

Form 1040

Department of the Treasury—Internal Revenue Service

1976

This space for IRS use only

For the year January 1—December 31, 1976, or other taxable year beginning

, 1976 ending

, 19

Please print or type	Name (If joint return, give first names and initials of both)	Last name	Your social security number			
	RUFUS A.	LEWIS	156 20 0438			
Present home address (Number and street, including apartment number, or rural route)		For Privacy Act Notification, see page 5 of Instructions.				
801 ROLIVAR STREET		Spouse's social security no.				
City, town or post office, State and ZIP code		Occupation	Yours ► EXECUTIVE			
MONTGOMERY ALABAMA		Spouse's ►				
Filing Status	1 <input checked="" type="checkbox"/> Single (Check only ONE box)	6a Regular <input checked="" type="checkbox"/> Yourself <input type="checkbox"/> Spouse Enter number of boxes checked ►				
	2 <input type="checkbox"/> Married filing joint return (even if only one had income)	b First names of your dependent children who lived with you Enter number ►				
	3 <input type="checkbox"/> Married filing separately. If spouse is also filing give spouse's social security number in designated space above and enter full name here ►	c Number of other dependents (from line 7) ►				
	4 <input type="checkbox"/> Unmarried Head of Household. See page 7 of instructions to see if you qualify ►	d Total (add lines 6a, b, and c) ►				
	5 <input type="checkbox"/> Qualifying widow(er) with dependent child (Year spouse died ► 19). See page 7 of instructions.	e Age 65 or older. <input checked="" type="checkbox"/> Yourself <input type="checkbox"/> Spouse Enter number of boxes checked ►				
	7 Other dependents:	(a) Name	(b) Relationship	(c) Months lived in your home. If born or died during year, write B or D.	(d) Did dependent have income of \$750 or more?	(e) Amount furnished for dependent's support By YOU. If 100% write ALL \$	By OTHERS including dependent. $

Please attach Copy B of Forms W-2 here	8 Presidential Election Campaign Fund ► Do you wish to designate \$1 of your taxes for this fund? If joint return, does your spouse wish to designate \$1? Yes Yes ► No No	Note: If you check the "Yes" box(es) it will not increase your tax or reduce your refund.		
	9 Wages, salaries, tips, and other employee compensation (Attach Forms W-2, if unavailable, see page 6 of Instructions.)	10c 2420 00	9 15650 00	
	10a Dividends (See pages 9 and 16 of Instructions) 2520 00, 10b less exclusion 100 00, Balance ► (If gross dividends and other distributions are over \$400, list in Part I of Schedule B.)	11 667 42	12 11217 21	
	11 Interest income. { If \$400 or less, enter total without listing in Schedule B } (If over \$400, enter total and list in Part II of Schedule B) ►	13 29954 63	14	
	12 Income other than wages, dividends, and interest (from line 37) ►	15a 29954 63	15b	
	13 Total (add lines 9, 10c, 11 and 12) ►	15c 29954 63	16 6958 88	
	14 Adjustments to income (such as moving expense, etc. from line 42) ►	(If box on line 3 is checked see page 10 of Instructions)	17c 180 00	
	15a Subtract line 14 from line 13 ►	18 6778 88	19 45 69	
	b Disability income exclusion (sick pay) (attach Form 2440) ►	20 6693 19	21 -0-	
	c Adjusted gross income. Subtract line 15b from line 15a, then complete Part III on back (If less than \$8,000, see page 2 of Instructions on "Earned Income Credit.") ►	22 6693 19		
T				
Please attach Payments and Credits	16 Tax, check if from: Tax Table Tax Rate Schedule X, Y or Z Schedule D			
	Schedule G Form 2555 OR Form 4726			
	17a Multiply \$35.00 by the number of exemptions on line 6d ►	17a 35 00 Enter larger of a or b	17b 180 00	
	b Enter 2% of line 47 but not more than \$180 (\$90 if box 3 is checked) ►	18 Balance. Subtract line 17c from line 16 and enter difference (but not less than zero) ►		
	19 Credits (from line 54) ►	19		
	20 Balance. Subtract line 19 from line 18 and enter difference (but not less than zero) ►	20 6693 19		
	21 Other taxes (from line 62) ►	21 -0-		
	22 Total (add lines 20 and 21) ►	22 6693 19		
	23a Total Federal income tax withheld. (attach Forms W-2, or W-2P to front) (include amount allowed as credit from 1975 return) ►	23a 3339 33		
	b 1976 estimated tax payments (from page 2) as credit from 1975 return) ►	23b		
c Earned income credit. (from Instructions) ►	23c			
d Amount paid with Form 4868 ►	23d			
e Other payments (from line 66) ►	23e			
24 TOTAL (add lines 23a through e) ►	24 3339 33			
T				
Please attach Check or Money Order here	25 If line 22 is larger than line 24, enter BALANCE DUE IRS (Check here ► if Form 2210 or Form 2210F is attached. See page 10 of instructions.) ►	25 4353 96		
	26 If line 24 is larger than line 22, enter amount OVERPAID ►	26		
	27 Amount of line 26 to be REFUNDED TO YOU ►	27		
	28 Amount of line 26 to be credited on 1977 estimated tax ► 28			
	T			
	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.			
	ROBBINS & NICHOLSON, CPA's			
	by <i>Brady Nicholson</i> 6/15/77 Date			

Sign here	TAXPAYER'S COPY		Date
	Your signature	Preparer's signature (and employer's name, if any)	Date
Your signature		630654880	
Spouse's signature (if filing jointly, BOTH must sign even if only one had income)		Identifying number (see instructions) 205 GOVER Address (and R.R. code) 2600 EAST SOUTH BOULEVARD MONTGOMERY, AL 36116	

Form 4868
Department of the Treasury
Internal Revenue Service

Application for Automatic Extension of Time to File U.S. Individual Income Tax Return

1976

NOTE: Prepare this form in duplicate. File the original with the Internal Revenue Service Center where you are required to file your income tax return and pay the amount shown on line 6 below. Attach the duplicate to the face of your Form 1040. This is not an extension of time for payment of tax. The law imposes a penalty for late payment of tax unless you show reasonable cause for failure to pay when due. (See Instruction F.)

Please	Name (If joint return, give first names and initials of both)	Last name	Your social security number
Print	Rufus A.	Lewis	155 20 0438
or	Present home address (Number and street, including apartment number, or rural route)		Spouse's social security number
Type	801 Bolivar Street		
	City, town or post office, State and ZIP Code		
	Montgomery, AL		

An automatic 2-month extension of time until June 15, 1977, is hereby requested in which to file Form 1040 for the calendar year 1976 (or if a fiscal year return until 19....., for the taxable year beginning 1976, and ending 1977).

1 Total tax you expect to owe for 1976 (see instruction C)	2,339.23
2 Federal income tax withheld	2,339.23
3 1976 Estimated tax payments (include 1975 overpayment allowed as a credit)	
4 Other payments (see instruction C)	
5 Total (add lines 2, 3, and 4)	2,339.23
6 BALANCE DUE (subtract line 5 from line 1). Pay in full with this application	0 -

Signature and Verification

If Prepared by Taxpayer.—Under penalties of perjury, I declare that to the best of my knowledge and belief, the statements made herein are true and correct.

Your signature _____ Date _____

Spouse's signature (if filing jointly, BOTH must sign even if only one had income) _____ Date _____

If Prepared by Someone Other Than Taxpayer.—Under penalties of perjury, I declare that to the best of my knowledge and belief, the statements made herein are true and correct, that I am authorized by the taxpayer to prepare this application, and that I am:

- A member in good standing of the bar of the highest court of (specify jurisdiction)
- A certified public accountant duly qualified to practice in (specify jurisdiction) *Alabama*
- A person enrolled to practice before the Internal Revenue Service.
- A duly authorized agent holding a power of attorney with respect to filing an extension of time. (The power of attorney need not be submitted unless requested.)
- A person standing in close personal or business relationship to the taxpayer who is unable to sign this application because of illness, absence, or other good cause. My relationship to the taxpayer and the reasons why the taxpayer is unable to sign this application are _____

Signature of preparer other than taxpayer *C. Polkett* Date *4/14/77*

See instructions on reverse

ALL INFORMATION IS COPY

Part I Income other than Wages, Dividends and Interest

29 Business income or (loss) (attach Schedule C)	29	
30a Net gain or (loss) from sale or exchange of capital assets (attach Schedule D)	30a	
b 50% of capital gain distributions (not reported on Schedule D—see page 10 of Instructions)	30b	
31 Net gain or (loss) from Supplemental Schedule of Gains and Losses (attach Form 4797)	31	
32a Pensions, annuities, rents, royalties, partnerships, estates or trusts, etc. (attach Schedule E)	32a	1388
b Fully taxable pensions and annuities (not reported on Schedule E—see page 10 of Instructions)	32b	33
33 Farm income or (loss) (attach Schedule F)	33	
34 State income tax refunds (does not apply if refund is for year in which you took the standard deduction—others see page 10 of Instructions)	34	
35 Alimony received	35	
36 Other (state nature and source—see page 11 of Instructions) ►	36	9828
<i>INCOME RECEIVED AS STATE LEGISLATOR</i>		88
37 Total (add lines 29 through 36). Enter here and on line 12 ►	37	11217
		21

Part II Adjustments to Income

38 Moving expense (attach Form 3903)	38	
39 Employee business expense (attach Form 2106)	39	
40a Payments to an individual retirement arrangement from attached Form 5329, Part III	40a	
b Payments to a Keogh (H.R. 10) retirement plan	40b	
41 Forfeited interest penalty for premature withdrawal (see page 12 of Instructions)	41	
42 Total (add lines 38 through 41). Enter here and on line 14 ►	42	

