Form **1040** Department of the Treasury — Internal Revenue Service
U.S. Individual Income Tax Return 1999
(99) IRS use only — Do not write or staple in this space.

For the year Jan 1-Dec 31, 1999, or other tax year beginning , 1999, ending , OMB No. 1545-0074

Label (See instructions.)
Use the IRS label. Otherwise, please print or type.

Your First Name	MI	Last Name	Your Social Security Number
Joseph	A	American	341-56-9777
If a Joint Return, Spouse's First Name	MI	Last Name	Spouse's Social Security Number
Gerry		American	341-69-5543

Home Address (number and street). If You Have a P.O. Box, See Instructions. Apartment No.
143 W Burton PL Condo

City, Town or Post Office. If You Have a Foreign Address, See Instructions. State ZIP Code
Chicago IL 60610-1368

Important! You **must** enter your social security number(s) above.

Presidential Election Campaign (See instructions.)

	Yes	No
Do you want $3 to go to this fund?		X
If a joint return, does your spouse want $3 to go to this fund?		X

Note: Checking 'Yes' will not change your tax or reduce your refund.

Filing Status
Check only one box.

1 [ ] Single
2 [X] Married filing joint return (even if only one had income)
3 [ ] Married filing separate return. Enter spouse's SSN above & full name here
4 [ ] Head of household (with qualifying person). (See instructions.) 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 19). (See instructions.)

Exemptions
6a [X] **Yourself.** If your parent (or someone else) can claim you as a dependent on his or her tax return, **do not** check box 6a
b [X] **Spouse**

No. of boxes checked on 6a and 6b: 2

c Dependents:

(1) First name Last name	(2) Dependent's social security number	(3) Dependent's relationship to you	(4) if qualifying child for child tax credit (see instructions)
Christine American	666-99-5555	Daughter	
Madison American	999-70-4444	Daughter	
Mackenzie American	326-56-9998	Daughter	X
Ruth American	302-56-0012	Parent	

If more than six dependents, see instructions.

No. of your children on 6c who: lived with you: 3
did not live with you due to divorce or separation (see instructions):
Dependents on 6c not entered above: 1

d Total number of exemptions claimed — Add numbers entered on lines above: 6

Income
Attach Copy B of your 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 instructions.
Enclose, but do not staple, any payment. Also, please use Form 1040-V.

7	Wages, salaries, tips, etc. Attach Form(s) W-2	7	196,000.
8a	**Taxable** interest. Attach Schedule B if required	8a	5,000.
b	**Tax-exempt** interest. **Do not** include on line 8a — 8b 2,500.		
9	Ordinary dividends. Attach Schedule B if required	9	3,000.
10	Taxable refunds, credits, or offsets of state and local income taxes (see instructions)	10	
11	Alimony received	11	
12	Business income or (loss). Attach Schedule C or C-EZ	12	
13	Capital gain or (loss). Attach Schedule D if required. If not required, check here [ ]	13	
14	Other gains or (losses). Attach Form 4797	14	
15a	Total IRA distributions 15a — b Taxable amount (see instrs)	15b	
16a	Total pensions & annuities 16a — b Taxable amount (see instrs)	16b	
17	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E	17	
18	Farm income or (loss). Attach Schedule F	18	
19	Unemployment compensation	19	
20a	Social security benefits 20a — b Taxable amount (see instrs)	20b	
21	Other income. List type & amount (see instrs)	21	
22	Add the amounts in the far right column for lines 7 through 21. This is your **total income**	22	204,000.

Adjusted Gross Income

23	IRA deduction (see instructions)	23	
24	Student loan interest deduction (see instructions)	24	
25	Medical savings account deduction. Attach Form 8853	25	
26	Moving expenses. Attach Form 3903	26	
27	One-half of self-employment tax. Attach Schedule SE	27	
28	Self-employed health insurance deduction (see instructions)	28	
29	Keogh and self-employed SEP and SIMPLE plans	29	
30	Penalty on early withdrawal of savings	30	
31a	Alimony paid b Recipient's SSN	31a	
32	Add lines 23 through 31a	32	
33	Subtract line 32 from line 22. This is your **adjusted gross income**	33	204,000.

