Lange 1040 P.	artment o S. Inc	f the Treasury - Internal Reven dividual Income	ue Service (99 Tax Returi	» 2015 or	MB No. 1545-00	74 IRS Use	Only-Do	not w	rite or staple in this space.
For the year Jan. 1-Dec. 3				,2015, ending	,20				eparate instructions.
Your first name and initial Last name AARON C ADAMS								Your social security number $891 - 02 - 0752$	
If a joint return, spouse's first name and initial Last name ALICE C ADAMS								Spouse's social security number $801 - 02 - 0752$	
Home address (numbe	er and str	eet). If you have a P.O. bo	x, see instructions	s. Apt. n				Make sure the SSN(s) above and on line 6c are correct.	
City, town or post office, state, and ZIP code. If you have a foreign address, also complete spaces below (see instructions). PLUCKEMIN NJ 07978-								neck he	ential Election Campaign re if you, or your spouse if filing ant \$3 to go to this fund. Check-
Foreign country name Fo			Foreign provir	Foreign province/state/county Foreign postal code			ing a box below will not change your tax or refund.		
	1 2 2		<i>/ · r ·</i>	4					erson). (See instructions.)
Filing Status	=	, o, ,		,	•			dbut	not your dependent, enter
Check only one	3	Married filing separa	, ,	use's SSN above		s name here.►		adaat	abild
box.	6a	and full name here.		you as a dependent,		widow(er) wit	n deper	Ident	
Exemptions	b b	X Spouse						· •	Boxes checked on 6a and 6b 2
	<u>с</u>	Dependents:		(2) Demendentie		6	 4)√if child	d under	No. of children
If more than (1) Fi	irst name	•	ame	(2) Dependent's social security number	(3) Dep relationsh		age 17 qua for child ta (see instru	x credit	on 6c who: lived with you 2
four depen- ALA	N AI	DAMS		802-02-075	2SON		X		 did not live with you due to divorce
dents, see <u>ALI</u>	CIA	ADAMS		803-02-075	2DAUGHT	'ER	Х		or separation (see instructions)
and check									Dependents on 6c 0
here 🕨									
	d	Total number of exem	ptions claimed						Add numbers on lines above 4
Income	7	Wages, salaries, tips,	etc. Attach Forr	m(s) W-2				7	20,588.
	8a	Taxable interest. Atta		. ,				8a	
	b	Tax-exempt interest.	Do not include	on line 8a	8b				
Attach Forms(s)	9a	Ordinary dividends. A	ttach Schedule	B if required				9a	
W-2 here. Also	b	Qualified dividends			9b				
attach Forms W-2G and	10	Taxable refunds, cred	its, or offsets of	state and local incom	e taxes			10	
1099-R if tax	11	Alimony received					🛓	11	
was withheld.	12	Business income or (le		╶╌╴┝	12				
	13	Capital gain or (loss).		•	required, che	ck here 🕨		13	
If you did not get a W-2,	14	Other gains or (losses	· · · ·	4797	 		· · ·	14	
see instructions.			15a		b Taxable		· · ·	15b	
		Pensions and annuitie		-ing C componentions t		amount	-	16b	
	17 18	Rental real estate, roy Farm income or (loss)			-		-	17 18	
	19	Unemployment compe					-	19	
	20a		1 1		1	amount	-	20b	
	21	Other income. List typ	II					21	
	22	Combine the amounts		col for lines 7 through	21.This is you	r total incom	e 🕨	22	20,588.
	23	Reserved			23				-
Adjusted	24	Certain business expe	enses of reservis	sts, performing artists,	,				
Gross		and fee-basis gov. offi	cials. Attach Fo	orm 2106 or 2106-EZ	24				
Income	25	Health savings accourt	nt deduction. At	ttach Form 8889	25				
	26	Moving expenses. At	tach Form 3903		26				
	27	•		ax. Attach Schedule SE ualified plans uction gs					
	28					29 30 31a			
	29								
	30		-						
		Alimony paid b Recipi							
	32								
	33 34			· · · · · · · · · · · · · ·					
	34 35	Domestic production a							
	36	Add lines 23 through 3			-			36	
	37	Subtract line 36 from I						37	20,588.

Form 1040 (201	5)	Α	ARON C & ALICE C ADAMS 891-	-02	-0752	0
Toy and	3	8	Amount from line 37 (adjusted gross income)		38	20,588.
Tax and Credits	3	9a	Check You were born before Jan. 2, 1951, Blind. Total boxes			
Credits			if: Spouse was born before Jan. 2, 1951, Blind. checked ► 39a			
Standard		b	If your spouse itemizes on a separate return or you were a dual-status alien, check here 39b			
Deduction for-	4	_	Itemized deductions (from Schedule A) or your standard deduction (see left margin	n)	40	12,600.