Part III Tax Computation

43 Adjusted gross income (from line 15c). If you have unearned income and can be claimed as a dependent on your parent's return, check here ► <input type="checkbox"/> and see page 9 of Instructions	43	29954	63
44a If you itemize deductions, check here ► <input checked="" type="checkbox"/> and enter total from Schedule A, line 40, and attach Schedule A	44	4032	42
b Standard deduction—if you do not itemize deductions, check here ► <input type="checkbox"/> and:			
If you checked the box on line 2 or 5, enter the greater of \$2,100 OR 16% of line 43—but not more than \$2,800	44	4032	42
1 or 4, enter the greater of \$1,700 OR 16% of line 43—but not more than \$2,400			
3, enter the greater of \$1,050 OR 16% of line 43—but not more than \$1,400			
45 Subtract line 44 from line 43 and enter difference (but not less than zero)	45	25922	21
46 Multiply total number of exemptions claimed on line 6f by \$750	46	1500	00
47 Taxable income. Subtract line 46 from line 45 and enter difference (but not less than zero)	47	24422	21
● If line 47 is \$20,000 or less and you did not average your income on Schedule G, or figure your tax on Form 2555, Exemption of Income Earned Abroad, find your tax in Tax Table. Enter tax on line 16 and check appropriate box.			
● If line 47 is more than \$20,000, figure your tax on the amount on line 47 by using Tax Rate Schedule X, Y, Z, or if applicable, the alternative tax from Schedule D, income averaging from Schedule G, tax from Form 2555 or maximum tax from Form 4726. Enter tax on line 16 and check appropriate box.			

Part IV Credits

48 Credit for the elderly (attach Schedules R & RP)	48		
49 Credit for child care expenses (attach Form 2441)	49		
50 Investment credit (attach Form 3468)	50		
51 Foreign tax credit (attach Form 1116)	51		
52 Contributions to candidates for public office credit (see page 12 of Instructions)	52		
53 Work Incentive (WIN) Credit (attach Form 4874)	53		
54 Total (add lines 48 through 53). Enter here and on line 19 ►	54		

Part V Other Taxes

55 Tax from recomputing prior-year investment credit (attach Form 4255)	55		
56 Minimum tax. Check here ► <input type="checkbox"/> , and attach Form 4625	56		
57 Tax on premature distributions from attached Form 5329, Part V	57		
58 Self-employment tax (attach Schedule SE)	58		
59 Social security tax on tip income not reported to employer (attach Form 4137)	59		
60 Uncollected employee social security tax on tips (from Forms W-2)	60		
61 Excess contribution tax from attached Form 5329, Part IV	61		
62 Total (add lines 55 through 61). Enter here and on line 21 ►	62		

Part VI Other Payments

63 Excess FICA, RRTA, or FICA/RRTA tax withheld (two or more employers—see page 13 of Instructions)	63		
64 Credit for Federal tax on special fuels, nonhighway gasoline and lubricating oil (attach Form 4136)	64		
65 Credit from a Regulated Investment Company (attach Form 2439)	65		
66 Total (add lines 63 through 65). Enter here and on line 23e ►	66		

**Schedules A & B—Itemized Deductions AND
(Form 1040)
Dividend and Interest Income**

Department of the Treasury
Internal Revenue Service

► Attach to Form 1040. ► See Instructions for Schedules A and B (Form 1040).

1976

Name(s) as shown on Form 1040

RUFUS A. LEWIS

Your social security number
155-20-0438

Schedule A—Itemized Deductions (Schedule B on back)

Medical and Dental Expenses (not compensated by insurance or otherwise) (See page 13 of Instructions.)

1 One half (but not more than \$150) of insurance premiums for medical care. (Be sure to include in line 10 below)		
2 Medicine and drugs		
3 Enter 1% of line 15c, Form 1040		
4 Subtract line 3 from line 2. Enter difference (if less than zero, enter zero)		
5 Enter balance of insurance premiums for medical care not entered on line 1		
6 Enter other medical and dental expenses:		
a Doctors, dentists, nurses, etc.		
b Hospitals		
c Other (itemize—include hearing aids, dentures, eyeglasses, transportation, etc.) ►		
DENTAL WORK	2616	00
7 Total (add lines 4 through 6c)	2616	00
8 Enter 3% of line 15c, Form 1040	898	64
9 Subtract line 8 from line 7 (if less than zero, enter zero)	1717	36
10 Total (add lines 1 and 9). Enter here and on line 34 ►	1717	36

Taxes (See page 13 of Instructions.)

11 State and local income	633	60
12 Real estate		
13 State and local gasoline (see gas tax tables)		
14 General sales (see sales tax tables)	312	96
15 Personal property		
16 Other (itemize) ►		
STATE UNEMPLOYMENT Comp	24	00
17 Total (add lines 11 through 16). Enter here and on line 35 ►	970	56

Interest Expense (See page 14 of Instructions.)

18 Home mortgage		
19 Other (itemize) ►		
20 Total (add lines 18 and 19). Enter here and on line 36 ►		

Contributions (See page 15 of Instructions for examples.)

21 a Cash contributions for which you have receipts, cancelled checks or other written evidence		41	00
b Other cash contributions. List donees and amounts. ►			
22 Other than cash (see page 15 of instructions for required statement)			
23 Carryover from prior years			
24 Total contributions (add lines 21a through 23). Enter here and on line 37 . . . ►		41	00

Casualty or Theft Loss(es) (See page 15 of Instructions.)

