

1040 Department of the Treasury—Internal Revenue Service (99)
U.S. Individual Income Tax Return

2014 OMB No. 1545-0074 IRS Use Only—Do not write or staple in this space.

		, or other tax year beginn	ing		2014, ending		20	Se	e separate instructio	ons.	
Your first name and	initial		Last n	ame				Yo	our social security num	nber	
Troy L			Down	Downs							
If a joint return, spo	use's first	name and initial	Last n	ame				Sp	ouse's social security nu	ımber	
Home address (num	nber and s	street). If you have a P.	O. box, see i	nstructions.			Apt. no.	1	Make sure the SSN(s)	above	
1799 FM 528 RD							10201		and on line 6c are co		
City, town or post office	ce, state, a	nd ZIP code. If you have	a foreign add	ress, also complete spaces b	elow (see instruction	s).		F	residential Election Cam	npaign	
Webster, TX 7759	98								ck here if you, or your spouse		
Foreign country nan	ne			Foreign province/s	state/county	Foreign	postal code		tly, want \$3 to go to this fund. ox below will not change your t rid. You		
	1	✓ Single			4 П н	and of househol	d (with aus	L	person). (See instruction		
Filing Status	2	= · • ·	ntly (even it	fonly one had income)					not your dependent, ent	•	
Check only one	3		- 1	nter spouse's SSN abo		ild's name here			int your coparating one		
box.	•	and full name he		ntor apodao a cort apt		ualifying widow	v(er) with	deper	ndent child		
	6a	Vourself If so	meone car	n claim you as a depen				<u> </u>	Boxes checked		
Exemptions	b	Spouse .							on 6a and 6b No. of children		
		Dependents:	· · · · · · · · · · · · · · · · · · ·	(2) Dependent's	(3) Dependent's	(4) / if chile	i under age 1	7	on 6c who:		
	(1) First		name	social security number	relationship to you	qualifying for (see ins	child tax cred tructions)	lit	Ilved with you did not live with		
						,	7	_	you due to divorce		
If more than four						Ī	1		or separation (see instructions)		
dependents, see instructions and							<u></u>		Dependents on 6c not entered above		
check here ▶	•]				
GREGKTICIO P	d	Total number of ex	emptions	claimed					Add numbers on lines above	\Box	
	7	Wages, salaries, ti						7	183961	08	
Income	8a	Taxable interest.	•	• •				8a			
	ь	Tax-exempt interes			8b	, ,				 	
Attach Form(s)	9a	•		chedule B if required	[95]			9a	10	10	
W-2 here. Also	b	Qualified dividend		oncodio B il roddii oo	9b		`				
attach Forms W-2G and	10			offsets of state and loca				10			
1099-R if tax	11	Alimony received						11		†	
was withheld.	12	Business income or (loss). Attach Schedule C or C-EZ						12	<u> </u>	 	
	13			Schedule D if required		heck here	i in l	13		1	
If you did not	14	Other gains or (los	•	•				14			
get a W-2,	15a	IRA distributions	. 15a	1 1	b Taxable	amount .		15b		 	
see instructions.	16a	Pensions and annu		**	b Taxable			16b			
	17	Rental real estate.	rovalties, r	partnerships, S corpora	ations, trusts, etc	. Attach Sche	dule E	17			
	18			Schedule F				18		<u> </u>	
	19			n]	19		ļ	
	20a	Social security ben		1 1	b Taxable	amount .	I	20b			
	21	•		amount 12 USC 411	Lawful Money F	Redeemed		21	<176078	20>	
	22			right column for lines 7 th			ne 🕨	22	7892	98	
	23	Educator expense	s		23						
Adjusted	24	Certain business exp	enses of re	servists, performing artist	s, and						
Gross				ttach Form 2106 or 2106-	1 1						
Income	25	Health savings acc	count dedu	ction. Attach Form 88	39 . 25						
	26	Moving expenses.	Attach For	rm 3903	26						
	27	Deductible part of se	elf-employm	ent tax. Attach Schedule	SE . 27						
	28	Self-employed SE	P, SIMPLE	, and qualified plans	28						
	29	Self-employed hea	alth insuran	ce deduction	29						
	30	Penalty on early w	ithdrawal c	of savings	30						
	31a	Alimony paid b R	ecipient's	ssn ▶	31a						
	32	IRA deduction .			32						
	33	Student loan interes	est deducti	on	33						
	34	Tuition and fees. A	Attach Form	n 8917	34						
	35	-		deduction. Attach Form						-	
	36		_				· :	36	0		
	37	Subtract line 36 from	om line 22.	This is your adjusted	gross income		. ▶	37	7892	98	