People who			Subtract line 40 from line 38	.,	41	7,988.
check any			Exemptions. If line 38 is \$154,950 or less, multiply \$4,000 by the number on line 6d. Otherwise, see instruction	 me	42	16,000.
box on line 39a or 39b or			Taxable income. Subtract line 42 from line 41. If line 42 is more than line 41, enter -0-		43	
who can be claimed as a			Tax (see instructions). Check if any from: a Form(s) 8814 b Form 4972 c		44	•
dependent,					44	
see instructions.			Alternative minimum tax (see instructions). Attach Form 6251			
 All others: 			Excess advance premium tax credit repayment. Attach Form 8962		46	
Single or	4		Add lines 44, 45, and 46		▶ 47	
Married filing	4		Foreign tax credit. Attach Form 1116 if required		_	
separately, \$6,300	4	.9	Credit for child and dependent care expenses. Attach Form 2441 . 49		_	
Married filing	5	0	Education credits from Form 8863, line 19			
jointly or Qualifying	5	1	Retirement savings contributions credit. Attach Form 8880 51			
widow(er),	5	2	Child tax credit. Attach Schedule 8812, if required 52			
\$12,600 Head of	5	3	Residential energy credits. Attach Form 5695 53			
household,	5	4	Other credits from Form: a 3800 b 8801 c 54			
\$9,250	5	5	Add lines 48 through 54. These are your total credits		55	
	5		Subtract line 55 from line 47. If line 55 is more than line 47, enter -0-		► 56	
	5		Self-employment tax. Attach Schedule SE		57	
Other			Unreported social security and Medicare tax from Form: a 4137 b 8919		58	
Taxes			Additional tax on IRAs, other qualified retirement plans, etc. Attach Form 5329 if require		59	
Taxes			Household employment taxes from Schedule H		60a	
	Ŭ		First-time homebuyer credit repayment. Attach Form 5405 if required		60b	
	6		Health care: individual responsibility (see instructions) Full-year coverage \overline{X} .		61	
			Taxes from: a Form 8959 b Form 8960 c Instructions; enter code(s)		62	
Doumonto			Add lines 56 through 62. This is your total tax	· · •	► 63	
Payments				50.	4	
If you have a			2015 estimated tax payments and amount applied from 2014 return 65 Earned income credit (EIC) 66a	10		
qualifying child, attach	6			±0.		
Schedule EIC			Nontaxable combat pay election 66b			
	6		Additional child tax credit. Attach Form 8812 67 2,00	<u>JU.</u>	_	
	6	8	American opportunity credit from Form 8863, line 8 68		_	
	6		Net premium tax credit. Attach Form 8962		_	
	7	0	Amount paid with request for extension to file 70			
	7	'1	Excess social security and tier 1 RRTA tax withheld 71			
	7		Credit for federal tax on fuels. Attach Form 4136 72			
	7	3	Credits from Form: a 2439 b served c 8885 d 73			
	7	'4	Add lines 64, 65, 66a, and 67 through 73. These are your total payments	🕨	▶ 74	8,548.
Refund	7	'5	If line 74 is more than line 63, subtract line 63 from line 74. This is the amount you over	erpaid	i 75	8,548.
	7	'6a	Amount of line 75 you want refunded to you. If Form 8888 is attached, check here	· 🗍	76a	8,548.
Direct deposit?	►	b	Routing c Type: Checking Savin	igs		
See instructions			Account number			
	_		Amount of line 75 you want applied to your 2016 estimated tax 77			
Amount			Amount you owe. Subtract line 74 from line 63. For details on how to pay, see instructions		▶ 78	
You Owe			Estimated tax penalty (see instructions)			
Third Party		-	ant to allow another person to discuss this return with the IRS (see instructions)?	Vo		plete below. X No
Designee	. Designe			F	Personal id	entification
	name		no. P es of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the be		number (P	
Sign	they are	true,	correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer h	has any	knowledge	
Here	Your si	ignat				ytime phone number
Joint return? See instructions	—		CLERK			8-555-1111
Keep a copy for	Spouse	e's si	gnature. If a joint return, both must sign. Date Spouse's occupation		Pro	e IRS sent you an Identity tection PIN, enter
your records.			WIFE		it he	ere (see inst.)
	Print/Type p				heck	if PTIN
Paid	AARP F		ndation Tax-Aide	se	elf-employ	s24051405
	Firm's name	-	▶Kinnelon Volunteer Fire Co	s EIN 🕨		
USE Only	Firm's addre	ess	▶103 Kiel Avenue	e no.		
			BUTLER NJ 07405	973	8-838-	-1321