Note: If you had more than one loss, omit lines 25 through 28 and see page 15 of Instructions for guidance.

25 Loss before insurance reimbursement			
26 Insurance reimbursement			
27 Subtract line 26 from line 25. Enter difference (if less than zero, enter zero)			
28 Enter \$100 or amount on line 27, whichever is smaller			
29 Casualty or theft loss (subtract line 28 from line 27). Enter here and on line 38 . . ►			

Miscellaneous Deductions (See page 15 of Instructions.)

30 Alimony paid			
31 Union dues			
32 Other (itemize) ►			
EMPLOYEE BUS. EXP- 2106		1293	80
SAFE DEPOSIT Box		10	50

33 Total (add lines 30 through 32). Enter here and on line 39 ►

1303

Summary of Itemized Deductions

A

34 Total medical and dental—line 10	1717	36
35 Total taxes—line 17	970	56
36 Total interest—line 20		
37 Total contributions—line 24		41
38 Casualty or theft loss(es)—line 29		
39 Total miscellaneous—line 33		
40 Total deductions (add lines 34 through 39). Enter here and on Form 1040, line 44 ►	4032	42

SCHEDULE E
(Form 1040)

Department of the Treasury
Internal Revenue Service

Supplemental Income Schedule

(From pensions and annuities, rents and royalties, partnerships, estates and trusts, etc.)
► Attach to Form 1040. ► See Instructions for Schedule E (Form 1040).

1976

Name(s) as shown on Form 1040

RUFUS A LEWIS

Your social security number
151200438

Part I Pension and Annuity Income. If fully taxable, do not complete this part. Enter amount on Form 1040, line 32b. For one pension or annuity not fully taxable, complete this part. If you have more than one pension or annuity that is not fully taxable, attach a schedule and enter combined total of taxable portions on line 5.

1 Name of payer
2 Did your employer contribute part of the cost?
If "Yes," is your contribution recoverable within 3 years of the annuity starting date?
If "Yes," show: Your contribution \$, Contribution recovered in prior years
2
3
4
5
3 Amount received this year
4 Amount excludable this year
5 Taxable portion (subtract line 4 from line 3)

Yes No
 Yes No

Part II Rent and Royalty Income. If you need more space use Form 4831.

Have you claimed expenses connected with your vacation home rented to others? Yes No

Note: If you are reporting farm rental income here, see Schedule E Instructions to determine if you should file Form 4835. If at least two-thirds of your gross income is from farming or fishing, check this box ►

(a) Kind and location of property if residential, also write "R"	(b) Total amount of rents	(c) Total amount of royalties	(d) Depreciation (explain below) or depletion (attach computation)	(e) Other expenses (Repairs, etc.— explain below)
RENTAL HOUSES (R)	1890.00		499.59	902.08
FARMLAND	900.00			
6 Totals	2790.00	499.59	902.08	
7 Net income or (loss) from rents and royalties (column (b) plus column (c) less columns (d) and (e)) .		7	1388.33	
8 Net rental income or (loss) (from Form 4831)		8		
9 Net farm rental profit or (loss) (from Form 4835)		9		
10 Total rent and royalty income (add lines 7, 8, and 9)				1388.33

Part III Income or Losses from Partnerships, Estates or Trusts, Small Business Corporations.

Note: If any of the partnership, estate or trust income reported below is from farming or fishing, see Schedule E Instructions to determine if you should also file Form 4835. If at least two-thirds of your gross income is from farming or fishing, check this box ►

Enter in column (b): P for Partnership, E for Estate or Trust, or S for Small Business Corp.	(b)	(c) Employer Identification number	(d) Income or (loss)	(e) Additional 1st year depreciation (applicable only to partnerships)
11 Totals				
12 Income or (loss). Total of column (d) less total of column (e)				12

13 TOTAL (add lines 5, 10, and 12). Enter here and on Form 1040, line 32a ► 13 1388.33

Explanation of Column (e), Part II		Item	Amount	Item	Amount
Item	Amount				
REPAIRS	902.08				

Schedule for Depreciation Claimed in Part II Above

If you need more space use Form 4562.

(a) Description of property	(b) Date acquired	(c) Cost or other basis	(d) Depreciation allowed or allowable in prior years	(e) Method of computing depreciation	(f) Life or rate	(g) Depreciation for this year	E
1 Total additional first-year depreciation (do not include in items below)							
2 Totals		10564.47				499.59	

Form 2106

Department of the Treasury
Internal Revenue Service

Employee Business Expenses

1976

► Attach to Form 1040.

Your name

RUFUS A. LEWIS

Employer's name

STATE OF ALABAMA

Social security number

155 20 0438

Occupation in which expenses were incurred

STATE LEGISLATOR

Employer's address

MONTGOMERY, ALABAMA

Instructions

Include all expenses you paid or incurred as an employee, or expenses you charged to your employer (for example, through use of credit cards), or expenses for which you received an advance, allowance, or reimbursement. For a more detailed explanation of these expenses, see instructions for Form 1040.

Include business expenses for which you were paid (reimbursed)

by your employer in Part I, line 6, unless they are included on your Form W-2. Report any such amounts shown on your Form W-2 as wages on Form 1040, line 9. Check with your employer if you doubt whether the payment is included on your Form W-2.

For a detailed explanation of the rules for deductions for travel, entertainment, and gift expenses, see Publication 463, Travel, Entertainment, and Gift Expenses.

Use Form 3903 to compute any moving expense deduction.

PART I.—Employee Business Expenses Deductible in Computing Adjusted Gross Income on Form 1040, Line 15c

1 Travel expenses while away from home on business (number of days.....):

(a) Airplane, boat, railroad, etc., fares . . . . .	.....	.....
(b) Meals and lodging . . . . .	.....	.....
(c) Automobile expenses (from Part IV) . . . . .	.....	.....
(d) Other (specify) ► . . . . .	.....	.....

Total travel expenses

2 Transportation expenses (not between home and work and not incurred while away from home overnight):

(a) Airplane, bus, railroad, taxi, etc., fares . . . . .	.....	.....
(b) Automobile expenses (from Part IV) . . . . .	.....	.....
(c) Other (specify) ► . . . . .	.....	.....

Total transportation expenses

3 Outside salesperson's expenses:

(a) Automobile expense's (from Part IV) . . . . .	.....	.....
(b) Other (specify) ► . . . . .	.....	.....

Total outside salesperson's expenses

4 Employee expenses other than traveling, transportation, and outside salesperson's expenses to the extent of reimbursement

5 Total of lines 1, 2, 3, and 4

6 Less: Employer's payments for above expenses (other than amounts included on Form W-2)

7 Excess expenses (line 5 less line 6). Enter here and include on Form 1040, line 39

8 Excess payments (line 6 less line 5). Enter here and include on Form 1040, line 36

PART II.—Employee Business Expenses which are Deductible if You Itemize Deductions on Schedule A (Form 1040)

1 Business expenses other than those included above (specify) ► EXPENSES ASSOCIATED

WITH DUTIES AS STATE LEGISLATOR: OFFICE HELP, COPYING,
MACHINE LEASE PAYMENTS, AND MISC. OFFICE EXPENSES.

1293 00

2 Total

If you itemize your deductions instead of using the standard deduction, deduct under Miscellaneous Deductions, Schedule A (Form 1040).

PART III.—Additional Information to be Furnished When Claiming a Deduction for Educational Expenses

1 Name of educational institution or activity ►

2 Address ►

3 Were you required to undertake this education to meet the minimum educational requirements to qualify in your employment, trade or business? Yes No4 Will the study program undertaken qualify you for a new trade or business? Yes No

5 If your answer to question 3 or 4 is No, state the reason for obtaining the additional education and show the relationship between the courses taken and your employment during the period ►

6 List the principal subjects studied at the educational institution or describe your educational activity ►

Name and address PUFUS A. LEWIS 155-20-0438

DEPRECIATION

YEAR

No.	Description of Property	Date acquired	Cost or other basis	Previous depreciation	Method used	Estimated life (yrs.)		Depreciation allowable this year
1	REPAIRS - HALL ST.	1975	\$ 821 57	\$ 41 10	SL	10YRS		\$ 82 16
2	FRAME HOUSE - HALL ST.	1947	3000 00	2875 00	SL	25YRS		120 00
3	REPAIRS - HALL ST	1950-57	2075 00	1472 00	SL	25YRS		83 00
4	REPAIRS - HALL ST	1956	2500 00	2500 00	SL	20YRS		-0-
5	REPAIRS - ROOF - HALL ST	12-30-72	434 70	130 47	SL	10YRS		43 49
6	REPAIRS - SHEETROCK - HALL ST	11-5-72	556 00	176 08	SL	10YRS		55 61
7	PANELING - HALL ST	8-1-75	892 00	126 37	SL	10YRS		89 20
8	IMPROVEMENTS - HALL ST	1-31-76	245 00	-0-	SL	10YRS		26 13
9								
10								
11								
12								
13								
14								
15								
16								
17								
18								
19								
20								
21								
22								
23								
24								
25								
26								
27								
28								
Totals.....			\$ 10564 47	\$ 4846 02				\$ 499 59

Computation of Investment Credit

► Attach to your tax return.

1976

Name

RUFUS A. LEWIS

Identifying number as shown on page 1 of your tax return

155-20-0438

1 Use schedule below to list qualified investment in new and used property acquired or constructed and placed in service during the taxable year; and also list qualified progress expenditures made during the 1976 taxable year and qualified progress expenditures made in 1974 and 1975 taxable years providing a proper election as prescribed in section 46(d)(6) was made for such prior years. If progress expenditure property is placed in service during the taxable year, do not list qualified progress expenditures for this property. See Specific Instruction for line 1.

If 100% investment credit is being claimed on certain ships, check this block. ► See Instruction K for details.

