| Form | n 1040N | VR (2 | (000) | | | | | | | Pa | age 2 |
|-----------------|----------|---|---|-----------------------|------------------------|----------------------------------|----------------------------|----------------------|--------------------------------|----------------------|------------------|
| | 34 | Ar | nount from line 33 (adjusted gross income) | | | | | 34 | | | |
| | 35 | | mized deductions from page 3, Schedule A, line 17 | | | | | 35 | | 195 | |
| | 36 | | ubtract line 35 from line 34 | | | | | 36 | | | |
| | 37 | | kemptions (see page 11) | | • • | • • | • | 37 | | | |
| | 38 | | axable income. Subtract line 37 from line 36. If line 37 is m | nore th | an line | e 36. enter | -0- | 38 | | | |
| s | 39 | | x (see page 11). Check if any tax is from a 🗌 Form(s) 88 | | | orm 4972 | - | 39 | | | |
| dit | 40 | | ternative minimum tax. Attach Form 6251 | | | 0 | • | 40 | | | |
| Fax and Credits | 41 | | dd lines 39 and 40 | • | • • | • • | • | 41 | | | |
| | 42 | | preign tax credit. Attach Form 1116 if required | • | 42 | • • | · í | | | | |
| | 43 | | redit for child and dependent care expenses. Attach Form | 2//1 | 43 | | | | | | |
| ax | 44 | | hild tax credit (see page 12) | 2771 | 44 | | | | | | |
| г | 44 | | doption credit. Attach Form 8839 | • | 45 | | | | | | |
| | 45 | | ther. Check if from $\mathbf{a} \square$ Form 3800 $\mathbf{b} \square$ Form 8396 | • | | | | | | | |
| | 40 | | | | 46 | | | | | | |
| | 47 | | ☐ Form 8801 d ☐ Form (specify) d lines 42 through 46. These are your total credits | • | -10 | | | 47 | | | |
| | 48 | | ubtract line 47 from line 41. If line 47 is more than line 41, i | enter - | 0- | • • | • | 48 | | | |
| axes | 49 | | | | | ago 4 ling | . 02 | 49 | | 36 | |
| | | | ix on income not effectively connected with a U.S. trade or bu | | | - | | 50 | | 00 | |
| | 50 E1 | | ocial security and Medicare tax on tip income not reported to e | | | | 137 | 51 | | | |
| Ľ. | 51 52 | | x on IRAs, other retirement plans, and MSAs. Attach Form | 1 3329 | ii iequ | illeu . | • | 52 | | | |
| Other Taxes | 52 53 | 1 | | | | | • | 53 | | | |
| | 54 | | dd lines 48 through 53. This is your total tax | 10) | • • | • • | • | 54 | | | |
| | 55 | | ederal income tax withheld from Forms W-2, 1099, 1042-S, etc. | | 55 | 53 | 6 | | | | |
| | 55 56 | | | • turn | 56 | | ~ | | | | |
| | 50 | | 000 estimated tax payments and amount applied from 1999 re ccess social security and RRTA tax withheld (see page 13) | um | 57 | | | | | | |
| | | | | • | 58 | | | | | | |
| | 58 | | dditional child tax credit. Attach Form 8812 | • | 59 | | | | | | |
| | 59 | | mount paid with Form 4868 (request for extension). | | 60 | | | | | | |
| uts | 60 | | ther payments. Check if from a Form 2439 b Form 4 | +130 | 61 | | | | | | |
| ayments | 61 | | redit for amount paid with Form 1040-C | • | | | | | | | |
| | 62 | | S. tax withheld at source: | | 62a | 3 | 6 | | | | |
| | | | om page 4, line 80 | | 62b | - | - | | | | |
| | | | y partnerships under section 1446 (from Form(s) 8805 or 10 | | | | | | | | |
| | 63 | | S. tax withheld on dispositions of U.S. real property interes | 515: | 63a | | | | | | |
| | | | om Form(s) 8288-A | • | 63b | | | | | | |
| | 64 | | om Form(s) 1042-S dd lines 55 through 63b. These are your total payments | • | 030 | | | 64 | | 572 | |
| | | | | | | | | | | 012 | |
| | - ' | 65 | If line 64 is more than line 54, subtract line 54 from line | e 64. II | nis is | the amou | nt you | 65 | | | |
| | | | | | | | | | | | |
| 3 | 2 ' | 004 | Amount of line 65 you want refunded to you. If you wa page 14 and fill in 66b, c, and d | | inectiy | deposite | u, see | 66a | | | |
