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Papers of Bess W. Truman

Form **1040** **U.S. Individual Income Tax Return** U.S. Treasury Department, Internal Revenue Service for the year January 1–December 31, 1967, or other taxable year beginning ....., 1967, ending ....., 19..... **1967**

Please print or type

First name and initial (If joint return, use first names and middle initials of both)	Last name	Your social security number
Harry S. and Bess W.	Truman	488 | 40 | 6969

Home address (Number and street or rural route): 219 North Delaware

Your occupation:

City, town or post office, and State: Independence, Missouri

ZIP code:

Spouse's social security number:

Enter below name and address used on your return for 1966 (If same as above, write "Same"). If none filed, give reason. If changing from separate to joint or joint to separate returns, enter 1966 names and addresses.
same

Spouse's occupation:

Your present employer and address:

Spouse's present employer and address, if joint return:

Your Filing Status—check only one:

1a ☐ Single

1b ☒ Married filing joint return (even if only one had income)

1c ☐ Married filing separately. If spouse is also filing a return, enter her (his) social security number in space provided above and give first name here .....

1d ☐ Unmarried Head of Household

1e ☐ Surviving widow(er) with dependent child

Your Exemptions

	Regular	65 or over	Blind	
2a Yourself . . .	☒	☒	☐	Enter number of boxes checked ▶ 4
2b Spouse . . .	☒	☒	☐	

3a First names of your dependent children who lived with you ..... Enter number ▶

3b Number of other dependents (from page 2, Part I, line 3)

4 Total exemptions claimed . . . . . ▶ 4

Please attach Copy B of Form W-2 here

Income If joint return include all income of both husband and wife	5	Wages, salaries, tips, etc. If not shown on attached Forms W-2 attach explanation	5	26,983 60
	6	Other income (from page 2, Part II, line 8)	6	37351 59
	7	Total (add lines 5 and 6)	7	64,335 19
	8	Adjustments to income (from page 2, Part III, line 5)	8	
	9	Total income (subtract line 8 from line 7)	9	64335 19
Find tax from table —OR—	10	If you do not itemize deductions and line 9 is less than $5,000, find your tax from tables in instructions. Do not use lines 11a, b, c, or d. Enter tax on line 12.	10	
Figure tax using tax rate schedules	11a	If you itemize deductions, enter total from page 2, Part IV, line 17. If you do not itemize deductions, and line 9 is $5,000 or more enter the larger of: (1) 10 percent of line 9; OR (2) $200 ($100 if married and filing separate return) plus $100 for each exemption claimed on line 4, above. Deduction under (1) or (2) limited to $1,000 ($500 if married and filing separately).	11a	9417 12
	11b	Subtract line 11a from line 9	11b	54,918 07
	11c	Multiply total number of exemptions on line 4, above, by $600	11c	2400 00
	11d	Subtract line 11c from line 11b. Enter balance on this line. (Figure your tax on this amount by using tax rate schedule on page 11 of instructions.) Enter tax on line 12.	11d	52,518 07
Your Tax, Credits, and Payments	12	Tax (from either Tax Table, see line 10, or Tax Rate Schedule, see lines 11a–11d)	12	18,319 04 ALT
	13	Total credits (from page 2, Part V, line 4)	13	
	14a	Income tax (subtract line 13 from line 12)	14a	18,319 04
	14b	Tax from recomputing prior year investment credit (attach statement)	14b	
	15	Self-employment tax (Schedule C–3 or F–1)	15	
	16	Total tax (add lines 14a, 14b, and 15)	16	18,319 04
	17	Total Federal income tax withheld (attach Forms W–2) — 17: 4336 44		
	18	Excess F.I.C.A. tax withheld (two or more employers—see page 5 of instr.) — 18:		
	19	☐ Nonhighway Federal gasoline tax—Form 4136, ☐ Reg. Inv.—Form 2439 — 19:		
	20	1967 Estimated tax payments (Include 1966 overpayment allowed as a credit) — 20: 19,700 00		
	21	Total (add lines 17, 18, 19, and 20)	21	24,036 44
Balance Due or Refund	22	If payments (line 21) are less than tax (line 16), enter Balance Due. Pay in full with this return	22	
	23	If payments (line 21) are larger than tax (line 16), enter Overpayment	23	5717 40
	24	Amount of line 23 you wish credited to 1968 Estimated Tax	24	5717 40
	25	Subtract line 24 from 23. Apply to: ☐ U.S. Savings Bonds, with excess refunded or ☐ Refund only	25	-

Please attach Check or Money Order here

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. If prepared by a person other than taxpayer, his declaration is based on all information of which he has any knowledge.

