

For the year Jan 1-Dec 31, 2014, or other tax year beginning

2014 ending

20

See separate instructions.

FERRY D LAMB JR
BRADLEY AVE
LAFAYETTE, GA 30728

Your social security number

Spouse's social security number

Make sure the SSNs above and on line 6c are correct.

Presidential Election Campaign
Check here if you, or your spouse if filing jointly, want \$3 to go to this fund. Checking a box below will not change your tax or refund.
 You Spouse

Foreign country name Foreign provincial state/county Foreign postal code

Filing Status
1 Single
2 Married filing jointly (even if one spouse had no income)
3 Married filing separately (each spouse's income above)
4 Head of household (person is a child but not your dependent, and with a qualifying person)
5 Qualifying widow(er) with dependent child

Exemptions
6a Yourself. If someone can claim you as a dependent, do not check this box.
6b Spouse
6c Dependents:
(1) First name Last name (2) Dependent's social security number (3) Dependent's relationship to you (4) If you are the child of a decedent (see instructions)
If more than four dependents, see instructions and check here

7	Wages, salaries, tips, etc. Attach Form(s) W-2 here. Also attach Forms W-2G and 1099-R if tax was withheld.	7	56,097.
8a	Taxable interest. Attach Schedule B if required.	8a	
8b	Tax-exempt interest. Do not include on line 8a.	8b	
9a	Ordinary dividends. Attach Schedule B if required.	9a	
9b	Qualified dividends	9b	
10	Taxable refunds, credits, or offsets of state and local income taxes	10	273.
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 <input type="checkbox"/>	13	
14	Other gains or losses. Attach Form 4797.	14	
15a	IRA distributions	15a	
15b	Taxable amount	15b	
16a	Pensions and annuities	16a	
16b	Taxable amount	16b	
17	Rental real estate, royalties, interest, S corporation dividends, etc. Attach Schedule E.	17	
18	Farm income. Attach Schedule F.	18	
19	Unemployment compensation	19	
20a	Social security benefits	20a	
20b	Taxable amount	20b	
21	Other income. List type and amount.	21	
22	Combine the amounts in the far right column for lines 7 through 21. This is your total income.	22	56,370.

23	Educator expenses	23	
24	Certain business expenses of reservists, performing artists, and fee-basis government officials. Attach Form 106-EZ.	24	
25	Health savings account deduction. Attach Form 8889.	25	
26	Moving expenses. Attach Form 3903.	26	
27	Deductible part of self-employment tax. Attach Schedule SE.	27	
28	Self-employed SEP, SIMPLE, and qualified plans	28	
29	Self-employed health insurance deduction	29	
30	Penalty on early withdrawal of savings	30	
31a	Alimony paid	31a	
31b	Recipient's SSN	31b	
32	IRA deduction	32	
33	Student loan interest deduction	33	
34	Tuition and fees. Attach Form 8917.	34	
35	Domestic production activities deduction. Attach Form 8903.	35	
36	Add lines 23 through 35	36	
37	Subtract line 36 from line 22. This is your adjusted gross income.	37	56,370.

KEA For Disclosure, Privacy Act, and Paperwork Reduction Act Notice, see separate instructions.

Form 1040 (2014)

