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U. S. INDIVIDUAL INCOME TAX RETURN—1957

or Other Taxable Year Beginning 1957. Ending 195... (PLEASE TYPE OR PRINT)

Name (If this is a joint return of husband and wife, use first names of both)

Home address (Number and street or rural route)

(City, town, or post office) (Postal zone number) (State)

Your Social Security Number Occupation Wife's Social Security Number Occupation

If Income Was All From Salaries and Wages, Use Pages 1 and 2 Only. See Page 3 of the Instructions.

Exemptions

- 1. Check blocks which apply. (a) Regular \$600 exemption... (b) Additional \$500 exemption if 65 or over... (c) Additional \$600 exemption if blind... 2. List first names of your children who qualify as dependents... 3. Enter number of exemptions claimed for other persons... 4. Enter the total number of exemptions claimed on lines 1, 2, and 3.

Income

Table with 4 columns: Employer's Name, Where Employed (City and State), (a) Wages, etc., (b) Income Tax Withheld. Rows include wages, less travel expenses, balance, profit from business, profit from farming, and ADJUSTED GROSS INCOME.

ATTACH COPY B OF FORMS W-2 HERE

Tax due or refund

- 12. Tax on income on line 11. (If line 11 is under \$5,000, and you do not itemize deductions, use Tax Table on page 16... 13. (a) Dividends received credit from line 5 of Schedule J... (b) Retirement income credit from line 12 of Schedule K... 14. Balance (line 12 less line 13)... 15. Enter your self-employment tax from separate Schedule C or F... 16. Sum of lines 14 and 15... 17. (a) Tax withheld (line 5 above)... (b) Payments and credits on 1957 Declaration of Estimated Tax... 18. If your tax (line 12 or 16) is larger than your payments (line 17)... 19. If your payments (line 17) are larger than your tax (line 12 or 16)... 20. Amount of line 19 to be: (a) Credited on 1958 estimated tax... (b) Refunded \$...

County in which you live. is your wife (husband) making a separate return for 1957? Widows and widowers who are entitled to the special tax computation, see instructions, page 7, and check here

TAXPAYER—I declare under the penalties of perjury that this return (including any accompanying schedules and statements) has been examined by me and to the best of my knowledge and belief is a true, correct, and complete return.

Sign here (Your signature) (Date) (If this is a joint return, wife's signature) (Date)

To assure split-income benefits, husband and wife must include all their income and, even though only one has income, BOTH MUST SIGN.

PREPARER (other than taxpayer)—I declare under the penalties of perjury that I prepared this return for the person(s) named herein; and that this return (including any accompanying schedules and statements) is, to the best of my knowledge and belief, a true, correct, and complete return based on all the information relating to the matters required to be reported in this return of which I have any knowledge.

Sign here (Individual or Firm Signature) (Address) (Date)

Name	Relationship	Number of months dependant lived in your home. If born or died during year also write "B" or "D"	Did dependant have gross income of \$600 or more?	Amount YOU spent for dependant's support. If 100% write "All"	Amount spent by OTHERS including dependant from own funds
				\$	\$

Enter on line 3, page 1, the number of exemptions claimed above.

→ If an exemption is based on a multiple-support agreement of a group of persons, attach information described on page 5 of instructions.

ITEMIZED DEDUCTIONS—IF YOU DO NOT USE TAX TABLE OR STANDARD DEDUCTION

If Husband and Wife (Not Legally Separated) File Separate Returns and One Itemizes Deductions, the Other Must Also Itemize
State to whom paid. If necessary write more than one item on a line or attach additional sheets. Please put your name and address on any attachments.