Sign here ▶ Your signature — Date

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

▶ Ruth E. Lapin — 4-10-68

Signature of preparer other than taxpayer — Date

PEAT, MARWICK, MITCHELL & CO.
CERTIFIED PUBLIC ACCOUNTANTS
Address: 2020 COMMERCE TOWER
KANSAS CITY, MO. 64199

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Part I Exemptions Complete only for dependents claimed on line 3b, page 1

(a) NAME (If more space is needed attach schedule)	(b) Relationship	(c) Months lived in your home. If born or died during year write "B" or "D"	(d) Did dependent have income of $600 or more?	(e) Amount YOU furnished for dependent's support, if 100% write "ALL"	(f) Amount furnished by OTHERS including dependent.
1				$	$
2					

3 Total number of dependents listed above. Enter here and on page 1, line 3b ▶

Part II Income from sources other than wages, etc.

1a Gross dividends and other distributions on stock (list payers and amounts—write (H), (W), (J), for stock held by husband, wife, or jointly)

Total line 1a ▶

1b Exclusion (see instructions).

1c Capital gain distributions (see page 6 of instructions).

1d Nontaxable distributions (see page 6 of instructions).

1e Total (add lines 1b, 1c, and 1d)

1f Taxable dividends (line 1a less line 1e—not less than zero) ▶

Interest (list payers and amounts below)

Earnings from savings and loan assoc. and credit unions.

Other interest (banks, bonds, tax refunds, etc.)

SCHEDULE ATTACHED

2 Total interest income ▶	17,171	14
3 Pensions and annuities, rents and royalties, partnerships, estates or trusts, etc. (attach Sch. B)	1808	18
4 Business income or loss (attach Schedule C)		
5 Sale or exchange of property (attach Schedule D)	8372	27
6 Farm income or loss (attach Schedule F)		

Miscellaneous income (state nature and source)

SCHEDULE ATTACHED

7 Total miscellaneous income ▶	10,000	00
8 TOTAL (add lines 1f, 2, 3, 4, 5, 6, and 7). Enter here and on page 1, line 6 ▶	37,351	59

Part III Adjustments to income

1 "Sick pay" if included in line 5, page 1 (attach Form 2440 or other required statement)		
2 Moving expenses (attach Form 3903)		
3 Employee business expense (attach Form 2106 or other statement)		
4 Payments by self-employed persons to retirement plans, etc. (attach Form 2950SE)		
5 TOTAL ADJUSTMENTS (lines 1 through 4). Enter here and on page 1, line 8 ▶		

Part IV Itemized deductions—Use only if you do not use tax table or standard deduction.

Medical and dental expense (not compensated by insurance or otherwise)—Attach itemized list.

1 One-half (but not more than $150) of insurance premiums for medical care	150	00
2 Total cost of medicine and drugs	727	15
3 Enter 1% of line 9, page 1	643	35
4 Subtract line 3 from line 2 (not less than zero)	83	80
5 Other medical, dental expenses (include balance of insurance premiums for medical care not deductible on line 1)	676	11
6 Total (add lines 4 and 5)	759	91
7 Enter 3% of line 9, page 1	1930	06
8 Subtract line 7 from line 6 (not less than zero)	—0—	
9 Total (add lines 1 and 8) ▶	150	00

Contributions.—Cash—including checks, money orders, etc. (itemize)

SCHEDULE ATTACHED

10 Total cash contributions		
11 Other than cash (see instructions for required statement). Enter total of such items here		
12 Carryover from prior years (see page 8 of instr.)		
13 Total contributions (add lines 10, 11, and 12—see instructions for limitation) ▶	3041	00

