## Form 1045

Department of the Treasury Internal Revenue Service **Application for Tentative Refund** 

▶ Before you fill in this form, read the separate instructions.

▶ Do not attach to your income tax return—mail in a separate envelope.

► For use by individuals, estates, or trusts.

OMB No. 1545-0098

1998

prin	warne (and harne or spouse it ming jointly)				Social Secui	inty or emp	loyer luei	itilication number
ō	Number, street, and apt. or suite no. If you have a	a P.O. box, see pa	age 2 of the instruc	tions.	Spouse's s	ocial secu	ıritv num	ber (SSN)
Please type or	name of sales of sales her in you have o	2	.90 2 00000					20. (00.1)
se	City, town or post office, state, and ZIP code. If y	ou have a foreign	address, see page	2 of the instructio	ns. Telephone r	no. (option	 al)	
Plea	, g, , ,	3			( )	(-1	,	
	а	Net operating lo	ss (from Schedule	A, page 2, line 28)	<b>b</b> Unused	general bu	usiness ci	redit
1	This application is filed to carry back:	\$	•	,	\$	3		
2a	For the calendar year 1998, or other tax year				<b>b</b> Date tax	x return wa	as filed	
	beginning , 1998, ending	, 19						
3	If this application is for an unused cred	dit created by	another carryb	ack, enter yea	r of the first ca	arryback	<b></b>	
4	If you filed a joint return (or separate re	eturn) for some	e, but not all, c	of the tax years	s involved in fi	guring tl	ne carry	back, list the
	years and specify whether joint (J) or s	separate (S) ret	turn for each 🕨	<b>-</b>				
5	If SSN for carryback year is different from a							
6	If you changed your accounting period							
7	Have you filed a petition in Tax Court f							
8	Does this carryback include a loss or o							Yes ∐ No
9	If you are carrying back a net operating of other credits due to the release of the	g loss, did this	cause the rele	ease of foreign	tax credits or	the rele	ase $\Box$	Vac 🗆 Na
		2		2nd preceding t			ceding tax	
	Computation of Decrease in Tax See page 2 of the instructions.	year ended F		year ended ►		year en	ded 🚩	
	Note: If 1a is blank, skip lines 10 through 16.	(a) Before carryback	(b) After carryback	(c) Before carryback	<b>(d)</b> After carryback	(e) Be		<b>(f)</b> After carryback
10	Adjusted gross income from tax		,					
10	return or as previously adjusted							
11	Net operating loss deduction after							
	carryback. See page 3 of the instructions							
12	Subtract line 11 from line 10							
13	Deductions. See page 3 of the instructions							
14	Subtract line 13 from line 12							
15	Exemptions							
16	Taxable income. Line 14 minus line 15							
17	Income tax. See page 4 of the							
	instructions and attach an explanation							
18	General business credit. See page 4							
19	of the instructions							
20	Total credits. Add lines 18 and 19							
21	Subtract line 20 from line 17							
22	Recapture taxes							
23	Alternative minimum tax							
24	Self-employment tax							
25	Other taxes						$\longrightarrow$	
26	Total tax liability. Add lines 21 through 25							
27	Enter the amount from line 26,							
28	columns (b), (d), and (f), respectively Decrease in tax. Line 26 minus line 27		-			<u> </u>	-	
<del>20</del> 29	Overpayment of tax due to a claim of i	l right adjustme	l nt under sectio	 nn 1341(h)(1)	attach compu	l tation		
	. 3	<u> </u>			•		ts and t	o the best of my
Sig	knowledge and belief, they are true, co			. and accompany	y Johnadales alla	. Statemen	, unu li	o the best of filly
He	Tour signature						Date	
	a copy of pplication							
	Spouse's signature (if Form 1045	is filed jointly, BO	TH must sign)				Date	
	<b>7</b>							
	parer Other Name ►						Date	
ınar	Taxpaver Address N					1		

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## Schedule A—Net Operating Loss (NOL). See page 4 of the instructions.

