

FORM 1040 U.S. INDIVIDUAL INCOME TAX RETURN 1990

=====

[  
[  
Your SSN (###-##-####) ---->  
Spouse SSN (###-##-####) -->

0

Present home address (No. & street, incl. apt. no., or rural route)

[  
City, town, or post office, State, & ZIP code

[  
Presidential Election Campaign - Do you or your spouse want \$1 to go to  
this fund? Enter 1 for "Yes" or 2 for "No" for you and spouse.

-----  
Filing Status

- 1
- 2
- 3
  
- 4
  
  
- 5

Enter filing status number ----->  
\*\*\*\*\* CHECK \*\*\*\*\*

-----  
Exemptions - If claimed on another return (such as parent's), do not

6a

c Dependents

Sheet1

d

e

---

Income

7

8a

b

9

10

11

12

13

14

15

16a

17a

18

19

20

NOTE: Complete lines 22 thru 30 ahead before completing

21a

b

Amount from FIRST Form 8814, line 5

Amounts from ADDITIONAL Forms 8814, line 5

22

22

23

---

Adjustments to Income

NOTE: Complete thru line 30 ahead before completing IRA Worksheet

24a

b

25

26

27

28

29

Write-in amounts

30

---

Adjusted Gross Income

31

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END OF PG 1, FORM 1040. Press ESC for menu for rest of form.

=====

First name & init

<-- If using the IRS provided mailing label enter 1 (one)

<--- You

<--- Spouse

-----

SINGLE (See pg 10 to see if you can file as head of household.)  
MARRIED FILING JOINT RETURN (even if only one had income)  
MARRIED FILING SEPARATE RETURN. Enter spouse's social security  
number above and full name here ----->[  
HEAD OF HOUSEHOLD (with qualifying person). (See page 10 of  
Instructions.) If qualifying person is your unmarried child but not  
your dependent, enter child's name ->  
QUALIFYING WIDOW(ER) WITH DEPENDENT CHILD. See pg 10 of Instructions  
Enter last two digits of year died ----->[

-----

Enter 1 for you and spouse (as applicable).  
Yourself ----->

Enter name

1st, init, last

Enter number of children on 6c who lived with you ----->  
Enter number of children on 6c who didn't live with you  
due to divorce or separation ----->

Enter number of other dependents listed on 6c ----->  
If your child didn't live with you but is claimed as your  
dependent under a pre 1985 agreement, enter 1 --->  
Total number of exemptions claimed ----->

---

Wages, etc. {W-2}

Other wages, salaries, tips, etc.

Income from Forms 2106, ln 8 {Form 2106-YOU}

Amount from {Form 2441}, line 22

Taxable interest income {Sched B}

Tax-exempt int income. DO NOT incl on ln 8a

Dividend income {Sched B}

Taxable refunds of state & local income taxes (pg 14)

Alimony received

Business income or (loss)

Capital gain or (loss) {Sched D}

Capital gain dist not reported on ln 13 (see pg 14)

Other gains or (losses) (attach Form 4797)

Total IRA distributions

Total pensions/annuities

Rents, royalties, partnerships, trusts, etc. {Sched E}

Farm income or (loss) {Sched F}

Unemployment compenstaion (insurance)

Amt of unempl comp repaid in 1990

Social Security Benefits Worksheet

Social security benefits {Soc Sec Wksht}

Taxable amount, if any {Soc Sec Wksht}

Other income. Type/amt >[

Total of income reported on line 22

Add lines 7 thru 22. Total income

Your IRA deduction {IRA Wksht 1 or 2}

Spouse IRA deduction {IRA Wksht 1 or 2}

One-half self-employment tax

{Sched SE-YOU}

{Sched SE-SPOUSE}

Self-employment health insurance deduction

Keogh plan and self-employed SEP deduction

Penalty on early withdrawal of savings

Alimony paid - recipient's

social security no ---->[

Add lines 24a thru 29. Total adjustments

-----

Line 23 less line 30. Adjusted gross income

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=====

] You [  
] Spouse [

-----

Numbers  
Must  
Match

-----

enter 1 for 6a, but be sure to enter 1 for line 33b.

0  
Number of 1's entered above ----->

X if  
under 2

SSN if 2  
or over

---

{Form 2106-SPOUSE}

{Sched C-YOU}  
{Sched C-SPOUSE}

0  
0

---

0  
0



You	0
Spouse	0

---

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=====
Last Name
]
]

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] Apt#[
]
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]
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^
v
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6b Spouse -->
0
0

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Rela-
tionship    Mos lived
in home '90

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0

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-----  
You  
Spouse  
You  
Spouse

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Total

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b Taxable amt  
b Taxable amt

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#VALUE!

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#VALUE!

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)

0

0

0

-----

#VALUE!

-----

Tax Computation

32

33a

b

c

34

NOTE: The larger of the Standard Deduction or the Itemized Deduction

NOTE: If you entered 1 on line 33b, indicating that you can be claimed on another person's return (e.g. parents'), complete the {Std Wksht for Dependents}, see pg 16

\*\*\*\*\* CHECK \*\*\*\*\*

#VALUE!

NOTE: If you itemize even though your itemized deductions are less than your standard deduction enter 1 (see instructions) ----->

35

36

37

38

Amount from FIRST Form 8814, line 8

Amounts from ADDITIONAL Forms 8814, line 8

TAX

39

40

-----  
Credits

41

42

43

44

45

46

47

---

Other Taxes

48

49

50

51

52

53

54

---

Payments

55

56

57

58

59

60

61

62

---

Refund or Amount You Owe

63

64

NOTE: If you will owe a penalty, figure penalty before completing In 65

65

66

67

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---

Paid Preparer's Use Only

Preparer's SSN (###-##-####) ->

Firm's or your name >[

Address ----->[

=====

END OF Form 1040

Pers Exemp >

Amount from line 31 (adjusted gross income)  
Enter 1 (one) for yourself and spouse as applicable

Enter 1 if claimed as dep on someone else's return ---->  
Enter 1 if you are married filing a separate return and  
your spouse itemizes deductions, or you are a  
dual-status alien, see page 19 ----->  
If you itemize deductions, complete Schedule A {Sched A}

will be used in line 34 unless you indicate otherwise below.

Standard deduction

<--- If ERR is displayed, the Standard Deduction is larger than  
the Itemized Deduction from Sched A and will be used in line 34  
unless you indicate otherwise below. CHECK YOUR ENTRIES.

Subtract line 34 from line 32  
Multiply \$2,050 by the total number of exemptions  
Taxable income. Ln 35 less ln 36. (Not less than zero)  
Caution: If under age 14 and you have more than \$1,000 income;  
see pg 16; complete Form 8615, if req'd; and enter 1 -->  
Tax

Additional taxes.

Tax Source      Source Number  
Form 4970  
Form 4972  
Add lines 38 and 39

-----  
Credit/child & dep care expenses {Form 2441}  
Credit for the elderly and the permanently  
and totally disabled {Sched R}  
Foreign tax credit (attach Form 1116)  
General business credit.  
Source #

1  
2

Credit Source  
Form 3800 or  
Other form # -->



Credit for prior yr min tax (attach Form 8801)  
Mort Int Credit (Show amt & "MIC" on form)  
Noncnvntnl Srce Fuel Cred (Show amt & FNS/form)  
Add lines 41 thru 45  
Line 40 less line 46. (Not less than zero)

---

Self-employment tax  
{Sched SE-YOU}  
{Sched SE-SPOUSE}  
Alternative minimum tax {Form 6251}  
Recapture taxes  
Tax Source      Source Number  
Form 4255  
Form 8611  
Soc sec tax/tip income not rept'd to employer (Form 4137)  
Tax on IRA or qual retirement plan (attach Form 5329)  
Advance Earned Income Credit (AEIC) Payments  
Total tax. Add lines 47 thru 53

---

Federal income tax withheld  
You {W-2}  
You (adj, 1099)  
Spouse {W-2}  
Spouse (adj, 1099)  
If any withheld taxes are from Form(s) 1099 enter 1 --->  
1990 est tax pmts & amt applied from '89 return  
{Earned Income Credit Wksht}. (see pg 22)  
Amount paid with Form 4868  
Excess soc sec tax & RRTA tax withheld (pg 23)  
Credit/Fed tax on gas & spec fuels (Form 4136)  
Regulated investment co credit (Form 2439)  
Total payments. Add lines 55 thru 61

---

If line 62 is larger than line 54, amount OVERPAID  
Amount of line 63 to be REFUNDED TO YOU

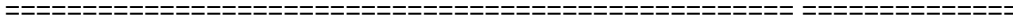
Amt of ln 63 to be applied to your 1991 est tax  
If line 55 is larger than line 63, AMOUNT YOU OWE  
Penalty from {Form 2210}  
Enter penalty from Form 2210F, if used ----->  
Amt of penalty from {Form 2210}/Form 2210F

---

Sheet1

ZIP code ----->[

E.I. No. ----->



2050

	#VALUE!
You were 65 or older ----->	0
You were blind ----->	0
Spouse was 65 or older ----->	0
Spouse was blind ----->	0
Total # of 1's entered above	0

0  
#VALUE!

0

0  
#VALUE!  
0  
#VALUE!

