1040		nent of the Treasury-				(99) U rn	20-	16	1 BMO	No. 1545-007	4 IRS Use	Only—	Oo not write or staple in thi	s space.
For the year Jan. 1-De	ec. 31. 2016	6. or other tax vear b	peainnina				. 2016	endina			, 20	Se	e separate instructi	ons.
Your first name and		,, ,		Last nan	ne		,	·g			,		our social security nui	
If a joint return, spouse's first name and initial Last name								Sp	ouse's social security n	umber				
Home address (num	nber and s	street). If you have	e a P.O. box	x, see ins	structions.	•					Apt. no.	A	Make sure the SSN(s and on line 6c are c	
City, town or post office	ce, state, a	nd ZIP code. If you	have a forei	gn addres	ss, also cor	mplete sp	paces below	(see instr	uctions)				Presidential Election Car	. •
Foreign country name					Foreign province/state/county Foreign post					n postal co		cly, want \$3 to go to this fund by below will not change your nd. You		
Filing Status	1 2	Single Married filin	na iointly (e	even if c	only one	had inc	come)	4					person). (See instruction not your dependent, er	
Check only one box.	3	Married filin	ig separat	ely. Ent	•			5	chi	ld's name her	e. >			
	6a	_			claim voi	1 25 2 0	denendent	do no)	Boxes checked	
Exemptions	b				•		асренает	., uo 110	COLOC	n box oa .		}	on 6a and 6b	
									Dependent's (4) ✓ if child unde				No. of children on 6c who:	
		(1) First name Last name			` ' '						alifying for child tax credit (see instructions)		lived with youdid not live with	
	(1)									(000 11			you due to divorce or separation	
If more than four	-												(see instructions)	
dependents, see instructions and													Dependents on 6c not entered above	
check here ▶	d	Total number	of exemp	tions cl	aimed								Add numbers on lines above	
	7	Wages, salari	·									7	lines above y	
Income	8a	Taxable inter			`	,			•			8a		
	b	Tax-exempt				•			Ė			Ju		
Attach Form(s)	9a	Ordinary divid							٠.			9a		
W-2 here. Also attach Forms	b	Qualified divid						. 9b						
W-2G and	10	Taxable refunds, credits, or offsets of state and local income taxes												
1099-R if tax	11													
was withheld.	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												
If you did not	14	Other gains o	r (losses).	Attach	Form 47	97 .						14		
get a W-2, see instructions.	15a	IRA distribution	ons .	15a				b Ta	xable	amount .		15b		
	16a	Pensions and	annuities	16a				b Ta	xable	amount .		16b		
	17	Rental real es	tate, roya	lties, pa	artnership	os, S co	orporation	s, trusts	s, etc.	Attach Sch	edule E	17		
	18	Farm income	. ,									18		
	19	Unemployme		nsation								19		
	20a	Social security		20a				b Ta	xable	amount .		20b		
	21	Other income Combine the a	. List type	and an	nount _	. (!' .	7.11	1. 04 TI				21		
	22									our total inco	me 🚩	22		
Adjusted	23	Educator exp										-		
Gross	24	Certain busines	•			_		İ						
Income	25	fee-basis government officials. At			_			. 25				-		
	26	_								-				
	27	Moving expenses. Attach Form 3903										-		
	28	Deductible part of self-employment tax. Attach Schedule SE .										-		
	29	Self-employed SEP, SIMPLE, and qualified plans . Self-employed health insurance deduction												
	30	Penalty on early withdrawal of savings												
	31a	Alimony paid						31a						
	32	IRA deduction											I	
	33	Student loan												
	34	Tuition and fe												
	35	Domestic prod												
	36	•										36		
	37	· · · · · · · · · · · · · · · · · · ·								37				

Form 1040 (2016	6)				Page 2				
	38	Amount from line 37 (adjusted gross income)		38					
Toy and	39a	Check You were born before January 2, 1952, Blind. Total boxes							
Tax and		if: Spouse was born before January 2, 1952, ☐ Blind. checked ▶ 39a							
Credits	b		 9b□						
Standard	40			40					
Deduction	41	Subtract line 40 from line 38	•	41					
