1040		rtment of the Treasury—Internal Revenue So Individual Income Tax Ret	- <u></u>	3 (99)	IRS Use Only—D	o not write or	staple in this space.	
-	For	the year Jan. 1-Dec. 31, 2003, or other tax year begin	ining , 2	2003, ending	, 20	`` <u></u> OI	MB No. 1545-0074	
Label	You	ur first name and initial	Last name			Your se	ocial security num	ber
(See L A								
on page 19.) E	If a joint return, spouse's first name and initial Last name Spouse's so							number
Use the IRS label. H Otherwise, E	Но	Home address (number and street). If you have a P.O. box, see page 19. 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 19.					ou must enter our SSN(s) above	9.
Presidential Election Campaign		Note. Checking "Yes" will not change ye	our tax or reduce	your refund		Υοι	u Spous	se
(See page 19.)		Do you, or your spouse if filing a joint re			d? 🕨	► Yes	s □No □Yes	No
	1	Single		4 🗌 Head	of household (wi	th qualifying	person). (See pag	e 20.) If
Filing Status	2	Arried filing jointly (even if only one h	had income)				not your depender	
Check only	3 [Married filing separately. Enter spouse	e's SSN above		hild's name here.			
one box.		and full name here. ►					dent child. (See pa	age 20.)
Exemptions	6a	Yourself. If your parent (or someone return, do not check box	6a	you as a depe	ndent on his or	her tax	No. of boxes checked on 6a and 6b	
	b	Spouse		(2) Do	pendent's (4)	f qualifying	No. of children on 6c who:	
	С	Dependents:	(2) Dependent social security nu	S rolatio	nship to child for	or child tax	 lived with you 	
		(1) First name Last name		N N	you credit (s	ee page 21)	 did not live with you due to divorce 	
If more than five							or separation	
dependents,							(see page 21)	
see page 21.							Dependents on 6c not entered above	
							Add numbers	
	d	Total number of exemptions claimed				<u> </u>	on lines above ►	
_	7	Wages, salaries, tips, etc. Attach Form(s	s) W-2			. 7		
Income	8a	Taxable interest. Attach Schedule B if r	-			. 8a		
Attach	b	Tax-exempt interest. Do not include on	n line 8a	8b				
Forms W-2 and	9a	Ordinary dividends. Attach Schedule B i	if required			. <u>9a</u>		<u> </u>
W-2G here. Also attach	b							
Form(s) 1099-R	10	Taxable refunds, credits, or offsets of st	. 10					
if tax was withheld.	11	Alimony received						
	12 13a							+
	b	If box on 13a is checked, enter post-May 5 capi	13a		<u> </u>			
If you did not	14	Other gains or (losses). Attach Form 479	97			14		
get a W-2,	15a	IRA distributions 15a			ount (see page 25			
see page 22.	16a	Pensions and annuities 16a			ount (see page 25	·		
Enclose, but do not attach, any payment. Also,	17	Rental real estate, royalties, partnerships	s, S corporations,	trusts, etc. At	tach Schedule	E 17		
	18	Farm income or (loss). Attach Schedule F						
please use	19	Unemployment compensation						+
Form 1040-V.	20a	Social security benefits . 20a			ount (see page 27	·		
	21 22	Other income. List type and amount (see Add the amounts in the far right column for						
	23	Educator expenses (see page 29)						
Adjusted	24	IRA deduction (see page 29)						
Gross	25	Student loan interest deduction (see page						
Income	26	Tuition and fees deduction (see page 32	-					
	27	Moving expenses. Attach Form 3903						
	28	One-half of self-employment tax. Attach						
	29	Self-employed health insurance deduction						
	30	Self-employed SEP, SIMPLE, and qualif						
	31	Penalty on early withdrawal of savings						1
	32a	Alimony paid b Recipient's SSN ►		32a				1
	33 24	Add lines 23 through 32a		s incomo		. 33		+
	34	Subtract line 33 from line 22. This is you	ui aujusteu gros	sincome .	<u> </u>	▶ 34		

For Disclosure, Privacy Act, and Paperwork Reduction Act Notice, see page 77.