0

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Amount  
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Amt ---> 0  
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Amount  
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]<--- Enter your occupation

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If self-employed,

0 < Enter 1

]  
]

]

=====

3250

5450

2725

4750

SCHEDULE A  
(FORM 1040)

ITEMIZED DEDUCTIONS  
OMB NO. 1545-0074

\*\*\*\*\* MEDICAL AND DENTAL EXPENSES \*\*\*\*\*

- 1
- 2
- 3
- 4

\*\*\*\*\* TAXES YOU PAID \*\*\*\*\*

5

- 6
- 7

8

\*\*\*\*\* INTEREST YOU PAID \*\*\*\*\*

9a

b

10

11

12a

b

13

\*\*\*\*\* GIFTS TO CHARITY \*\*\*\*\*

14

15

16

17

\*\*\*\*\* CASUALTY AND THEFT LOSSES \*\*\*\*\*

18

\*\*\*\*\* MOVING EXPENSES \*\*\*\*\*

19

\*\*\*\*\* JOB EXPENSES & MOST OTHER MISCELLANEOUS DEDUCTIONS \*\*\*\*\*

20

21

22

23

24

25

\*\*\*\*\* OTHER MISCELLANEOUS DEDUCTIONS \*\*\*\*\*

26

\*\*\*\*\* TOTAL ITEMIZED DEDUCTIONS \*\*\*\*\*

27

\*\*\*\*\*

END OF Sched A

imprt31

Enter 1 if filing this sched --->		0
Medical and dental expenses.....	..(1)	0
Amount from line 32, {Form 1040}.....	..(2)	#VALUE!
Multiply ln 2 by 7.5% (.075).....	..(3)	#VALUE!
Line 1 less line 3. Not less than zero.....	..(4)	#VALUE!
State and local income taxes.....	..(5)	0
You - State & local income tax withheld {W-2}		0
You - Adjustments		0
Spouse - State & local income tax withheld {W-2}		0
Spouse - Adjustments		0
Real estate taxes.....	..(6)	0
Other taxes (list -- include personal property taxes)		
_____	..(7)	0
Add lines 5 thru 7.....	..(8)	0
Deductible home mortgage interest (from Form 1098) paid to financial institutions. Report ded pts on ln 10....	.(9a)	0
Other ded home mort int. (If to individual, list name & address)		
_____	.(9b)	0
Deductible points. (See instructions.).....	.(10)	0
Deductible investment interest.....	.(11)	0
Personal interest you paid.....	(12a)	0
Multiply amt on line 12a by 10% (.10).....	(12b)	0
Add lines 9a thru 11, & 12b.....	.(13)	0
Contributions by cash or check.....	.(14)	0
Other than cash. (You MUST att Form 8283 if over \$500)	.(15)	0
Carryover from prior year.....	.(16)	0
Add lines 14 thru 16.....	.(17)	0
Casualty or theft loss(es) (attach Form 4684).....	.(18)	0
Moving Expenses {Form 3903}.....	.(19)	0
Unreimbursed employee expenses (job trvl, union dues, etc)		
Business expenses - {Form 2106-YOU}		0
Business expenses - {Form 2106-SPOUSE}		0
List below and enter amount not on Form 2106 here --->		0
_____	.(20)	0
Other expenses (list type and amount)		
_____	.(21)	0
Add lines 20 & 21.....	.(22)	0



Sheet1

Amount from line 32, {Form 1040}.....	.(23)	#VALUE!
Multiply In 23 by 2% (.02).....	.(24)	#VALUE!
Line 22 less line 24. (Not less than zero).....	.(25)	#VALUE!

Other (from list on pg 30, inst) List type & amt		
<hr/>	.(26)	0

Add Ins 4, 8, 13, 17, 18, 19, 25, & 26. (To Form 1040)	.(27)	#VALUE!
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\*\*\*\*\*

/xchdst~  
 /ppouqar31-01~g  
 rthead~g  
 r31-02~g  
 r31-03~g  
 r31-04~g  
 rpfoot~gpg  
 /xr~  
 Form 1040 tax computation

	#VALUE!	#VALUE!
Single		#VALUE!
Sch/Tab		#VALUE!
Exess		#NAME?
Jnt		#VALUE!
Sch/Tab		#VALUE!
Exess		#NAME?
Sep		#VALUE!
Sch/Tab		#VALUE!
Exess		#NAME?
Head		#VALUE!
Sch/Tab		#VALUE!
Exess		#NAME?

Please wait. Saving file.

SPECIAL PRINT NOTICE

The worksheet you have selected can not be printed in a format suitable for submission to the IRS. To print this worksheet, use the Print, Screen menu option.

Press [RETURN] to continue.

TAXAIDE  
SHAREWARE NOTICE

The form you have selected is not available in the shareware version of TaxAide. Order the regular version of TaxAide for the full compliment of forms.

Press RETURN to continue....

SCHEDULE B  
(FORM 1040)

OMB NO. 1545-0074

\*\*\*\*\* PART I - INTEREST INCOME \*\*\*\*\*

1

2

3

4

\*\*\*\*\* PART II - DIVIDEND INCOME \*\*\*\*\*

5

6

7

8

9

10

\*\*\*\*\* PART III - FOREIGN ACCOUNTS AND FOREIGN TRUSTS \*\*\*\*\*

11a

b

12

\*\*\*\*\*

END OF Sched B  
imprt132

This option allows you to save/retrieve up to nine different TaxAide returns. Each return occupies approximately 260K of disk space. When saving a return enter appropriate identification information for each TaxAide income tax return used. The return will be saved under the filename (TAXAIDE1-9) based upon the number you select below.

Type the number corresponding to the desired file name and

Interest income. (List name of payer, if from seller-financed mortgages, list first)

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Add amounts on line 1.....

Excludable savings bond interest from ln 14 {Form 8815}

Line 2 less line 3. Goes to Form 1040, ln 8a.....

Dividend income. (List name of payer - include capital gain dist, nontaxable dist, etc.)

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Add amounts on line 5.....

Capital gain distributions (Goes to Sched D, line 13)..

Nontaxable distributions.....

Add lines 7 and 8.....

Line 6 minus line 9 (Goes to line 9, Form 1040).....

In 1990, did you have an interest in or a signature or other authority over a bank account, securities account, or other financial account in a foreign country? ----->

If yes, enter country ----->

Were you the grantor of, or transferor to, a foreign

trust which existed during 1990 whether or not you  
have any beneficial interest in it? ----->

\*\*\*\*\*

/xchdst~  
/ppouqar32-01~g  
rphed~g  
r32-02~g  
rpfot~gpg  
/xr~

SAVING/RETRIEVING TAXAIDE INCOME TAX RETURNS TO HARD DISK

# File name

- 1 - TAXAIDE1
- 2 - TAXAIDE2
- 3 - TAXAIDE3
- 4 - TAXAIDE4
- 5 - TAXAIDE5
- 6 - TAXAIDE6
- 7 - TAXAIDE7
- 8 - TAXAIDE8
- 9 - TAXAIDE9

INTEREST AND DIVIDEND INCOME

1990 \* 08

Enter 1 if filing this sched --->

0

Amount

.(1)	0
.(1)	0
.(1)	0
.(1)	0
.(1)	0
.(1)	0
.(1)	0
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.(5)	0
.(5)	0
.(6)	0
.(7)	0
.(8)	0
.(9)	0
(10)	0

(Yes or No)

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ID info

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press [RETURN], then press [ESC] ----->



NOTICE NOTICE NOTICE NOTICE

You did not enter a valid file number....

Press enter to continue.....

SCHEDULE D  
(FORM 1040)

\*\*\*\*\*

1 Tot sales/stocks, bonds, etc & real est/Forms 1099-B&S..(1)

\*\*\*\*\* PART I - SHORT-TERM CAPITAL GAINS AND LOSSES \*\*\*\*\*

(a)

Dscrp of  
Property

2a Stocks, Bonds, etc, and Real Est Trans

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2b Amt/Sched D-1 (att), In 2b.....

2c Tot (col (d), Ins 2a & b)...(2c)

2d Other Transactions. (Report 1099-S on line 2a.)

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3 S-term gain/sale or exch of home {Form 2119}...(3)

4 Short-term gain from install sales/Form 6252...(4)

5 Net short-term gain/(loss) partn/S corp/fiduc..(5)

6 Short-term loss carryover.....(6)

7 Add Ins 2a, 2b, 2d, & 3 thru 6, cols (f) & (g).(7)

8 Net short-term gain/(loss), combine col (f) & (g) In 7..(8)

\*\*\*\*\* PART II - LONG TERM CAPITAL GAINS AND LOSSES \*\*\*\*\*

(a)

Dscrp of  
Property

9a Stocks, Bonds, Other Securities, and Real Estate

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9b Amt/Sched D-1 (att), In 9b.....

9c Tot (col (d), Ins 9a & b)...(9c)

9d Other Transactions. (Report 1099-S on line 9a.)

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- 
- 10 L-term gain/sale or exch of home {Form 2119}..(10)
  - 11 Long-Term gain from install sales/Form 6252...(11)
  - 12 Net long-term gain/(loss) partn/S corp/fiduc..(12)
  - 13 Capital gain distributions {Sched B}.....(13)
  - 14 Gain from Form 4797, line 7 or 9.....(14)
  - 15 Long-term loss carryover.....(15)
  - 16 Add lns 9a, 9b, 9d, & 10-15, cols (f) & (g)...(16)
  - 17 Net long-term gain/(loss), combine col (f) & (g) ln 16.(17)
- \*\*\*\*\*

SCHEDULE D (con't) PG 2  
(Form 1040)

\*\*\*\*\* PART III - SUMMARY OF PARTS I & II \*\*\*\*\*

- 18 Combine lines 8 & 17. If gain, goes to Form 1040.....(18)
  - 19 If ln 18 is loss, smaller of ln 18 or \$3,000 or \$1,500.(19)
- \*\*\* PART IV - FIGURE YOUR CAPITAL LOSS CARRYOVERS FROM 1990 TO 1991 \*\*\*\*

Section A. -- Carryover Limit

- 20 Taxable income {Form 1040, ln 37}.....(20)
- 21 Loss on ln 19.....(21)
- 22 Amount from {Form 1040, ln 36}.....(22)
- 23 Combine lines 20, 21, & 22. (Not less than zero).....(23)
- 24 Smaller of line 21 or line 23.....(24)

Section B. -- Short-Term Capital Loss Carryover

- 25 Loss shown on line 8.....(25)
- 26 Gain shown on line 17.....(26)
- 27 Amount on line 24.....(27)
- 28 Add lines 26 & 27.....(28)
- 29 S-term cap loss carryover to 91. Ln 25 less ln 28.....(29)

Section C. -- Long-Term Capital Loss Carryover

- 30 Loss shown on line 17.....(30)
- 31 Gain shown on line 8.....(31)
- 32 Amount on line 24.....(32)
- 33 Amount on line 25.....(33)
- 34 Ln 32 less ln 33. Not less than zero.....(34)
- 35 Add lines 31 & 34.....(35)
- 36 L-term cap loss carryover to 91. Ln 30 less ln 35.....(36)

\*\*\*\*\* PART V - ELECTION NOT TO USE INSTALLMENT METHOD \*\*\*\*\*

- 37 Enter X if elected ----->
- 38 Enter face amount of note or obligation.....
- 39 Enter percentage of valuation of note. (Enter as decimal)..