1	Adjusted gross income from your 1998 Form 104	1			
2	Deductions (individuals only):	2a			
a	Enter the amount from your 1998 Form 1040, line			-	
b	Enter your deduction for exemptions from your 1998 Form 1040, line 38 . Label Add lines 2a and 2b				( )
3	Combine lines 1 and 2c. Estates and trusts, ente		2c 3		
	Note: If line 3 is zero or more, do not complete rest				
	Adjustments:	ı	l I		
4	Deduction for exemptions from line 2b above. Est exemption amount from tax return.		4		
5	Total nonbusiness capital losses before limitation. Enter as a positive number	5			
6	Total nonbusiness capital gains (without regard to any section 1202 exclusion)	6			
7	If line 5 is more than line 6, enter the difference; otherwise, enter -0-	7			
8	If line 6 is more than line 5, enter the difference; otherwise, enter -0-	8			
9	Nonbusiness deductions. See page 4 of the instructions	9			
10	Nonbusiness income other than capital gains.				
11	See page 4 of the instructions	10			
12	If line 9 is more than line 11, enter the difference	; otherwise, enter -0	12		
13	If line 11 is more than line 9, enter the difference; otherwise, enter -0 Do not enter more than line 8	13			
14	Total business capital losses before limitation. Enter as a positive number	14			
15	Total business capital gains (without regard to	15			
16	any section 1202 exclusion)	16			
. o 17	If line 14 is more than line 16, enter the				
	difference; otherwise, enter -0-	17			
18	Add lines 7 and 17	18			
19	Enter the loss, if any, from line 17 of Schedule D (Form 1040). (Estates and trusts, enter the loss,				
	if any, from line 16, column (3), of Schedule D				
	(Form 1041).) Enter as a positive number. If you				
	do not have a loss on that line (and do not have a section 1202 exclusion), skip lines 19 through				
	24 and enter on line 25 the amount from line 18	19			
20	Section 1202 exclusion. Enter as a positive numb	per	20	_	
21	Subtract line 20 from line 19. If zero or less, enter -0-	21			
22	Enter the loss, if any, from line 18 of Schedule				
	D (Form 1040). (Estates and trusts, enter the				
	loss, if any, from line 17 of Schedule D (Form 1041).) Enter as a positive number	22			
23	If line 21 is more than line 22, enter the				
	difference; otherwise, enter -0	23			
24	If line 22 is more than line 21, enter the difference		24		
25	Subtract line 23 from line 18. If zero or less, ente		25		
26	Net operating loss deduction for losses from other number	•	26		
27	Add lines 4, 12, 20, 24, 25, and 26			27	
28	Net operating loss. Combine lines 3 and 27. If				
	page 1, line 1a. If the result is zero or more, you			28	

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## Schedule B—Net Operating Loss Carryover. See the instructions beginning on page 4.

Complete one column before going to the next column.		(a) 3rd preceding tax year ended ►	(b) 2nd preceding tax year ended ►	(c) 1st preceding tax year ended ►	
1	Net operating loss deduction from Form 1045, line 11, on page 1				
2	Taxable income from tax return (or as previously adjusted) before 1998 NOL carryback. See page 5 of the instructions				
3	Net capital loss deduction. See page 5 of the instructions				
4	Adjustments to adjusted gross income. See page 5 of the instructions				
5	Adjustment to itemized deductions. See page 5 of the instructions				
6	Deduction for exemptions from tax return (or as previously adjusted). Estates and trusts, enter exemption amount				
7	Modified taxable income. Combine lines 2 through 6. If zero or less, enter -0-				
8	Net operating loss carryover. Subtract line 7 from line 1. If zero or less, enter -0 See page 5 of the instructions				
	Adjustment to Itemized Deductions (Individuals Only)				
	Complete lines 9 through 33 <b>ONLY</b> for the carryback year(s) for which you itemized deductions.				
9	Adjusted gross income per return (or as previously adjusted) before 1998 NOL carryback				
10	Add lines 3 and 4 above				
11	Modified adjusted gross income. Add lines 9 and 10				
12	Medical expenses from Sch. A (Form 1040), line 1 (line 2 for 1988-89) (or as previously adjusted)				
13	Multiply line 11 by 7.5% (.075)				
14	Subtract line 13 from line 12. If zero or less, enter -0-				
15	Medical expenses from Sch. A (Form 1040), line 4 (or as previously adjusted)				
16	Subtract line 14 from line 15				

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## Schedule B—Net Operating Loss Carryover (Continued)

	nplete one column before going to the t column.	(a) 3rd preceding tax year ended ►	(b) 2nd preceding tax year ended ►	(c) 1st preceding tax year ended ►
17	Modified adjusted gross income from line 11 on page 3			
18 19	Enter as a positive number any NOL carryback from a year before 1998 that was deducted in figuring line 9 on page 3 Add lines 17 and 18			
20	Refigure your charitable contributions using line 19 as your adjusted gross income. See page 5 of the instructions .			
21 22	Charitable contributions from Sch. A (Form 1040), line 18 (line 17 for 1988-90, line 16 for 1991-93) (or as previously adjusted) Subtract line 20 from line 21			_
23	Casualty and theft losses from Form 4684, line 16 (or as previously adjusted).			
24 25	Multiply line 17 by 10% (.10) Subtract line 24 from line 23. If zero or less, enter -0			
26 27	Casualty and theft losses from Form 4684, line 18 (or as previously adjusted)			_
28	Miscellaneous itemized deductions from Sch. A (Form 1040), line 23 (line 22 for 1988-90, line 21 for 1991-93) (or as previously adjusted)			
29 30	Multiply line 17 by 2% (.02) Subtract line 29 from line 28. If zero or less, enter -0			_
31	Miscellaneous itemized deductions from Sch. A (Form 1040), line 26 (line 24 for 1988-89 and 1991-93, line 25 for 1990) (or as previously adjusted).			
32 33	Subtract line 30 from line 31 Complete the worksheet on page 6 of the instructions if line 17 is more than:  • \$100,000 for 1991 (\$50,000 if married filing separately); • \$105,250 for 1992 (\$52,625 if married filing separately); • \$108,450 for 1993 (\$54,225 if married filing separately); • \$118,450 for 1994 (\$55,900 if married filing separately); • \$111,800 for 1994 (\$55,900 if married filing separately); • \$114,700 for 1995 (\$57,350 if married filing separately); • \$117,950 for 1996 (\$58,975 if married filing separately); • \$121,200 for 1997 (\$60,600 if married filing separately).  Otherwise, combine lines 16, 22, 27, and 32; enter the result here and on line 5 (page 3)			