Federal 1040 Overview

IRS Form 1040

- Everyone files a 1040 or a version of the 1040 (1040A, 1040EZ, etc)
- Split up into 4 general areas
 - Taxpayer information
 - Income
 - Taxes & Credits
 - Payments/Refunds Due and Signature

Taxpayer Information

- Includes
 - Personal information for taxpayer & spouse
 - Presidential election campaign question
 - Filing status
 - Exemptions (including Dependents)
- Input into TaxWise on the Main Information Sheet

Form 1040 Page 1 TP Information Personal Information

| £ 1040 | | ent of the Treasury—Intern | nal Revenue Service | 5 0 | 09 |)\ IDO Has Os | Do not write | or staple in this space. |
|-----------------------------------|-------------------|----------------------------|---|---------------------------------------|-------------------------------|--|---------------------------------|---|
| Label (| For the | year Jan. 1-Dec. 31, 2009 | 9, or other tax year beginn | ning | , 2009, ending | , 20 | | OMB No. 1545-0074 |
| Labei | Your fir | rst name and initial | | Last name | | | Your | social security number |
| (See Anions E | | | | | | | | |
| n page 14.) | If a join | it return, spouse's first | name and initial | Last name | | | Spous | se's social security number |
| Jse the IRS | | | | | | | | |
| abel. F | Home | address (number and s | street). If you have a P. | .O. box, see page | 14. | Apt. r | no. | You must enter |
| Otherwise, | | | | | | | | your SSN(s) above. |
| please print propertype. | City, to | wn or post office, stat | e, and ZIP code. If you | ı have a foreign a | ddress, see page 1 | 14. | Check | ing a box below will not |
| Presidential | | | | | | | change | e your tax or refund. |
| Election Campaign | | | | · · · · · · · · · · · · · · · · · · · | | - (000 page - | _ N | ou Spouse |
| Filing Status Check only one box. | 1 L 2 [3 [| _ | ntly (even if only one parately. Enter spou re. ► | | qua e chi | alifying person is ild's name here. | a child but no | g person). (See page 15.) If the t your dependent, enter this ndent child (see page 16) |
| Exemptions | 6a | Yourself. If so | meone can claim yo | ou as a depend | ent, <mark>do not</mark> ched | ck box 6a |) | Boxes checked on 6a and 6b |
| Litempuons | b | Spouse . | | | | | <u></u> ∫ | No. of children |
| | C | Dependents: | | (2) Depe | | Dependent's (4) | if qualifying ill for child tax | on 6c who: • lived with you |
| | | (1) First name | Last name | social secur | ty number relati | onship to you cre | dit (see page 17) | did not live with |
| | | | | | | | | you due to divorce or separation |
| f more than four | | | | | | | | (see page 18) |
| dependents, see page 17 and | | | | | | | | Dependents on 6c not entered above |
| check here ► | d | Total number of ex | remptions claimed | | | | | Add numbers on |

