

For the year Jan. 1-Dec. 31, 2013, or other tax year beginning

, 2013, ending

, 20

See separate instructions.

Your first name and initial
LISA A.

Last name
BULLOCK

Your social security number
[REDACTED]

If a joint return, spouse's first name and initial
STEPHEN C.

Last name
BULLOCK

Spouse's social security number
[REDACTED]

Home address (number and street). If you have a P.O. box, see instructions.
[REDACTED]

Apt. no.

Make sure the SSN(s) above and on line 6c are correct.

City, town or post office, state, and ZIP code. If you have a foreign address, also complete spaces below.

HELENA, MT 59601

Foreign country name

Foreign province/state/county

Foreign postal code

Presidential Election Campaign
Check here if you, or your spouse if filing jointly, want \$3 to go to this fund. Checking a box below will not change your tax or refund.

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 and full name here.
4 Head of household (with qualifying person). If the qualifying person is a child but not your dependent, enter this child's name here.
5 Qualifying widow(er) with dependent child

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 (2) Dependent's social security number (3) Dependent's relationship to you (4) If child under age 17 qualifying for child tax credit
CAROLINE G BULLOCK [REDACTED] DAUGHTER X
ALEXANDRIA F BULLOCK [REDACTED] DAUGHTER X
CAMERON S BULLOCK [REDACTED] SON X
d Total number of exemptions claimed 5

Income

- 7 Wages, salaries, tips, etc. Attach Form(s) W-2 DCB 7 134,862.
8a Taxable interest. Attach Schedule B if required 8a 1.
b Tax-exempt interest. Do not include on line 8a 8b
9a Ordinary dividends. Attach Schedule B if required 9a 716.
b Qualified dividends 9b 447.
10 Taxable refunds, credits, or offsets of state and local income taxes STMT 1 STMT 2 10 1,345.
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 1,461.
14 Other gains or (losses). Attach Form 4797 14
15a IRA distributions 15a b Taxable amount 15b
16a Pensions and annuities 16a b Taxable amount 16b
17 Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E 17 6,643.
18 Farm income or (loss). Attach Schedule F 18
19 Unemployment compensation 19
20a Social security benefits 20a b Taxable amount 20b
21 Other income. List type and amount 21
22 Combine the amounts in the far right column for lines 7 through 21. This is your total income 22 145,028.

Adjusted Gross Income

- 23 Educator expenses 23
24 Certain business expenses of reservists, performing artists, and fee-basis government officials. Attach Form 2106 or 2106-EZ 24
25 Health savings account deduction. Attach Form 8889 25
26 Moving expenses. Attach Form 3903 26
27 Deductible part of self-employment tax. Attach Schedule SE 27
28 Self-employed SEP, SIMPLE, and qualified plans 28
29 Self-employed health insurance deduction 29
30 Penalty on early withdrawal of savings 30
31a Alimony paid b Recipient's SSN 31a
32 IRA deduction 32
33 Student loan interest deduction 33
34 Tuition and fees. Attach Form 8917 34
35 Domestic production activities deduction. Attach Form 8903 35
36 Add lines 23 through 35 36
37 Subtract line 36 from line 22. This is your adjusted gross income 37 145,028.

