Form ID: 1040	Perso	nal Information			1
Filing (Marital) status code (1 = Single, 2	= Married filing joint, 3 = Married fil	ing separate, 4 = Head of househo	ld, 5 = Qualifying survivin	g spouse)	[1]
Mark if you were married but living a					[2]
Mark if your nonresident alien spous	e does not have an Individu	ıal Taxpayer Identification	Number (ITIN)		[3]
Social security number		Taxpayer		Spouse	
First name		[4] [6]	-		[5] [7]
Last name					
Occupation		[10]			[11]
Designate \$3.00 to the presidential e	election campaign fund? (1 =	Yes, 2 = No, 3 = Blank) [12]			[14]
Mark if dependent of another taxpay		[15]			[16]
Taxpayer with income less than 1/2 s	support age 18 or 19 - 23 fu				
Mark if legally blind Date of birth		[20]			[21]
Date of death	_	[22] [26]			[24] [27]
Work/daytime telephone number/ex	xt number			[30]	[31]
Home/evening telephone number		[32]		[50]	[33]
Do you authorize us to discuss your r	return with the IRS? (Y, N)	[34]			
· · ·		t Mailing Address			
Addross		t Maning Addiess			
Address Apartment number					[40] [41]
City, state postal code, zip code			[42]	[43]	
Foreign country name			[+2]	[40]	[46]
Foreign phone number					[49]
In care of addressee					[51]
	Denen	dent Information			
	<u>-</u>	endent Codes located at t	the hottom)		Care
	(Ticase Telef to Dept	indent codes located at t	ine bottom,	Months**Dep in Codes	expenses paid for
First Name ^[52] Last Na	me Date of Birth	Social Security No.	Relationship	home * **	dependent
	 -				
					
		-			
		- 			
Name of child who lived with you bu					[53]
Social security number of qualifying	person 				[54]
	De	pendent Codes			
*Basic 1 = Child who lived w	-	**Other 1 = Stude			
	t live with you due to divo				
3 = Other dependent			ndent who is both	a student and dis	abled
=	ts, but do not qualify for Cr		ts (ODC)		
	or Earned Income Credit or	-			
	ed with you, but do not qua	= -	realt		
	ed with you, but do not qua	= -	Cradit for Other D	anandants/Earna	l Income Cro
	id with vall but do bot air	anny ioi cinia lax ciedil/	Credit for Other D	cpenaents/ Earlie(a micoming cit
***Months 77 = Reported on ad	ed with you, but do not qua d year return	,		•	
***Months77 = Reported on od 88 = Reported on evo	d year return	,			
88 = Reported on eve	d year return en year return	,			
	d year return en year return	,			

Preparer - Enter on Screen Contact

Tax matters person (Indicate which spouse handles tax return related questions) (Blank = Both, T = Taxpayer, S = Spouse)	[8]
Taxpayer email address		[9]
Spouse email address		[10]
	Taxpayer	Spouse
Fax telephone number	[11]	[20]
Mobile telephone number	[12]	[21]
Mobile telephone #2 number	[13]	[22]
Pager number	[14]	[23]
Other:	[15]	[24]
Telephone number	[16]	[25]
Extension		[26]
Preferred method of contact:		
Email, Work phone, Home phone, Fax, Mobile phone, Mobile phone #2	[18]	[27

NOTES/QUESTIONS: