For the year Jan. 1-De	c. 31, 2014, or other tax year beginning			2014, ending	. 20		e separate instructi	·
Your first name and		Last nam		2014, onding	, 20		ur social security nur	
If a joint return, spor	use's first name and initial	Last nam	e			Spo	ouse's social security n	umber
, and the							opouse's social security number	
Home address (num	nber and street). If you have a P.O	, box, see ins	ructions.		Apt. no		1 1 1 OON/A	V.12
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,						Make sure the SSN(s and on line 6c are c	
City, town or post office	ce, state, and ZIP code. If you have a	foreign addres	s, also complete spaces l	pelow (see instructions).		Р	residential Election Car	npaign
							ck here if you, or your spouse	
Foreign country nam	ne		Foreign province/s	state/county	Foreign postal co		ly, want \$3 to go to this fund x below will not change your	
						refur	nd. You 🗌	Spouse
Filing Status	1 D Single			4 ☐ Hea	d of household (with q	ualifying	person). (See instruction	ns.) If
iiiig Otatas	2 Married filing join	tly (even if o	nly one had income)	the	qualifying person is a c	hild but i	not your dependent, en	ter this
Check only one			r spouse's SSN abo	THE STATE OF THE S	d's name here. 🕨			
oox.	and full name her	e. ⊳ ∘	_	5 🔲 Qua	alifying widow(er) wit	h depen	dent child	<u> </u>
Exemptions	6a Vourself. If someone can claim you as a dependent, do not check box 6a						Boxes checked on 6a and 6b	fat di Sa. P
zxomptiono	b 🗌 Spouse	* * * * * * * * * * * * * * * * * * *	en en kommend og skriver i skr Skriver i skriver i s			<u></u> J	No. of children	
	c Dependents:		(L) Depondent of		(4) ✓ if child under ag qualifying for child tax of	e 17 redit	on 6c who: • lived with you	
	(1) First name Last na	ime	social security number rela	relationship to you	(see instructions)		did not live with	
£							you due to divorce or separation	
f more than four dependents, see							(see instructions)	· · · · · · · ·
nstructions and	<u></u>						Dependents on 6c not entered above	·
check here ►				L.		10.1	Add numbers on	
	d Total number of exe	emptions cla	imed		Bitter Willeam	3. 1.3.	lines above	<u> </u>
Income	7 Wages, salaries, tip	s, etc. Attac	h Form(s) W-2			7		<u> </u>
	8a Taxable interest. A	ttach Sched	ule B if required .			8a		_
	b Tax-exempt interes	st. Do not in	clude on line 8a .	8b		S. Ja		
Attach Form(s)	9a Ordinary dividends	Attach Sch	edule B if required			9a		
N-2 here. Also attach Forms	b Qualified dividends 9b							
N-2G and	10 Taxable refunds, credits, or offsets of state and local income taxes							
1099-R if tax	11 Alimony received							
was withheld.	12 Business income or (loss). Attach Schedule C or C-EZ							
	(13) Capital gain or (loss). Attach Schedule D if required. If not required, check here					13	*	
If you did not	14 Other gains or (loss	es). Attach l	orm 4797			14		
get a W-2, see instructions.	15a IRA distributions	15a		b Taxable a	amount	15b		
see manachons.	16a Pensions and annuit							
	17 Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E							
	18 Farm income or (loss). Attach Schedule F.							
	19 Unemployment compensation							
	20a Social security benefits 20a b Taxable amount							
	21 Other income. List type and amount							
	22 Combine the amount	s in the far rig	ht column for lines 7 t	hrough 21. This is yo	ur total income 🕨	22	•	_
	23 Educator expenses			23			7880	
Adjusted	24 Certain business expe	enses of reser	vists, performing artist	s, and		a translati		