Contributions			
	Total paid but not to exceed % of line 11, page 1, except as described on page 8 of instructions . . .		\$
Interest			
	Total interest		
Taxes			
	Total taxes		
Medical and dental expense (If 65 or over, see instructions, page 9)	Submit itemized list. Do not enter any expense compensated by insurance or otherwise.		
	1. Cost of medicines and drugs, in excess of 1 percent of line 11, page 1		\$
	2. Other medical and dental expenses		\$
	3. Total		\$
	4. Enter 3 percent of line 11, page 1		
5. Allowable amount (excess of line 3 over line 4). (See instructions, page 10, for limitations.)			
Other Deductions (Including child care and casualty losses)	Enter child care expenses paid but not to exceed \$600. Enter casualty losses which are not compensated by insurance or otherwise. See page 10 of instructions and attach information required.		
	Total		
TOTAL DEDUCTIONS (Enter here and on line 2 of Tax Computation, below)			\$

TAX COMPUTATION—IF YOU DO NOT USE THE TAX TABLE

1. Enter Adjusted Gross Income from line 11, page 1	\$
2. If deductions are itemized above, enter total of such deductions. If deductions are not itemized and line 1, above, is \$5,000 or more: (a) a married person filing separately enter \$500; (b) all others enter 10 percent of line 1, or \$1,000, whichever is smaller.	
3. Balance (line 1 less line 2)	
4. Multiply \$600 by total number of exemptions claimed on line 4, page 1	
5. TAXABLE INCOME (line 3 less line 4)	
6. Tax on amount on line 5. Use appropriate Tax Rate Schedule on page 11 of instructions	
7. If you had capital gains and the alternative tax applies, enter the tax from separate Schedule D	
8. Tax credits. If you itemized deductions, enter: (a) Credit for income tax payments to a foreign country or U. S. possession (Attach Form 1116) (b) Tax paid at source on tax-free covenant bond interest and credit for partially tax-exempt interest	\$
Enter total →	
9. Enter here and on line 12, page 1, the amount shown on line 6 or 7 less amount claimed on line 8	\$

IF INCOME WAS ALL FROM SALARIES AND WAGES, TEAR OFF THIS PAGE AND FILE ONLY PAGES 1 AND 2

Schedule A.—INCOME FROM DIVIDENDS (Income from Savings (Building) and Loan Associations and Credit Unions should be entered as interest in Schedule B)

1. Name of qualifying corporation declaring dividend (See instructions, page 12): (Indicate by (H), (W), (J) whether stock is held by husband, wife, or jointly)	Amount
.....	\$
.....
.....
.....
.....
2. Total	\$
3. Exclusion of \$50 (If both husband and wife received dividends, each is entitled to exclude not more than \$50 of his (her) own dividends)
4. Excess, if any, of line 2 over line 3. Enter here and on line 1, Schedule J	\$
5. Name of nonqualifying corporation declaring dividend:
.....
6. Enter total of lines 4 and 5	\$

Schedule B.—INCOME FROM INTEREST

Name of payer	Amount	Name of payer	Amount
.....	\$	\$
.....
Enter total here→			

Schedule D Summary.—GAINS AND LOSSES FROM SALES OR EXCHANGES OF PROPERTY

- 1. From sale or exchange of capital assets (from separate Schedule D)
- 2. From sale or exchange of property other than capital assets (from separate Schedule D)

Schedule E.—INCOME FROM PENSIONS AND ANNUITIES (See instructions, page 13)

Part I.—General Rule

1. Investment in contract	\$	4. Amount received this year	\$
2. Expected return	\$	5. Amount excludable (line 4 multiplied by line 3)
3. Percentage of income to be excluded (line 1 divided by line 2)	%	6. Taxable portion (excess of line 4 over line 5)

Part II.—Where your cost will be recovered within three years and your employer has contributed part of the cost

1. Cost of annuity (amounts paid in)	\$	4. Amount received this year	\$
2. Cost received tax-free in past years	5. Taxable portion (excess, if any, of line 4 over line 3)
3. Remainder of cost (line 1 less line 2)	\$		

Schedule G.—INCOME FROM RENTS AND ROYALTIES

I. Kind and location of property	2. Amount of rent or royalty	3. Depreciation (explain in Sch. I) or depletion	4. Repairs (attach itemized list)	5. Other expenses (attach itemized list)
.....	\$	\$	\$	\$
.....
.....
1. Totals	\$	\$	\$	\$
2. Net income (or loss) from rents and royalties (column 2 less sum of columns 3, 4, and 5)				