Tax and Credits	38	Amount from line 37 (adjusted gross income)	38	56,370.
	39a	Check <input type="checkbox"/> You were born before January 2, 1950, <input type="checkbox"/> Blind. Total boxes checked <input type="checkbox"/> 39a		
		<input type="checkbox"/> Spouse was born before January 2, 1950, <input type="checkbox"/> Blind		
	b	If your spouse itemizes on a separate return or you were a dual-status alien, check here <input type="checkbox"/> 39b		
Standard Deduction for -	40	Itemized deductions (from Schedule A) or your standard deduction (see left margin)	40	13,272.
People who check any box on line 39a or 39b or who can be claimed as a dependent, see instructions.	41	Subtract line 40 from line 38	41	43,098.
All others:	42	Exemptions. If line 28 is \$132,523 or less, multiply \$3,950 by the number on line 42. Otherwise, see instructions	42	3,950.
Single or Married filing separately, \$0,000	43	Taxable income. Subtract line 42 from line 41. If line 42 is more than line 41, enter -0-	43	39,148.
Married filing jointly or Qualifying widow(er), \$12,400	44	Tax. Check if any from <input type="checkbox"/> Form(s) 8814 <input type="checkbox"/> Form 4872 <input type="checkbox"/>	44	5,638.
Head of household, \$0,000	45	Alternative minimum tax (see instructions). Attach Form 6251	45	
	46	Excess advance premium tax (see instructions). Attach Form 8879	46	
	47	Add lines 44, 45, and 46	47	5,638.
	48	Foreign tax credit. Attach Form 1116 (required)		
	49	Credit for child and dependent care expenses. Attach Form 2441		
	50	Education credits from Form 8833, line 1		
	51	Retirement savings contributions credit. Attach Form 8880	51	
	52	Child tax credit. Attach Schedule 8812, if required	52	
	53	Residential energy credit. Attach Form 5695	53	
	54	Other credits from Form <input type="checkbox"/> 3800 <input type="checkbox"/> 8801 <input type="checkbox"/>	54	
	55	Add in 48 through 54. These are your total credits	55	
	56	Subtract line 55 from line 47. If line 55 is more than line 47, enter -0-	56	5,638.
Other Taxes	57	Self-employment tax. Attach Form 1041 or Schedule SE	57	
	58	Unreported social security and Medicare tax. Attach Form 4138, line 8919	58	
	59	Additional tax on IRAs, other qualified plans, and annuities. Attach Form 5329 if required	59	
	60a	Household employment taxes from Schedule C	60a	
	60b	First-time homebuyer credit. Attach Form 5405 (required)	60b	500.
	61	Health care. Individual responsibility (see instructions). Full-year coverage <input checked="" type="checkbox"/>	61	
	62	Taxes from: <input type="checkbox"/> Form 8959 <input type="checkbox"/> Form 8980 <input type="checkbox"/> Instructions, ^{or} _{code(s)}	62	
	63	Add lines 58 through 62. This is your total tax	63	6,238.
Payments	64	Federal income tax withheld from Forms W-2 and 1099	64	7,480.
	65	2014 estimated tax payments and amount applied from 2013 return	65	
	66a	Earned Income credit (EIC)	66a	
	b	Non-taxable contributions election (see 66b)		
	67	Additional child tax credit. Attach Schedule 8812	67	
	68	American opportunity credit. Attach Form 8833, line B	68	
	69	Net premium tax credit. Attach Form 8862	69	
	70	Amount paid for qualified tuition on file		
	71	Excess social security and tier 1 RRTA tax withheld	71	
	72	Credit for federal tax on fuels. Attach Form 4138	72	
	73	Credits from Form <input type="checkbox"/> 2439 <input type="checkbox"/> Reserved <input type="checkbox"/> Reserved <input type="checkbox"/>	73	
	74	Add lines 64, 65, 66a, and 67 through 73. These are your total payments	74	7,480.
Refund	75	If line 74 is more than line 63, subtract line 63 from line 74. This is the amount you overpaid	75	1,342.
	76a	Amount of line 75 you want refunded to you. If Form 8888 is attached, check here <input type="checkbox"/>	76a	1,342.
Direct deposit?	b	Routing number <input type="checkbox"/> State: <input checked="" type="checkbox"/> Check <input type="checkbox"/> Savings		
See instructions	d	Account number <input type="checkbox"/>		
	77	Amount of line 75 you want applied to your 2015 estimated tax	77	
Amount You Owe	78	Amount you owe. Subtract line 74 from line 63. For details on how to pay, see instructions	78	
	79	Estimated tax penalty (see instructions)	79	

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Do you want to allow another person to discuss this return with the IRS (see instructions)? Yes. Complete below. No

Third Party Designee
 Designee's name _____ Phone no. _____ Personal ID 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.