Note: Include your share of investment in property made by a partnership, estate, trust, small business corporation, or lessor.

Type of property	Line	(1) Life years	(2) Cost or basis (See instruction G)	(3) Applicable percentage	(4) Qualified investment (Column 2 x column 3)
New property	(a)	3 or more but less than 5		33 1/3	
	(b)	5 or more but less than 7	1285.30	66 2/3	856.87
	(c)	7 or more		100	
Qualified progress expenditures	(d)	7 or more		20	
	(e)	7 or more		40	
Used property (See instructions for dollar limitation)	(f)	3 or more but less than 5		33 1/3	
	(g)	5 or more but less than 7		66 2/3	
	(h)	7 or more		100	

2 Qualified investment—add lines 1(a) thru (h) /

3 10% of line 2

4 7% (4% for public utility property) of certain property (see Instruction for line 1)

5 Electing corporations with qualifying stock ownership plans—Enter 1% of line 2 (see Instruction I). (Attach election statement.)

6 Carryback and carryover of unused credit(s). See instruction F—attach computation

7 Tentative investment credit—Add lines 3, 4, 5 and 6 85.69

Limitation

8 (a) Individuals—Enter amount from line 18, page 1, Form 1040
 (b) Estates and trusts—Enter amount from line 24 or 25, page 1, Form 1041
 (c) Corporations—Enter amount from line 9, Schedule J, page 3, Form 1120

9 Less: (a) Credit for the elderly (individuals only)
 (b) Foreign tax credit
 (c) Tax on lump-sum distributions (see instruction for line 9(c))
 (d) Possession Tax Credit (corporations only)

10 Total—Add lines 9(a), (b), (c) and (d) -0-

11 Line 8 less line 10

12 (a) Enter amount on line 11 or \$25,000, whichever is lesser. (Married persons filing separately, controlled corporate groups, estates, and trusts, see instruction for line 12.)
 (b) If line 11 exceeds line 12(a), enter 50% of the excess. (Public utilities, railroads, and airlines see instruction J.)

13 Total—Add lines 12(a) and (b) 6778.00

14 Investment credit—Amount from line 7 or line 13, whichever is lesser. Enter here and on line 50, Form 1040; line 10(b), Schedule J, page 3, Form 1120; or the appropriate line on other returns 85.69

Schedule A If any part of your investment in line 1 or 4 above was made by a partnership, estate, trust, small business corporation, or lessor, complete the following statement and identify property qualifying for the 7% or 10% investment credit.

Name (Partnership, estate, trust, etc.)	Address	Property			
		Progress expenditures	New	Used	Life years
		\$	\$	\$	

If property is disposed of prior to the life years used in computing the investment credit, see instruction E.



P. O. BOX 1555, ATLANTA, GEORGIA 30301

STATEMENT
NUMBER

77 - 564-6

JOB DEVELOPMENT INVESTMENT CREDIT
LESSOR'S ELECTION STATEMENT

LESSEE MAIL TO ADDRESS

Mr. Rufus A. Lewis
801 Solivar St.
Montgomery, Ala. 36104

PREPARATION DATE

7-20-76

PAGE NO.

1 / of 1

RETURN
DATE
8-20-76

LESSEE INSTALLED AT ADDRESS

THIS IS YOUR NOTICE THAT LANIER BUSINESS PRODUCTS ELECTS, FOR THE PURPOSE OF THE TAX CREDIT ALLOWED BY SECTION 38 OF THE INTERNAL REVENUE CODE, TO TREAT YOU AS HAVING PURCHASED THE PROPERTY IDENTIFIED BELOW. THIS ELECTION IS NOT EFFECTIVE UNLESS YOU COMPLETE AND SIGN THIS STATEMENT, INDICATING ACCEPTANCE OR REJECTION, ON OR BEFORE THE RETURN DATE INDICATED ABOVE.

IT IS ESSENTIAL THAT THE PROPER COPY OF THIS ELECTION STATEMENT BE RETURNED PROMPTLY TO LANIER BUSINESS PRODUCTS EVEN IF TAX CREDIT IS REJECTED, UNLESS IT IS SO RETURNED THE INTERNAL REVENUE SERVICE CANNOT BE INFORMED THAT THIS ELECTION HAS BEEN MADE.

PLEASE RETAIN A COPY OF THIS STATEMENT FOR INCLUSION IN YOUR TAX RECORDS.

PROPERTY DESCRIPTION MACHINE TYPE AND SERIAL NUMBER	POSSESSION TRANSFER DATE (RENTAL START)	QUARTERLY RATE	FAIR MARKET VALUE	ESTIMATED USEFUL LIFE CATEGORY (*)	IF TAX CREDIT REJECTED ENTER ITEM NO IN REASON COLUMN A OR B		
					ITEM NO.	NON QUALIFYING USE	OTHER REA
Lanier Action Line Includes: AL-1 #202145 Quan. 1, Foot Control LX-017-0 Listening Device NT-004-1 Action Line Remote Station ALRS-1 Quan. 1 Index Strips (Box of 100) ALIS-1 Quan. 1 Standard Cassettes PC-60 Quan. 12 Lanier Pocket Secretary MS-60 52247 Quan. 1 Companion Adapter MCC-60 29083 Quan. 1 Microcassettes MC-60 Quan. 5	6-21-76	161.63	1285.30	2			

58-0810382

ATLANTA, GA.