Form 1040 Page 1 TP Information Presidential Election Campaign

| £ 1040 | • | asury—Internal Revenue Service Iual Income Tax R | eturn 20 | 09 (99) | IRS Use Only—Do not wr | ite or staple in this space. |
|---|-----------------------|--|-----------------------|--------------------------|---|--|
| Lobol | For the year Jan. 1-0 | Dec. 31, 2009, or other tax year be | ginning | , 2009, ending | , 20 | OMB No. 1545-0074 |
| Label (| Your first name an | id initial | Last name | | You | ır social security number |
| (See A | | | | | | |
| instructions B on page 14.) | If a joint return, sp | ouse's first name and initial | Last name | | Spo | ouse's social security number |
| Use the IRS | | | | | | |
| label. H | Home address (nu | ımber and street). If you have a | a P.O. box, see page | 14. | Apt. no. | You must enter |
| Otherwise, E | | , , | , , , | | | vour SSN(s) above. |
| please print R | (ty, town or post | office, state, and ZIP code. If | vou have a foreign ad | idress, see page 14. | Cha | oking a boy bolow will not |
| or type. | ,, | | , | , p g | Offe | cking a box below will not nge your tax or refund. |
| Presidential | Chaolahara i | f var. ar varr anamaa if filin | a injustiv want for | to go to this fund | | You Spouse |
| Election Campaign | Check here i | f you, or your spouse if filin | ig jointly, want \$3 | to go to triis iuria (| (see page 14) | Tou spouse |
| Filing Status | | | | 4 L Head | or nousenoid (with quality | ring person). (See page 15.) if the |
| | | | | | | |
| | | d filing jointly (even if only o | - | | , ,, | not your dependent, enter this |
| Check only one | 3 Married | d filing separately. Enter sp | - | e child' | s name here. > | |
| Check only one box. | 3 Married | | - | e child' | s name here. > | not your dependent, enter this endent child (see page 16) |
| box. | 3 Married and ful | d filing separately. Enter sp | oouse's SSN above | child' 5 Quali | s name here. ifying widow(er) with dep | pendent child (see page 16) Boxes checked |
| | 3 Married and ful | d filing separately. Enter sp Il name here. ► rself. If someone can claim | oouse's SSN above | child' 5 Quali | s name here. ifying widow(er) with dep | bendent child (see page 16) Boxes checked on 6a and 6b |
| box. | 3 Married and ful | d filing separately. Enter sp Il name here. ► rself. If someone can claim use | oouse's SSN above | 5 Quali | ifying widow(er) with dep box 6a | Dendent child (see page 16) Boxes checked on 6a and 6b No. of children on 6c who: |
| box. | 3 | d filing separately. Enter sp Il name here. ► rself. If someone can claim use | you as a depende | 5 Qualient, do not check | ifying widow(er) with dep box 6a | Boxes checked on 6a and 6b No. of children on 6c who: • lived with you |
| box. | 3 | d filing separately. Enter sp Il name here. ► rself. If someone can claim use | you as a depende | 5 Qualient, do not check | ifying widow(er) with dep box 6a | Boxes checked on 6a and 6b No. of children on 6c who: • lived with you • did not live with you due to divorce |
| box. | 3 | d filing separately. Enter sp Il name here. ► rself. If someone can claim use | you as a depende | 5 Qualient, do not check | ifying widow(er) with dep box 6a | Boxes checked on 6a and 6b No. of children on 6c who: • lived with you • did not live with |
| Exemptions If more than four dependents, see | 3 | d filing separately. Enter sp Il name here. ► rself. If someone can claim use | you as a depende | 5 Qualient, do not check | ifying widow(er) with dep box 6a | Boxes checked on 6a and 6b No. of children on 6c who: Ived with you did not live with you due to divorce or separation (see page 18) Dependents on 6c |
| Exemptions If more than four | 3 | d filing separately. Enter sp Il name here. ► rself. If someone can claim use | you as a depende | 5 Qualient, do not check | ifying widow(er) with dep box 6a | 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 18) |

Form 1040 Page 1 TP Information Filing Status

| 104 | 0 | • | • | nternal Revenue Service Income Tax Re | eturn 20 | 09 | (99) IRS U | lse Only—Do r | not write or s | staple in this space. | |
|---------------------------------------|--------|-------------------|----------------------|--|-------------------|----------------------------|--------------------|----------------|----------------|--|------|
| Label | | For the | year Jan. 1-Dec. 31, | 2009, or other tax year begi | inning | , 2009, er | ding | , 20 | 0 | MB No. 1545-0074 | |
| Labei | L | Your fi | rst name and initial | | Last name | | | | Your so | cial security number | |
| (See | A B | | | | | | | | | | |
| instructions on page 14.) | Ē | If a join | it return, spouse's | first name and initial | Last name | | | | Spouse' | s social security nun | nber |
| Use the IRS | L | | | | | | | | | | |
| label. | н | Home | address (number a | and street). If you have a | P.O. box, see pa | e 14. | | Apt. no. | | You must enter | |
| Otherwise, | E | | | | | | | | _ | our SSN(s) above. | |
| please print | R E | City, to | own or post office, | state, and ZIP code. If yo | ou have a foreign | iddress, see i | page 14. | | | a box below will no | |
| or type. | | | • | | | | | • | | our tax or refund. | |
| Presidential | _ | _ | | | | | | _ | | | |
| Filing Statu Check only on box. | | 1 [2 [3 [| _ | jointly (even if only or separately. Enter spo e here. ▶ | | | qualifying pers | son is a child | but not ye | erson). (See page 15. our dependent, enter ent child (see page 1 | this |
| Exemption | S | Va | — roursen. n | Someone can ciaim | you as a depen | aent, <mark>ao no</mark> t | CHECK DOX OA | | } | on 6a and 6b | |
| • | | b | | <u></u> | <u> </u> | | | | | No. of children | |
| | | С | Dependents: | | | endent's | (3) Dependent's | | | on 6c who: • lived with you | |
| | | | (1) First name | Last name | social seci | ırity number | relationship to yo | credit (see p | age 17) | did not live with | |
| | | | | | | | | | | you due to divorce or separation | |
| If more than fo | | | | | | | | | | (see page 18) | |
| dependents, s page 17 and | ee | | | | | | | | | Dependents on 6c not entered above | |
| check here ▶ | | | | | | | | | | Add numbers on | |
| | | d | Total number of | f exemptions claimed | | | | <u> </u> | | lines above | |

Form 1040 Page 1 TP Information Exemptions (including Dependents)

| 1040 | - | ent of the Treasury—Internal Revenue Service Individual Income Tax Re | eturn 20 | 09 | (99) | IRS Use Only—Do | not write or staple in this space. |
|-----------------------------|------------|---|--------------------|--------------|---------------|--------------------|---|
| Label | For the | year Jan. 1-Dec. 31, 2009, or other tax year beg | inning | , 2009, e | ending | , 20 | OMB No. 1545-0074 |
| Labei | Your fir | rst name and initial | Last name | | | | Your social security number |
| (See A | | | | | | | |
| instructions B on page 14.) | If a join | nt return, spouse's first name and initial | Last name | | | | Spouse's social security number |
| Use the IRS | | | | | | | |
| label. H | Home a | address (number and street). If you have a | P.O. box, see pa | e 14. | | Apt. no. | ▲ You must enter ▲ |
| Otherwise, | | | | | | | your SSN(s) above. |
| please print or type. | City, to | own or post office, state, and ZIP code. If y | ou have a foreign | iddress, see | page 14. | | Checking a box below will not |
| Presidential | | | | | | | change your tax or refund. |
| Election Campaign | ► Ch | eck here if you, or your spouse if filing | j jointly, want \$ | to go to th | nis fund (see | page 14) ► | You Spouse |
| Filing Status | 1 [2 [| ☐ Single ☐ Married filing jointly (even if only o | ne had incoree) | 4 | | • | qualifying person). (See page 15.) If the dbut not your dependent, enter this |
| Check only one | 3 | Married filing separately. Enter spo | ouse's SSN ab | á | child's na | me here. 🕨 | |
| how | | | | | | | |
| Exemptions | 6a | ☐ Yourself. If someone can claim | you as a depen | dent, do no | t check box | 6a | Boxes checked on 6a and 6b |
| Exemptions | b | ☐ Spouse | | | | | No. of children |
| | С | Dependents: | (2) Dej | endent's | (3) Depend | dent's (4) √ if q | ualifying on 6c who: |
| | | (1) First name Last name | social sec | urity number | relationship | to you child for d | |
| | | | | | | Jordan (600 | you due to divorce or separation |
| If more than four | | | | | | | (see page 18) |
| dependents, see page 17 and | | | | | | | Dependents on 6c not entered above |
| check here ▶□ | d | Total number of exemptions claimed | | | | | Add numbers on |

Income

- All sources of income included in this section
- Income derived from various tax forms usually issued by employer, financial institution, government agency, etc
- Information from tax forms and client interview entered into the respective form or worksheet in TaxWise
- TaxWise puts the appropriate values into the 1040
- Adjustments to income included in this section
- Final line on page is "Adjusted Gross Income"

