File this return with Collector of Internal Revenue on or before March 15, 1945. Any balance of tax due (item 8, below) must be paid in full with return. See separate Instructions for filling out return.

FORM	M 1040
Treasury	Department

## U. S. INDIVIDUAL INCOME TAX RETURN FOR CALENDAR YEAR 1944

1944

			or fiscal year beginning		and ending		. 1945	Do not write in thes	e snaces
		ssje	EMPLOYEES.—Instead of the your return, if your total incompleting Receipts or of such w	his form, you may use your ome was less than \$5,000,	Withholding Reconsisting whol	eceipt, Form W-2 (Re	v.), as With-	File Code Serial No.	e spaces
			NAME (PLEASE PL	RINT. If this return is for a h	9race	Godfrey St use both first names)	neehan	District (Cashier's Star	mp)
		(	ADDRESS 349 N. (PLI	EASE PRINT. Street and nur	Social S	e) 3400 92 0 security 525 - 50 -	64		
	wife (o	r hus	wn name. If married and your band). List names of other close joint return of husband and wife	relatives with 1944 income	es of less than \$	this is a joint return 500 who received more	of husbare than one	d and wife, list name	of your from you.
v			NAME (Please print)	Relationship	Lat CL	NAME (Please print)		Relationship	SEATS
Your Exemptions	Your name	la m	es C. Sheehan	xxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxx					200
"	Bei	CH	a E. Godfrey	motherafwife	15. Bo				
	L		30535030	260 201020000000000000000000000000000000					<u> </u>
	2. Enter y	nce,	total wages, salaries, bonuses, con bonds, etc. Members of arme	d forces and persons clain	ning traveling o	r reimbursed expenses	AY-ROLL s, see Inst	DEDUCTIONS for tax ruction 2.	es, dues,
	· 1	. PRI	INT EMPLOYER'S NAME	WHERE EMPLOYED (CIT	TY AND STATE)	AMOUNT	1 00	Total of lines 2 to	
	posto	0)	Fa: 102	Laurange, I	Max	\$ 146	211	ess inventory at end	
	War	D	ept. Orunsuen. Hosp	Chiera te, N.	CIEL!	5 45	24	11/-14	
Your	11 Mg	Fr	· · · · · · · · · · · · · · · · · · ·	N G 40 4 4		78	00	14 7	58
Income	- L.L.X.	1		- I	6/10	Enter total		\$ 1363	5 8
			ere the total amount of yo						
	obliga	tions	s unless wholly exempt from ta eceived any other income,	give details on page	3 and enter	the total here	AA SML	315	78
	5.Add	amo	ounts in items 2, 3, and 4	and enter the total	here	eas latings to spend	no vo obsa	8 119	201
	If		5 includes income of both hus d wife, show husband's income	hand				175	106
	L								36
	the cor	ma to	NCOME WAS LESS THAN \$5,0 ax rates as are used in the Tax C	omputation on page 4. The	table automati	cally allows about 10 r	ercent of	your total income for	charitable
How to Figure	contrib	oution	ns, interest, taxes, casualty losses in 10 percent, it will usually be to	a. medical expenses, and mi	scellaneous exp	enses. It your expend	litures and	l losses of these classe	s amount
Your Tax	IF YO	UR I	INCOME WAS \$5,000 OR MOR	RE.—Disregard the tax tab	le and compute	your tax on page 4.	You may e	ither take a standard	deduction
1000	of \$500	0 or i	itemize your deductions, whicheve AND WIFE.—If husband an	er is to your advantage. d wife file separate retur	ns, and one ite	mizes deductions, the	other mu	st also itemize deduc	tions.
			our tax from table on pag			come from al-		15 24	400
			ch have you paid on your		ионтонала	BO MOITANA.	l- Jacke	55	
Tax Due			y withholding from your w		eipts, Form W-2)_	\$ 43	30	vince to be beild at	
or or			y payments on 1944 Declar			and the same of the same	T de la	45	30
Refund	0.76		onitals American	. (1. 7)	- t - DAT ANY	Enter total	STATE OF THE PERSON NAMED IN	e 9,70	-
-	8. If yo	ur t	ax (item 6) is larger than	payments (item /),	enter Balance	the OVERPAYMEN	T here	\$ 11	- 320
	9. If yo	our j	payments (item 7) are lar	vment: Refunded to you	: or Credited	on your 1945 estimate	ed tax	4	
	_			1943	THE RESERVE OF THE PARTY.	r husband) making a		esturn for 10442	10
			year, what was the latest year?	1900 -	If "Yes," writ	e below:		("Yes"	or "No")
To which Coll To which Co	lector's office	e was	it sent?			(or husband)		- delimination	45.7
amount cl	aimed in ite	em 7	(B), above?	THE RESERVE OF THE PARTY OF THE		ce to which sent			
I declare my knowledg	under the p	is a	ties of perjury that this return true, correct, and complete retur	(including any accompany	ying schedules	and statements) has	been exam	nined by me and to the	ne best of
(Signature	of person (other	er tha	n taxpayer or agent) preparing return)	(Date)		(Signature of taxpay	er)		Date)
							STATE OF THE PARTY OF	THE RESERVE OF THE PARTY OF THE	