\* PART VI - RECONCILIATION OF FORMS 1099-B FOR BARTERING TRANSACTIONS \*\*

- 40 Form 1040, line 22.....(40)
- 41 Schedule C (Form 1040).....(41)
- 42 Schedule D (Form 1040).....(42)
- 43 Schedule E (Form 1040).....(43)
- 44 Schedule F (Form 1040).....(44)
- 45 Other (identify) (if not taxable, indicate reason -- attach

add'l sheets)

46 Total (add lines 40 thru 45).....(46)

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END OF Sched D

imprt35

CAPITAL GAINS AND LOSSES

OMB NO. 1545-0074

Enter 1 if filing this sched --->

\*\*\*\*\*

(b) Date aquired mm/dd/yy	(c) Date sold mm/dd/yy	(d) Sales price	(e) Cost or basis
_____	_____	0	0
_____	_____	0	0
_____	_____	0	0
_____	_____	0	0
_____	_____	0	0
_____	_____	0	0
_____	_____	0	0
_____	_____	0	0
_____	_____	0	0
_____	_____	0	0
_____	_____	0	0
_____	_____	0	0
_____	_____	0	0
_____	_____	0	0
_____	_____	0	0

(b) Date aquired mm/dd/yy	(c) Date sold mm/dd/yy	(d) Sales price	(e) Cost or basis
_____	_____	0	0
_____	_____	0	0
_____	_____	0	0
_____	_____	0	0
_____	_____	0	0
_____	_____	0	0
_____	_____	0	0
_____	_____	0	0
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_____	_____	0	0

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Schedule D continued on page 2

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/ppoouqar35-01~g  
rphed~g  
r35-02~g  
r35-03~g  
rpfot~gp  
r35-04~g  
rphed~g  
r35-05~gpq  
/xr~

PT IV TEST  
IV B TEST  
IV C TEST

1            990 \* 12A

0

\*\*\*\*\*

0

(f)	(g)
LOSS:	GAIN:
(e)	(d)
less (d)	less (e)

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0	0
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0	0
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////////////////////////////////////

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////////////////////////////////////	0
////////////////////////////////////	0
0	0
0 //////////////////////////////////////	0
0	0
	0

(f)	(g)
LOSS:	GAIN:
(e)	(d)
less (d)	less (e)

0	0
0	0
0	0
0	0
0	0
0	0
0	0
0	0
0	0

////////////////////////////////////

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////////// 0
////////// 0
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////////// 0
      0//////////
      0      0
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1            990 \* 12A

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(45) 0  
0

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SCHEDULE R CREDIT FOR THE ELDERLY OR THE DISABLED  
(FORM 1040) OMB NO.1545-0074

Enter 1 if filing this sched --->

\*\*\*\*\*

PART I - Filing Status and Age At End of 1990 Enter X for only ONE answer

Single You were 65 or older 1. ( )  
You were under 65, & retired on disability 2. ( )

-----  
Both spouses 65 or older 3. ( )  
Married Both under 65, one spouse retired on disab 4. ( )  
Filing Both under 65, both retired on disability 5. ( )  
Jointly One 65 or older, one under 65 on disab ret 6. ( )  
One 65 or older, one und 65 NOT on disab ret 7. ( )

-----  
Married You 65 or older & not live w/spouse in '90 8. ( )  
Filing Sep You under 65, dis ret & did not live w/spouse 9. ( )

-----  
Enter number corresponding to answer given above ----->

\*\*\*\*\*

PART II - Disability Statement

1 If statement filed in 1983 or earlier year, or after 1983 with Box B checked by physician, AND  
2 you were unable to work in 1990, enter X ----->( )

Physician's Statement

I certify that \_\_\_\_\_

Name of disabled person

was permanently and totally disabled on January 1, 1976, or January 1, 1977, OR was permanently and totally disabled on the date he or she retired. Date retired if retired after December 31, 1976: \_\_\_\_\_

Physician: Sign your name on either line A or B below & check box.

A. Disability has lasted, or can be expected to last continuously for at

least a year. \_\_\_\_\_

Physician's signature Date

B. There is no reasonable probability that the disabled condition will

ever improve. \_\_\_\_\_

Physician's signature Date

\*\*\*\*\*

Schedule R continued on page 2

SCHEDULE R (con't) PG 2

\*\*\*\*\*

PART III - Figure Amount of Credit

- 10 \$5,000; \$7,500; or \$3,750.....(10)
- 11 Taxable disability income (see form & instructions).....(11)
- 12 Smaller of line 10 or 11.....(12)
- 13 Enter the following pensions, annuities, & disability amounts received in 1990
  - a Nontaxable pt of soc sec & RR retirement benefits....(13a)
  - b Nontaxable pt of veteran's pensions & other benefits excluded from income.....(13b)
  - c Add lines 13a and 13b.....(13c)
- 14 Amount from line 32, {Form 1040}.....(14)
- 15 \$7,500; \$10,000; or \$5,000.....(15)
- 16 Line 14 less line 15, not less than zero.....(16)
- 17 Divide line 16 by 2.....(17)
- 18 Add lines 13c and 17.....(18)
- 19 Line 12 less line 18.....(19)

\*\*\*\*\* CHECK \*\*\*\*\*

If line 19 is ERR, you cannot take credit. Otherwise, continue.

20 Percentage used to figure credit.....(20)

Multiply line 19 by 15%. PRELIMINARY CREDIT.....

\*\*\*\*\* CHECK \*\*\*\*\*

If NA displays here it indicates that you are filing -----> Schedule C, D, E, or F and line 23, {Form 1040} is above the specified amount for your filing status. Complete FM6251 thru line 15 and return to Sched R and worksheet below will complete.

- a Amount from line 40 less line 41, {Form 1040}
  - b Amount from line 15, {Form 6251}
  - c Line a less line b. MAXIMUM CREDIT (not less than zero)
- Amount on line 21 is smaller of preliminary credit or line c.

21 Multiply line 19 by 15% (.15). (Goes to Form 1040).....(21)

\*\*\*\*\*

END OF Sched R

imprt39

/xchdst~  
 /ppouqar39-01~g  
 rthead~g  
 r39-02~g  
 r39-07~g  
 rpfoot~gp  
 r39-03~g  
 rthead~g  
 r39-04~g  
 r39-05~g  
 r39-06~gpg  
 /xr~

Sheet1

1990 \* 16 SCHEDULE SE SOCIAL SECURITY SELF-EMPLOYMENT TAX 1990 \* 17  
 (Form 1040) OMB No. 1545-0074

0 Sched SE-YOU

\*\*\*\*\* Enter 1 if using Sect A or 2 if using Sect B of this sched --> 0

Section A - Short Schedule SE

1 Net farm profit or (loss) from {Sched F} 0  
 ) Net farm profit or (loss) from Schedule K-1, In 15a 0  
 ) 1 Net profit or (loss) from Schedule F, In 36, & farm  
 ----- partnerships, Schedule K-1 (Form 1065), In 14a.....(1) 0  
 ) 2 Net profit or (loss) from {Sched C-YOU} 0  
 ) Net profit/(loss) - Sched K-1, In 15a, & other income 0  
 ) 2 Net profit/(loss) from Schedule C (1040), In 29, &  
 ) Schedule K-1 (1065), In 15a.....(2) 0  
 ) 3 Add lines 1 and 2.....(3) 0  
 ----- 4 Mult In 3 by .9235. If less than \$400 do NOT file sched.(4) 0  
 ) \*\*\*\*\* CHECK \*\*\*\*\*  
 ) If ERR is display here, -----> 0  
 ----- line 3 is less than \$400 and this schedule should not be filed.  
 0 5 Max amt of wages & earnings subject SS or RR ret tax....(5) 51300  
 \*\*\*\*\* Social Security wages {W-2} 0  
 RRTA compensation 0  
 6 Total W-2 social security wages & RRTA compensation....(6) 0  
 7 Line 5 less line 6. If zero or less, do not file sched..(7) 0  
 ) \*\*\*\*\* CHECK \*\*\*\*\*  
 If ERR is display here, -----> 0  
 line 7 is less than zero and this schedule should not be filed.  
 8 Smaller of line 4 or line 7.....(8) 0  
 9 Rate of tax.....(9) X .153  
 10 Self-employment tax. (Goes to Form 1040).....(10) 0

Schedule SE continued on page 2

SCHEDULE SE (con't) PG 2 1990 \* 17

Section B - Long Schedule SE

A If you are a minister, member of a religious order, or Christian  
 Science practitioner, AND you filed Form 4361, but you had \$400 or  
 more of OTHER earnings subject to self-employment tax, continue with

A ( ) Part I and enter X here -----> \_\_\_\_\_

B If only earnings subject to self-employment tax were from a church  
 or church controlled organization that is exempt from employer SS  
 taxes and you are not a minister or a member of a religious order,  
 skip lines 1-4b. Enter 0 on line 4c and go on to line 6a.

