

Label

(See instructions on page 21.)

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

Presidential Election Campaign (See page 21.)

Label Here

For the year Jan. 1–Dec. 31, 2002, or other tax year beginning , 2002, ending , 20 OMB No. 1545-0074 Your first name and initial Last name Your social security number

Home address (number and street). If you have a P.O. box, see page 21. Important! You must enter your SSN(s) above.

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? Yes No

Filing Status

Check only one box.

1 Single 2 3 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 21.)

Exemptions

If more than five dependents, see page 22.

6a Yourself. If your parent (or someone else) can claim you as a dependent on his or her tax return, do not check box 6a. 6b Spouse. 6c Dependents: (1) First name Last name (2) Dependent's social security number (3) Dependent's relationship to you. No. of boxes checked on 6a and 6b. No. of children on 6c who: Dependents on 6c not entered above. Add numbers on lines above.

Income

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

If you did not get a W-2, see page 23.

Enclose, but do not attach, any payment. Also, please use Form 1040-V.

7 Wages, salaries, tips, etc. Attach Form(s) W-2 7 8a Taxable interest. Attach Schedule B if required 8a b 9 Ordinary dividends. Attach Schedule B if required 9 10 10 11 11 12 12 13 13 14 14 15a IRA distributions 15b 16a Pensions and annuities 16b 17 17 18 18 19 19 20a Social security benefits 20b 21 Other income. List type and amount (see page 29) 21 22 Add the amounts in the far right column for lines 7 through 21. This is your total income 22

Adjusted Gross Income

23 24 IRA deduction (see page 29) 24 25 Student loan interest deduction (see page 31) 25 26 Tuition and fees deduction (see page 32) 26 27 27 28 28 29 29 30 30 31 31 32 32 33a 33a 34 Add lines 23 through 33a 34 35 Subtract line 34 from line 22. This is your adjusted gross income 35

Tax and Credits

Standard Deduction for—
• People who checked any box on line 37a or 37b or who can be claimed as a dependent, see page 34.
• All others:
Single, \$4,700
Head of household, \$6,900
Married filing jointly or Qualifying widow(er), \$7,850
Married filing separately, \$3,925

36 Amount from line 35 (adjusted gross income)
37a Check if: [ ] You were 65 or older, [ ] Blind; [ ] Spouse was 65 or older, [ ] Blind.
Add the number of boxes checked above and enter the total here
b
38 Itemized deductions (from Schedule A) or your standard deduction (see left margin)
39 Subtract line 38 from line 36
40 If line 36 is \$103,000 or less, multiply \$3,000 by the total number of exemptions claimed on line 6d. If line 36 is over \$103,000, see the worksheet on page 35
41 Taxable income. Subtract line 40 from line 39. If line 40 is more than line 39, enter -0-
42 Tax (see page 36)
43
44 Add lines 42 and 43
45 Foreign tax credit. Attach Form 1116 if required
46 Credit for child and dependent care expenses. Attach Form 2441
47
48
49
50
51
52
53
54 Add lines 45 through 53. These are your total credits
55 Subtract line 54 from line 44. If line 54 is more than line 44, enter -0-

Table with columns for line numbers (36-55) and shaded areas for calculations.

Other Taxes

56 Self-employment tax. Attach Schedule SE
57
58 Tax on qualified plans, including IRAs, and other tax-favored accounts. Attach Form 5329 if required
59
60
61 Add lines 55 through 60. This is your total tax

Table with columns for line numbers (56-61) and shaded areas for calculations.

Payments

If you have a qualifying child, attach Schedule EIC.

62 Federal income tax withheld from Forms W-2 and 1099
63 2002 estimated tax payments and amount applied from 2001 return
64
65
66
67
68
69 Add lines 62 through 68. These are your total payments

Table with columns for line numbers (62-69) and shaded areas for calculations.

Refund

Direct deposit? See page 56 and fill in 71b, 71c, and 71d.

70 If line 69 is more than line 61, subtract line 61 from line 69. This is the amount you overpaid
71a
b
c
d
72

Table with columns for line numbers (70-72) and shaded areas for calculations.

Amount You Owe

73 Amount you owe. Subtract line 69 from line 61. For details on how to pay, see page 57
74

Table with columns for line numbers (73-74) and shaded areas for calculations.

Third Party Designee

Do you want to allow another person to discuss this return with the IRS (see page 58)? [ ] Yes. Complete the following. [ ] No
Designee's name, Phone no., Personal identification number (PIN)

Sign Here

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 complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Joint return? See page 21. Keep a copy for your records.

Your signature, Date, Your occupation, Daytime phone number
Spouse's signature. If a joint return, both 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.