Taxes.—Real estate

State and local gasoline

General sales (see page 15 of instructions)

State and local income

Personal property

14 Total taxes ▶	4111	12

Interest expense.—Home Mortgage

Other (itemize)

15 Total interest expense ▶		

Miscellaneous deductions.—(see page 9 of instructions)

SCHEDULE ATTACHED

16 Total miscellaneous ▶	2115	00
17 TOTAL DEDUCTIONS (add lines 9, 13, 14, 15, and 16). Enter here and on page 1, line 11a. ▶	9417	12

Part V Credits

1 Retirement income credit (Schedule B)		
2 Investment credit (Form 3468)		
3 Foreign tax credit (Form 1116)		
4 TOTAL CREDITS (for page 1, line 13) ▶		

EXPENSE ACCOUNTS—If you had an expense allowance or charged expenses to your employer, check here ☐ and see page 7 of instructions.

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SCHEDULE B
(Form 1040)

U.S. Treasury Department
Internal Revenue Service

Supplemental Schedule of Income and Retirement Income Credit

(From pensions and annuities, rents and royalties, partnerships, and estates or trusts)

Attach this schedule to your income tax return, Form 1040

1967

Name and address as shown on page 1 of Form 1040

Harry S. and Bess W. Truman, 219 North Delaware, Independence, Missouri

Part I.—PENSION AND ANNUITY INCOME

A.—General Rule (If you did not contribute to the cost of the pension or annuity, enter the total amount received on line 6 and omit lines 1 through 5.)

				AMOUNT
1 Investment in contract		4 Amount received this year		
2 Expected return		5 Amount excludable (line 4 multiplied by line 3)		
3 Percentage of income to be excluded (line 1 divided by line 2)	%	6 Taxable portion (excess of line 4 over line 5)		

B.—Special Rule—Where your employer has contributed part of the cost and your own contribution will be recovered tax-free within 3 years. If your cost was fully recovered in prior years, enter the total amount received on line 5 and omit lines 1 through 4.

1 Cost of annuity (amounts you paid)		4 Amount received this year		
2 Cost received tax-free in past years				
3 Remainder of cost (line 1 less line 2)		5 Taxable portion (excess, if any, of line 4 over line 3)		

Part II.—RENT AND ROYALTY INCOME

1. Kind and location of property	2. Total amount of rents	3. Total amount of royalties	4. Depreciation (explain in Part IV) or depletion (attach computation)	5. Repairs (attach itemized list)	6. Other expenses (attach itemized list)	AMOUNT	
			SCHEDULE	ATTACHED		1694	15
			SCHEDULE	ATTACHED		114	03
1 Totals							
2 Net income (or loss) from rents and royalties (column 2 plus column 3 less columns 4, 5, and 6)						1808	18

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Part III.—INCOME OR LOSSES FROM PARTNERSHIPS, ESTATES OR TRUSTS, ETC.

1 Partnerships (name, address, employer identification number, and nature of income)

2 Small business corporations (subchapter S—name, address, and employer identification number)

3 Estates or trusts (name, address, and employer identification number)

TOTAL OF PARTS I, II, AND III (Enter here and on page 2, Part II, line 3, Form 1040) 1808 18

Part IV.—SCHEDULE FOR DEPRECIATION CLAIMED IN PART II ABOVE

—This schedule is designed for taxpayers using the alternative guidelines and administrative procedures described in Revenue Procedures 62–21 and 65–13 as well as for those taxpayers who wish to continue using practices authorized prior to these revenue procedures. Where double headings appear use the first heading for depreciation under Revenue Procedures 62–21 and 65–13 and the second heading for other authorized practices.