B ( ) NOTE: If you meet conditions in B, enter 1 -----> 0

\*\*\*\*\* PART I - SOCIAL SECURITY SELF-EMPLOYMENT TAX \*\*\*\*\*

1 Net farm profit or (loss) from {Sched F} 0  
 Net farm profit or (loss) from Schedule K-1, In 15a 0  
 1 Net profit or (loss) from Schedule F, In 36, & farm  
 partnerships, Schedule K-1 (Form 1065), In 15a.....(1) 0

Sheet1

	2	Net profit or (loss) from {Sched C-YOU}	0
		Net profit/(loss) - Sched K-1, ln 15a, & other income	0
1990 * 17	2	Net profit/(loss) from Schedule C (1040), ln 29, &	
*****		Schedule K-1 (1065), ln 15a.....(2)	0
	3	Combine lines 1 & 2.....(3)	0
	0	4a Ln 3 times .9235 or amt from ln 3.....(4a)	0
	0	b If optional method(s) elected, ln 12 plus ln 14.....(4b)	0
	0	c Comb lns 4a & b. If less than \$400 do not file sched..(4c)	0
		Exception: if you are an employee of an electing church,	
		enter 1, and complete this schedule ----->	0
	0	***** CHECK *****	
		If ERR is displayed do not file this schedule ----->	0
		0 values will not transfer to Form 1040	
	0	5 Max amt of wages & earnings subject SS or RR ret tax....(5)	51300
#VALUE!		Social Security wages {W-2}	0
	0	RRTA compensation	0
#VALUE!	6a	Total W-2 social security wages & RRTA compensation....(6a)	0
#VALUE!	b	Unreported tips subject to SS (Form 4137) or RRTA tax..(6b)	0
#VALUE!	c	Add lines 6a and 6b.....(6c)	0
#VALUE!	7a	Line 5 less line 6c. If zero or less do not file sched.(7a)	0
		***** CHECK *****	
		If ERR is displayed, ln 7a <0, do NOT file this schedule ----->	0
		X.15 values will not transfer to Form 1040	
#VALUE!	b	W-2 wages of \$100 or more from church or church org....(7b)	0
	c	Mult ln 7b by .9235 (if less than \$100, 0).....(7c)	0
	0	d Add lines 4c and 7c.....(7d)	0
	8	Smaller of line 7a or line 7d.....(8)	0
	9	Medicare qualified government wages.....(9)	0
	10	Self-employment tax. Goes to Form 1040.....(10)	0
	0	***** PART II - OPTIONAL METHOD TO FIGURE NET EARNINGS *****	
	0	11 Maximum income for optional methods.....(11)	1600
	0	12 If electing Farm Optional Method (see Tests A & B on	
		IRS Schedule SE), enter 1 (one) here ----->	0
#VALUE!		2/3 gross farm income {Sched F}	0
*****		2/3 line 14b, Schedule K-1	0
	12	Farm Optional Method - smaller of 2/3 gross income from	
		Schedule F (1040), ln 11, and farm partnerships,	
		Schedule K-1 (1065), ln 15b; or \$1,600.....(12)	0
	13	Subtract line 12 from line 11.....(13)	0
	14	If electing Non-Farm Optional Method (see Test C on IRS	
		Schedule SE), enter 1 (one) here ----->	0
		2/3 gross non-farm income {Sched C-YOU}	0
		2/3 line 14c, Schedule K-1	0
	14	Non-Farm Optional Method - smallest of 2/3 gross income	
		from Schedule C (1040), ln 7, and Schedule K-1 (1065),	
		ln 15c (other than farming); or \$1,600; or amount on	
		ln 13 if Farm Optional Method was selected.....(14)	0
		*****	
		END OF Sched SE-YOU	

SCHEDULE SE SOCIAL SECURITY SELF-EMPLOYMENT TAX 1990 \* 17  
 (Form 1040) OMB No. 1545-0074  
 Sched SE-SPOUSE

Enter 1 if using Sect A or 2 if using Sect B of this sched --> 0

NOTE - This schedule SE is for use if your spouse had separate business income for which social security tax must be paid. Since two Schedules C are provided (YOU & SPOUSE) this second Schedule SE is provided for the computation of social security tax with transfer of information from Sched C-SPOUSE. Since one Schedule F is provided, computation involving Schedule F is performed ONLY on Sched SE-YOU NOT Sched SE-SPOUSE.

\*\*\*\*\*

Section A - Short Schedule SE

- 1 Net farm profit or (loss) from {Sched F} NOT USED
- Net farm profit or (loss) from Schedule K-1, In 15a 0
- 1 Net profit or (loss) from Schedule F, In 36, & farm partnerships, Schedule K-1 (Form 1065), In 14a.....(1) 0
- 2 Net profit or (loss) from {Sched C-SPOUSE} 0
- Net profit/(loss) - Sched K-1, In 15a, & other income 0
- 2 Net profit/(loss) from Schedule C (1040), In 29, & Schedule K-1 (1065), In 15a.....(2) 0
- 3 Add lines 1 and 2.....(3) 0
- 4 Mult In 3 by .9235. If less than \$400 do NOT file sched.(4) 0

\*\*\*\* CHECK \*\*\*\*

If ERR is display here, -----> 0

line 3 is less than \$400 and this schedule should not be filed.

- 5 Max amt of wages & earnings subject SS or RR ret tax....(5) 51300
- Social Security wages {W-2} 0
- RRTA compensation 0
- 6 Total W-2 social security wages & RRTA compensation.....(6) 0
- 7 Line 5 less line 6. If zero or less, do not file sched..(7) 0

\*\*\*\* CHECK \*\*\*\*

If ERR is display here, -----> 0

line 7 is less than zero and this schedule should not be filed.

- 8 Smaller of line 4 or line 7.....(8) 0
- 9 Rate of tax.....(9) X .153
- 10 Self-employment tax. (Goes to Form 1040).....(10) 0

\*\*\*\*\*

Schedule SE continued on page 2

SCHEDULE SE (con't) PG 2 1990 \* 17

\*\*\*\*\*

Section B - Long Schedule SE

A If you are a minister, member of a religious order, or Christian Science practitioner, AND you filed Form 4361, but you had \$400 or more of OTHER earnings subject to self-employment tax, continue with Part I and enter X here ----->

B If only earnings subject to self-employment tax were from a church or church controlled organization that is exempt from employer SS taxes and you are not a minister or a member of a religious order, skip lines 1-4b. Enter 0 on line 4c and go on to line 6a.

Sheet1

NOTE: If you meet conditions in B, enter 1 ----->	0
***** PART I - SOCIAL SECURITY SELF-EMPLOYMENT TAX *****	
1 Net farm profit or (loss) from {Sched F}	NOT USED
Net farm profit or (loss) from Schedule K-1, In 15a	0
1 Net profit or (loss) from Schedule F, In 36, & farm partnerships, Schedule K-1 (Form 1065), In 15a.....(1)	0
2 Net profit or (loss) from {Sched C-SPOUSE}	0
Net profit/(loss) - Sched K-1, In 15a, & other income	0
2 Net profit/(loss) from Schedule C (1040), In 29, & Schedule K-1 (1065), In 15a.....(2)	0
3 Combine lines 1 & 2.....(3)	0
4a Ln 3 times .9235 or amt from In 3.....(4a)	0
b If optional method(s) elected, In 12 plus In 14.....(4b)	0
c Comb lns 4a & b. If less than \$400 do not file sched..(4c)	0
Exception: if you are an employee of an electing church, enter 1, and complete this schedule ----->	0
***** CHECK *****	
If ERR is displayed do not file this schedule ----->	0
values will not transfer to Form 1040	
5 Max amt of wages & earnings subject SS or RR ret tax....(5)	51300
Social Security wages {W-2}	0
RRTA compensation	0
6a Total W-2 social security wages & RRTA compensation....(6a)	0
b Unreported tips subject to SS (Form 4137) or RRTA tax..(6b)	0
c Add lines 6a and 6b.....(6c)	0
7a Line 5 less line 6c. If zero or less do not file sched.(7a)	0
***** CHECK *****	
If ERR is displayed, In 7a <0, do NOT file this schedule ----->	0
values will not transfer to Form 1040	
b W-2 wages of \$100 or more from church or church org....(7b)	0
c Mult In 7b by .9235 (if less than \$100, 0).....(7c)	0
d Add lines 4c and 7c.....(7d)	0
8 Smaller of line 7a or line 7d.....(8)	0
9 Medicare qualified government wages.....(9)	0
10 Self-employment tax. Goes to Form 1040.....(10)	0
***** PART II - OPTIONAL METHOD TO FIGURE NET EARNINGS *****	
11 Maximum income for optional methods.....(11)	1600
12 If electing Farm Optional Method (see Tests A & B on IRS Schedule SE), enter 1 (one) here ----->	0
2/3 gross farm income {Sched F}	0
2/3 line 14b, Schedule K-1	0
12 Farm Optional Method - smaller of 2/3 gross income from Schedule F (1040), In 11, and farm partnerships, Schedule K-1 (1065), In 15b; or \$1,600.....(12)	0
13 Subtract line 12 from line 11.....(13)	0
14 If electing Non-Farm Optional Method (see Test C on IRS Schedule SE), enter 1 (one) here ----->	0
2/3 gross non-farm income {Sched C-SPOUSE}	0
2/3 line 14c, Schedule K-1	0



Sheet1

14 Non-Farm Optional Method - smallest of 2/3 gross income  
from Schedule C (1040), In 7, and Schedule K-1 (1065),  
In 15c (other than farming); or \$1,600; or amount on  
In 13 if Farm Optional Method was selected.....(14) 0

\*\*\*\*\*

END OF Sched SE-SPOUSE

Please wait. Print preparation and printing in progress.

TaxAide

Be sure to read the installation instructions.

This software is licensed not sold.

Use of this software is subject to the terms and conditions contained in the Agreement.

Press [ALT]M to return to the TaxAide menu.

Press [ESC] to return to previous menu.