	Scl	redule	A.—INCO	ME	FROM A	ANNU	ITIES C	DR PE	NSIONS	Line	and the same	A. Carrie	of the	STREET,	
1. Cost of a	annuity (total amount	ou paid	in) \$		4.	Total	amount re	eceived t	his year	\$					
2. Amount	t received tax-free in p	rior yea	rs_	E W	5.	Excess	s, if any, o	f line 4	over line 3	2- 1			0		FUE
	der of your cost (line				6.	Enter	line 5, or	3 percen	t of line 1,	vhiche	ver is greate	,	\$	rangali S	-
2)			\$		-	40.00	ENGLE STATE		and and						
	Sc	hedul	B.—INC	OME	FROM	RENT	rs and	ROY	ALTIES	Schille	igo 1997 Luza				
	1. Kind of property		2. Am	ount of	3. Dep	reciation	or depletion chedule F)	4. Rep	airs (explain in	5.	Other expenses in Schedule				
	Target 1 and	CHING be		1		STATE AND ADDRESS OF THE PARTY		The state of the		10 X	III Delicoule	1			
									THE PARTY OF THE P	\$					
Net	profit (or loss) (col. 2	ess sum	Marian Style Sto	e uso	we has breed	and a sol	cup of the co		195 884 1						
of	cols. 3, 4, and 5)		\$		\$			\$		\$_					-
Sched	ule C.—PROFIT	(OR I	OSS) FR	OM I	BUSINES	SOR	PROFE	SSION	. (Farmers	should	ohtain Form 1	040F)			
	nature of business		7												
			1									I			
	eceipts	10-100			The state of the s					\$	100 miles	_	改善		
	OF GOODS SOLD	THE REAL PROPERTY.					USINESS		das "Labor"		l do ansator y	S 18 18 18			
an inc	come-determining factor)			VIII A			the state of the s		ness						
2 and 8 if	tters "C," or "C or M," or inventories are valued at e st or market whichever is lo	ther			Control of the Contro				ss property_			and the second second	The same of the same of		1001
									S)						o Pigran
	ory at beginning of your andise bought for sale_	100000							or services			The second	100		
	andise bought for sale.				14 5				nd depletion						
	al and supplies	to the best with the contract of		The same of the sa	(e	explain	in Schedul	le F)							
	costs(explain in Schedul	THE PERSON			11. 1701	Sched	irs, and oth	ner expen	ses (explain	e Lasis		and mo	TOTAL		
	otal of lines 2 to 6								y facilities		day a sound	10000			
	ventory at end of year				(a	attach s	tatement)					-			
	st of goods sold (line 7								ion (attach						
	8)	Carried Contract			st					The same of					
			1		20.	Total	of lines 11	to 19		\$			200		BOT
10. Gross p	profit (line 1 less line 9	) \$	and the second		21.	Total	of lines 9 ar	nd 20	Annual Sep	\$					NCOR!
		To the		and and	22. Net	profit	(or loss)	line 1 les	s line 21)		day	coere	33.	18	
Sched	lule D.—GAINS	AND L	OSSES FI	ROM	SALES (	OR EX	KCHANG	GES O	F CAPITA	I. AS	SETS F	rc.			
	(or loss) from sale or	V. Carlotte					_							315	778
STATE OF THE PERSON NAMED IN													NE NE		
	(or loss) from sale or	1400				1/1									-
	le E.—INCOME										ER SOUP	RCES	OTA		The same
	address of partnership														work
	address of estate or tr														To all
- Committee of the comm	es (state nature)						Simovba u	and of all	Amour	ıt,	MANUAL STREET				Two
													doug	7 -	000
	Total	inco	ne from	abo	ve sour	ces	(Enter a	as iten	1 4, page	1)			\$	315	116
	Schedule F.	-EXPI	ANATION	OF DI	EDUCTION	FOR	DEPRECI	ATION	CLAIMED	IN SC	HEDULES	B AND	C	174	
1. K	Kind of property	2 D.	3. Cost or othe		4. Assets full	v depre-	5. Deprec	iation al-	6. Remaining	cost or	7. Estimated life used in	8. Estim		9. Deprec	fation
(If buildings	, state material of which constructed)	2. Date acquired	or other none	depre-	ciated in use of year	at end	5. Deprecion lowed (or a in prior	llowable)	other basis	to be	accumulat- ing depre-	life fro	om	allowable	this
	7117	eri ingovi	cimote propi	10,7		1		1	3		ciation	of yea	ar		1
			\$	1	\$	-	\$	a priva	\$	rel a	To most)	267 10	\$	38	
						-							-		
						-1			- N - S - S - S - S - S - S - S - S - S			<u> </u>			
1.01	Schedule G.—EX	PLANAT	TION OF CO	LUM	NS 4 AND	5 OF	SCHEDUL	E B, A	ND LINES	6, 14,	AND 17 OF	SCHE	DULE	c	naidw
1. Column or Line No.	the state of the s	anation		anil	3. Amount	1000	1. Column Line No.	or		Explana		(i) (ii)	sit or	3. Amount	at-term Majoro B
edd add or i	us on the boundary	ood sali	(dimensistis)	101 8	hibida an	lynage.	ottos titus	ya sela	ii) materi i	ib Jac	d vagen b	shifted	le sell	rebas ora	als I
•				Ψ						eneman.	TO DESCRIPTION		ş	the daily	O DETER
Sales .		Contract L	Westpaline				- Contract						-		
(, 16,5 %)	hogs wagen to see to	of the school	Thy wrong since	S at an	h 333				(gila)	Larry and	673-10-101 <u>0</u> -30	0.00			