BAA For Disclosure, Privacy Act, and Paperwork Reduction Act Notice, see instructions. Form **1040** (1999)

Tax and Credits

34	Amount from line 33 (adjusted gross income)		34	204,000.
35 a	Check if: ☐ **You** were 65/older, ☐ Blind; ☐ **Spouse** was 65/older, ☐ Blind. Add the number of boxes checked above and enter the total here G 35 a ☐			
b	If you are married filing separately and your spouse itemizes deductions or you were a dual-status alien, see instructions and check here G 35 b ☐			
36	Enter your **itemized deductions** from Schedule A, line 28, **Or standard deduction** shown on the left. **But** see instructions to find your standard deduction if you checked any box on line 35a or 35b **or** if someone can claim you as a dependent		36	28,058.
37	Subtract line 36 from line 34		37	175,942.
38	If line 34 is $94,975 or less, multiply $2,750 by the total number of exemptions claimed on line 6d. If line 34 is over $94,975, see the worksheet in the instructions for the amount to enter		38	14,520.
39	**Taxable income.** Subtract line 38 from line 37. If line 38 is more than line 37, enter -0-		39	161,422.
40	**Tax** (see instrs). Check if any tax is from a ☐ Form(s) 8814 b ☐ Form 4972 G		40	41,466.
41	Credit for child and dependent care expenses. Attach Form 2441	41		
42	Credit for the elderly or the disabled. Attach Schedule R	42		
43	Child tax credit (see instructions)	43		
44	Education credits. Attach Form 8863	44		
45	Adoption credit. Attach Form 8839	45		
46	Foreign tax credit. Attach Form 1116 if required	46		
47	Other. Check if from a ☐ Form 3800 b ☐ Form 8396 c ☐ Form 8801 d ☐ Form (specify)	47		
48	Add lines 41 through 47. These are your **total credits**		48	
49	Subtract line 48 from line 40. If line 48 is more than line 40, enter -0- G		49	41,466.

Standard Deduction for Most People

Single: $4,300

Head of household: $6,350

Married filing jointly or Qualifying widow(er): $7,200

Married filing separately: $3,600

Other Taxes

50	Self-employment tax. Attach Schedule SE	50	
51	Alternative minimum tax. Attach Form 6251	51	
52	Social security and Medicare tax on tip income not reported to employer. Attach Form 4137	52	
53	Tax on IRAs, other retirement plans, and MSAs. Attach Form 5329 if required	53	
54	Advance earned income credit payments from Form(s) W-2	54	
55	Household employment taxes. Attach Schedule H	55	
56	Add lines 49-55. This is your **total tax** G	56	41,466.

Payments

57	Federal income tax withheld from Forms W-2 and 1099	57	43,970.		
58	1999 estimated tax payments and amount applied from 1998 return	58			
59 a	**Earned income credit**. Attach Schedule EIC if you have a qualifying child.				
b	Nontaxable earned income: amount G and type G	59 a			
60	Additional child tax credit. Attach Form 8812	60			
61	Amount paid with request for extension to file (see instructions)	61			
62	Excess social security and RRTA tax withheld (see instrs)	62			
63	Other payments. Check if from a ☐ Form 2439 b ☐ Form 4136	63			
64	Add lines 57, 58, 59a, and 60 through 63. These are your **total payments** G			64	43,970.

Refund

Have it directly deposited! See instructions and fill in 66b, 66c, and 66d.

65	If line 64 is more than line 56, subtract line 56 from line 64. This is the amount you **Overpaid**		65	2,504.
66 a	Amount of line 65 you want **Refunded to You** G		66 a	2,504.
G b	Routing number G c Type: ☐ Checking ☐ Savings			
G d	Account number			
67	Amount of line 65 you want **Applied to Your 2000 Estimated Tax** G	67		

Amount You Owe

68	If line 56 is more than line 64, subtract line 64 from line 56. This is the **Amount You Owe.** For details on how to pay, see instructions G		68	
69	Estimated tax penalty. Also include on line 68	69		

Sign Here

Joint return? See instructions.

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

Your Signature	Date	Your Occupation	Daytime Telephone Number (optional)
A		Claims Adjuster	
Spouse's Signature. If a Joint Return, **Both** Must Sign.	Date	Spouse's Occupation	
A		Design Engineer	

Paid Preparer's Use Only

Preparer's Signature A	Date	Check if self-employed ☐	Preparer's SSN or PTIN
Firm's Name (or yours if self-employed) and Address A	Self-prepared	EIN	
		ZIP Code	

Schedule A **(Form 1040)**

Department of the Treasury Internal Revenue Service (99)