Copyright 1991 Software Applications of Wichita

Sheet1

Tax Schedules

Single

0	0.15	0
19450	0.28	2917.50
47050	0.33	10645.50
97620	0.28	27333.60

Married Jnt/Qual Widow

0	0.15	0
32450	0.28	4867.50
78400	0.33	17733.50
162770	0.28	45575.60

Married Separate

0	0.15	0
16225	0.28	2433.75
39200	0.33	8866.75
123570	0.28	36708.85

Head Household

0	0.15	0
26050	0.28	3907.50
67200	0.33	15429.50
134930	0.28	37780.40

Sheet1

SOCIAL SECURITY BENEFITS WORKSHEET

Enter 1 if using this worksheet -->

0

NOTE: Complete lines 7 thru 20, 22, and 30 on Form 1040.

Value

- 1 Single, Head of household, or Qual widow(er) with dep child
- 2 Married filing a joint return
- 3 Married filing a separate return and lived with your spouse at any time during the year
- 4 Married filing a separate return and DID NOT live with your spouse at any time during the year

Enter appropriate value number from above ----->

0

1 Tot amt from Box 5 of all forms SSA-1099. Goes to Form 1040.

0

\*\*\* If line 1 is zero, stop; none of your benefits are taxable \*\*\*

2 Divide line 1 by 2.....

0

3 Sum of lns 7 thru 20, & ln 22 (not 16a, 17a) {Form 1040}....

@SUM(163..179,H65,H87)

4 Add lines 2 and 3.....

#VALUE!

5 Amount from line 30, {Form 1040}.....

0

6 Subtract line 5 from line 4.....

#VALUE!

7 Amount based on value number entered above.....

0

8 Subtract line 7 from line 6 (not less than zero).....

#VALUE!

\*\*\*\*\* CHECK \*\*\*\*\*

If 0 becomes NA, line 8 is zero, stop here. ----->

#VALUE!

Benefits are not taxable.

9 Divide line 8 by 2.....

#VALUE!

10 Smaller of line 2 or line 9. (Goes to Form 1040).....

#VALUE!

\*\*\*\*\*

END OF Soc Sec Wksht

STANDARD DEDUCTION WORKSHEET FOR DEPENDENTS

Enter 1 if using this worksheet -->

0

1 Earned income.....

0

Adjustments to earned income.....

0

1 Net earned income.....

0

2 Minimum amount.....

500

3 Larger of line 1 or 2.....

500

4 Amount based on filing status or from chart.....

0

5a Smaller of lines 3 or 4.....

0

If you are 65 or older, or blind, enter 1 ----->

0

If you did NOT enter 1, ln 5a to Form 1040, otherwise ln 5c transfers

b Line 33a, {Form 1040} mult by \$800 or \$650.....

0

c Add lines 5a and 5b. Goes to Form 1040.....

0

\*\*\*\*\*

END OF Wksht for Dependents

EARNED INCOME CREDIT WORKSHEET

Enter 1 if using this worksheet --> 0

NOTE: See instructions on pg 23 to determine if credit can be taken.

1 Amt from line 7, {Form 1040} 0

2 Enter non-taxable earned income 0  
and NEI will print left of line 57, Form 1040

3 Add lines 1 & 2 0

4 Schedule SE, Sect A or B, ln 3 minus Form 1040 ln 25 0

NOTE: If using optional method on Sched SE see Pub 596 and  
enter amount for line 4 here -----> 0

Enter 1 if you were a statutory employee -----> 0

4 Amount for line 4 0

5 Earned income. Combine lines 3 & 4 0

\*\*\*\* If 0 changes to ERR, -----> #NAME?

ln 3 is zero or less, or more than \$20,264 & you cannot take the credit.

6 Adjusted gross income. Line 32, {Form 1040} #VALUE!

\*\*\*\*\* CHECK \*\*\*\*\*

If 0 changes to ERR, line 6 is \$20,264 or more,-----> #VALUE!

You cannot take credit.

7 Amt from table for ln 5 if ln 6 is less than \$10750  
(minus Alt. Min. Tax). (Goes to Form 1040)..... 0

6 Completed if line 6 is at least \$10,750

a Amt from table for line 5..... #VALUE!

b Amt from table for line 6..... #VALUE!

c Smaller of 6a or 6b. (Less Alt Min Tax). (Goes to Form 1040) 0

\*\*\*\*\*

END OF Earned Income Credit Wksht

EIC Table for line 5

0.01	12.5
0	1.75
6799.99	953
10750	2025.25
20250	1
	2

EIC Table for line 6

#VALUE!	#VALUE!
0	#VALUE!
6799.99	953
10750	#VALUE!
20250	1
	#VALUE!

IRA WORKSHEET 1

Enter 1 if using this worksheet -->

0

NOTE: Complete thru line 30, Form 1040 before completing IRA Worksheets.

If you (AND your spouse, if filing a joint return) were NOT covered by a retirement plan at work, enter 1 ---->

0

If you (OR your spouse, if filing a joint return) WERE covered by a retirement plan at work, enter 1 ----->

0

If you are married filing separately and did NOT live with your spouse in 1990, enter 1 ----->

0

Modified AGI = #VALUE!

\*\*\*\*\* CHECK \*\*\*\*\*

If NA is displayed, ----->  
data in your return indicates that you should not use this IRA Worksheet. Check IRA Worksheet 2.

#VALUE!

	You	Spouse
1 Contributions to 1990 IRA, not more than \$2,000.....	0	0
2 Earned inc less Ins 25 & 27 deductions (see instr)..	0	0
3 Smaller of lines 1 or 2.....	0	0
Amt of line 3 you choose to deduct. Goes to Form 1040.	0	0
If pmnts made to non-working spouse's IRA, enter 1 --> and continue lines 4 through 8.	0	
4 Smaller of line 2 or \$2,250.....	0	
5 Amount from line 3.....	0	
6 Line 4 less line 5.....	0	
7 Contributions made to 1990 nonworking spouse's IRA. DO NOT enter more than \$2,000.....	0	
8 Smaller of lines 6, or 7.....	0	
Amt of line 8 you choose to deduct. Goes to Form 1040.	0	

\*\*\*\*\*

END OF IRA Wksht 1

IRA WORKSHEET 2

Enter 1 if using this worksheet -->

0

NOTE: Complete thru line 30, Form 1040 before completing IRA Worksheets.

If you (OR your working spouse, if filing a joint return) WERE covered by a retirement plan at work, enter 1 -->

0

If you are married filing separately and did NOT live with your spouse in 1990, enter 1 ----->

0

Modified AGI = #VALUE!

\*\*\*\*\* CHECK \*\*\*\*\*

If NA is displayed, ----->  
data in your return indicates that you should not use this IRA Worksheet. Check IRA Worksheet 1.

#N/A



Sheet1

	You	Spouse
1 Amount based on filing status.....	#NAME?	0
2 Amount from line 23, {Form 1040}.....	#VALUE!	0
3 Lns 25 thru 29, & ln 30 write in amt {Form 1040}...	0	0
4 Line 2 less line 3.....	#VALUE!	0
***** CHECK *****		
If NA is displayed, -----> none of your contributions are deductible. See instructions.	#VALUE!	#N/A
5 Line 1 less line 4.....	#NAME?	0
***** CHECK *****		
If NA is displayed, stop here; complete Worksheet 1.->	#NAME?	0.00
6 Multiply ln 5 by 20%. Will be rounded up to mult of \$10. Will not be less than \$200.....	#NAME?	200
7 Enter earned income. (See instructions).....	0	0
8 Enter IRA contributions made to 1990 IRA, DO NOT enter more than \$2,000.....	0	0
9 Smallest of lines 6, 7, or 8.....	#N/A	#N/A
Amt of line 9 you choose to deduct. Goes to Form 1040.	0	0
10 Smaller of line 7 or 8 less line 9.....	#N/A	#N/A
Enter here and on Form 8606 amount of line 10 you choose to make nondeductible.....	0	0
If pmnts made to non-working spouse's IRA, enter 1 --> and continue lines 11 through 20.	0	
11 Smaller of line 7 or \$2,250.....	0	
12 Ln 9 plus nondeductible amount on line 10.....	0	
13 Line 11 less line 12.....	0	
***** CHECK *****		
If NA is displayed you cannot make deductible or nondeductible IRA contributions for your nonworking spouse ----->	#N/A	
14 Enter smallest of (a) IRA contributions made for 90 for nonworking spouse; (b) \$2000; or (c) amt on ln 13..	0	
15 Multiply ln 5 by 22.5%. Will be rounded up to mult of \$10. Will not be less than \$200.....	#NAME?	
16 Amount from line 9.....	0	
17 Line 15 less line 16.....	#NAME?	
18 Smaller of lines 14 or 17.....	#NAME?	
19 Smallest of lines 6, 7, or 18.....	#NAME?	
Amt of ln 19 you choose to deduct. Goes to Form 1040..	0	
20 Line 14 less line 19.....	#NAME?	
Enter here and on spouse's Form 8606 amt of ln 20 you choose to make nondeductible.....	0	
***** ***** *****		

END OF IRA Wksht 2

W-2 DATA INPUT WORKSHEET  
(Supports Form 1040 & Sched A)

	YOU	SPOUSE
Wages, tips, & compensation	0	0
Federal Income Tax Withheld	0	0
State & Local Income Tax Withheld	0	0

Sheet1

Advance EIC payment	0	0
-----		
Additional W-2 Information		
State wages, tips, etc.	0	0
Social security wages	0	0
Social security tax withheld	0	0
Allocated tips	0	0
=====		
END OF W-2 Data Input Wksht		

SCHEDULE C            PROFIT OR LOSS FROM BUSINESS  
(FORM 1040)  
Sched C-YOU

\*\*\*\*\*

A  
C

E  
F

G  
H  
I  
J

\*\*\* PART I - INCOME \*\*\*\*\*

1  
  
2  
3  
4  
5  
6  
7

\*\*\* PART II - EXPENSES \*\*\*\*\*

8  
9

10  
11  
12  
13

14  
15  
16  
a  
b  
17  
18  
19  
20  
a  
b

-----  
28  
29  
30  
a

b

-----

#####

SCHEDULE C (con't) Pg 2  
(Form 1040)