1040 Page 1 Income

| | | | | | | _ |
|-----------------------------------|---|---|---|----------|-----|---|
| Income | 7 | Wages, salaries, tips, etc. Attach Form(s) W-2 | | | 7 | |
| moomo | 8a | Taxable interest. Attach Schedule B if required | , | | 8a | |
| | b | Tax-exempt interest. Do not include on line 8a | 8b | | | |
| Attach Form(s) W-2 here. Also | 9a | Ordinary dividends. Attach Schedule B if required | , | . [| 9a | |
| attach Forms | b | Qualified dividends (see page 22) | 9b | | | |
| W-2G and | 10 | Taxable refunds, credits, or offsets of state and local incom | 10 | | | |
| 1099-R if tax | 11 | Alimony received | | | 11 | |
| was withheld. | 12 | Business income or (loss). Attach Schedule C or C-EZ . | | 12 | | |
| | 13 | Capital gain or (loss). Attach Schedule D if required. If not r | equired, check here > | | 13 | |
| If you did not get a W-2, | 14 | Other gains or (losses). Attach Form 4797 | | | 14 | |
| see page 22. | 15a | IRA distributions . 15a | b Taxable amount (see page | 24) | 15b | |
| oco pago LL. | 16a | Pensions and annuities 16a | b Taxable amount (see page | 25) | 16b | |
| | 17 | Rental real estate, royalties, partnerships, S corporations, t | rusts, etc. Attach Schedule | e E | 17 | |
| Enclose, but do | 18 | Farm income or (loss). Attach Schedule F | | | 18 | |
| not attach, any payment. Also, | 19 | Unemployment compensation in excess of \$2,400 per recip | pient (see page 27) | | 19 | |
| please use | 20a | Social security benefits 20a | b Taxable amount (see page | 27) | 20b | |
| Form 1040-V. | 21 | Other income. List type and amount (see page 29) | | | 21 | |
| | | | | | | |
| | 22 | Add the amounts in the far right column for lines 7 through 2 | 1. This is your total income | • ▶ | 22 | |
| | 22 | | 1. This is your total income | • ▶ | 22 | |
| Aajustea | | | | ▶ | 22 | |
| Gross | 00 | Educates automores (see nogo 00) | | ▶ | 22 | |
| • | 00 | Certain business expenses of reservists, performing artists, and | 00 | • • | 22 | |
| Gross | 24 | Certain business expenses of reservists, performing artists, and fee-basis government officials. Attach Form 2106 or 2106-EZ | 24 | • • | 22 | |
| Gross | 24 25 | Certain business expenses of reservists, performing artists, and fee-basis government officials. Attach Form 2106 or 2106-EZ Health savings account deduction. Attach Form 8889 . | 24 25 | • • | 22 | |
| Gross | 24 25 26 | Certain business expenses of reservists, performing artists, and fee-basis government officials. Attach Form 2106 or 2106-EZ Health savings account deduction. Attach Form 8889 Moving expenses. Attach Form 3903 | 24 25 26 | • • | 22 | |
| Gross | 24 25 26 27 | Certain business expenses of reservists, performing artists, and fee-basis government officials. Attach Form 2106 or 2106-EZ Health savings account deduction. Attach Form 8889 . Moving expenses. Attach Form 3903 One-half of self-employment tax. Attach Schedule SE . | 24 25 26 27 | • • | 22 | |
| Gross | 24 25 26 27 28 | Certain business expenses of reservists, performing artists, and fee-basis government officials. Attach Form 2106 or 2106-EZ Health savings account deduction. Attach Form 8889 . Moving expenses. Attach Form 3903 One-half of self-employment tax. Attach Schedule SE . Self-employed SEP, SIMPLE, and qualified plans | 24 25 26 27 28 | • • | 22 | |
