

Form

1040 U.S. Individual Income Tax Return 2016

Department of the Treasury - Internal Revenue Service

(99)

OMB No. 1545-0047 Use only on Form 1040-SS. Do not write or staple in this space.

Must say 2017 or 2016

For the year Jan. 1-Dec. 31, 2016, or other tax year beginning , 2016, ending , 20

Your first name and initial Last name Your social security number

Your name will be on one of these lines here

If a joint return, spouse's first name Last name Spouse's social security number

Home address (number and street) Apt. no. Make sure the SSN(s) above and on line 6c are correct.

City, town or post office, state, and ZIP code. If you have a foreign address, also complete spaces below (see instructions).

Foreign country name Foreign province/state/county Foreign postal code

Filing Status

1 Single

2 Married filing jointly (even if only one had income)

3 Married filing separately. Enter spouse's SSN above and 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

Exemptions

6a Yourself. If someone can claim you as a dependent, do not check box 6a

6b Spouse

c Dependents:

(1) First name	Last name	(2) Dependent's social security number	(3) Dependent's relationship to you	(4) Check if child under age 17 qualifying for child tax credit (see instructions)
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

If more than four dependents, see instructions and check here

d Total number of exemptions claimed 2

No. of children on 6c who:

- lived with you 1
- did not live with you due to divorce or separation (see instructions)

Dependents on 6c not entered above

Add numbers on lines above 1

Income

7 Wages, salaries, tips, etc. Attach Form(s) W-2 7

8a Taxable interest. Attach Schedule B if required 8a

b Tax-exempt interest. Do not include on line 8a 8b

9a Ordinary dividends. Attach Schedule B if required 9a

b Qualified dividends 9b

10 Taxable refunds, credits, or offsets of state and local income taxes 10

11 Alimony received 11

12 Business income or (loss). Attach Schedule C or C-EZ 12

13 Capital gain or (loss). Attach Schedule D if required. If not required, check here 13

14 Other gains or (losses). Attach Form 4797 14

15a IRA distributions 15a b Taxable amount 15b

16a Pensions and annuities 16a b Taxable amount 16b

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

20a Social security benefits 20a b Taxable amount 20b

21 Other income 21

22 Combine the amounts in the far right column for lines 7 through 21. This is your total income 22

Adjusted Gross Income

23 Educator expenses 23

24 Certain business expenses of reservists, performing artists, and fee-basis government officials. Attach Form 2106 or 2106-EZ 24

25 Health savings account deduction. Attach Form 8889 25

26 Moving expenses. Attach Form 3903 26

27 Deductible part of self-employment tax. Attach Schedule SE 27

28 Self-employed SEP, SIMPLE, and qualified plans 28

29 Self-employed health insurance deduction 29

30 Penalty on early withdrawal of savings 30

31a Alimony paid b Recipient's SSN 31a

32 IRA deduction 32

33 Student loan interest deduction 33

34 Tuition and fees. Attach Form 8917 34

35 Domestic production activities deduction. Attach Form 8903 35

36 Add lines 23 through 35 36

37 Subtract line 36 from line 22. This is your adjusted gross income 37

Adjusted Gross Income (AGI) is found here

Be sure to include page 2 of the 1040

Tax and Credits

38 Amount from line 37 (adjusted gross income) **38**

39a Check You were born before 1964 and your spouse was born before 1964 } Total boxes checked **39a**

Spouse was born before 1964 and you were born after 1963 } Total boxes checked **39a**

b If your spouse itemizes on a separate return or you were a dual-status alien, check here **39b**

Standard Deduction for—

- People who check any box on line 39a or 39b or who can be claimed as a dependent, see instructions.
- All others:
 - Single or Married filing separately, \$6,300
 - Married filing jointly or Qualifying widower, \$12,600
 - Head of household, \$9,250

40 **Itemized deductions** (from Schedule A) or your **standard deduction** (see left margin) **40**

41 Subtract line 40 from line 38 **41**

42 **Exemptions.** If line 38 is \$154,950 or less, multiply \$4,000 by the number on line 6d. Otherwise, see instructions **42**

43 **Taxable income.** Subtract line 42 from line 41. If line 42 is more than line 41, enter -0- **43**

44 **Tax** (see instructions). Check if any from: a Form(s) 8814 b Form 4972 c **44**

45 **Alternative minimum tax** (see instructions). Attach Form 6251 **45**

46 **Excess advance premium tax credit repayment.** Attach Form 8962 **46**

47 **Add lines 44, 45, and 46** **47**

48 **Foreign tax credit.** Attach Form 1116 if required **48**

49 **Credit for child and dependent care expenses.** Attach Form 2441 **49**

50 **Education credits** from Form 8863, line 19 **50**

51 **Retirement savings contributions credit.** Attach Form 8880 **51**

52 **Child tax credit.** Attach Schedule 8812, if required **52**

53 **Residential energy credits.** Attach Form 5695 **53**

54 **Other credits** from Form: a 3800 b 8801 c **54**

55 **Add lines 48 through 54. These are your total credits** **55**

56 **Subtract line 55 from line 47. If line 55 is more than line 47, enter -0-** **56**

Other Taxes

57 **Self-employment tax.** Attach Schedule SE **57**

58 **Unreported social security and Medicare tax** from Form: a 4137 b 8919 **58**

59 **Additional tax on IRAs, other qualified retirement plans, etc.** Attach Form 5329 if required **59**

60a **Household employment taxes** from Schedule H **60a**

b **First-time homebuyer credit repayment.** Attach Form 5405 if required **60b**

61 **Health care: individual responsibility** (see instructions) Full-year coverage **61**

62 **Taxes from:** a Form 8959 b Form 8960 c Instructions; enter code(s) **62**

63 **Add lines 58 through 62. This is your total tax** **63**

Payments

64 **Federal income tax withheld** from Forms W-2 and 1099 **64**

65 **2015 estimated tax payments and amount applied** from 2014 return **65**

66a **Earned income credit (EIC)** **66a**

b **Nonrefundable combat pay election** **66b**

67 **Additional child tax credit.** Attach Schedule 8812 **67**

68 **American opportunity credit** from Form 8863, line 8 **68**

69 **Net premium tax credit.** Attach Form 8962 **69**

70 **Amount paid with request for extension to file** **70**

71 **Excess social security and tier 1 RRTA tax withheld** **71**

72 **Credit for federal tax on fuels.** Attach Form 4136 **72**

73 **Credits from Form:** a 2439 b 8885 c 8885 d **73**

74 **Add lines 64, 65, 66a, and 67 through 73. These are your total payments** **74**

Refund

75 **If line 74 is more than line 63, subtract line 63 from line 74. This is the amount you overpaid** **75**

76a **Amount of line 75 you want refunded to you.** If Form 8878 is attached, check here **76a**

Direct deposit? **b** **Routing number** **c** Type: Checking Savings

See instructions. **d** **Account number**

77 **Amount of line 75 you want applied to your 2016 estimated tax** **77**

Amount You Owe

78 **Amount you owe.** Subtract line 74 from line 63. For details on how to pay, see instructions **78**

79 **Estimated tax penalty** (see instructions) **79**

Third Party Designee

Do you want to allow another person to discuss this return with the IRS (see instructions)? Yes. Complete below. No

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

Sign Here

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**

Spouse's signature, if a joint return, both must sign. **Date** **Spouse's occupation**

If the IRS sent you an Identity Protection PIN, enter it here (see instr.)

Paid Preparer Use Only

Print/Type preparer's name **Preparer's signature** **Date** **Check if self-employed** **PTIN**

Firm's name **Firm's EIN**

Firm's address **Phone no.**