			86 Document 1-2 Filed i			<u> 15 </u>	2 <u>age</u> 38	2 Of 4 7892	age 2
	38		justed gross income)			•	- 30	7002	
Fax and	39a		化二氯甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基						
Credits			vas born before January 2, 1950,						
	ь	المطراب الشافان والأرابط الزار تعزيران بمعانهم فاستحجا ويهوا ويواع فيبيا كالموارد والمارات	n a separate return or you were a dual-st	man en a man a de	galagian a see restriction of the second second	30b	ri Distantinos		
tandard	40		rom Schedule A) or your standard ded	 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -			40	6200	0
eduction or-	41	Subtract line 40 from lin	e 38				41	1692	9
People who	42	Exemptions. If line 38 is \$	i152,525 or less, multiply \$3,950 by the number	on line 6d.	Otherwise, see instru	ctions	42	3950	0
neck any ox on line	43		ract line 42 from line 41, if line 42 is mo	医多形形形 医多形		5.5	43	0	0
9a or 39b or	44		eck if any from: a 🔲 Form(s) 8814 b	원 강화하다		10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	44	0	0
ho can be laimed as a	45		ex (see instructions). Attach Form 6251		Const. March 1985 and the Const. Property of the Const.		45	0	0(
ependent,	46		회원(MACCO) 전문 MESSA 하겠다는 것이 없는 이 등은 사용을 하면 되었다.		(1) 소설 (10년 1일 : 1) 전 (10년 1년			0	0
ee estructions.		그 없는 이 내는 이 이 살이 되는 것이 되는 것이 없는 것이 없다.	m tax credit repayment. Attach Form 8!	4.4			46	0	0
All others:	47.	Add lines 44, 45, and 46	함께 보고 있는 아니라 왕은 중 얼마나 그리를 모르는 아니다.			>	47	0	
ingle or	48	그 그 사람들이 많은 그는 이번 그는 것이다. 이번 살았다.	h Form 1116 if required	-		-			
larried filing	49	Credit for child and deper	ndent care expenses. Attach Form 2441	49		+			
eparately, 6,200	50	Education credits from f	Form 8863, line 19	50		00			
larried filing	51	Retirement savings cor	ntributions credit, Attach Form 8880	51	0	00]. ` . }	!	
intly or ualifying	52		Schedule 8812, if required	52	(00			
idow(er),	53			53					
2,400	7.5	그리아 그들은 그 사람들은 사람들이 살아 하지만 하셨다면요.	<u>하고 보는</u> 11명 전 4명이는 분명하 <u>는 12일 한</u> 하고 하는 사람은 사람이 <u>하고 있는 것</u>	54		+			
ead of ousehold.	54	Other credits from Form: a	(2005년) - 1202년 - 1202년 (1924년 - 1924년 1924년 1925년 - 1202년 1924년 - 1202년 - 1202년 1924년 - 1202년 - 1202년 - 1202년			1,,,	-	<u> </u>	
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	56	Subtract line 55 from lin	e 47. If line 55 is more than line 47, ente	yr -0-		<u> </u>	56	0	0
	57	Self-employment tax. At	ttach Schedule SE				57		
ther	58		ity and Medicare tax from Form; a				58		
	59		병원 그는 지민 열차 수 없다. 중요 시 나는 그 시간 등에 급하다 나왔다. 조각	100-100-100-100		alian	59		
axes			ther qualified retirement plans, etc. Attac		맞은 경우는 가게 된다는데 그 그는 그 사는 것이 없는 살이라면		TOPE OF		
	60a		taxes from Schedule H			da.	60a		
	b	First-time hamebuyer cre	edit repayment. Attach Form 5405 if requi	red .			60b		
	61	Health care: Individual re	sponsibility (see instructions) Full-year	coverag	e 🔲 🔒 🗀 🖫		61		
	62	Taxes from: a Form	. 8959 b 🗌 Form 8960 c 🔲 Instruc	tions; e	nter code(s)	1943	62		
	63		. This is your total tax			→	63	0	0(
ayments			held from Forms W-2 and 1099		12292	7			
ayments		그 경우 바람이 되었다. 이번 그 얼마나는 이 없는 이번 경험되어	가을 되지만 않는데 나가 하면 유가백하다 않는데 그 이 속 돈 하지만 하게 되었다. 아이를 살다고 하다.						
you have a	65		ents and amount applied from 2013 return			. 			
Jalifying r	66a	Earned Income credit ((EIC)	66a		<u></u>			
ild, attach	b	Nontaxable combat pay ele	ection 66b				-		
hedule EIC.	67	Additional child tax credit	. Attach Schedule 8812	67					
	68		redit from Form 8863, line 8	68					
	69		. Attach Form 8962	69					
	70		나는 아내는 아내는 아내는 그 나는 아내는 아내는 아내는 아내는 아내는 아내는 아내는 아내는 아내는 아내		***************************************	 			
		Amount paid with reque		70		 			
	71		d tier 1 RRTA tax withheld	71					
	72	Credit for federal tax on	fuels. Attach Form 4136	72					
	73	Credits from Form: a 2439	to Reserved to Reserved d	73					
	74		nd 67 through 73. These are your total	payment			74	12292	2
efund	75		ne 63, subtract line 63 from line 74. Thi		**************************************	ald T	75	12292	2
eiunu			생물하다 하다면 그는 그는 그는 가장 얼마를 받는데 하는데 그리고 있다. 그 그리고 있다는데 그리고 있다.			-		12292	2
	76a	하늘 살아내는 얼마를 가다고 하다.	ant refunded to you. If Form 8888 is a			'Ц	76a	12232	
rect deposit?	> ь	Routing number	>	Type:	Checking Sav	ings			
	► d	Account number							
	The same of the contract of th	Amount of line 75 you wa	nt applied to your 2015 estimated tax ►	77					
	77				ay, see instruction		78		
structions.	77 78		ract line 74 from line 63. For details on			G -			
mount	78	Amount you owe. Subt	ract line 74 from line 83. For details on see instructions)	1 - 1	Available of Available and Control of the Control of the			The file of the second second second	
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2014 Form 1040, Line 21