| Gross | 24 25 26 27 28 29 | Certain business expenses of reservists, performing artists, and fee-basis government officials. Attach Form 2106 or 2106-EZ Health savings account deduction. Attach Form 8889 . Moving expenses. Attach Form 3903 One-half of self-employment tax. Attach Schedule SE . Self-employed SEP, SIMPLE, and qualified plans Self-employed health insurance deduction (see page 30) | 24 25 26 27 28 29 | • • | 22 | |
| Gross | 24 25 26 27 28 29 30 | Certain business expenses of reservists, performing artists, and fee-basis government officials. Attach Form 2106 or 2106-EZ Health savings account deduction. Attach Form 8889 . Moving expenses. Attach Form 3903 One-half of self-employment tax. Attach Schedule SE . Self-employed SEP, SIMPLE, and qualified plans Self-employed health insurance deduction (see page 30) Penalty on early withdrawal of savings | 24 25 26 27 28 29 30 | | 22 | |
| Gross | 24 25 26 27 28 29 30 31a | Certain business expenses of reservists, performing artists, and fee-basis government officials. Attach Form 2106 or 2106-EZ Health savings account deduction. Attach Form 8889 . Moving expenses. Attach Form 3903 One-half of self-employment tax. Attach Schedule SE . Self-employed SEP, SIMPLE, and qualified plans . Self-employed health insurance deduction (see page 30) Penalty on early withdrawal of savings Alimony paid b Recipient's SSN > | 24 25 26 27 28 29 30 31a | | 22 | |
| Gross | 24 25 26 27 28 29 30 31a 32 | Certain business expenses of reservists, performing artists, and fee-basis government officials. Attach Form 2106 or 2106-EZ Health savings account deduction. Attach Form 8889 Moving expenses. Attach Form 3903 One-half of self-employment tax. Attach Schedule SE Self-employed SEP, SIMPLE, and qualified plans Self-employed health insurance deduction (see page 30) Penalty on early withdrawal of savings Alimony paid b Recipient's SSN | 24 25 26 27 28 29 30 31a 32 | | 22 | |
| Gross | 24 25 26 27 28 29 30 31a 32 33 | Certain business expenses of reservists, performing artists, and fee-basis government officials. Attach Form 2106 or 2106-EZ Health savings account deduction. Attach Form 8889 Moving expenses. Attach Form 3903 One-half of self-employment tax. Attach Schedule SE Self-employed SEP, SIMPLE, and qualified plans Self-employed health insurance deduction (see page 30) Penalty on early withdrawal of savings Alimony paid b Recipient's SSN IRA deduction (see page 31) Student loan interest deduction (see page 34) | 24 25 26 27 28 29 30 31a 32 33 | | 22 | |
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| Gross | 24 25 26 27 28 29 30 31a 32 33 34 35 | Certain business expenses of reservists, performing artists, and fee-basis government officials. Attach Form 2106 or 2106-EZ Health savings account deduction. Attach Form 8889 Moving expenses. Attach Form 3903 One-half of self-employment tax. Attach Schedule SE Self-employed SEP, SIMPLE, and qualified plans Self-employed health insurance deduction (see page 30) Penalty on early withdrawal of savings Alimony paid b Recipient's SSN IRA deduction (see page 31) Student loan interest deduction (see page 34) Tuition and fees deduction. Attach Form 8917 Domestic production activities deduction. Attach Form 8903 | 24 25 26 27 28 29 30 31a 32 33 34 35 | | | |