Tax and Credits		38	145,028.
38 Amount from line 37 (adjusted gross income)		38	145,028.
39a Check <input type="checkbox"/> You were born before January 2, 1949, <input type="checkbox"/> Blind. <input type="checkbox"/> Spouse was born before January 2, 1949, <input type="checkbox"/> Blind. Total boxes checked ... 39a			
b If your spouse itemizes on a separate return or you were a dual-status alien, check here ... 39b			
40 Itemized deductions (from Schedule A) or your standard deduction (see left margin)		40	23,194.
41 Subtract line 40 from line 38		41	121,834.
42 Exemptions. If line 38 is \$150,000 or less, multiply \$3,900 by the number on line 6d. Otherwise, see inst.		42	19,500.
43 Taxable income. Subtract line 42 from line 41. If line 42 is more than line 41, enter -0-		43	102,334.
44 Tax. Check if any from: a <input type="checkbox"/> Form(s) 8814 b <input type="checkbox"/> Form 4972 c <input type="checkbox"/>		44	17,252.
45 Alternative minimum tax. Attach Form 6251		45	0.
46 Add lines 44 and 45		46	17,252.
47 Foreign tax credit. Attach Form 1116 if required		47	3.
48 Credit for child and dependent care expenses. Attach Form 2441		48	
49 Education credits from Form 8863, line 19		49	
50 Retirement savings contributions credit. Attach Form 8880		50	
51 Child tax credit. Attach Schedule 8812, if required		51	1,200.
52 Residential energy credits. Attach Form 5695		52	
53 Other credits from Form: a <input type="checkbox"/> 3800 b <input type="checkbox"/> 8801 c <input type="checkbox"/>		53	
54 Add lines 47 through 53. These are your total credits		54	1,203.
55 Subtract line 54 from line 46. If line 54 is more than line 46, enter -0-		55	16,049.
Other Taxes			
56 Self-employment tax. Attach Schedule SE		56	
57 Unreported social security and Medicare tax from Form: a <input type="checkbox"/> 4137 b <input type="checkbox"/> 8919		57	
58 Additional tax on IRAs, other qualified retirement plans, etc. Attach Form 5329 if required		58	
59a Household employment taxes from Schedule H		59a	
b First-time homebuyer credit repayment. Attach Form 5405 if required		59b	
60 Taxes from: a <input type="checkbox"/> Form 8959 b <input type="checkbox"/> Form 8960 c <input type="checkbox"/> Inst.; enter code(s)		60	
61 Add lines 55 through 60. This is your total tax		61	16,049.
Payments			
62 Federal income tax withheld from Forms W-2 and 1099		62	15,154.
63 2013 estimated tax payments and amount applied from 2012 return		63	
64a Earned income credit (EIC)		64a	
b Nontaxable combat pay election		64b	
65 Additional child tax credit. Attach Schedule 8812		65	
66 American opportunity credit from Form 8863, line 8		66	
67 Reserved		67	
68 Amount paid with request for extension to file		68	
69 Excess social security and tier 1 RRTA tax withheld		69	
70 Credit for federal tax on fuels. Attach Form 4136		70	
71 Credits from Form: a <input type="checkbox"/> 2439 b <input type="checkbox"/> Reserved c <input type="checkbox"/> 8885 d <input type="checkbox"/>		71	
72 Add lines 62, 63, 64a, and 65 through 71. These are your total payments		72	15,154.
Refund			
73 If line 72 is more than line 61, subtract line 61 from line 72. This is the amount you overpaid		73	
74a Amount of line 73 you want refunded to you. If Form 8888 is attached, check here		74a	
Direct deposit? See instructions. Routing number: Type: <input type="checkbox"/> Checking <input type="checkbox"/> Savings Account number:			
75 Amount of line 73 you want applied to your 2014 estimated tax		75	
76 Amount you owe. Subtract line 72 from line 61. For details on how to pay, see instructions		76	895.
Amount You Owe			
77 Estimated tax penalty (see instructions)		77	
Third Party Designee			
Do you want to allow another person to discuss this return with the IRS (see instructions)? <input checked="" type="checkbox"/> Yes. Complete below. <input type="checkbox"/> No			
Designee's name: JUSTIN L. MOSNESS, CPA Phone no. Personal identification number (PIN)			
Sign Here			
Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.			
Your signature: Date: Your occupation: Daytime phone number:			
Spouse's signature, if a joint return, both must sign. Date: Spouse's occupation: If the IRS sent you an Identity Protection PIN, enter it here:			
Print/Type preparer's name: JUSTIN L. MOSNESS, CPA Preparer's signature: Date: 03/24/14 Check <input type="checkbox"/> if self-employed PTIN:			
Firm's name: GALUSHA, HIGGINS & GALUSHA, P.C. Firm's EIN: P.O. BOX 1699 Phone no. HELENA, MT 59624-1699			