 from line 69. This is the amount you overpa	
Refund Direct deposit?	71a	Amount of line 70 you want refunded to you	▶ 71a
See page 56	▶ b	Routing number	as and a second
and fill in 71b, 71c, and 71d.	▶ d	Account number	
, 10, and , 14	72	Amount of line 70 you want applied to your 2003 estimated tax 72	
Amount	73	Amount you owe. Subtract line 69 from line 61. For details on how to pay, see page 57	73
You Owe	74	Estimated tax penalty (see page 57)	
Third Party	Do	you want to allow another person to discuss this return with the IRS (see page 58)? $\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \$	Yes. Complete the following. L
Designee		· · · · · · · · · · · · · · · · · · ·	lentification
	nar Und	ne	, , , , , , , , , , , , , , , , , , , ,
Sign	beli	ef, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information	n of which preparer has any knowledge.
Here Joint return?	You	ur signature Date Your occupation	Daytime phone number
See page 21.			()
Keep a copy	Spo	ouse's signature. If a joint return, both must sign. Date Spouse's occupation	
for your records.	7		
Paid	Pre	parer's Date Check if	Preparer's SSN or PTIN
	sig	nature check if self-employed	
Preparer's		n's name (or EIN	
Use Only	you	ils il sell-eripioyed),	no ()