<u>.</u>			Home address			ang ang wile, us	e first names of t	101a)	1				
<u>.</u>			(City, town.	-	• • • •	Name							
<u>.</u>			(City, town, o		/0	ostal zone numb		(Chala)	-				
<u>s</u>			Your Social Securi		Occupation	05181 2018 101811		(State) Security Number	Occupat	ion			
s		If Income	Was All From	n Salaries	and Wages, Use	Pages 1 a	nd 2 Only.	See Page 3 of	the Ir	structions.			
Exemptions	2. 3.	Check for wife income or he included in thi List first names qualify as dep address if diffe Enter numbe	if she had no is return, s of your children pendents; give event from yours. of exemption:	) Additional ) Additional who s claimed fo	00 exemption \$600 exemption if 6 \$600 exemption if b  r other persons list	5 or over at i ilind at end o ed at top ol	end of taxable f taxable yea f page 2	e year. 🗌 Yourself r 🗍 Yourself	U Wife	Enter number of exemptions checked Enter number of children listed			
	_				laimed on lines 1, missions, tips, and						_		
	э.	Employer	's Nam <del>a</del>		Where Employed (City as	nd State)		(a) Wages, etc.	1	(b) Income Tax Withh			
Income	6.	Less: (a) Tra	ivel, reimbursed	expenses, e Dau'' ia liao	Etc. (See instructions, page B. Attach required statements	nter totals he \$	:	\$	\$	;			
UT FUKMS WYY TIEKE	8. 9. 10.	Balance (line Profit (or loss Profit (or loss Other incom	e 5 less line 6) s) from business s) from farming re (or loss) from	from separa from separa page 3 (div	ate Schedule C ate Schedule F idends, interest, 1 of lines 7, 8, 9, an	ents, pensi	• • • • •		(	lf social security (FICA) withheld your wages excer \$94.50, see ins tions, page 5.	fro ede		
o ļ	Unmarried or legally separated persons qualifying as "Head of Household," see instructions, page 7, and check here in tax computation, see instructions, page 7, and check here instructions.												
- 1		Táble on pag il you itemize	ge 16 of instruc edeductions, co	tions to find mpute your	is under \$5,000, yout tax and chee tax on page 2 and	ck here □. Lenter here	If line 11 i the amount	is \$5,000 or more from line 9, page	, or 2). \$.				
		If Income was all from wages, omit lines 13	(b) Retire 14. Balance (	ment incom line 12 less	ed credit from line e credit from line line 13)	12 of Sche	dule K	l	\$.				
r refu		through 16	16. Sum of lin	ies 14 and 1	yment tax from se	<b> .</b> .			<u> </u>				
Tax due or refund	17.		neld (line 5 abo s and credits or t Director's offic		ch Forms W-2 (C laration of Estimat rid	Copy B) ed Tax ( <sup>See</sup> inst	page 8, ructions.)	\$	\$.				
	18. 19.	lf your tax (li Pay in full with	ne 12 or 16) is h this return to *	larger than	your payments (li enus Service." It is an your tax (line funded only upon at	ne 17), ente ss than \$1.09 12 or 16), e	er the balance , file return w onter the over	due here lithout payment. payment here	→ \$. → \$.				
					funded only upon as 1958 estimated tax				· · · · · ·	I			
-	Cour	in which you	live.		ife (hutband) making a his) name.	separate retur	n for 1957? [	]Yes []No If"Ye		you owe any Fed for years before 1 Yes			
of my kn lign	YER_ owled	—1 declare under ge and beitef is	r the panalties of p a true, correct; and	eriury that this complete setur	; return (including any n.	accompanying	schedules and	statements) has been	examined	t by me and to the	beş		
		e split-income			(Dote) nust include all their	income and	, even thoug		ome, BC				
lincluding	3 any	eccompanying s	chedules and state	ments) is, to t	enalties of perjury H he best of my knowle which I have any kno	tge and beliet	d this return : f, a true, carro	for the personiz) non ect, and complete reto	ned herein vrn based	o; and that this re on all the inform	elurn atior		