1040 Page 1 Income Adjustments

| M-2G and 109 Taxable refunds, credits, or offsets of state an local income taxes (see page 23) 10 | | | | | | |
|---|---------------|---|--|---|-----|---------|
| tatach Form(s) b Tax-exempt interest. Do not include on line 8 b Tax-exempt interest. Do not include on line 8 cordinary dividends. Attach Schedule B if require b Qualified dividends, Attach Schedule B if required b Qualified dividends, credits, or offsets of state an local income taxes (see page 23) 10 Variable refunds, credits, or offsets of state an local income taxes (see page 23) 10 Variable refunds, credits, or offsets of state an local income taxes (see page 23) 10 Variable refunds, credits, or offsets of state an local income taxes (see page 23) 10 Variable refunds, credits, or offsets of state an local income taxes (see page 23) 11 Variable refunds, credits, or offsets of state an local income taxes (see page 23) 11 Variable refunds, credits, or offsets of state an local income taxes (see page 23) 11 Variable refunds, credits, or offsets of state an local income taxes (see page 23) 11 Variable refunds, credits, or offsets of state an local income taxes (see page 23) 11 Variable refunds, credits, or offsets of state an local income taxes (see page 23) 11 Variable refunds, credits, or offsets of state an local income taxes (see page 23) 11 Variable refunds, credits, or offsets of state an local income taxes (see page 23) 11 Variable refunds, credits, or offsets of state an local income taxes (see page 24) 15 Variable refunds, credits, or offsets of state an local income taxes (see page 24) 15 Variable refunds, credits, or offsets of state an local income taxes (see page 24) 15 Variable refunds, credits, or offsets of state an local income taxes (see page 23) 10 Variable refunds, credits, or offsets of state an local income taxes (see page 27) 12 Variable refunds, credits, or offsets of state an local income taxes (see page 27) 15 Variable refunds, credits, or offsets of state an local income taxes (see page 27) 17 Variable refunds, credits, or offsets of state an local income taxes (see page 27) 19 Variable refunds, credits, or offsets of state | Income | 7 | Wages, salaries, tips, etc. Attach Form(s) W-2 | | 7 | |
| Attach Form(e) N2 ener. Also strach Forms N2 ener. Also strach Forms Developed dividends (see page 22) Developed dividends (see page 22) Alimony received Taxable refunds, credits, or offsets of state an ocal income taxes (see page 23) Alimony received Taxable refunds, credits, or offsets of state an ocal income taxes (see page 23) Alimony received Taxable refunds, credits, or offsets of state an ocal income taxes (see page 23) Alimony received Taxable refunds, credits, or offsets of state an ocal income taxes (see page 23) 10 Alimony received Taxable refunds, credits, or offsets of state an ocal income taxes (see page 23) 11 Alimony received Taxable refunds, credits, or offsets of state an ocal income taxes (see page 23) 11 Alimony received Taxable refunds, credits, or offsets of state an ocal income taxes (see page 23) 11 12 13 Capital gain or (loss), Attach Schedule C C-EZ 12 Capital gain or (loss), Attach Schedule C C-EZ 15a IRA distributions 15a IRA distributions 15a IRA destributions 15a IRA defunds, expenses of see page 29) Certain business expenses of reservists, performing artists, and fee-basis government officials. Attach Form 1040-V. 23 Educator expenses (see page 29) Core-half of self-employed SEP, SIMPLE, and qualified plans 25 Self-employed SEP, SIMPLE, and qualified plans 26 Moving expenses, Attach Form 3903 26 Core-half of self-employed health insurance deduction (see page 30) Penalty on early withdrawal of savings 30 31a Alimony paid b Recipient's SSN ▶ 31a 32 IRA deduction (see page 31) 33 Subtract line 36 from line 22. This is your adjusted gross income ▶ 37 | moonic | 8a | Taxable interest. Attach Schedule B if required | | 8a | \bot |
| M-2 here. Also but do not attach, any ayment. Also, blease use Form 1040-V. | | b | Tax-exempt interest. Do not include on line 8 | 8b | | |
| b Qualified dividends (see page 22) | | 9a | Ordinary dividends. Attach Schedule B if required | | 9a | |
| 1099-R if tax was withheld. 12 12 12 12 12 12 12 1 | attach Forms | b | Qualified dividends (see page 22) | 9b | | |
| Subiness income or (loss). Attach Schedule C C-EZ 12 13 14 14 15 15 15 15 15 15 | W-2G and | 10 | Taxable refunds, credits, or offsets of state an local incon | ne taxes (see page 23) | 10 | \perp |