Gross		and the state of the contract	ch Form 2106 or 2106		12.4			
Income		ount deduct	ion. Attach Form 88			y		
	26 Moving expenses.		医结节 医多头性 医多维性试验检 电二点回路			N S		
	27 Deductible part of self-employment tax. Attach Schedule SE 27							
	28 Self-employed SEP, SIMPLE, and qualified plans 28							
	29 Self-employed health insurance deduction							
	30 Penalty on early withdrawal of savings							
	31a Alimony paid b Recipient's SSN ▶ 31a							
	32 IRA deduction							
	33 Student loan interest deduction							
	34 Tuition and fees. Attach Form 8917.							
	35 Domestic production activities deduction. Attach Form 8903 35					4.40		
	36 Add lines 23 through	the transfer which a fi	na king pangkarèn i K			36		
	37 Subtract line 36 from line 22. This is your adjusted gross income							

Amount	75 76a b d 77 78 79 Dos nam Und they You	gnee's Phone Personal iden	ne best of my knowledge and beli
Amount You Owe Third Party Designee Sign Here oint return? See electric structions.	72 73 74 75 76a b d 77 78 79 Do Des nam Und they You	Credit for federal tax on fuels. Attach Form 4136 Credits from Form: a 2439 b Reserved c Reserved d 73 Add lines 64, 65, 66a, and 67 through 73. These are your total payments If line 74 is more than line 63, subtract line 63 from line 74. This is the amount you overpaid Amount of line 75 you want refunded to you. If Form 8888 is attached, check here Routing number Routing number Amount of line 75 you want applied to your 2015 estimated tax 77 Amount you owe. Subtract line 74 from line 63. For details on how to pay, see instructions Estimated tax penalty (see instructions) you want to allow another person to discuss this return with the IRS (see instructions)? Yes gnee's Phone Personal iden number (PIN) Per penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer signature Date Your occupation	74 75 76a Complete below. Nutrication Pre best of my knowledge and beliarer has any knowledge. Daytime phone number If the IRS sent you an Identity Protect PIN, enter it here (see inst.) Check if PTIN
Amount You Owe Third Party Designee Sign Here Joint return? See Jour records.	72 73 74 75 76a b d 77 78 79 Do Des nam Und they You	Credit for federal tax on fuels. Attach Form 4136 Credits from Form: a 2439 b Reserved c Reserved d 73 Add lines 64, 65, 66a, and 67 through 73. These are your total payments If line 74 is more than line 63, subtract line 63 from line 74. This is the amount you overpaid Amount of line 75 you want refunded to you. If Form 8888 is attached, check here Routing number Routing number Amount of line 75 you want applied to your 2015 estimated tax 77 Amount you owe. Subtract line 74 from line 63. For details on how to pay, see instructions Estimated tax penalty (see instructions) you want to allow another person to discuss this return with the IRS (see instructions)? Yes gnee's Phone Personal iden number (PIN) Per penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer signature Date Your occupation	74 75 76a Complete below. Nutrication Pre best of my knowledge and beliarer has any knowledge. Daytime phone number If the IRS sent you an Identity Protect PIN, enter it here (see inst.) Check if PTIN
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Amount You Owe Third Party Designee Sign Here oint return? See Instructions. Geep a copy for	72 73 74 75 76a b d 77 78 79 Do Des nam Und they You	Credit for federal tax on fuels. Attach Form 4136 Credits from Form: a	74 75 76a 78 Complete below. Notification N
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ee 🕨	72 73 74 75 76a b	Credit for federal tax on fuels. Attach Form 4136 Credits from Form: a 2439 b Reserved c Reserved d 73 Add lines 64, 65, 66a, and 67 through 73. These are your total payments If line 74 is more than line 63, subtract line 63 from line 74. This is the amount you overpaid Amount of line 75 you want refunded to you. If Form 8888 is attached, check here Routing number C Type: Checking Savings	74 75 76a
