Department of the Treasury—Internal Revenue Service (99) U.S. Individual Income Tax Return

<b>1040</b>		nent of the Treasury— Individual			(99) <b>Return</b>	20	13	OMB N	lo. 1545-0074	IRS Use O	nly – Do	o not write or staple in	this space.
For the year Jan. 1-De	AND SOUTH					201:	3, ending		, 20		-	e separate instru	
Your first name and		o, or other tax year be	-	ast name		, 2010	o, ending		, 20		-	r social security	
												1 1	
If a joint return, spo	use's first	name and initial	L	ast name							Spo	use's social security	y number
Home address (nun	nber and s	street). If you have	a P.O. box,	, see instru	ctions.					Apt. no.	$\blacktriangle$	Make sure the SSN and on line 6c are	
City, town or post offi	ce state a	and ZIP code. If you h	have a foreig	n address. a	also complete s	paces below	v (see instr	ructions).			Dr	esidential Election (	
,											CONTRACTOR AND ADDRESS OF THE PARTY OF THE P	k here if you, or your spo	
Foreign country nar	ne				Foreign pro	vince/state	county		Foreign	postal code		, want \$3 to go to this fu below will not change y	
					100 Mil				70000		refund		Spouse
Filing Status	1	Single		144000			4	Hea	d of household	l (with quali	fying p	person). (See instruc	ctions.) If
9	2	Married filing		distribution of the second		STATE OF THE PARTY					but n	ot your dependent,	enter this
Check only one box.	3									The state of the s		dent shild	
poste Agos	60	and full name here. ► 5  Qualifying widow(er) with								(er) with d	epend	Boxes checked	
Exemptions	b	6a  Yourself. If someone can claim you as a dependent, do not check box 6a b Spouse										on 6a and 6b	
	c Dependents:			(2) Dependent's (3) I			(3) Depend	Dependen's (4) ✓ if child under age				No. of children or 6c who:	
	(1) First	With the state of the season o	Last name	so	cial security nun		elationship	to you	qualifying for o		I .	<ul> <li>lived with you</li> <li>did not live with</li> </ul>	-
lf than fa	6											or separation	
If more than four dependents, see	10			_								(see instructions) Dependents on 6	
instructions and	7			-							_	not entered abov	
check here ►	d	Total number of	of exempti	ions clain	ned	SEE SEE		0 0 0		0 0		Add numbers or lines above ▶	ו
Incomo	7	Wages, salarie	The second second second	A PROPERTY OF A PARTY							7	mico aporo p	
Income	8a	Taxable intere		A Commission							8a		
	b	Tax-exempt in	nterest. Do	o not incl	ude on line	a	. 8b						
Attach Form(s) W-2 here. Also	9a	Ordinary divide		ch Sched	lule B if requ	ired .	8 0 3		S - 10 - 10		9a		
attach Forms	b	Qualified divide					, 96						
W-2G and 1099-R if tax	10 11	Taxable refund Alimony receiv		, or onset	s of state ar	nd local in	come ta	ves ,	* * *	* *	10		+
was withheld.	12									12		+	
	13	Capital gain or					not requi	ired, ch	eck here		13		
If you did not get a W-2,	14	Other gains or					, ,				14		
see instructions.	15a	IRA distribution		15a				axable a			15b		
	16a	Pensions and a		16a				axable a			16b		+
	17	Rental real est				orporatio	ns, trusts	s, etc. /	Attach Sched	lule E	17		+
	19	Unemploymen		The second second	ieddie P						19		+
	20a	Social security	A CONTRACTOR OF THE PARTY OF TH	The second second	# # # # # # # # # # # # # # # # # # #		- A	axable a	mount .		20b		$\top$
		Other income	List type a	and amou	int		_				21		
	22	Combine the arr	_	e far right	column for lir	nes 7 throu			ur total incom	e ►	22		
Adjuste	23	Educator expe	Contain Contain	- m - m									
Gross	24	Certain business fee-basis govern	ALCOHOL: MARKET				nd   24			1 1			
Income	25	Health savings	The state of the state of				. 25	-		+			
	26	Charles and the second			903			-					
	27	Deductible part						-					
	28	Self-employed	SEP, SIM	IPLE, and	l qualified pl	ans .	. 28						
	29	Self-employed						-		_			
	30	Penalty on ear			22.	1		-		+-			
	31a 32	Alimony paid I IRA deduction					31a						
	33	Student loan in					. 33						
	34	Tuition and fee											
	35	Domestic produ			ction. Attach	Form 890	3 35						
	36	Add lines 23 th							* * *		36		+
	37	Subtract line 3	tom line	e 22. This	is your adju	usted gro	ss incol	me .			37		

Form 1040 (2013	3)									Page 2
Tax and	38	Amount from line 37 (adju	sted gross income	e)				38		
Credits	39a	Check	orn before Januar	y 2, 1949,	Blind.	Total boxes				