\*\*\* PART III - COST OF GOODS SOLD \*\*\*\*\*

- 31
- 32
- 33
- 34
- 35
- 36
- 37
- 38

\*\*\*\*\*

END OF Sched C-YOU  
imprt33

(SOLE PROPRIETORSHIP)  
 Enter 1 if filing this sched --->

\*\*\*\*\*

Business/Profession: \_\_\_\_\_  
 Name and Address: \_\_\_\_\_

Acct method: Enter from Schedule C ----->  
 Method(s) used to value closing inventory:  
 Enter method from Schedule C ----->  
 Was there any change in determining valuation? (Yes/No)  
 Deducting expenses for business use of home? (Yes/No)  
 Did you materially participate in 1990? (Yes/No)  
 If first Sched C filed for this business, enter X ----->

Gross receipts or sales. Caution: if this income was...(1)  
 rptd on W-2 & stat box checked, enter X ---->  
 Returns and allowances.....(2)  
 Line 1 less line 2.....(3)  
 Cost of goods sold {ln 38, pg 2}.....(4)  
 Line 3 less line 4. GROSS PROFIT.....(5)  
 Other income, incl fed, st, or fuel tax cred or refund.(6)  
 Add lines 5 & 6. GROSS INCOME.....(7)

Advertising.....	0 21
Bad debts from	22
sales or services....	0 23
Car/truck expenses...	0 24
Commissions & fees...	0  a
Depletion.....	0  b
Depreciation & 179	
deduction {Form 4562}	c
(not in Pt III).....	0
Empl benefit progs...	0  d
Insurance.....	0 25
Interest:	26
Mort to banks.....	0 27a
Other.....	0
Legal/prof'l serv....	0
Office expense.....	0
Pensn/profit-share...	0
Rent or lease:	
Machinery & equip....	0
Other business prop..	0 27b

-----  
 Add ln 8 thru 27b cols. Total Expenses.....(28)  
 Net profit or (loss) (line 7 less line 28).....(29)  
 If you have a loss, you MUST check appropriate line:  
 All investment is at risk. Enter X.....(30a)

Some investment is not at risk. Enter X.....(30b)

---

Schedule C continued on page 2

If you entered X in 30b enter a 1 (one) here ----->  
If you enter X in 32b and entered a 1, you must attach  
Form 6198. LOSS on line 29 will not transfer to Form 1040.  
If you entered X in 30a and did not enter 1, line 30  
profit (or loss) will transfer to Form 1040 & Sched SE-YOU.####

Inventory at beginning of yr (Explain if different)...(31)  
Purchases (less cost of personal items).....(32)  
Cost of labor (don't include own salary).....(33)  
Materials and supplies.....(34)  
Other costs.....(35)  
Add lines 31 through 35.....(36)  
Inventory at end of year.....(37)  
Cost of goods sold. Line 36 less line 37.....(38)

\*\*\*\*\*

/xccyssh~  
/rlc33-32x~  
/ppouqar33-01~g  
rphed~g  
r33-02~g  
rpfot~gp  
r33-03~g  
rphed~g  
r33-04~gpq  
/xr~

1990 \* 09

OMB 1545-0074

0

\*\*\*\*\*

B Bus Code: \_\_\_\_\_

D Emp ID #: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

0

\_\_\_\_\_

0

0

0

0

0

0

Repairs & maint..... 0

Supplies (not Pt III)... 0

Taxes & licenses..... 0

Trav, meals & enter.....

Travel..... 0

Meals and

entertainment..... 0

20% of line 24b subject

to limits (see instr) 0

Ln 24b less ln 24c..... 0

Utilities (see instr)... 0

Wages (less jobs cred).. 0

Other expenses (list)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Tot other expenses..... 0

-----

0

0

\_\_\_\_\_

-----

0

1990 \* 09

0  
0  
0  
0  
0  
0  
0  
0

\*\*\*\*\*

imprt40

/xccyssh~  
/ppouqar40-01~g  
rphed~g  
r40-02~g  
r40-03~g  
r40-04~g  
r40-05~g  
r40-06~g  
r40-07~g



Sheet1

rpfoot~gp  
r40-08~g  
rphead~g  
r40-09~g  
r40-10~g  
r40-11~g  
r40-12~g  
r40-14~g  
r40-15~g  
r40-16~g  
r40-17~g  
r40-18~gpq  
/xr~

SCHEDULE C      PROFIT OR LOSS FROM BUSINESS  
(FORM 1040)  
Sched C-SPOUSE

\*\*\*\*\*

A  
C

E  
F

G  
H  
I  
J

\*\*\* PART I - INCOME \*\*\*\*\*

1  
  
2  
3  
4  
5  
6  
7

\*\*\* PART II - EXPENSES \*\*\*\*\*

6  
7

10  
11  
12  
13

14  
15  
16  
a  
b  
17  
18  
19  
20  
a  
b

-----  
28  
29  
30  
a

b

-----

#####

SCHEDULE C (con't) Pg 2  
(Form 1040)

\*\*\* PART III - COST OF GOODS SOLD \*\*\*\*\*

- 31
- 32
- 33
- 34
- 35
- 36
- 37
- 38

\*\*\*\*\*

END OF Sched C-SPOUSE

imprt34

(SOLE PROPRIETORSHIP)  
 Enter 1 if filing this sched --->

\*\*\*\*\*

Business/Profession: \_\_\_\_\_  
 Name and Address: \_\_\_\_\_

Acct method: Enter from Schedule C ----->  
 Method(s) used to value closing inventory:  
 Enter method from Schedule C ----->  
 Was there any change in determining valuation? (Yes/No)  
 Deducting expenses for business use of home? (Yes/No)  
 Did you materially participate in 1990 (Yes/No)  
 If first Sched C filed for this business, enter X ----->

Gross receipts or sales. Caution: if this income was...(1)  
 rptd on W-2 & stat box checked, enter X ---->  
 Returns and allowances.....(2)  
 Line 1 less line 2.....(3)  
 Cost of goods sold {ln 38, pg 2}.....(4)  
 Line 3 less line 4. GROSS PROFIT.....(5)  
 Other income, incl fed, st, or fuel tax cred or refund.(6)  
 Add lines 5 & 6. GROSS INCOME.....(7)

Advertising.....	0
Bad debts from sales or services....	0
Car/truck expenses...	0
Commissions & fees...	0
Depletion.....	0
Depreciation & 179 deduction {Form 4562} (not in Pt III).....	0
Empl benefit progs...	0
Insurance.....	0
Interest:	
Mort to banks.....	0
Other.....	0
Legal/prof'l serv....	0
Office expense.....	0
Pensn/profit-share...	0
Rent or lease:	
Machinery & equip....	0
Other business prop..	0

-----  
 Add ln 8 thru 27b cols. Total Expenses.....(28)  
 Net profit or (loss) (line 7 less line 28).....(29)  
 If you have a loss, you MUST check appropriate line:  
 All investment is at risk. Enter X.....(30a)

Some investment is not at risk. Enter X.....(30b)

Schedule C continued on page 2

If you entered X in 30b enter a 1 (one) here ----->

If you enter X in 32b and entered a 1, you must attach Form 6198. LOSS on line 29 will not transfer to Form 1040.

If you entered X in 30a and did not enter 1, line 30 profit (or loss) will transfer to Form 1040 & Sched SE-SPOUSE.####

Inventory at beginning of yr (Explain if different)...(31)

Purchases (less cost of personal items).....(32)

Cost of labor (don't include own salary).....(33)

Materials and supplies.....(34)

Other costs.....(35)

Add lines 31 through 35.....(36)

Inventory at end of year.....(37)

Cost of goods sold. Line 36 less line 37.....(38)

\*\*\*\*\*

/xccssn~

/rlc34-32x~

/ppoouqar34-01~g

rphed~g

r34-02~g

rpfot~gp

r34-03~g

rphed~g

r34-04~gpq

/xr~

1990 \* 09

OMB 1545-0074

0

\*\*\*\*\* \*\*\*\*\*

B Bus Code: \_\_\_\_\_

D Emp ID #: \_\_\_\_\_

\_\_\_\_\_

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\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

0

0

0

0

0

0

0

|21 Repairs & maint..... 0

|22 Supplies (not Pt III)... 0

|23 Taxes & licenses..... 0

|24 Trav, meals & enter..... 0

| a Travel..... 0

| b Meals and entertainment..... 0

| c 20% of line 24b subject to limits (see instr) 0

| d Ln 24b less ln 24c..... 0

|25 Utilities (see instr)... 0

|26 Wages (less jobs cred).. 0

|27a Other expenses (list)

| \_\_\_\_\_

| \_\_\_\_\_

| \_\_\_\_\_

| \_\_\_\_\_

| \_\_\_\_\_

|27b Tot other expenses..... 0

-----

0

0

\_\_\_\_\_

-----

0

1990 \* 09

0  
0  
0  
0  
0  
0  
0  
0

\*\*\*\*\*

imprt41

/xccssn~  
/ppouqar41-01~g  
rphed~g  
r41-02~g  
r41-03~g  
r41-04~g  
r41-05~g  
r41-06~g  
r41-07~g

Sheet1

rpfoot~gp  
r41-08~g  
rphead~g  
r41-09~g  
r41-10~g  
r41-11~g  
r41-12~g  
r41-14~g  
r41-15~g  
r41-16~g  
r41-17~g  
r41-18~gpq  
/xr~



SCHEDULE E SUPPLEMENTAL INCOME AND LOSS  
(Form 1040)

\*\*\*\*\* PART I - INCOME OR LOSS FROM RENTALS AND ROYALTIES \*\*\*\*\*

1 Show kind & location of each rental property:

- A
  - B
  - C
- 

2 For each rental property, did you or your family use it

---

RENTAL AND ROYALTY INCOME

Enter 1 for RENTAL or

- 3 Rents received.....(3)
  - 4 Royalties recv'd .....(4)
- 

RENTAL AND ROYALTY EXPENSES

- 5 Advertising.....(5)
  - 6 Auto & travel.....(6)
  - 7 Cleaning/maintenance...(7)
  - 8 Commissions.....(8)
  - 9 Insurance.....(9)
  - 10 Legal/prof fees.....(10)
  - 11 Mort int to banks.....(11)
  - 12 Other interest.....(12)
  - 13 Repairs.....(13)
  - 14 Supplies.....(14)
  - 15 Taxes.....(15)
  - 16 Utilities.....(16)
  - 17 Wages/salaries.....(17)
  - 18 Other (list).....(18)
- 

- 19 Add lns 5 thru 18.....(19)
- 20 Depreciation expenses.(20)
- 21 Tot exp (ln 19 + 20)..(21)
- 22 Income or (loss).....(22)
- 23 Deductible rental loss.