for—	42	Exemptions. If line 38 is \$155,650 or less, multiply \$4,050 by the number on line 6d. Otherwise, see instruc	42						
 People who check any 		•							
box on line 39a or 39b or	43	Taxable income. Subtract line 42 from line 41. If line 42 is more than line 41, enter -0	•	43					
who can be	44	Tax (see instructions). Check if any from: a Form(s) 8814 b Form 4972 c Form 4972 c		44					
claimed as a dependent,	45	Alternative minimum tax (see instructions). Attach Form 6251	•	45					
see	46	Excess advance premium tax credit repayment. Attach Form 8962	•	46					
instructions. • All others:	47	Add lines 44, 45, and 46	47						
Single or	48	Foreign tax credit. Attach Form 1116 if required 48							
Married filing	49	Credit for child and dependent care expenses. Attach Form 2441 49							
separately, \$6,300	50	Education credits from Form 8863, line 19							
Married filing	51	Retirement savings contributions credit. Attach Form 8880 51							
jointly or Qualifying	52	Child tax credit. Attach Schedule 8812, if required 52							
widow(er),	53	Residential energy credits. Attach Form 5695 53							
\$12,600 Head of	54	Other credits from Form: a 3800 b 8801 c 54							
household,	55	Add lines 48 through 54. These are your total credits		55					
\$9,300	56	Subtract line 55 from line 47. If line 55 is more than line 47, enter -0-	•	56					
	57	Self-employment tax. Attach Schedule SE		57					
O 46	58	Unreported social security and Medicare tax from Form: a 4137 b 8919 .		58					
Other	59	Additional tax on IRAs, other qualified retirement plans, etc. Attach Form 5329 if required	•	59					
Taxes	60a		•	60a					
		Household employment taxes from Schedule H							
	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 56 through 62. This is your total tax		63					
Payments	64	Federal income tax withheld from Forms W-2 and 1099 64							
If you have a	65	2016 estimated tax payments and amount applied from 2015 return 65							
qualifying	66a	Earned income credit (EIC)							
child, attach	b	Nontaxable combat pay election 66b							
Schedule EIC.	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							
	71	Excess social security and tier 1 RRTA tax withheld							
	72	Credit for federal tax on fuels. Attach Form 4136 72							
	73	Credits from Form: a 2439 b Reserved 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 overp	aid	75					
- 	76a	•		76a					
Direct deposit?	▶ b	Routing number							
See	► d	Account number	J						
instructions.	77	Amount of line 75 you want applied to your 2017 estimated tax ▶ 77							
Amount	78	Amount you owe. Subtract line 74 from line 63. For details on how to pay, see instructions	s •	78					
You Owe	79	Estimated tax penalty (see instructions)							
			\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	. Complete be	elow. No				
Third Party		,	_	tification					
Designee	nar	me ▶ no. ▶ numbe	er (PIN)	>					
Sign		penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my							
Here		ely list all amounts and sources of income I received during the tax year. Declaration of preparer (other than taxpayer) is based or	i ali intori	1					
Joint return? See	10	ur signature Date Your occupation Daytime phone number							
instructions.		Pouvois signature If a joint vature hath must sign. Date. Chausele seguination.							
Keep a copy for your records.	Sp	ouse's signature. If a joint return, both must sign. Date Spouse's occupation		If the IRS sent you an Identity Protection PIN, enter it					
your records.				here (see inst.)	T DTIN				
Paid	Pri	nt/Type preparer's name Preparer's signature Date		Check if	PTIN				
Preparer			self-employed						
Use Only	Fire	m's name ▶		Firm's EIN ▶					
	Fire	m's address ▶	Phone no.						
www.irs.gov/for	m1040				Form 1040 (2016)				