51040	U.S. In	f the Treasury - Internal Rever	Tax Return	<b>2015</b> o	MB No. 154	45-0074	IRS Use Only	y-Do not w	rite or staple in this space.		
For the year Jan. 1-Dec. 31, 2015, or other tax year beginning ,2015, ending ,20							See s	See separate instructions.			
	Your first name and initial Last name							Your social security number $684 - 02 - 0752$			
If a joint return, spouse's first name and initial Last name								Spous	Spouse's social security number		
Home address (number and street). If you have a P.O. box, see instructions. Apt. no.									Make sure the SSN(s) above and on line 6c are correct.		
								Check he	ential Election Campaign re if you, or your spouse if filing ant \$3 to go to this fund. Check-		
Foreign country name			Foreign province/state/county			Foreign postal code			ing a box below will not change your tax or refund. You Spouse		
		X Single		4			· ·	,	erson). (See instructions.)		
Filing Status		Married filing jointly	· •	,				child but	not your dependent, enter		
Check only one	3	Married filing separ	, ,	ſ		hild's nam	-				
box.		and full name here.		5			ow(er) with de	ependent	child		
Exemptions	6a		neone can claim y	ou as a dependent,	do not c	heck box	6a	· · · 귝	Boxes checked on		
	b		<u></u> .				(4)	if child under	6a and 6b <u>1</u> No. of children		
If more than (1)	<b>C</b> First name		ame	(2) Dependent's social security number	• • • •	Depender tionship to	nt'S áge for c	17 qualifying hild tax credit	on 6c who:		
four depen-	TIISCHAIN	Lasti	lame	Social Security Humber	i icia		you <sub>(see</sub>	instructions)	did not live with		
dents, see									you due to divorce or separation (see instructions)		
instructions and check									Dependents on 6c		
here									not entered above		
	b	Total number of exem	notions claimed						Add numbers on lines above		
Income	7	Wages, salaries, tips,		. ,	• • • • •			. 7	17,500.		
		Taxable interest. Att		•	1 1			. 8a			
Attach Forma(a)	b Oo	Tax-exempt interest. Ordinary dividends.			8b			. 9a			
Attach Forms(s) W-2 here. Also	9a b			•	9b			. <del>9</del> a			
attach Forms	10	Taxable refunds, credits, or offsets of state and local income taxes									
W-2G and	10										
1099-R if tax was withheld.	12										
	13	Capital gain or (loss). Attach Schedule D if required. If not required, check here									
If you did not	14	Other gains or (losses		•				<u> </u>			
get a W-2,		IRA distributions .	· · ·		<b>b</b> Tax	able amou	unt	. 15b			
see instructions.		Pensions and annuitie					unt				
	17	Rental real estate, roy		ps, S corporations, t				17			
	18							. 18			
	19	Unemployment comp	ensation					. 19			
	20a	Social security benefi	ts . <b>20a</b>		<b>b</b> Tax	able amou	unt	. 20b			
	21	Other income. List ty	pe and amount					21			
	22	Combine the amounts	s in the far right co	ol for lines 7 through	21.This i	s your <b>to</b> l	tal income	▶ 22	17,500.		
	23	Reserved			23						
Adjusted	24	Certain business exp									
Gross		and fee-basis gov. of						_			
Income	25	Health savings accou						_			
	26	Moving expenses. At						_			
	27	Deductible part of self						_			
	28 20	Self-employed SEP, SIMPLE, and qualified plans				28					
	29 30	Penalty on early withdrawal of savings				29 30 31a					
	30 31 a										
	312	IRA deduction									
	32	Student loan interest									
	34										
	35	Domestic production									
	36	Add lines 23 through						. 36			
	37	Subtract line 36 from						▶ 37	17,500.		

Form 1040 (2015)		Ν	IAX EVANS 684	-02	-075	52	Page <b>2</b>
Tax and		38	Amount from line 37 (adjusted gross income)		38		17,500.
Tax and Credits		39a	Check <b>You</b> were born before Jan. 2, 1951, Blind. <b>Total boxes</b>				
Cieuns			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 <b>39b</b>				
Deduction for-		40	Itemized deductions (from Schedule A) or your standard deduction (see left marging	n)	40		6,300.
<ul> <li>People who</li> </ul>		41	Subtract line 40 from line 38		41		11,200.
check any box on line		42	Exemptions. If line 38 is \$154,950 or less, multiply \$4,000 by the number on line 6d. Otherwise, see instruction	ons .	42		4,000.