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	Name	Relationship	Number of months dependent lived in your home. If born or died dur- ing year also write "B" or "D"	Did dependent have gross income of \$600 or more?	Amount YOU spent for dependent's support. If 100% write "All"	Amount spent by OT including dependent own funds			
<u> </u>	· · · · · · · · · · · · · · · · · · ·				<u>s</u>	5			
		·•   - • • • • • • • • • • • • • • • • •							
	ge 1, the number of exemption n is based on a multiple-suppo			ormation describ	ped on page 5 of	instructions.			
It Hu	AIZED DEDUCTIONS-	eparated) File Se	parate Returns and One Item	izes Deductions,	the Other Must Al	so litemizo			
		•		·					
Contributions									
		e <u>% of line</u> 1	1, page 1, except as describ	ped on page 8 c	of instructions	\$	•		
Interest		· · · · · · · · · · · · · · · · · · ·							
					Total interest				
-	·				+				
Taxes	 								
·	Submit item:	any expense compensa	and by insurance or otherwise.		Total taxes				
Medical and dental expense			I percent of line 11, page 1.		\$				
(If 65 or over,									
see instructions, page 9)	4. Enter 3 percent of line								
	5. Allowable amount (exc								
Other Deductions	Enter child care expenses paid but not to exceed \$600. Enter casualty losses which are not compensated by insurance or otherwise.								
(Including child									
care and casualty losses)									
	TOTAL DEDUCTION	IS (Enter here or	id on line 2 of Tax Comput	tation, below).	Total	<u>s</u>			
			YOU DO NOT USE			<u> </u>	-		
							·,		
	sted Gross Income from lin s are itemized above, enter					\$			
	5 <b>,000 or more: (</b> a) a ma	rried person fili	ng separately enter \$500;	7					
	(b) all of	hers enter 10 p	ercent of line 1, or \$1,000	), whichever is	smaller				
3, Balance (lir									
4. Multiply \$	500 by total number of ex	emptions claim	ed on line 4, page 1						
5. TAXABLE	INCOM <sup>®</sup> (line 3 less lin	e 4)							
6. Tax on am		-	ite Schedule on page 11						
	ital go and the alter								
8. Tax credits.	If you itemized deduction	ons, enfer:							
	or income tax payments to a d at source on tax-free covena								
			- •	Ent	ter total>				
9. Enter heter	d on line 12, page 1, t	ie amount shov	n on line 6 or 7 less am	ount claimed	on line 8	\$			

Form 1040-1957 EXEMPTIONS FOR PERSONS OTHER THAN YOUR WIFE AND CHILDREN

Page 2

Form 1040-1957 IF INCOME WAS ALL FROM SAL	ARIES AND W	AGES, TEAR	OFF THIS P	AGE AND F	ILE ONLY	PAGES	Page I AND
Schedule A INCOME FROM DIVIDEN	DS (Income from Savi	ngs (Building) and Loa	n Associations and Cri	edit Unions should be	entered as intere	st in Schedu	le 8)
1. Name of qualifying corporation a (Indicate by (H), (W), (J) whether stock is held by hus		nd (See instruc	tions, page 1	2):	Amount	;	
				\$			
			• <b>-</b>				
2. Total				\$			ļ
<ol> <li>Exclusion of \$50 (If both husband an not more than \$50 of his (her) own</li> </ol>		lividends, each i	is entitled to exc	clude			*****
4. Excess, if any, of line 2 over line		nd on line 1.	Schedule 1	<u>s</u>			
5. Name of nonqualifying corporation of				••••			
	·····						
6. Enter total of lines 4 and 5	<u></u>				<u></u>	\$	
Schedule B.—INCOME FROM INTERES	ST						
Name of payer	Amount		Name of payer		Amount		
	\$			\$			
	<b></b>			Enter t	otal here->		
Schedule D Summary.—GAINS AND LO	N 0003 2322		ANCES OF DD	· · · · ·			
1. From sale or exchange of capital asse				OFERI			
2. From sale or exchange of property of	•	•		D)			
Schedule E.—INCOME FROM PENSION							
Part 1,-General Rule							
. Investment in contract	\$	4. Amount rec	eived this year.	<b>  S</b>			
2. Expected return	\$	5. Amount excludable (line 4 multiplied					
3. Percentage of income to be excluded		by line 3).		· · · · · · · · · · <u> </u>			
(line 1 divided by line 2)		6. Taxable po					
Part II.—Where your cest will be record 1. Cost of annuity (amounts paid in)	· · · · ·				he cost		
2. Cost received tax-free in past years	] }	4. Amouni rec	erved mis year.	· · • • • • • • • • • • • • • • • • • •			
<ol> <li>Cost received lax-mee in past years</li> <li>Remainder of cost (line 1 less line 2)</li> </ol>	t_ !	5. Taxable por	tion lexcess if a	inv. of line 4 ov	ver line 3).		
Schedule GINCOME FROM RENTS		-					
I. Kind and location of property	2. Amount of rent or revelty	3. Depreciation (ex in Sch. 1) or deple			ter expenses itemized list)		2 - 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	¢	C					
	·P	P		·····	····· /		
					{		
. Totals	\$ rovalties (colum	\$ n 2 less sum of	s columns 3, 4, c	<u> \$</u> ind 5)	l		
chedule HOTHER INCOME							*
	· · · ·	<u>-</u>					
2. Estates or trusts (name and address)		•••					
. Other sources (state nature)							
Total income (or loss) from above	sources (Enter h	ere and on lin	e 10, page 1).	<u></u>	<u></u>	<u> </u>	
chedule IEXPLANATION OF DEDUC	TION FOR DEP	RECIATION CL	AIMED IN SC	HEDULE G			
<ol> <li>Kind of property (if buildings, state material of which constructed), Exclude land and other nondepreciable property</li> </ol>	2. Date acquired	3. Cost or other basis	4. Depreciation al- lowed (or allowable) in prior years	5. Method of computing depreciation	6. Rate (%) or life (years	7. 1 ) fo	Deprecistion r this year
	}	*	<u>م</u>		1		