LANIER TAXPAYER
ACCOUNT NUMBERIRS OFFICE
WHERE TAX RETURN IS FILED

Lanier Business Products Inc.

By: *Rufus A. Lewis*

Lanier Authorized Signature

IMPORTANT

The information called for in this box must be entered
on all copies if not shown.

Alabama

63	0170370	Montgomery	Ala. 36033
x x	x x x x x x x x	(CITY AND STATE)	

Lessee's Taxpayer Account Number - IRS District Directors office where return is filed
EXCEPT FOR ITEMS REJECTED, THE LESSEE'S SIGNATURE INDICATES HIS CONSENT TO BE
TREATED AS THE PURCHASER OF THE SPECIFIC PROPERTY ITEMIZED ABOVE FOR PURPOSE
OF THE JOB DEVELOPMENT INVESTMENT CREDIT ALLOWED BY SECTION 38, INTERNAL
REVENUE CODE.

RUFUS A. Lewis

LESSEE'S NAME
Rufus A. Lewis
LESSEE'S AUTHORIZED SIGNATURE

DATE

'CATEGORY: 1-ESTIMATED USEFUL LIFE OF 3 YEARS OR MORE BUT LESS
THAN 5 YRS.
2-ESTIMATED USEFUL LIFE OF 5 YEARS OR MORE BUT LESS
THAN 7 YRS.
3-ESTIMATED USEFUL LIFE OF 7 YEARS OR MORE.

ORIGINAL - RETURN TO LANIER AT THE ADDRESS ON TOP OF THE FORM.

COPY 2 - LESSEE'S COPY

RETURN TO LANIER ADDRESS ABOVE

APPLICATION FOR EXTENSION OF TIME FOR FILING STATE OF ALABAMA INCOME TAX RETURNS
IMPORTANT - SEND ONE COPY ONLY - Read Instructions before preparing form

RECEIVING STAMP	YOUR SOCIAL SECURITY NO.	SPOUSE'S SOCIAL SECURITY NO.
	155-20-0438	
SOCIAL SECURITY NUMBERS MUST BE GIVEN OR APPLICATION WILL NOT BE APPROVED		
NAME - USE FULL NAME (Please type or print)		
<i>Rufus A. Lewis</i>		
STREET AND NUMBER, OR RURAL ROUTE		
<i>801 Bolivar Street</i>		
CITY, TOWN, OR POST OFFICE AND STATE		ZIP CODE
<i>Montgomery, Al.</i>		

APPLICATION IS HEREBY MADE FOR AN EXTENSION OF TIME FOR FILING THE FOLLOWING INCOME TAX RETURN:

1. Type of return:
 - Individual Form 40, 40A or 40-B
 - Partnership Form 65
 - Fiduciary (Estate or Trust) Form 41
2. Extension requested to: July 15, 1977
(Date)
3. For: Calendar year ending Dec. 31, 1976
OR
 Fiscal year ending _____
4. This extension is necessary for the following reasons:

All information is not available at this time for accurate determination of the tax

5. APPLICABLE TO INDIVIDUALS ONLY - FORMS 40 and 40-B

- a. Did you have taxable income other than salaries and wages for the taxable year involved? Yes No
- b. If so, did you file a Declaration of Estimated Tax? Yes No
- c. Amount Paid \$ _____

DO NOT WRITE IN THIS SPACE

See reverse side for reason

(Signature of Taxpayer or Authorized Agent)

(Date)

(For Joint Return - Signature of Spouse)

(Date)

MAIL ORIGINAL COPY ONLY TO:
ALABAMA DEPARTMENT OF REVENUE
INCOME TAX DIVISION
MONTGOMERY, ALABAMA 36130

DUPLICATE - YOUR COPY

10
Date of This Notice

Social Security Number

Document Locator Number

Form Number Year Ended

Balance Is Due By

If you inquire about
your account, please
refer to these num-
bers or attach this
notice

Request for Payment of Balance Due

The statement at the right shows that a payment is due on your account. Please make the payment by the due date shown above.

If our statement does not agree with your records, the information on the back of this notice will tell you what to do.

If we included any penalty or interest charges, an explanation will be found on the back. (Code numbers in the box at lower right will guide you to the explanations that apply.)

Make your check or money order payable to Internal Revenue Service for the adjusted balance due. Please show your social security number on your payment and mail it with this notice in the envelope enclosed for your convenience.

Thank you for your cooperation.

Tax Statement

Total Tax on Return	\$ 1,429.00
Less IRA Excise Taxes on Return .....	.00
Balance of Tax on Return	\$ 1,429.00
Tax Withheld	2,339.11
Estimated Tax Credits .....	.00
Other Credits .....	.00
Payments	4,353.94
Payments Applied to IRA Excise Taxes .....	.00
Plus Penalty*	184.24
Plus Interest*	50.80
Balance Due IRS → \$	235.04
Subtract Payments We Haven't Included	
Pay Adjusted Balance Due	\$ 235.04

10
Pay Adjusted Balance Due

*See these code numbers on
the back for an explanation of
penalty or interest charges.