Schedule H.—OTHER INCOME

- 1. Partnerships (name and address)
 - 2. Estates or trusts (name and address)
 - 3. Other sources (state nature)
- Total income (or loss) from above sources (Enter here and on line 10, page 1)

Schedule I.—EXPLANATION OF DEDUCTION FOR DEPRECIATION CLAIMED IN SCHEDULE G

1. Kind of property (if buildings, state material of which constructed). Exclude land and other nondepreciable property	2. Date acquired	3. Cost or other basis	4. Depreciation allowed (or allowable) in prior years	5. Method of computing depreciation	6. Rate (%) or life (years)	7. Depreciation for this year
.....	\$	\$	\$
.....
.....

IF INCOME WAS ALL FROM SALARIES AND WAGES, TEAR OFF THIS PAGE AND FILE ONLY PAGES 1 AND 2

Schedule J.—DIVIDENDS RECEIVED CREDIT (See instructions, page 15)

1. Amount of dividends on line 4, Schedule A.....	\$	
2. Tentative credit (4 percent of line 1).....		
LIMITATION ON CREDIT		
3. Tax shown on line 12, page 1, plus amount, if any, shown on line 8(b), page 2.....		
4. 4 percent of taxable income.....		
Taxable Income Means { <ul style="list-style-type: none"> (a) If tax is computed on page 2, the amount shown on line 5, page 2. (b) If capital gains alternative tax applies, the amount shown on line 14, separate Schedule D. (c) If Tax Table is used, the amount shown on line 11, page 1, less 10 percent thereof, and less the deduction for exemptions (\$600 multiplied by the number of exemptions claimed on line 4, page 1). 		
5. Dividends received credit. Enter here and on line 13(a), page 1, the smallest of the amounts on line 2, 3, or 4, above.....	\$	

Schedule K.—RETIREMENT INCOME CREDIT (See instructions, page 15)

This credit applies:
 1. If you received pensions or annuities of \$1,200 or more from Social Security or Railroad Retirement,
 2. If you are under 65 years of age and had "earned income" of \$2,100 or more, OR
 3. If you are 65 or over and under 72, and had "earned income" of \$2,400 or more.

If separate return, use column B only. If joint return, use column A for wife and column B for husband → Did you receive earned income in excess of \$600 in each of any 10 calendar years before the taxable year 1957? Widow or widowers see instructions, page 15.....	A <input type="checkbox"/> Yes <input type="checkbox"/> No	B <input type="checkbox"/> Yes <input type="checkbox"/> No
If answer above is "Yes" in either column, furnish all information below in that column.		
1. Retirement income for taxable year which is included in line 11, page 1, of this return: (a) For taxpayers under 65 years of age: Enter only income received from pensions and annuities under public retirement systems, including retirement pay from Armed Forces..... (b) For taxpayers 65 years of age or older: Enter total of pensions and annuities, including retirement pay from Armed Forces, interest, gross rents, and dividends.....	\$	\$

LIMITATION ON RETIREMENT INCOME

2. Maximum amount of retirement income for credit computation.....	\$	1,200	00	\$	1,200	00
3. Deduct:						
(a) Amounts received in taxable year as pensions or annuities under the Social Security Act, the Railroad Retirement Acts, and certain other exclusions from gross income..... (b) Earned income received in taxable year: (This line does not apply to persons 72 years of age or over) (1) Taxpayers under 65 years of age, enter amount in excess of \$900..... (2) Taxpayers 65 or over and under 72, enter amount in excess of \$1,200.....						
4. Total of lines 3(a) and 3(b).....						
5. Balance (line 2 minus line 4).....						
6. Line 5 or line 1, whichever is smaller.....						
7. Tentative credit (20 percent of line 6).....						
8. Total tentative credit on this return (total of amounts on line 7, columns A and B).....						

LIMITATION ON RETIREMENT INCOME CREDIT

9. Amount of tax shown on line 12, page 1.....		
10. Dividends received credit from line 5, Schedule J, above.....		
11. Balance (line 9 less line 10).....		
12. Retirement income credit. Enter here and on line 13(b), page 1, the amount on line 8 or line 11, whichever is smaller.....	\$	