1040 Department of the Treasury—Informal Revenue Service (99) U.S. Individual Income Tax Return 2014 OMB No. 1545-0074

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For the year Jan. 1-De		4, or other to	ax year beginning								-	See separate instructions.		
Your first name and	initial			Last name	Mauri						1300	Your social security number		
Samuel P			rever	Taxpayer							_	123-45-6789		
If a joint return, spo		name and	moai	Last name							18.00	Spouse's social security number		
Felicity Q Taxpayer									Apt. no.	432-19-8765				
Home address (number and street). If you have a P.O. box, see instructions. Apt. 789 Tuxedo Drive									right. Hos.	•	Make sure the SSN(s) above and on line 6c are correct.			
City, sown or post offi	ce, state, a	and ZIP cod	e. If you have a fore	ign address	, also complete spaces	below (see	instruction	e).			P	residential Election Ca	mpaign	
Bronxville	NY :	10708										ok here if you, or your spous ly, want \$3 to go to this fund		
Foreign country nar	Foreign province/state/county Foreign postal co					ostal code		x below will not change you	tax or					
Filing Status	1	Single	e		4 Head of household (with qu						fying	person). (See instruction	ons.) if	
riing Status	2	2 Married filing jointly (even if only one had income) the qualifying person is a ch												
Check only one	3													
box.		and full name here. ► 5 ☐ Qualifying widow(er) with									epen	dent child		
If more than four dependents, see instructions and check here	6a											Boxes checked on 6a and 6b	- 2	
	b X Spouse .											No. of children	-6	
	c	Depen	dents:		(2) Dependent's		(3) Dependent's		(4) If child under age qualifying for child tax cre			on 6c who: • lived with you	2	
	(1) First name Last na			_						(see instructions)		 did not live with 		
	Cyril T		Taxpaye	_	23-45-1234	Son		-			_	you due to divorce or separation		
	Heid	ii W	Taxpayer		123-23-2345		Daughter				_	(see instructions) Dependents on 6c		
	Sydr	ney D	Taxpayer	r 1	123-54-9876		Parent				-	not entered above	_1	
								_				Add numbers on		
	d		umber of exemp	-				4 - 4				lines above >		
Income	7	Wages, salaries, tips, etc. Attach Form(s) W-2									7		250.	
	8a	Taxable interest. Attach Schedule B if required									8a		127.	
Attach Form(s)	ь	Tax-exempt interest. Do not include on line 8a 8b 543.									1003		2002	
W-2 here. Also	9a	Ordinary dividends. Attach Schedule B if required									9a		196.	
attach Forms	ь	Qualified dividends												
W-2G and 1099-R if tax was withheld.	10	Taxable refunds, credits, or offsets of state and local income taxes									10		_	
	11	Almony received								1	11	0.4	072	
	12	Business income or (loss). Attach Schedule C or C-EZ								0	12	- The second sec		
If you did not get a W-2, see instructions. Adjusted Gross Income	13	Other gains or (losses). Attach Schedule D is required. If not required, check here >								- F	13	11,	039.	
	14		CONT. C. C. C. P. D. C.	15a	om 4/9/	1.0	- Vanable	*			14 15b			
	15a							b Taxable amount			16b			
	16a	Pensions and annuities 16a b Taxable amount								COLUMN TO SERVICE STATE OF THE PARTY OF THE	17			
	18	Farm income or (loss). Attach Schedule F									18		_	
	19										19			
	20a										20b			
	21	Other income. List type and amount								21				
	22				nt column for lines 7 t	hrough 2	1. This is y	your tota	it incom	0 >	22	187,	885.	
	23	Educati	or expenses .				23	-	-					
	24	Certain I	business expense	s of reserv	ists, performing artist	ts, and								
					th Form 2106 or 2106	200000000000000000000000000000000000000	24							
	25	Health:	savings accoun	t deducti	on. Attach Form 88	89 .	25							
	26	Moving	expenses. Atta	ch Form	3903		26							
	27	Deducti	ble part of self-en	tax. Attach Schedule	SE .	27		6,	660.					
	28	Self-employed SEP, SIMPLE, and qualified plans					28		17,	523.				
	29	Self-employed health insurance deduction 29												
	30	Penalty on early withdrawal of savings 30												
	31a	Almony paid b Recipient's SSN ▶ 31a												
	32	IRA deduction										1		
	33	Student loan interest deduction												
	34	Tuition and fees. Attach Form 8917 34												
	35	Domestic production activities deduction. Attach Form 8903 35												
	36	Add line	es 23 through 3	5				200			36	24,	183.	
	27	Cubitment time 20 from time 22. This is your adjusted executions								0.7	1.00	200		