PART I - COMPUTATION OF NET INCOME AND TAX DUE.

	A	B	
1. TOTAL INCOME from line 10, Page 1	\$ 30054 63	\$	
2. Total Combined Income - Add Columns A & B	\$ 30054 63	%	
3. Divide line 1 column A by line 2 - Husband		%	
4. Divide line 1 column B by line 2 - Wife		%	
5. Total Federal Income Tax from line 7, Part II	\$ 3598 23		
6. Total Itemized Deductions from line 12, Part III - If Optional Deduction is used, enter zero	5168 51		
7. Add lines 5 & 6	\$ 8766 84		
8. Multiply line 7 by percentages on lines 3 & 4	8766 84		
9. Subtract line 8 from line 1	\$ 21287 79	\$	
10. Optional Deduction - 10% of line 1, but not over \$1000.00 in either column - If deductions are itemized, enter zero	-0-		
11. NET INCOME (Subtract line 10 from line 9)	\$ 21287 79	\$	
12. Personal Exemption (See Instruction)	1500 00		
13. Credit for Dependents (To Be Claimed By Spouse Furnishing Major Support)			
14. Total of Lines 12 and 13	1500 00		
15. Amount Taxable (Subtract line 14 from line 11)	\$ 19787 79	\$	
16. TAX DUE (See Rate Schedule in Instruction) Enter here and on line 16, page 1	\$ 904 39	\$	

PART II - SCHEDULE OF FEDERAL INCOME TAX PAID IN 1976 (See Instructions)

If a joint Federal Income Tax Return and separate Alabama Income Tax Returns are filed by a married couple, the Federal income tax deductible shown on Line 7 must be prorated by the percentages shown on Lines 3 & 4, Part I or 50-50 if that method is elected.

1. Federal Income Tax withheld in 1976	\$ 2339 23
2. Federal Income Tax paid on 1976 Estimate in 1976	
3. Additional tax paid with your 1975 Federal Return in 1976	1259 10
4. Federal Income Tax paid in 1976 for the year(s)	
5. Total Federal Income Tax paid in 1976	\$ 3598 33
6. Less: Federal Income Tax Refunds Received in 1976	-0-
7. Total Federal Income Tax deductible (Enter here and on line 5, Part I, Page 2)	\$ 3598 33

PART III - ITEMIZED DEDUCTIONS - FOR PERSONS NOT USING STANDARD DEDUCTION ON LINE 10, PART I (See Inst.)

IMPORTANT: PLEASE READ CAREFULLY BEFORE LISTING ITEMIZED DEDUCTIONS.

Alabama Income Tax Law requires married taxpayers filing separate returns to claim the itemized deductions actually paid by each spouse in his or her own return. In lieu of keeping separate records required by this method, a husband and wife filing separately will be permitted to:

(1) Prorate the total deductions on a 50-50 basis.

(2) Prorate the total deductions by the ratio that the total income of each spouse bears to the total income of both spouses.

If deductions are claimed on the basis of actual separate records, married persons filing separately may not combine their returns on one form but must file two forms.

Indicate the method you have used by checking the appropriate square. separate records: 50-50 basis: percentage of income

Medical and Dental Expense		Contributions	
1. Total cost of medicine and drugs	\$	Total cash contributions for which you have receipts, cancelled checks, money orders, etc.	\$ 41 00
2. Enter 1% of line 2, Part I (see inst.)	\$	Other contributions (List payees and amounts)	
3. Subtract line 2 from line 1	\$		
4. Enter other medical and dental expenses:			
Insurance premiums for medical care			
Doctors, dentists, etc.			
Hospitals			
Other (Itemize - include hearing aids, dentures, eyeglasses, transportation, etc.)			
DENTAL WORK	2616 00		
		9. Total Contributions, see instructions for maximum limitation	\$ 41 00
		Interest Expense	
		Home Mortgage	\$
		Other (Itemize)	
5. Total (add lines 3 and 4)	\$ 2616 00		
6. Enter 3% of line 2, Part I (see inst.)	\$ 2616 00		
7. Subtract line 6 from line 5; see instructions for maximum limitation			
Taxes (Other than Federal Income Tax)		10. Total Interest Expense	\$
Real Estate	\$		
Gasoline			
Sales	312 96		
Personal Property			
FICA (Social Security)	895 05	Miscellaneous Deductions	
Others (Itemize)		EMPLOYEE Bus. EXP. - 2106	\$ 1273 00
		SAFE DEPOSIT BOX	10 50
8. Total Taxes	\$ 1208 01	11. Total Miscellaneous Deductions	\$ 1303 50
		12. TOTAL (Add lines 7, 8, 9, 10, & 11) Enter here and on line 6, Part I, Page 2.....	\$ 5168 51