Form	1040	(2003)
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Tax and	35	Amount from line 34 (adjusted gross income)			35		
Credits	36a	Check ∫					
Standard)	if: $\int \Box$ Spouse was born before January 2			► 36a		
Deduction	b	If you are married filing separately and your spo you were a dual-status alien, see page 34 and c			□		
for—	27		37				
 People who checked any 	37 38	Itemized deductions (from Schedule A) or your	38				
box on line 36a or 36b or	30 39	Subtract line 37 from line 35					
who can be claimed as a	39	line 6d. If line 35 is over \$104,625, see the worksheet on page 35				39	
dependent,	40	Taxable income. Subtract line 39 from line 38. If line 39 is more than line 38, enter -0-				40	
see page 34.	41		Tax (see page 36). Check if any tax is from: a \Box Form(s) 8814 b \Box Form 4972				
All others:	42	Alternative minimum tax (see page 38). Attach		42			
Single or Married filing	43	Add lines 41 and 42			•	43	
separately, \$4,750	44	Foreign tax credit. Attach Form 1116 if required					
Married filing	45	Credit for child and dependent care expenses. Atta	ch Form 24				
jointly or	46	Credit for the elderly or the disabled. Attach Sch	nedule R.				
Qualifying widow(er),	47						
\$9,500	48	Retirement savings contributions credit. Attach I					
Head of	49	Child tax credit (see page 40)		•			
household, \$7,000	50	Adoption credit. Attach Form 8839		·			
	51 52	Credits from: a Form 8396 b Form Other credits. Check applicable box(es): a		· //////			
	52	b Form 8801 c Specify					
	53	Add lines 44 through 52. These are your total c		•		53	
	54	Subtract line 53 from line 43. If line 53 is more t				54	
Other	55	Self-employment tax. Attach Schedule SE				55	
Taxes	56	Social security and Medicare tax on tip income not r	reported to	employer. Attach Forr	n 4137	56	
Takes	57	Tax on qualified plans, including IRAs, and other tax-fa	if required .	57			
	58	Advance earned income credit payments from F	58				
	59	Household employment taxes. Attach Schedule				59	
Decimente	60	Add lines 54 through 59. This is your total tax			· · · P	60	
Payments	61	Federal income tax withheld from Forms W-2 ar	-				
	62	2003 estimated tax payments and amount applied from 2 Earned income credit (EIC)		•			
If you have a qualifying	63 64	Excess social security and tier 1 RRTA tax withheld					
child, attach Schedule EIC.	65	Additional child tax credit. Attach Form 8812		50)			
	66	Amount paid with request for extension to file (
	67	Other payments from: a Form 2439 b Form 4136 c					
	68	Add lines 61 through 67. These are your total p	ayments		>	68	
Refund	69	If line 68 is more than line 60, subtract line 60 fro	m line 68.	This is the amount y	ou overpaid	69	
Direct deposit?	70a	Amount of line 69 you want refunded to you .	<u> </u>	· · <u>·</u> · · ·	<u>.</u> ►	70a	
See page 56 and fill in 70b,	► b	Routing number		c Type: Checking	Savings		
70c, and 70d.	► d	Account number					
Amount	71	Amount of line 69 you want applied to your 2004 estin			F7 N		
Amount You Owe	72 73	Amount you owe. Subtract line 68 from line 60. Estimated tax penalty (see page 58)			e page 57		
		you want to allow another person to discuss this			58)? 🗌 Yes.	Complete the following.	
Third Party		signee's Phon			Personal identifi		
Designee	nar	ne 🕨 no.	▶ ()	number (PIN)		
Sign		ler penalties of perjury, I declare that I have examined this r ef, they are true, correct, and complete. Declaration of prepa					
Here		Ir signature	Daytime phone number				
Joint return? See page 20.	10		ne	Your occupation			
Keep a copy		puse's signature. If a joint return, both must sign. Da	ite	Spouse's occupation			
for your records.	- sp	base s signature. In a joint return, both must sign. Da		Spouse's occupation			
	D.			Date		Preparer's SSN or PTIN	
Paid		parer's hature		Ch	eck if f-employed		
Preparer's	Firr	n's name (or	- <u> </u>				
Use Only	you add	ars if self-employed), dress, and ZIP code	()				