Oreans		- Carlotte	s born before Janı	Andrew Control of the	- Indicate and the	checked ►	O VERNET IN THE REAL PROPERTY.	_		
Standard Deduction	b	If your spouse itemizes on	manage and a second particular	- North Conversion of Asserta						1
for-	40	Itemized deductions (fro		your <b>standard</b>	deduction (	see left margi	n)	40		$\rightarrow$
People who check any	41	Subtract line 40 from line	41		-					
box on line	42	Exemptions. If line 38 is \$15	42		$\rightarrow$					
39a or 39b or who can be	43	Taxable income. Subtra	43							
claimed as a dependent,	44	Tax (see instructions). Chec	44							
see instructions.	45	Alternative minimum tax	- Appendix of the appropriate the control of the			* * *		45		+
All others:	46	Add lines 44 and 45						46		-
Single or	47	Foreign tax credit. Attach			- V					
Married filing separately,	48	Credit for child and depend								
\$6,100	49	Education credits from Fo	And the second of the second of the second of							
Married filing jointly or	50	Retirement savings cont								
Qualifying widow(er),	51	Child tax credit. Attach S	As the distribution of the last of the las	Ares 12 (Company Colon)						
\$12,200	52	Residential energy credits		The state of the s						
Head of household,	53	Other credits from Form: a			53		19			
\$8,950	54	Add lines 47 through 53.			[16] - [18] - [18] - [18]	V 10 10 10		54		—
	55	Subtract line 54 from line		re man ine 46	, eriter 0-	2 2 2	* *	55		+-
Other	56	Self-employment tax. Atta		· · · · · ·	07		6	50		+
Taxes	57	Unreported social security		A SOCIOL HICKORY CONTRACTOR AS IN		891 Section 1	9	57		-
	58	Additional tax on IRAs, oth		A Secretary Control of the Control o	Attach Form	5329 IT require		500		-
	59a	Household employment ta		12 AC 10	10 N	to to to to	10	59a 59b		-
	60	First-time homebuyer cred Taxes from: a Form 8		A STATE OF THE PARTY OF THE PAR	tions; enter o	nodo(s)	A 1	60		+-
	61				dons, enter c	Joue(s)		61		-
Payments	62	Add lines 55 through 60. Tederal income tax withher			62	10 10 10	• •	01		$\rightarrow$
rayillelits	63	2013 estimated tax paymen	AND CONTRACT CONTRACTOR OF THE CONTRACTOR	Action and the second	the the					
If you have a	64a	Earned income credit (E		5.11.201210	64a					
qualifying	b	Nontaxable combat pay elec						a a a		
child, attach Schedule EIC.	65	Additional child tax credit		12	. 65					
	66	American opportunity cre	ASSESSMENT TO A STATE OF THE PARTY OF THE PA	CANADA IN THE THE	. 66					
	67	Reserved		. •	67		, i			
	68	Amount paid with request	or extension to fi	le	68					
	69	Excess social security and	tier 1 RRTA tax wit	hheld .	69					
	70	Credit for lederal tax on f	uels. Attach Form	4136	70					
	71	Credits from Form: a 243	9 b 🔲 Reserved 😉 🛭	8885 d 🗌	71					
	72	Add lines 62, 63, 64a, and	65 through 71. T	ese are your t	otal paymen	nts	>	72		
Refund	73	If line 72 is more than line	The second second				overpaid	73		
	74a	Amount of line 73 you was	nt refunded to you	u. If Form 8888	3 is attached,		. ▶□	74a		
Direct deposit?	<b>b</b> b	Routing number			▶ c Type: □	Checking [	Savings			
See instructions.	d	Account number					Ш,			
_	75	Amount of line 73 you want				20 2				1
Amount	76	Amount you owe. Subtra		e 61. For detail		pay, see instru	uctions >	76		
You Owe	77	Estimated tax penalty (see								
Third Party	Do	you want to allow another	person to discuss	this return with	h the IRS (se	e instructions	)?	s. Compl	ete below.	☐ No
Designee		signee's		Phone			ersonal identi	fication		
Sign		ne Danielia di parium. I dealare i	that I have examined th	no. ►	amaanina aab		ımber (PIN)	the best of	my knowledge en	d ballef
Here		der penalties of perjury, I declare to y are true, correct, and complete.								i beller,
	You	ur signature	• • • • • • • • • • • • • • • • • • •	Date	Your occupa	tion		Daytime	e phone number	
Joint return? See instructions.	1									
Keep a copy for	opy for Spouse's signature. If a joint return, <b>both</b> must sign. Date Spouse's occupation If the IRS sent you an								sent you an Identity	Protection
your records.	1							PIN, enter it here (see inst.)		
Doid	Prir	nt/Type preparer's name	Preparer's signatu	ıre	I.S.	Date			- PTIN	
Paid		85 (5) S						Check self-em		
Preparer Use Only	Firr	m's name ▶	dis.			Firm's	s EIN ▶		1	
USE OILLY		n's address ►								
(S						Phon			Form 10	40 (2013)