| Dofind | 2 | | | • | | • • | • • | | | | |
| ă | 2 | b | Routing number | hecking | | Savings | | | | | |
| | | d | Account number | | | | | | | | |
| | | 67 | Amount of line 65 you want applied to your 2001 | | | | | | | | |
| | | | estimated tax | | 67 | | | | | | |
| ŧ | e l | 68 | If line 54 is more than line 64, subtract line 64 from line 54. | This is | the a | mount vo | JOWe | | | | |
| Amount | § ` | | For details on how to pay, including what to write on your | | | | | 68 | | | |
| - Au | 0 | | 15. 5 | | | 1.5 | | | | | |
| | | 69 | Estimated tax penalty. Also include on line 68 | | 69 | | | | | | |
| Sig | In | | Under penalties of perjury, I declare that I have examined this return and acc belief, they are true, correct, and complete. Declaration of preparer (other that | companyi an taxpay | ing sche /er) is ba | dules and sta used on all inf | atements, a ormation of | nd to the which p | ebest of my l reparer has a | knowledg any know | ge and vledge |
| He | | | | | | n in the Unit | | | | - | |
| Keep | a copy | | Your signature | | | | | | | | |
| of th retur | n for | | | Date | | | | | eturn with the p | | |
| | records | S. | · | Date | | show | n below (see | |)? L Yo eparer's SSN | | 110 |
| Pai | | | Preparer's signature | Date | | Chec | | _ | :haigi 2 2211 | UPIN | 1 |
| Pre | | | Firm's name (or | | | self-e | mployed | <u> </u> | | | |
| | rer's | JV I | yours if self-employed), | | | | EIN Phone n | |) | | |
| Use Only | | | address, and ZIP code | | | | | |) | | |

| Form 1040NR (200 | 10) | | | Page 3 |
|---|-----|---|--|---------------------|
| Schedule / | 4— | Itemized Deductions (See pages 14, 15, a | nd 16.) | 07 |
| State and Local | 1 | State income taxes | 1 195 | |
| Income Taxes | 2 | Local income taxes | 2 | |
| | 3 | Add lines 1 and 2 | | 195 |
| Gifts to U.S. Charities | 4 | Caution: If you made a gift and received a benefit in return, see page 15. Gifts by cash or check. If you made any gift of \$250 or more, see page 15 | 4 | |
| | 5 | Other than by cash or check. If you made any gift of \$250 or more, see page 15. You must attach Form 8283 if "the amount of your deduction" (see definition on page 15) is more than \$500 | 5 | |
| | 6 | Carryover from prior year | 6 | |
| | 7 | Add lines 4 through 6 | 7 | |
| Casualty and Theft Losses | 8 | Casualty or theft loss(es). Attach Form 4684 | | |
| Job Expenses and Most Other Miscellaneous | 9 | Unreimbursed employee expenses—job travel, union dues, job education, etc. You must attach Form 2106 or Form 2106-EZ if required. See page 15 | 9 | |
| Deductions | 10 | Tax preparation fees | 10 | |
| | 11 | Other expenses. See page 16 for expenses to deduct here. List type and amount E | 11 | |
| | 12 | Add lines 9 through 11 | 12 | |
| | 13 | Enter the amount from Form 1040NR, line 34 | | |
| | 14 | Multiply line 13 by 2% (.02) | 14 | |
| | 15 | Subtract line 14 from line 12. If line 14 is more than line | 12, enter -0 15 | |
| Other Miscellaneous Deductions | 16 | Other—certain expenses of disabled employees, estate ta etc. List type and amount ► | | |
| Total Itemized Deductions | 17 | Is Form 1040NR, line 34, over \$128,950 (over \$64,475 if box 3, 4, or 5 on page 1 of Form 1040NR)? No. Your deduction is not limited. Add the amounts in the fi for lines 3 through 16. Also enter this amount on Form 10 Yes. Your deduction may be limited. See page 16 for the a here and on Form 1040NR, line 35. | ar right column 040NR, line 35. mount to enter | 195 040NR (2000) |

Form **1040NR** (2000)