24 Income. Add rental & royalty income from line 22.....(24)

Sheet1

25 Losses. Add royalty & rental losses (ln 22 & ln 23).....(25)

26 Tot rental & royalty income or (loss). Lns 24 & 25.....(26)

\*\*\*\*\*

imprt36

---

---

---

---

for personal purposes for more than the greater of 14 days or 10% of the total days rented during tax year?

---

2 for ROYALTY activity

---

---

---

---

---

---

ENTER NEGATIVE.....(23)

\*\*\*\*\*

Schedule E continued on page 2

/rlc22ll~  
/xchdst~  
/ppoouqar36-01~g  
rphed~g  
r36-02~g  
r36-03~g  
rpfoot~gp  
r37-01~g  
rphed~g  
r37-02~gpq/xr~

Enter 1 if filing this sched --->

0

--  
--  
--

Yes/No

A \_\_\_\_\_  
B \_\_\_\_\_  
C \_\_\_\_\_

Properties				Totals	
A	B	C			
	0	0	0		
	0	0	0   (3)		0
	0	0	0   (4)		0
	0	0	0   /// /	////////	
	0	0	0   /// /	////////	
	0	0	0   /// /	////////	
	0	0	0   /// /	////////	
	0	0	0   /// /	////////	
	0	0	0   (11)		0
	0	0	0   /// /	////////	
	0	0	0   /// /	////////	
	0	0	0   /// /	////////	
	0	0	0   /// /	////////	
	0	0	0   /// /	////////	
	0	0	0   /// /	////////	
	0	0	0   /// /	////////	
	0	0	0   (19)		0
	0	0	0   (20)		0
	0	0	0   /// /	////////	
	0	0	0   /// /	////////	
	0	0	0   /// /	////////	
	0	0	0   (19)		0

0  
0

\*\*\*\*\* \*\* \*\*\*\*\* \*\* \*\* \*\*\*\*\* \*\*\*\*\*

SCHEDULE E (con't) Pg 2  
(Form 1040)

\*\*\*\* PART II - INCOME OR (LOSS) FROM PARTNERSHIPS, & S CORPORATIONS \*\*\*\*

27

- A |
  - B |
  - C |
  - D |
  - E |
- 

28a Totals

b Totals

29 Add amts in cols (h) & (k), ln 28a.....(29)

30 Add amts in cols (g), (i), & (j), ln 28b.....(30)

31 Tot partnrshp/S corp income (loss). Comb lns 29 & 30.(31)

\*\*\*\*\* PART III - INCOME OR (LOSS) FROM ESTATES AND TRUSTS \*\*\*\*\*

32

- A |
- B |
- C |

33a Totals

b Totals

34 Add amts in cols (d) & (f), ln 33a.....(34)

35 Add amts in cols (c) & (e), ln 33b.....(35)

34 Tot estate & trust income (loss). Comb lns 34 & 35...(36)

\*\*\*\*\* PART IV - INCOME OR (LOSS) FROM REAL ESTATE MORTGAGE INVESTMENT

37

---

38 Combine cols (d) & (e) only.....(38)

Sheet1

\*\*\*\*\* PART V - SUMMARY \*\*\*\*\*

39 Net farm rental income/(loss) from Form 4835.....(39)

40 TOTAL income/(loss). Comb Ins 26, 31, 36, 38, & 39.

41 Gross farming & fishing income/Parts II, III & In 39.(41)

\*\*\*\*\*

END OF Sched E

- 1
- 2
- 3
- 4
- 5
- 6
- 7
- 8
- 9
- 10
- 11
- 12
- 13
- 14
- 15
- 16
- 17

Type number of selection (1-33), press [RETURN] then [ESC] >



(a) Name

---

---

---

---

---

---

A  
B  
C  
D  
E

---

---

---

CONDUITS (REMICS) --RESIDUAL HOLDER \*\*\*\*\*  
(a) Name

(Goes to Form 1040).....(40)

\*\*\*\*\*

- Form 1040 pg 1
- Form 1040 pg 2
- Form 2106-YOU
- Form 2106-SPOUSE
- Form 2119
- Form 2210
- Form 2210 Ann Inc Wksht
- Form 2441
- Form 3903
- RESERVED
- Form 4562-1
- Form 4562-2
- Form 4562-3
- Form 6251
- Form 8615
- Form 8814
- Form 8815

(b)  
Code  
(P/S)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

---

Passive Activities	
(g) Passive loss allowed	(h) Passive income
0	0
0	0
0	0
0	0
0	0
0	0
0	0
0	0
0	0
0	0

(a) Name

Passive Activities	
(c) Pass loss allwd	
A	0
B	0
C	0
	0

(b) Empl  
ID number

\_\_\_\_\_

\*\*\*\*\* \*\* \*\*\*\*\*

TAXAIDE FORMS, SCHEDULES, & WORKSHEETS

31  
32  
33  
34  
35  
36  
37  
38  
39  
40  
41  
51  
52  
53  
54  
55  
56

	(c) X if foreign partnrshp	(d) Empl ID number	All/Some not
	_____	_____	
	_____	_____	
	_____	_____	
	_____	_____	

Nonpassive Activities

	(i) Non-pass loss	(j) Sect 179 deduction
	0	0
	0	0
	0	0
	0	0
	0	0
	0	0
////////////////////	0	0

	(d) Pass income	(b) Emp ID #	(e) Ded or loss
		_____	
		_____	
		_____	
	0		0
	0		0
	0		0
	0	////////////////////	0
////////////////////			0

	(c) Excess inclusion	(d) Tx inc (net loss)
	0	0

\*\*\*\*\* \*\* \*\*\*\*\*

- Sched A
- Sched B
- Sched C-YOU
- Sched C-SPOUSE
- Sched D
- Sched E pg 1
- Sched E pg 2
- Sched F
- Sched R
- Sched SE-YOU
- Sched SE-SPOUSE
- Earned Income Credit Wksht
- IRA Wksht 1
- IRA Wksht 2
- Soc Sec Wksht
- Std Deduction Wksht for Dependents
- W-2 Data Input Wksht

1990 \* 13 SCHEDULE F FARM INCOME AND EXPENSES (Form 1040)

(e) & (f) \*\*\*\*\*

Investment at Risk? A Principal Product: \_\_\_\_\_

C Acct Meth-Cash/Accrual:

\_\_\_\_\_ E Prior yr elect include commodity cred loan as inc? (Yes/No)

\_\_\_\_\_ F "Materially participate" in ops of business? (Yes/No)

\_\_\_\_\_ G Elect to currently deduct preprod per exp? (Yes/No/Not app)

\_\_\_\_\_ \*\*\*\*\* PART I - FARM INCOME - CASH METHOD \*\*\*\*\*

\_\_\_\_\_ If you are using the CASH METHOD enter a 1 (one); or, ----- if you are using the ACCRUAL METHOD, enter a 2. Enter here-->

(k) 1 Sales of livestock and other items bought for resale...(1)

Non-pass 2 Cost of livestock and other items bought for resale....(2)

income 3 Subtract line 2 from line 1.....(3)

4 Sales of livestock, produce, grains and prod raised....(4)

0 5a Tot coop dist....(5a)

0 6a Tot ag prog pmts..(6a)

0 7 Commodity Credit Corporation (CCC) loans:

0 a CCC loans reported under election.....(7a)

0 b CCC loans forfeited

0 or repd w/cert....(7b)

////////// 8 Crop insurance proceeds & certain disaster payments:

0 a Amt rcvd in 1990..(8a)

0 c If deferred to 91, enter X -->

0 9 Custom hire (machine work) income.....(9)

10 Other income, incl Fed & state gas tax credit/refund..(10)

11 Add lines 3 thru 10, right col.; or accrual method

amount from Page 2, line 51. GROSS INCOME.....(11)

\*\*\*\*\* PART II - FARM EXPENSES - CASH AND ACCRUAL METHOD \*\*\*\*\*

12 Breeding fees.....

13 Chemicals.....

(f) Other 14 Conservation exp.

income (att Form 8645).....

0 15 Cust hire (mach wk)...

0 16 Depreciation and

0 section 179 expense

0 deduction {Form 4562}.

////////// 17 Empl benefit progs

0 other than ln 25.....

0 18 Feed purchased.....

0 19 Fertilizers & lime.....

20 Freight & trucking....

21 Gas, fuel, & oil.....

(e) Income 22 Insurance (not health)

23 Interest:

0 a Mortgage (pd to banks)

0 b Other.....