1. Group and guideline class —OR— Description of property	2. Cost or other basis at beginning of year —OR— Cost or other basis	3. Asset additions in year (amount) —OR— Date acquired	4. Asset retirements in year (amount) (applicable only to Rev. Proc. 62–21)	5. Depreciation allowed or allowable in prior years	6. Method of computing depreciation	7. Class life —OR— Rate (%) or life	8. Depreciation for this year
1 Total additional first-year depreciation (do not include in items below) →							
Total cost or other basis							
2 Total depreciation (Enter here and in Part II, column 4 above)							

SUMMARY OF DEPRECIATION

	Straight line	Declining balance	Sum of the years-digits	Units of production	Additional first year (section 179)	Other (specify)	Total
1 Under Rev. Proc's. 62–21 and 65–13							
2 Other							

659—16——1

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SCHEDULE D (Form 1040)
U.S. Treasury Department
Internal Revenue Service

Gains and Losses From Sales or Exchanges of Property

Attach this schedule to your income tax return, Form 1040

1967

Name and address as shown on page 1 of Form 1040
Harry S. and Bess W. Truman, 219 North Delaware, Independence, Mo.

Part I—CAPITAL ASSETS—Short-term capital gains and losses—assets held not more than 6 months

a. Kind of property. Indicate security, real estate, or other (Specify)	b. Description (Examples: 100 sh. of "Z" Co., 2 story brick, etc.)	c. How acquired. Enter letter symbol (See Instr.)	d. Date acquired (mo., day, yr.)	e. Date sold (mo., day, yr.)	f. Gross sales price	g. Depreciation allowed (or allowable) since acquisition	h. Cost or other basis, cost of subsequent improvements (if not purchased, attach explanation) and expense of sale	i. Gain or loss (f plus g less h)
1								

2 Enter your share of net short-term gain (or loss) from partnerships and fiduciaries . . . . . .
3 Enter unused short-term capital loss carryover from preceding taxable years (attach statement) . . . . . .
4 Net short-term gain (or loss) from lines 1, 2, and 3 . . . . . .

Long-term capital gains and losses—assets held more than 6 months (12 months or more for certain livestock)

5 Enter gain from Part II, line 3 . . . . . .

SCHEDULE ATTACHED

Total long-term gross sales price . .

6 Enter the full amount of your share of net long-term gain (or loss) from partnerships and fiduciaries . . . . . .
7 Enter unused long-term capital loss carryover from preceding taxable years (attach statement) . . . . . .
8 Capital gain dividends (see Form 1040 Instructions, page 6) . . . . . .
9 Net long-term gain (or loss) from lines 5, 6, 7, and 8 . . . . . 16744.54
10 Combine the amounts shown on lines 4 and 9, and enter the net gain (or loss) here 16744.54
11 If line 10 shows a GAIN—Enter 50% of line 9 or 50% of line 10, whichever is smaller. (Enter zero if there is a loss or no entry on line 9.) (See reverse side for computation of alternative tax.) 8372.27
12 Subtract line 11 from line 10. Enter here and in Part IV, line 1, on reverse side 8372.27
13 If line 10 shows a LOSS—Enter here and in Part IV, line 1, the smallest of the following: (a) the amount on line 10; (b) the amount on page 1, line 11b, Form 1040, computed without regard to capital gains and losses; or (c) $1,000 . .

Part II—GAIN FROM DISPOSITION OF DEPRECIABLE PROPERTY UNDER SECTIONS 1245 AND 1250—assets held more than 6 months (see instructions for definitions)

Where double headings appear, use the first heading for section 1245 and the second heading for section 1250.

a. Kind of property and how acquired (If necessary, attach statement of descriptive details not shown below—write 1245 or 1250 to indicate type of asset)	b. Date acquired (mo., day, yr.)	c. Date sold (mo., day, yr.)	d. Gross sales price	e. Cost or other basis, cost of subsequent improvements (if not purchased, attach explanation) and expense of sale
1				

f. Depreciation allowed (or allowable) since acquisition		g. Adjusted basis (e less sum of f-1 and f-2)	h. Total gain (d less g)	i. Ordinary gain (lesser of f-2 or h) OR (see instructions)	j. Other gain (h less i)
f-1. Prior to January 1, 1962 OR Prior to January 1, 1964	f-2. After December 31, 1961 OR After December 31, 1963				

2 Total ordinary gain. Enter here and in Part IV, line 2, on reverse side . . . . . .
3 Total other gain. Enter here and in Part I, line 5; however, if the gains do not exceed the losses when this amount is combined with other gains and losses from section 1231 property enter the total of column j in Part III, line 1 . .

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