Supporting Schedule

Demand for Lawful Money

12 USC Section 411

	Column A	Column B	Column C
Description	Total Amounts	Amounts prior	Lawful Money
	for CY 2014	to February 3,	Reduction
		2014	Amounts (A-B)
Gross Pay	\$192049.16	\$8505.04	\$183544.12
Gross pay deductions (Dental, Medical, HSA)	\$8088.08	\$622.16	\$7665.92
Adjusted Gross Pay	\$183961.08	\$7882.88	\$176078.20
FITW	\$12292.23	\$1018.80	\$11273.43
SS	\$7254.00	\$488.74	\$6765.26
Medicare	\$2667.44	\$114.30	\$2553.14
LTD Insurance	\$568.88	\$55.76	\$513.12
Child Support	\$4846.17	\$0	\$4846.17
Child Support Administration Fee	\$17.50	\$0	\$17.50

Total Gross Pay Reduction to Line 21 - \$176,078.20

Description: See attached copies of bank memo showing date of demand; confirming checks and EFTs; W4 demand to employer. Said copies provide substantive evidence and record that Lawful Money is Demanded for All Transactions, effective February 3, 2014. The right to amend this and any return is reserved if further deductions can be made nunc pro tunc prior to February 3, 2014.

Calculations above are based on January 24, 2014 and December 24, 2014 Earnings Statements, also included.

A copy of Title 12 United States Code Section 411 is included as well, for review.