| Business income or (loss). Attach Schedule C C-EZ 12 13 14 14 15 14 15 14 15 15 16 16 16 16 16 17 18 18 17 18 18 18 18 18 18 18 18 18 | 1099-R if tax | 11 | Alimony received | | 11 | |
| flyout did not get a W-2, see page 22. 15a | was withheid. | 12 | Business income or (loss). Attach Schedule C C-EZ . | | 12 | |
| get a W-2, see page 22. 15a IRA distributions 15a b Taxable amount (see page 24) 15b 16b 17axable amount (see page 25) 16b 17axable amount (see page 26) 17axable amount (see page 27) 17axable amount (see page 27) 18a 17axable amount (see page 27) 18a 17axable amount (see page 27) 18a 18a | | 13 | Capital gain or (loss). Attach Schedule D if requred. If not r | required, check here 🕨 🗌 | 13 | |
| 15a | | 14 | Other gains or (losses). Attach Form 4797 | | 14 | |
| 16a Pensions and annuities 16a | , | 15a | IRA distributions . 15a | b Taxable amount (see page 24) | 15b | |
| 18 | | 16a | Pensions and annuities 16a | b Taxable amount (see page 25) | 16b | |
| not attach, any payment. Also, please use 20a | | 17 | Rental real estate, royalties, partnerships, S coporations, t | rusts, etc. Attach Schedule E | 17 | \perp |
| Dearge use please use polease | | 18 | Farm income or (loss). Attach Schedule F | | 18 | |
| 20a Social security benefits 20a | | 19 | Unemployment compensation in excess of \$2 00 per reci | pient (see page 27) | 19 | |
| Adjusted Gross Income 23 | please use | 20a | Social security benefits 20a | b Taxable amount (see page 27) | 20b | |
| Adjusted Gross 24 Certain business expenses of reservists, performing artists, and fee-basis government officials. Attach Form 2106 or 2106-EZ 24 Income 25 Health savings account deduction. Attach Form 8889 25 26 Moving expenses. Attach Form 3903 26 27 One-half of self-employment tax. Attach Schedule SE 27 28 Self-employed SEP, SIMPLE, and qualified plans 28 29 Self-employed health insurance deduction (see page 30) 29 30 Penalty on early withdrawal of savings 30 31a Alimony paid b Recipient's SSN ► 31a 32 IRA deduction (see page 31) 32 33 Student loan interest deduction (see page 34) 33 34 Tuition and fees deduction. Attach Form 8917 34 35 Domestic production activities deduction. Attach Form 8903 35 36 Add lines 23 through 31a and 32 through 35 36 37 Subtract line 36 from line 22. This is your adjusted gross income 37 | Form 1040-V. | 21 | Other income. List type and amount (see page) | | 21 | \perp |
| Adjusted Gross | | -^^ | | | | _ |
| Gross fee-basis government officials. Attach Form 2106 or 2106-EZ beasis government officials. Attach Form 8889 25 beasis government officials. Attach Schedule SE 27 cone-half of self-employment tax. Attach Schedule SE 27 28 Self-employed SEP, SIMPLE, and qualified plans 28 self-employed health insurance deduction (see page 30) 29 cone-half of savings 30 penalty on early withdrawal of savings 30 penalty on early withdrawal of savings 30 cone-half of savings 31 and 31 and 31 and 32 liRA deduction (see page 31) 31 and 32 liRA deduction (see page 31) 32 cone-half officials. Attach Form 8917 32 cone-half officials. Attach Form 8917 34 cone-half officials. Attach Form 8903 35 cone-half officials. Attach Form 8903 36 and d lines 23 through 31a and 32 through 35 cone-half officials. Attach Form 890s and sold lines 23 through 31a and 32 through 35 cone-half officials. Attach Form 890s and sold lines 23 through 31a and 32 through 35 cone-half officials. Attach Form 890s and sold lines 23 through 31a and 32 through 35 cone-half officials. Attach Form 890s and sold lines 23 through 31a and 32 through 35 cone-half officials. Attach Form 890s and sold lines 23 through 31a and 32 through 35 cone-half officials. | | | | | | |
| Health savings account deduction. Attach Form 8889 . 25 26 Moving expenses. Attach Form 3903 26 27 One-half of self-employment tax. Attach Schedule SE | Adiusted | 23 | Educator expenses (see page 29) | 23 | | |
| Moving expenses. Attach Form 3903 | Adjusted | | | 23 | | |
| 27 One-half of self-employment tax. Attach Schedule SE | Gross | | Certain business expenses of reservists, performing artists, and | | - | |
| 28 Self-employed SEP, SIMPLE, and qualified plans | | 24 | Certain business expenses of reservists, performing artists, and fee-basis government officials. Attach Form 2106 or 2106-EZ | 24 | - | |