Itemized Deductions

G **Attach to Form 1040.**
G **See Instructions for Schedule A (Form 1040).**

OMB No. 1545-0074

1999

07

Name(s) Shown on Form 1040: Joseph A & Gerry American

Your Social Security Number: 341-56-9777

Medical and Dental Expenses		**Caution:** Do not include expenses reimbursed or paid by others.				
	1	Medical and dental expenses (see instructions)	1	3,700.		
	2	Enter amount from Form 1040, line 34 — 2 — 204,000.				
	3	Multiply line 2 above by 7.5% (.075)	3	15,300.		
	4	Subtract line 3 from line 1. If line 3 is more than line 1, enter -0-			4	0.
Taxes You Paid (See instructions.)	5	State and local income taxes	5	5,880.		
	6	Real estate taxes (see instructions)	6	4,500.		
	7	Personal property taxes	7			
	8	Other taxes. List type and amount G	8			
	9	Add lines 5 through 8			9	10,380.
Interest You Paid (See instructions.)	10	Home mortgage interest and points reported to you on Form 1098	10	17,500.		
	11	Home mortgage interest not reported to you on Form 1098. If paid to the person from whom you bought the home, see instructions and show that person's name, identifying number, and address G	11			
Note: Personal interest is not deductible.	12	Points not reported to you on Form 1098. See instructions for special rules	12			
	13	Investment interest. Attach Form 4952 if required. (See instructions.)	13			
	14	Add lines 10 through 13			14	17,500.
Gifts to Charity	15	Gifts by cash or check. If you made any gift of $250 or more, see instructions	15	2,500.		
If you made a gift and got a benefit for it, see instructions.	16	Other than by cash or check. If any gift of $250 or more, see instructions. You **Must** attach Form 8283 if over $500	16			
	17	Carryover from prior year	17			
	18	Add lines 15 through 17			18	2,500.
Casualty and Theft Losses	19	Casualty or theft loss(es). Attach Form 4684. (See instructions.)			19	
Job Expenses and Most Other Miscellaneous Deductions	20	Unreimbursed employee expenses ' job travel, union dues, job education, etc. You **Must** attach Form 2106 or 2106-EZ if required. (See instructions.) G Employee Business Expenses 650.	20	650.		
	21	Tax preparation fees	21	300.		
(See instructions for expenses to deduct here.)	22	Other expenses ' investment, safe deposit box, etc. List type and amount G	22			
	23	Add lines 20 through 22	23	950.		
	24	Enter amount from Form 1040, line 34 — 24 — 204,000.				
	25	Multiply line 24 above by 2% (.02)	25	4,080.		
	26	Subtract line 25 from line 23. If line 25 is more than line 23, enter -0-			26	0.
Other Miscellaneous Deductions	27	Other ' from list in the instructions. List type and amount G			27	
Total Itemized Deductions	28	Is Form 1040, line 34, over $126,600 (over $63,300 if married filing separately)? ☐ **No.** Your deduction is not limited. Add the amounts in the far right column for lines 4 through 27. Also, enter this amount on Form 1040, line 36. ☒ **Yes.** Your deduction may be limited. See instructions for the amount to enter.			G 28	28,058.

Itemized Deductions Limited per IRC Sec. 68.

Name(s) Shown on Form 1040. Do Not Enter Name and Social Security Number if Shown on Schedule A.
Joseph A & Gerry American

Your Social Security Number 341-56-9777

Schedule B ' Interest and Ordinary Dividends

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Part I Interest

(See instructions for Form 1040, line 8a.)

Note: If you received a Form 1099-INT, Form 1099-OID, or substitute statement from a brokerage firm, list the firm's name as the payer and enter the total interest shown on that form.

Note: If you had over $400 in taxable interest income, you must also complete Part III.

			Amount
1	List name of payer. If any interest is from a seller-financed mortgage and the buyer used the property as a personal residence, see the instructions and list this interest first. Also, show that buyer's social security number and address . . . G	**1**	
	Illinois Department of Revenue		2,500.00
	IBM		5,000.00
	Untitled		
	Subtotal		7,500.00
	Tax-Exempt Interest		-2,500.00
2	Add the amounts on line 1	**2**	5,000.00
3	Excludable interest on series EE and I U.S. savings bonds issued after 1989 from Form 8815, line 14. You **Must** attach Form 8815	**3**	
4	Subtract line 3 from line 2. Enter the result here and on Form 1040, line 8a . . . G	**4**	5,000.00

Part II Ordinary Dividends

(See instructions for Form 1040, line 8a.)

Note: If you received a Form 1099-DIV, or substitute statement from a brokerage firm, list the firm's name as the payer and enter the ordinary dividends shown on that form.

Note: If you had over $400 in ordinary dividends, you must also complete Part III.

			Amount
5	List name of payer. Include only ordinary dividends. If you received any capital gain distributions, see the instructions for Form 1040, line 13 . . . . . G	**5**	
	Ford Motor Co.		3,000.00
6	Add the amounts on line 5. Enter the total here and on Form 1040, line 9 . . . G	**6**	3,000.00

Part III Foreign Accounts and Trusts

(See instructions.)

	You must complete this part if you **(a)** had over $400 of interest or ordinary dividends; **(b)** had a foreign account; or **(c)** received a distribution from, or were a grantor of, or a transferor to, a foreign trust.	Yes	No
7a	At any time during 1999, did you have an interest in or a signature or other authority over a financial account in a foreign country, such as a bank account, securities account, or other financial account? See instructions for exceptions and filing requirements for Form TD F 90-22.1		X
b	If 'yes,' enter the name of the foreign country . . . G		
8	During 1999, did you receive a distribution from, or were you the grantor of, or transferor to, a foreign trust? If 'yes,' you may have to file Form 3520. See instructions		X