

Form

1040

Department of the Treasury - Internal Revenue Service

U.S. Individual Income Tax Return

2005

(99)

IRS Use Only - Do not write or staple in this space.

**Label**  
(See instructions on page 16.)  
**Use the IRS label.**  
Otherwise, please print or type.

**Presidential Election Campaign**

L  
A  
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E  
L  
  
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R  
E

For the year Jan. 1-Dec. 31, 2005, or other tax year beginning

2005, ending

, 20

OMB No. 1545-0074

Your first name and initial

CLAUDE A

Last name

SIMON

If a joint return, sp. first name &amp; initial

Last name

Home address (number and street). If you have a P.O. box, see page 16.

71 TONJES RD PO BOX 291

Apt. no.

City, town or post office, state, and ZIP code. If you have a foreign address, see page 16.

CALLICOON

NY 12723

Your social security number

106-50-1158

Spouse's social security number

▲ You must enter  
your SSN(s) above. ▲

Checking a box below will not  
change your tax or refund.

Check here if you, or your spouse if filing jointly, want \$3 to go to this fund (see page 16)

☒ You☐ Spouse**Filing Status**

1

Single

2

Married filing jointly (even if only one had income)

3

Married filing separately. Enter spouse's SSN above

4

☒ Head of household (with qualifying person). (See page 17.) If the qualifying person is a child but not your dependent, enter this child's name here. ▶

5

☐ Qualifying widow(er) with dependent child (see page 17)

Check only  
one box.

**Exemptions**

6a

☒ Yourself. If someone can claim you as a dependent, do not check box 6a

b

☐ Spouse

c

Dependents:

(1) First name

Last name

CHARLES

SIMON

(2) Dependent's  
social security number

669-22-4825

(3) Dependent's  
relationship to  
you

Son

(4) Ck. if  
qual. child  
for child  
tax cr. (see  
pg. 19)☒

Boxes checked on 6a and 6b

No. of children on 6c who:

☒ lived with you☐ did not live with you due to divorce or separation (see page 20)

Dependents on 6c not entered above

Add numbers on lines above ▶

d

Total number of exemptions claimed

2

**Income**

Attach Form(s)  
W-2 here. Also  
attach Forms  
W-2G and  
1099-R if tax  
was withheld.

If you did not  
get a W-2,  
see page 22.

Enclose, but do  
not attach, any  
payment. Also,  
please use  
Form 1040-V.

7

Wages, salaries, tips, etc. Attach Form(s) W-2

7

55,200

8a

Taxable interest. Attach Schedule B if required

8a

453

b

Tax-exempt interest. Do not include on line 8a

347

9a

Ordinary dividends. Attach Schedule B if required

9a

4,916

b

Qualified dividends (see page 23)

2,833

10

Taxable refunds, credits, or offsets of state and local income taxes (see page 23)

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

-3,000

14

Other gains or (losses). Attach Form 4797

14

15a

IRA distributions

15a

b Taxable amount (see page 25)

16a

Pensions and annuities

16a

b Taxable amount (see page 25)

17

Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E

17

30,010

18

Farm income or (loss). Attach Schedule F

18

19

Unemployment compensation

19

20a

Social security benefits

20a

b Taxable amount (see page 27)

21

Other income. List type and amt. (see page 29)

21

22

Add the amounts in the far right column for lines 7 through 21. This is your total income

22

87,579

**Adjusted Gross Income**

23

23

24

24

25

31a

32

35

36

Subtract line 36 from line 22. This is your adjusted gross income

37

87,579

For Disclosure, Privacy Act, and Paperwork Reduction Act Notice, see page 78.

DAA

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