Do not itemize deductions if—(1) You determine your tax from the tax table on page 2, or
(2) Your total income is \$5,000 or more and you claim the \$500 standard deduction.

If husband and wife living together at end of year file separate returns and one itemizes deductions, the other must file his or her return on Form 1040, and must also itemize deductions.

**DEDUCTIONS** 

Describe deductions and state to whom paid. If more space is needed, list deductions on separate sheet of paper and attach to this return

Contributions	Church and charify \$		
	· Allowable Contributions (not in excess of 15 percent of item 5, page 1)	, 100	00
the last test	Allowable Contributions (not in excess of 15 percent of heart 5, page 1)	Car Carlo	
Interest			
2	Total Interest		
1 100 100 100 1	.   \$	etteette	
8 80 80 10	Aples 25 00		
Taxes	Communication (Telaphone) / 10		
4 24 84 85	almosion 5		
16 + 316   155   160 17   66   700   100	1 40 00	40	ni
68 ,即   時   例、	Total Taxes 40.00	16	
Losses from fire,	\$	100	DES.
Losses from fire, storm, shipwreck, or			
other casualty, or			
theft	Total Allowable Losses (not compensated by insurance or otherwise)		
1 12 12 12 12 12 12 12 12 12 12 12 12 12	Total Allowable Losses (not compensated by insurance of otherwise)		
1 18 18 18	THE RESERVE OF THE PERSON OF T	note a Temp	
0 1-50 80 80			
Medical and dental	EST 1 0 7 1 CLE 15 / 100 CTATE TO THIS COLUMN 10 1 1 1 1 60 1 5		
expenses	Net Expenses (not compensated by insurance or otherwise)\$		
	Enter 5 percent of item 5, page 1, and subtract from Net Expenses		
部 武	Allowable Medical and Dental Expenses. See Instruction for limitation		
Miscellaneous	\$		
(including alimony, amor-			
tizable bond premium,			
special deduction for			
the blind, etc.)	Total Miscellaneous Deductions		
92   60   20   CV	TOTAL DEDUCTIONS	15 140	100
TAX C	OMPUTATION—FOR PERSONS NOT USING TAX TABLE ON PA	GE 2	
1. Enter amount shown in	item 5, page 1. This is your Adjusted Gross Income	\$ 13.72	5
2. Enter DEDUCTIONS	(if deductions are itemized above, enter the total of such deductions; if adjusted gross income (line 1, e and deductions are not itemized, enter the standard deduction of \$500)		
3 Subtract line 2 from line	e and deductions are not itemized, enter the standard deduction of \$300)	\$	
4. Enter your Surtax Exen	nptions (\$500 for each person listed in item 1, page 1)		
5. Subtract line 4 from line	e 3. Enter the difference here. This is your Surtax Net Income	\$	
6. Use the Surtax Table in	instruction sheet to figure your Surtax on amount entered on line 5. Enter the amount here	\$	
	red on line 3, above. (If line 3 includes partially tax-exempt interest, see Tax Computation Instructions)		
	Exemption (\$500 if return includes income of only one person; otherwise see Tax Computation Instructions)		
	e 7, and enter the difference here		
10. Enter here 3 percent of	line 9. This is your Normal Tax	*	
enter here tax from lin	6 and 10, and enter the total here. (If alternative tax computation is made on separate Schedule D, e 15 of Schedule D)	\$	
	dard deduction in line 2, disregard lines 12, 13, & 14, and copy on line 15 the same figure you entered on line 11	100	No.
12. Enter here any income t	ax payments to a foreign country or U. S. possession (attach Form 1116)\$		
13. Enter here any income	tax paid at source on tax-free covenant bond interest		SE S
14. Add the figures on lines	12 and 13 and enter the total here		
15. Subtract line 14 from lin	ne 11. Enter the difference here and in item 6, page 1. This is your tax	1	

1045

## SCHEDULE OF GAINS AND LOSSES

## FROM SALES OR EXCHANGES OF (1) CAPITAL ASSETS AND (2) PROPERTY OTHER THAN CAPITAL ASSETS

(TO BE FILED WITH THE COLLECTOR OF INTERNAL REVENUE WITH FORM 1040)