39a or 39b <b>or</b> who can be		43	Taxable income. Subtract line 42 from line 41. If line 42 is more than line 41, enter -0	)	43		7,200.
claimed as a		44	Tax (see instructions). Check if any from: a Form(s) 8814 b Form 4972 c		44		723.
dependent, see		45	Alternative minimum tax (see instructions). Attach Form 6251		45		
instructions.		46	Excess advance premium tax credit repayment. Attach Form 8962		46		
All others:		47	Add lines 44, 45, and 46	1	▶ 47		723.
Single or Married filing		48	Foreign tax credit. Attach Form 1116 if required 48				
separately, \$6,300		49	Credit for child and dependent care expenses. Attach Form 2441 . 49				
Married filing		50	Education credits from Form 8863, line 19				
jointly or Qualifying		51	Retirement savings contributions credit. Attach Form 8880 51				
widow(er),		52	Child tax credit. Attach Schedule 8812, if required 52				
\$12,600 Head of		53	Residential energy credits. Attach Form 5695 53				
household,		54	Other credits from Form: a         3800         b         8801         c         54				
\$9,250		55	Add lines 48 through 54. These are your total credits		55		
		56	Subtract line 55 from line 47. If line 55 is more than line 47, enter -0-	<u></u>	► 56	_	723.
		57	Self-employment tax. Attach Schedule SE		57	_	
Other		58	Unreported social security and Medicare tax from Form: <b>a</b> 4137 <b>b</b> 8919		58	<u> </u>	
Taxes		59	Additional tax on IRAs, other qualified retirement plans, etc. Attach Form 5329 if requi		59	<u> </u>	
			Household employment taxes from Schedule H		60a	-	
			First-time homebuyer credit repayment. Attach Form 5405 if required		60b	<u> </u>	225
		61	Health care: individual responsibility (see instructions) Full-year coverage	• • •	61	┥	325.
		62	Taxes from: a Form 8959 b Form 8960 c Instructions; enter code(s)		62	<u> </u>	1 0 4 0
Deumente		63	Add lines 56 through 62. This is your total tax	<b>)</b> 00.	► 63	+	1,048.
Payments		64 67		00.	-		
If you have a qualifying		65 66a	2015 estimated tax payments and amount applied from 2014 return     65       Earned income credit (EIC)     NQ       66a		-		
child, attach		<u>b</u>	Nontaxable combat pay election 66b		-		
Schedule EIC.		67	Additional child tax credit. Attach Form 8812 67		-		
		68	American opportunity credit from Form 8863, line 8 68		-		
		69	Net premium tax credit. Attach Form 8962 69		-		
		70	Amount paid with request for extension to file 70		-		
		71	Excess social security and tier 1 RRTA tax withheld 71		-		
		72	Credit for federal tax on fuels. Attach Form 4136 72				
		73	Credits from Form: a 2439 b served c 8885 d 73		1		
		74	Add lines 64, 65, 66a, and 67 through 73. These are your total payments	)	▶ 74		800.
Refund		75	If line 74 is more than line 63, subtract line 63 from line 74. This is the amount you ov	erpaic	1 75	L	
		76a	Amount of line 75 you want refunded to you. If Form 8888 is attached, check here		76a	ı 🗌	
Direct deposit?	►	b	Routing number C Type: Checking Savin	ngs			
See instructions.	►	d	Account number				
		77	Amount of line 75 you want applied to your 2016 estimated tax > 77				
Amount		78	Amount you owe. Subtract line 74 from line 63. For details on how to pay, see instructions $% \left( {{{\bf{N}}_{\rm{B}}}} \right)$ .		▶ 78		248.
You Owe		79	Estimated tax penalty (see instructions) 79				
Third Party Designee		nee's	ant to allow another person to discuss this return with the IRS (see instructions)? Phone no. ►	I	es. Co Personal number	identifi	e below. X No cation
Sign	Unde they a	r penal are true	ties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the b e, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer	y knowle knowled	dge and ge.	belief,	
Here	Your	signa		Your occupation			e phone number
Joint return?			WORKER	14		Desertation and Identity	
See instructions. Keep a copy for your records.	Spot	use's s	ignature. If a joint return, <b>both</b> must sign. Date Spouse's occupation	F	If the IRS sent you an Identity Protection PIN, enter it here (see inst.)		
			arer's name Preparer's signature Date		heck	if	PTIN
Dronaror -			ndation Tax-Aide		elf-empl	,	S24051405
	m's na		Kinnelon Volunteer Fire Co 103 Kiel Avenue	s EIN	•		
• Fir	rn's ad	aress	▶ 103 Kiel Avenue BUTLER NJ 07405	ie no. 3-838	2_11	21	
			LOILIO ON MULLIO	212	-030	ノーエン	- <u>-</u> _