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## Form 1040-1957 IF INCOME WAS ALL FROM SALARIES AND WAGES, TEAR OFF THIS PAGE AND FILE ONLY PAGES 1 AND 2

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## Schedule J.-DIVIDENDS RECEIVED CREDIT (See instructions, page 15)

	Amount of dividends on line 4, Schedule A Tentative credit (4 percent of line 1)	
	LIMITATION ON CREDIT	
3.	Tax shown on line 12, page 1, plus amount, if any, shown on line 8(b), page 2	 
	4 percent of taxable income.	 
	Taxable Income I Aeans(a) If tax is computed on page 2, the amount shown on line 5, page 2.(b) If capital gains alternative tax applies, the amount shown on line 14, separate Schedule D.(c) If Tax Table is used, the amount shown on line 11, page 1, less 10 percent thereof, and less the deduction for exemptions (\$600 multiplied by the number of exemptions claimed on line 4, page 1).	
5.	Dividends received credit. Enter here and on line 13(a), page 1, the smallest of the amounts on line 2, 3, or 4, above.	\$

## Schedule K.-RETIREMENT INCOME CREDIT (See instructions, page 15)

2	cre ot apply: . Is of pensions or annulties of \$1,200 or more from Social Security or Reliroad Relirements . I oder \$5 years of age and had "earned income" of \$2,100 or more, OR . I os or over and under 72, and had "earned income" of \$2,400 or more.	nt,						
If separate return, use column B only. If joint raturn, use column A for wife and column B for husband Did you receive earned income in excess of \$600 in each of any 10 calendar years before the taxable year 1957? Widow or widowers see instructions, page 15		A		B				
		]_[	Yes No		lo		No	
ll an	swer above is "Yes" in either column, furnish all information below in that column.							
1.	Retirement income for taxable year which is included in line 11, page 1, of this return:							
	(a) For taxpayers under 65 years of age: Enter only income received from pensions and annuities under public retirement systems, including retirement pay from Armed Forces	\$				\$		
	(b) For taxpayers 65 years of age or older: Enter total of pensions and annuities, including retirement pay from Armed Forces, interest, gross rents, and dividends							
	LIMITATION ON RETIREMENT INCOME							
	Maximum amount of retirement income for credit computation Deduct: (a) Amounts received in taxable year as pensions or annuities under the Social Security Act, the Railroad Retirement Acts, and certain other exclusions from gross income	\$		,200	00	\$	1,200	00
6.	<ul> <li>(b) Eamed income received in taxable year: (This line does not apply to persons 72 years of age or over)</li> <li>(1) Taxpayers under 65 years of age, enter amount in excess of \$900</li></ul>							
7.	Tentative credit (20 percent of line 6)							:
8.	Total tentative credit on this return (total of amounts on line 7, columns A and B)		••••		•••			-
	LIMITATION ON RETIREMENT INCOME CREDIT				i			
9. 10.	Int of ta							
	Balance (line 9 less line 10) Retirement income credit. Enter here and on line 13(b), page 1, the amount on line 8 o is smaller	r lee	11, w		ver			