F	Cal	land	an 1	l'ear	1944
POP	L.a	eno	121 488	ear	エフサヤ

THE RESERVE OF THE PARTY OF THE									STATE OF	Brown Fr	No.	VOTEZ:		4650			-
				(1)	CAPIT	AL A	1										,
1. Kind of property (if	2. Date acquired	3. Date sold	4. Gross s	ales	5. Cos	6. Expense of sal and cost of im- provements sub-			- al	Deprecion lowed (or ole) since	allow-		or loss (co		Gain or loss to be taken into account		
necessary, attach state- ment of descriptive details not shown below)	Mo. Day Year	Mo. Day Year	price (cont		other b	Asis	sequer sition	nt to acque or March 1913	ui- sit	ion or M 1913 (at schedu	arch I,		m of colum and 6)	ina 5	9. Per cent-	10. Amou	unt
	SHORT-TI	ERM CAPITAL	L GAINS	AND	LOSSES	-ASS	SETS I	HELD	NOT	MORE	THA	N 6 M	ONTHS				
Participation of the second	/	Brown and T	s	1	\$		SALDING CONTRACTOR		1			\$	3000		100	\$	
	*****					1000	CONTRACTOR OF THE PARTY OF THE		107		-				100		
															100		
															100		-
Total net short-term	capital gain o	or loss (enter in	line 1, col	umn	3, of sum	pary l	below)									3	
LONG	-TERM CAP	ITAL GAINS										THS	1	10	,	216	-10
	1939	1944	\$8250	200	\$ 581	W (	\$ 4	974	15	中岭	-	\$	62.1	M	50	\$ 210	1-1
			- 9		·										50		
							7-7-								50		
				-				,		para i	-			-	50	\$ 215	1
Total net long-term	capital gain or		Ine 2, colu													1 212	-1
		SUN						_				ken into	5	. Tota	al net g	gain or loss take	en
1. Classification		2. Capital loss carry-over	3. No	et gain	or loss to b	10, abo	into	accour	t from	partner trust f	ships a	nd comm	on into			columns 2, 3, ar	nd 4
		(attach statement) (a) Gain				oss (a) C			Gain (b)		b) Loss (a)		(a) Ga	in	(b) Loss		
	, , ,	.			Ι.						- 79					s	
Total net short-term capital Total net long-term capital			\$		5			\$				•	- 5			\$	
Net gain in column 5,				dule	D. page	3. For	m 104	0)		1 19			\$			XXXXX	x
Net loss in column 5, li (2) net income, or a without regard to ca	ines 1 and 2.	(The amount income if tax	to be enter	red or	n line 1, S	chedul	le D, pa	age 3, F	orm	1040, is Form 1	(1) th	is item	ed		xx	\$	
			COMPU	TAT	ION O	FAL	TER	NATIV	/E 7	ГАХ							BAK.