-----  
0 35 Add lns 12 thru 34e. Total expenses.....(35)

36 Net farm profit or (loss)(line 11 less line 35).....(36)

0 37 If you have a loss, you MUST mark appropriate line:

0 a All investment is at risk. Enter X.....(37a)

\*\*\*\*\* b Some investment is not at risk. Enter X.....(37b)

\*\*\*\*\*

Schedule F continued on page 2

###If you entered X in 37b, enter 1 (one) here----->

If 1 is entered, loss will not transfer to Form 1040 or Sched SE-YOU,  
otherwise loss goes to Form 1040, line 18 and Sched SE-YOU, line 1

SCHEDULE F (con't) Page 2

(Form 1040)

\*\*\*\*\* PART III - FARM INCOME -- ACCRUAL METHOD \*\*\*\*\*

38 Sales of livestock, produce, grains, & products.....(38)

39a Tot coop dist...(39a)

40a Tot ag prog pmts.(40a)

41 Commodity Credit Corporation (CCC) loans:

a CCC loans under election (see instructions).....(41a)

b CCC loans foreited

or repd w/cert...(41b)

42 Crop insurance proceeds.....(42)

43 Custom hire (machine work) income.....(43)

44 Other income, incl Fed & state gas tax cred or ref....(44)

45 Total. Add lines 38 thru 44, right col.....(45)

46 Inventory of livestock, produce, grains, & other  
products at beginning of year.....(46)

31 47 Cost of livestock, produce, grains, & other products  
purchased during year.....(47)

48 Add lines 46 & 47.....(48)

49 Inventory of livestock, produce, grains, & other  
products at end of year.....(49)

NOTE: If you use the unit-livestock-price method or the farm-price  
method of valuing inventory, enter a 1 (one) here----->

50 Cost of livestock, produce, grains, & other products  
sold. Subtract line 49 from line 48.....(50)

51 Gross income. Subtract line 50 from line 45.....(51)

\*\*\*\*\*

END OF Sched F

imprt38



Enter 1 if filing this sched --->

0

\*\*\*\*\*

B Ag Activity Code: \_\_\_\_\_

D Employer ID number: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

0

0

0

0

0

0

0

5b Taxable amt...(5b)

0

0

6b Taxable amt...(6b)

0

0

0

7c Taxable amt...(7c)

0

0

8b Taxable amt...(8b)

0

-

8d Amt def frm 89.(8d)

0

0

0

0

0 |24 Labor/less jobs credit

0

0 |25 Pen & profit share....

0

|26 Rent or lease:

////////////////////

0 | a Machinery & equip.....

0

0 | b Other (land, etc.)...

0

|27 Repairs & maint.....

0

|28 Seeds/plants bought...

0

0 |29 Storage, warehousing..

0

|30 Supplies purchased....

0

0 |31 Taxes.....

0

0 |32 Utilities.....

0

0 |33 Vet fees, medicine....

0

0 |34 Other expenses (spec):

////////////////////

0 | a

\_\_\_\_\_

0

0 | b

\_\_\_\_\_

0

//////////////////// | c

\_\_\_\_\_

0

0 | d

\_\_\_\_\_

0

0 | e

\_\_\_\_\_

0

Sheet1

0  
0

\*\*\*\*\*

0

1990 \* 14

0  
0

39b Taxable amt..(39b)  
40b Taxable amt..(40b)

0  
0  
////////////////////  
0

0

41c Taxable amt..(41c)

0  
0  
0  
0  
0  
0  
0  
0  
0  
0  
0  
0

\*\*\*\*\*

/xchdst~  
/ppouqar38-01~g  
rphed~g  
r38-02~g  
r38-03~g  
rphed~gp  
r38-04~g  
rphed~g  
r38-05~g  
r38-06~gpq

imprt12

/xccssn~

/xr~

Sheet1

H862 For paperwork reduction act notice, see separate instructions  
\\0

\\m

Menu

ENTER

CHOICE

print

&

pchoice

sprint

spchoice

save

\p  
one  
zero

quit

pret

{GOTO}id~  
/wgrm/wgpe  
/fccexid~  
{GOTO}note~{GOTO}dnote~/wgra  
/xmmenu~/xg\m~

Enter  
Enter data into forms, schedules, and worksheets  
/xgenter~/xg\m~

{GOTO}list~/wgrm  
/resel~  
/rilist~  
/xisel<1#or#sel>56#or#sel=10~/xg\m~  
/xisel>2#and#sel<18~{GOTO}shnote~{?}{GOTO}list~/xg\m~  
/xisel>17#and#sel<31~/xg\m~  
/xisel>41#and#sel<50~/xg\m~  
{GOTO}sel~{EDIT}{HOME}'~  
/csel~choice~  
/wgra/rirng  
31  
~  
/xg\m~

Return  
Print forms, schedules, & worksheets used for your return for submission to IRS  
/xcpret~/xg\m~

{GOTO}list~/wgrm  
/resel~  
/rilist~  
/xisel<1#or#sel>56#or#sel=10~/xg\m~  
/xisel>0#and#sel<18~{GOTO}shnote~{?}{GOTO}list~/xg\m~  
{GOTO}sel~{EDIT}{HOME}'~{GOTO}pnote~  
/csel~spchoice~  
/ppouqarrng

~  
gpq  
/wgra{CALC}/xg\m~

Floppy  
Use this option if saving your TaxAide return onto a floppy disk

{GOTO}snote~  
/fs~r  
/wgrm  
/cone~disk~  
/cone~tname~  
/xr~

/xmprint~

0

1

No  
Do not leave 1-2-3  
/xg\m~

{GOTO}pnote~/wgrm  
/xiuse31=1~/xcimprt31~  
/xiuse32=1~/xcimprt32~  
/xiuse33=1~/xcimprt33~  
/xiuse34=1~/xcimprt34~  
/xiuse35=1~/xcimprt35~  
/xiuse36=1~/xcimprt36~  
/xiuse38=1~/xcimprt38~

Sheet1

/xiuse39=1~/xcimprt39~  
/xiuse40=1~/xcimprt40~  
/xiuse40=2~/xcimprt40~  
/xiuse41=1~/xcimprt41~  
/xiuse41=2~/xcimprt41~  
/xiuse51=1~/ppoouqarrng51~gpq  
/xiuse52=1~/ppoouqarrng52~gpq  
/xiuse53=1~/ppoouqarrng53~gpq  
/xiuse54=1~/ppoouqarrng54~gpq  
/xiuse55=1~/ppoouqarrng55~gpq  
/ppoouqarrng56~gpq  
/xr~



Print  
Print forms, schedules, and worksheets  
/xc\p~/xg\m~

IRS  
Print individual form or schedule for submission to IRS  
{GOTO}list~/wgrm  
/resel~  
/rilist~  
/xisel<1#or#sel>56#or#sel=10~/xr~  
/xisel>0#and#sel<18~{GOTO}shnote~{?}{GOTO}list~/xg\m~  
/xisel>17#and#sel<31~/xr~  
/xisel>41#and#sel<50~/xr~  
/xisel>51~{GOTO}enote~{?}{GOTO}list~/xr~  
/xisel=2~/cone~sel~  
/xisel=37~/ct\_36~sel~  
{GOTO}sel~{EDIT}{HOME}'~{GOTO}pnote~  
/csel~pchoice~  
/xcimprt  
  
~  
/wgra{CALC}  
/xr~

Hard Disk

Use this option to save your TaxAide return onto a hard disk

{GOTO}nfilesav~/wgrm

/rename~/rename~

/rfiles~/rfilesav~

/xinname<1~{GOTO}savenote~{?}/xr~

/xinname>9~{GOTO}savenote~{?}/xr~

/cname~tname~

{GOTO}nname~{EDIT}{HOME}'~{GOTO}snote~

/cname~sname~

/wgra{CALC}/fxvxd~id~r/fstaxaide

~r

/redisk~

/xr~

disk  
tname

Yes

Leave 1-2-3. Be sure to save worksheet if desired.

/qy

Save

Save TaxAide income tax forms, schedules, and worksheets  
/xc\ls~/xg\m~

New

Retrieve TaxAide0 to start new return  
/frtaxaide0~

Screen

Print form, schedule or worksheet as it appears on screen  
/xgsprint~/xg\m~

t\_37

get New

Retrieve TaxAide0 to start new return  
/frtaxaide0~

Occupation

Retrieve

Retrieve other TaxAide income tax returns (TAXAIDE1-9)

/xc\g~/xg\m~

Quit

Quit 1-2-3.

/xmquit~/xg\m~

37

Floppy

Retrieve a TaxAide return from a floppy disk

/frtaxaide0~

Hard Disk

Retrieve a TaxAide return from hard disk

{GOTO}nfilesav~/wgrm

/rename~/rename~

/rfiles~/rinfilesav~

/xinname=0~/xr~

/xinname>9~/xr~

/cnname~tname~

{GOTO}nname~{EDIT}{HOME}'~{GOTO}snote~

/cnname~rname~

/frtaxaide

~

hdst /cfirst~pfirst~

/xifilestat=2~/cand~pand~

/xifilestat=2~/csfirst~psfirst~

Sheet1

csssn

/xfilestat<>2~/clast~pand~  
/xfilestat=2~/clast~plast~  
/cssn~pssn~  
/xr  
/cssn~pssn~  
/csfirst~pfirst~  
/clast~pand~  
/repsfirst~  
/replast~

cyssn

/xr~  
/clast~pand~  
/cssn~pssn~  
/cfirst~pfirst~  
/repsfirst~  
/replast~  
/xr~

SSN

Present  
Address

Apt#

\g /xmget~

\s

/xmsave~

Leave

Leave TaxAide Menu. Press [ALT]M to return.

/xq~



Spouse SSN

0 xy65  
0 xybl  
0 xs65  
0 xsbl  
0 x33a  
0 x33bx  
0 x33cx  
0 x34  
1 xitmdedx  
0 x35  
0 x36  
0 x37amt  
  
1 x38source  
0 x38d  
0 x38  
0 x39  
0 x8814amt  
0 x40  
0 x41  
0 x42  
0 x43  
0 x44source  
  x44name  
0 x44  
0 x45  
0 x46  
0 x47  
0 x48  
0 x49

Sheet1

0 x50  
0 x51  
0 x52  
0 x53  
0 x54  
0 x55  
0 x55source  
0 x56  
0 x57  
0 x58  
0 x59  
0 x60  
0 x61  
0 x62  
0 x63  
0 x64  
0 x65  
0 x66  
0 x67

0 x2210amt  
xocc

0 xslemp  
xfirm

0 x20repay  
0 xRamt  
0 x2441amt  
0 xNEI  
0 x21a-D  
0 xie  
0 xFM2210D  
0 xln7DCB  
0 x2210B  
xapt  
0 x4970source  
0 x4972source  
0 x4255source  
0 x8611source