Your signature _____	Date _____	Your occupation SURG TECH	Daytime phone number _____
Spouse's signature. If joint return, both must sign _____	Date _____	Spouse's occupation _____	If the IRS sent you an ID Protection PIN, enter it here (see instructions) _____

Paid Preparer Use Only
 Print/Type preparer's name _____ Preparer's signature _____ Date _____ Check if self-employed PTIN _____
 Firm's name _____ Firm's EIN _____
 Firm's address _____ Phone no. _____

**SCHEDULE A
(Form 1040)**

Department of the Treasury
Internal Revenue Service (99)

Itemized Deductions

Information about Schedule A and its separate instructions is at www.irs.gov/schedulea.
Attach to Form 1040.

OMB No. 1545-0074

2014

Attachment Sequence No. **07**

Name(s) shown on Form 1040

PERRY D LAMB JR

Your social security number

Caution. Do not include expenses reimbursed or paid by others.			
Medical and Dental Expenses	1 Medical and dental expenses (see instructions)	1	
	2 Enter amount from Form 1040, line 38	2	
	3 Multiply line 2 by 10% (.10). But if either you or your spouse was born before January 2, 1950, multiply line 2 by 7.5% (.075) if you are single, or by 5% (.05) if you are married.	3	
	4 Subtract line 3 from line 1. If line 3 is more than line 1, enter -	4	
Taxes You Paid	5 State and local (check only one box)		
	a <input checked="" type="checkbox"/> Income taxes, or	5	2,934.
	b <input type="checkbox"/> General sales taxes		
	6 Real estate taxes (see instructions)	6	2,114.
	BRADLEY AVE 2,114.		
	7 Personal property taxes	7	
	8 Other taxes. List type and amount	8	
	9 Add lines 5 through 8	9	5,048.
Interest You Paid	10 Home mortgage interest and points reported to you on Form 1098	10	7,602.
	11 Home mortgage interest not reported to you on Form 1098. If paid to the person from whom you bought the home, attach a statement showing that person's name, identifying number, and address	11	
	12 Points not reported to you on Form 1098. See instructions for special rules	12	
	13 Mortgage insurance premiums (see instructions)	13	622.
	14 Investment interest. Attach Form 4952 if required. (See instructions.)	14	
	15 Add lines 10 through 14	15	8,224.
Gifts to Charity	16 Gifts by cash or check. If you made any gift of \$250 or more, see instructions	16	
	17 Other than by cash or check. If any gift is \$250 or more, see instructions. You must attach Form 7083 if over \$500.	17	
	18 Carryover from previous year	18	
	19 Add lines 16 through 18	19	
Casualty and Theft Losses	20 Casualty or theft loss(es). Attach Form 4684. (See instructions.)	20	
Job Expenses and Certain Miscellaneous Deductions	21 Unreimbursed employee expenses - job travel, union dues, job education, etc. Attach Form 2106 or 2106-EZ if required. (See inst.)	21	
	22 Tax preparation fees	22	
	23 Other expenses - investment, safe deposit box, etc. List type and amount	23	
	24 Add lines 21 through 23	24	
	25 Enter amount from Form 1040, line 38	25	
Other Miscellaneous Deductions	26 Multiply line 25 by 2% (.02)	26	
	27 Subtract line 26 from line 24. If line 26 is more than line 24, enter -	27	
	28 Other - from list in instructions. List type and amount	28	
Total Itemized Deductions	29 Is Form 1040, line 38, over \$152,525?		
	<input checked="" type="checkbox"/> No. Your deduction is not limited. Add the amounts in the far right column for lines 4 through 28. Also, enter this amount on Form 1040, line 40.	29	13,272.
	<input type="checkbox"/> Yes. Your deduction may be limited. See the Itemized Deductions Worksheet in the instructions to figure the amount to enter.		
30 If you elect to itemize deductions even though they are less than your standard deduction, check here			

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