	72 73 74 75 76a	Credit for federal tax on fuels. Attach Form 4136 Credits from Form: a 2439 b Reserved c Reserved d 73 Add lines 64, 65, 66a, and 67 through 73. These are your total payments If line 74 is more than line 63, subtract line 63 from line 74. This is the amount you overpaid Amount of line 75 you want refunded to you. If Form 8888 is attached, check here	74 75 76a
	72 73 74 75	Credit for federal tax on fuels. Attach Form 4136 Credits from Form: a 2439 b Reserved c Reserved d 73 Add lines 64, 65, 66a, and 67 through 73. These are your total payments If line 74 is more than line 63, subtract line 63 from line 74. This is the amount you overpaid	74 75 76a
	72 73 74 75	Credit for federal tax on fuels. Attach Form 4136 Credits from Form: a 2439 b Reserved c Reserved d 73 Add lines 64, 65, 66a, and 67 through 73. These are your total payments If line 74 is more than line 63, subtract line 63 from line 74. This is the amount you overpaid	74 75
efund	72 73 74	Credit for federal tax on fuels. Attach Form 4136	74
	72 73	Credit for federal tax on fuels. Attach Form 4136 72 Credits from Form: a ☐ 2439 b ☐ Reserved c ☐ Reserved d ☐ 73	المنافظات
	72	Credit for federal tax on fuels. Attach Form 4136	
	74	en 1911, in the same of the sa	
	70	Amount paid with request for extension to file	12.95.96 3.1
	69 :	Net premium tax credit. Attach Form 8962	
4.4	68	American opportunity credit from Form 8863, line 8	
· J.	67	Additional child tax credit. Attach Schedule 8812	
nild, attach	Б	The state of the s	
ualifying	66a	Earned income credit (EIC) 66a Nontaxable compat hav election 66b	
vou have a —	65		
		2014 estimated tax payments and amount applied from 2013 return 65	
	64	Federal income tax withheld from Forms W-2 and 1099 64	- X
· · · · · · · · · · · · · · · · · · ·	63	Add lines 56 through 62. This is your total tax	63 🔀
1.0	62	Taxes from: a Form 8959 b Form 8960 c Instructions; enter code(s)	62
		Health care: Individual responsibility (see instructions) Full-year coverage	61
*.		三, 그 사이 그 사이 가는 그 사람들이 가장 하는 다른 사이를 가장 하는 것이 되었다. 하는 사람이 가장 가장 가장 하는 것이다.	60b
axes		Household employment taxes from Schedule H	60a
4.	59	Additional tax on IRAs, other qualified retirement plans, etc. Attach Form 5329 if required	59
ther	58	Unreported social security and Medicare tax from Form: a 4137 b 8919	58
	57	Self-employment tax. Attach Schedule SE	57
	56	Subtract line 55 from line 47. If line 55 is more than line 47, enter -0-	.56
ousehold, 9,100	55	Add lines 48 through 54. These are your total credits	55
Nuchold	54	Other credits from Form: a 3800 b 8801 c 54	and the second s
12,400	53	Residential energy credits. Attach Form 5695	
ualifying	52 52	Child tax credit: Attach Schedule 8812, if required	
ointly or	51	Retirement savings contributions credit. Attach Form 8880 51 Child tay gradit: Attach Schodulo 8810, if required	
-,	50 51		
eparately,		Credit for child and dependent care expenses. Attach Form 2441 49 Education credits from Form 8863, line 19 50	
ingle or	48 49	Foreign tax credit. Attach Form 1116 if required	
All others:			47
atruations	47	Excess advance premium tax credit repayment. Attach Form 8962	46
ependent,	45 46	Alternative minimum tax (see instructions). Attach Form 6251	45
ho can be	*	Tax (see instructions). Check if any from: a Form(s) 8814 b Form 4972 c	44
0 00-	44	Taxable income. Subtract line 42 from line 41. If line 42 is more than line 41, enter -0-	43
neck any	43		42
"-	42	Exemptions. If line 38 is \$152,525 or less, multiply \$3,950 by the number on line 6d. Otherwise, see instructions	41
eduction 5	41	Itemized deductions (from Schedule A) or your standard deduction (see left margin) Subtract line 40 from line 38	40.
	b 40	If your spouse itemizes on a separate return or you were a dual-status alien, check here ▶ 39b Itemized deductions (**res Sekadule A) are residued to the status alien, check here ▶ 39b	
redits		if: ☐ Spouse was born before January 2, 1950, ☐ Blind. ☐ checked ▶ 39a ☐	
ax and 📑	зуа	Check You were born before January 2, 1950, Blind. Total boxes	
	38	Amount from line 37 (adjusted gross income)	38