Use only if you had	d an excess of	net long-term	capital	gai	n over ne	t short	t-term	capit	al le	088, an	d line	5, page	4, Form	1040	, exce	eds \$10,000	T
. Net income (line 3, pag	e 4, Form 104	10)	\$														
. Excess of net long-term capital loss (line 2, o	capital gain of column 5 (a), l	ess line 1, colu	ımn			10. 1	Norma	l tax (3	% of	line 9).					!	,	_ -
5 (b), of summary at	The same of the		March Millian														
. Ordinary net income (lin	ne 1 less line 2)		\$			11. 1	Partial	tax (lin	e 6 pl	lus line	10)						
. Less: Surtax exemption	ns (line 4, pag	e 4, Form 104	10)			12	E007								3		
. Balance (surtax net inc	come)Tal	ble in Form I	040 \$	Q16		12.	50% o	t line 2.									- -
Surtax on line 5. (Se Instructions)			\$			12	Ale		- (lin	11 plu	line 1	2)	1				
. Ordinary net income (li exempt interest is	ine 3, above).	(If partially to Tax Computation	tax-			15.	Alterna	ative ta	x (iin	e i i più	s inic i	4)				77 S. C. S.	
Instructions on page	4 of Form 10	040 Instruction	ns)\$			14.							s line 10,		4.		
matractions on page						No. 15	For	m 1040	)							1000	- -
	otion (line 8, pa		)40)-			15.	Tax lia	bility (	line	3 or lin	ne 14,	whicher	ver is the	less	er).		
. Less: Normal-tax exemp			\$				IND STREET	25 M A C O M O		Not Williams		m 1040	)				301
. Less: Normal-tax exemp	mal tax					TH	IAN	CAPI	TAL	ASS	EIS	100					
. Less: Normal-tax exemp	mal tax		PROPER	TY	OTHER			1		-	1	VAUNUS INCOME.			1	CONTRACTOR OF THE PARTY OF	THE REAL PROPERTY.
. Less: Normal-tax exemp			3. Gross (contra	sales p	rice 4.	Cost or		of im	to a	sale and nents sul equisition 1, 1913	ose-	allowable or N	iation allow since acquarch 1, 19 ach schedul	isition 13	plu	Gain or loss (co us column 6 le m of columns 4	ess th
. Less: Normal-tax exemp		(2) I	3. Gross	sales p	rice 4.	Cost or basis		of im	to a	ments sul	ose-	allowable or N	since acquarch 1, 19	isition 13	plu	us column 6 le	ess th
. Less: Normal-tax exemp		(2) I	3. Gross	sales p	rice 4.	Cost or basis		of im	to a	ments sul	ose-	allowable or N	since acquarch 1, 19	isition 13	plu	us column 6 le	ess th

If any item in this schedule was acquired by you otherwise than by purchase, attach a statement explaining how acquired.

16-41028-1