

Label (See page 19.)

Use the IRS label. Otherwise, please print or type.

LABEL HERE

Form fields for personal information: Your first name and initial, Last name, Social security number, Spouse's social security number, Home address, Apt. no., City, town or post office, state, and ZIP code.

OMB No. 1545-0085, Important! You must enter your SSN(s) above.

Presidential Election Campaign (See page 20.)

Note. Checking "Yes" will not change your tax or reduce your refund. Do you, or your spouse if filing a joint return, want \$3 to go to this fund? . . .

Filing status

- 1 Single
- 2 Married filing joint return (even if only one had income)
- 3 Married filing separate return. Enter spouse's social security number above and full name here.
- 4 Head of household (with qualifying person). (See page 21.) If the qualifying person is a child but not your dependent, enter this child's name here.
- 5 Qualifying widow(er) with dependent child (year spouse died . . . ). (See page 22.)

Exemptions

6a Yourself. 6b Spouse. 6c Dependents: Table with columns for First name, Last name, Social security number, Relationship to you, and Child for credit. 6d Total number of exemptions claimed.

Income

Attach Form(s) W-2 here. Also attach Form(s) 1099-R if tax was withheld.

Income lines 7 through 19: Wages, salaries, tips, etc.; Taxable interest; Ordinary dividends; Capital gain distributions; Total IRA distributions; Total pensions and annuities; Unemployment compensation; Social security benefits; Adjusted gross income.

**Tax, credits, and payments****Standard Deduction for—**

• People who checked any box on line 21a or 21b or who can be claimed as a dependent, see page 33.

• All others:  
Single, \$4,550  
Head of household, \$6,650  
Married filing jointly or Qualifying widow(er), \$7,600  
Married filing separately, \$3,800

If you have a qualifying child, attach Schedule EIC.

<b>20</b>	Enter the amount from line 19 (adjusted gross income).	20	
<b>21a</b>	Check if: <input type="checkbox"/> You were 65 or older <input type="checkbox"/> Blind <input type="checkbox"/> Spouse was 65 or older <input type="checkbox"/> Blind Enter number of boxes checked ▶	21a	<input type="checkbox"/>
<b>b</b>	If you are married filing separately and your spouse itemizes deductions, see page 32 and check here ▶	21b	<input type="checkbox"/>
<b>22</b>	Enter your <b>standard deduction</b> (see left margin).	22	
<b>23</b>	Subtract line 22 from line 20. If line 22 is more than line 20, enter -0-.	23	
<b>24</b>	Multiply \$2,900 by the total number of exemptions claimed on line 6d.	24	
<b>25</b>	Subtract line 24 from line 23. If line 24 is more than line 23, enter -0-. This is your <b>taxable income</b> .	25	
<b>26</b>	<b>Tax</b> , including any alternative minimum tax (see page 33).	26	
<b>27</b>	Credit for child and dependent care expenses. Attach Schedule 2.	27	
<b>28</b>	Credit for the elderly or the disabled. Attach Schedule 3.	28	
<b>29</b>	Education credits. Attach Form 8863.	29	
<b>30</b>	Rate reduction credit. See the worksheet on page 36.	30	
<b>31</b>	Child tax credit (see page 36).	31	
<b>32</b>	Adoption credit. Attach Form 8839.	32	
<b>33</b>	Add lines 27 through 32. These are your <b>total credits</b> .	33	
<b>34</b>	Subtract line 33 from line 26. If line 33 is more than line 26, enter -0-.	34	
<b>35</b>	Advance earned income credit payments from Form(s) W-2.	35	
<b>36</b>	Add lines 34 and 35. This is your <b>total tax</b> .	36	
<b>37</b>	Federal income tax withheld from Forms W-2 and 1099.	37	
<b>38</b>	2001 estimated tax payments and amount applied from 2000 return.	38	
<b>39a</b>	<b>Earned income credit (EIC)</b> .	39a	
<b>b</b>	Nontaxable earned income.	39b	
<b>40</b>	Additional child tax credit. Attach Form 8812.	40	
<b>41</b>	Add lines 37, 38, 39a, and 40. These are your <b>total payments</b> .	41	
<b>42</b>	If line 41 is more than line 36, subtract line 36 from line 41. This is the amount you <b>overpaid</b> .	42	
<b>43a</b>	Amount of line 42 you want <b>refunded to you</b> .	43a	
<b>b</b>	Routing number <input type="text"/> ▶ c Type: <input type="checkbox"/> Checking <input type="checkbox"/> Savings		
<b>d</b>	Account number <input type="text"/>		
<b>44</b>	Amount of line 42 you want <b>applied to your 2002 estimated tax</b> .	44	
<b>45</b>	<b>Amount you owe</b> . Subtract line 41 from line 36. For details on how to pay, see page 48.	45	
<b>46</b>	Estimated tax penalty (see page 48).	46	

**Refund**

Direct deposit? See page 47 and fill in 43b, 43c, and 43d.

**Amount you owe****Third party designee**

Do you want to allow another person to discuss this return with the IRS (see page 49)? ☐ Yes. Complete the following. ☐ No

Designee's name ▶ Phone no. ▶ ( ) Personal identification number (PIN) ▶

**Sign here**

Joint return? See page 20. Keep a copy for your records.

Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and accurately list all amounts and sources of income I received during the tax year. Declaration of preparer (other than the taxpayer) is based on all information of which the preparer has any knowledge.

Your signature	Date	Your occupation	Daytime phone number ( )
Spouse's signature. If a joint return, <b>both</b> must sign.	Date	Spouse's occupation	

**Paid preparer's use only**

Preparer's signature ▶ Date ▶ Check if self-employed ☐ Preparer's SSN or PTIN ▶

Firm's name (or yours if self-employed), address, and ZIP code ▶ EIN ▶ Phone no. ( ) ▶