| 29 Self-employed health insurance deduction (see page 30) 30 Penalty on early withdrawal of savings 30 31a Alimony paid b Recipient's SSN ▶ | Gross | 24 25 | Certain business expenses of reservists, performing artists, and fee-basis government officials. Attach Form 2106 or 2106-EZ Health savings account deduction. Attach Form 8889 | 24 25 | - | |
| 30 Penalty on early withdrawal of savings | Gross | 24 25 26 | Certain business expenses of reservists, performing artists, and fee-basis government officials. Attach Form 2106 or 2106-EZ Health savings account deduction. Attach Form 8889 . Moving expenses. Attach Form 3903 | 24 25 26 | - | |
| 31a Alimony paid b Recipient's SSN ▶ 31a 32 IRA deduction (see page 31) | Gross | 24 25 26 27 | Certain business expenses of reservists, performing artists, and fee-basis government officials. Attach Form 2106 or 2106-EZ Health savings account deduction. Attach Form 8889 . Moving expenses. Attach Form 3903 One-half of self-employment tax. Attach Schedule SE . | 24 25 26 27 | - | |
| 32 IRA deduction (see page 31) | Gross | 24 25 26 27 28 | Certain business expenses of reservists, performing artists, and fee-basis government officials. Attach Form 2106 or 2106-EZ Health savings account deduction. Attach Form 8889 . Moving expenses. Attach Form 3903 One-half of self-employment tax. Attach Schedule SE . Self-employed SEP, SIMPLE, and qualified plans | 24 25 26 27 28 | | |
| 33 Student loan interest deduction (see page 34) 33 34 Tuition and fees deduction. Attach Form 8917 34 35 Domestic production activities deduction. Attach Form 8903 35 36 Add lines 23 through 31a and 32 through 35 | Gross | 24 25 26 27 28 29 | Certain business expenses of reservists, performing artists, and fee-basis government officials. Attach Form 2106 or 2106-EZ Health savings account deduction. Attach Form 8889 . Moving expenses. Attach Form 3903 One-half of self-employment tax. Attach Schedule SE . Self-employed SEP, SIMPLE, and qualified plans Self-employed health insurance deduction (see page 30) | 24 25 26 27 28 29 | | |
| Tuition and fees deduction. Attach Form 8917 34 35 Domestic production activities deduction. Attach Form 8903 35 36 Add lines 23 through 31a and 32 through 35 | Gross | 24 25 26 27 28 29 30 | Certain business expenses of reservists, performing artists, and fee-basis government officials. Attach Form 2106 or 2106-EZ Health savings account deduction. Attach Form 8889 . Moving expenses. Attach Form 3903 | 24 25 26 27 28 29 30 | | |
| 35 Domestic production activities deduction. Attach Form 8903 36 Add lines 23 through 31a and 32 through 35 | Gross | 24 25 26 27 28 29 30 31a | Certain business expenses of reservists, performing artists, and fee-basis government officials. Attach Form 2106 or 2106-EZ Health savings account deduction. Attach Form 8889 . Moving expenses. Attach Form 3903 | 24 25 26 27 28 29 30 31a 32 | | |
| 36 Add lines 23 through 31a and 32 through 35 | Gross | 24 25 26 27 28 29 30 31a 32 | Certain business expenses of reservists, performing artists, and fee-basis government officials. Attach Form 2106 or 2106-EZ Health savings account deduction. Attach Form 8889 Moving expenses. Attach Form 3903 One-half of self-employment tax. Attach Schedule SE Self-employed SEP, SIMPLE, and qualified plans Self-employed health insurance deduction (see page 30) Penalty on early withdrawal of savings Alimony paid b Recipient's SSN IRA deduction (see page 31) | 24 25 26 27 28 29 30 31a 32 | | |
| 37 Subtract line 36 from line 22. This is your adjusted gross income 37 | Gross | 24 25 26 27 28 29 30 31a 32 33 | Certain business expenses of reservists, performing artists, and fee-basis government officials. Attach Form 2106 or 2106-EZ Health savings account deduction. Attach Form 8889 . Moving expenses. Attach Form 3903 One-half of self-employment tax. Attach Schedule SE . Self-employed SEP, SIMPLE, and qualified plans Self-employed health insurance deduction (see page 30) Penalty on early withdrawal of savings Alimony paid b Recipient's SSN IRA deduction (see page 31) Student loan interest deduction (see page 34) Tuition and fees deduction. Attach Form 8917 | 24 25 26 27 28 29 30 31a 32 33 34 | | |
| | Gross | 24 25 26 27 28 29 30 31a 32 33 34 | Certain business expenses of reservists, performing artists, and fee-basis government officials. Attach Form 2106 or 2106-EZ Health savings account deduction. Attach Form 8889 . Moving expenses. Attach Form 3903 One-half of self-employment tax. Attach Schedule SE . Self-employed SEP, SIMPLE, and qualified plans Self-employed health insurance deduction (see page 30) Penalty on early withdrawal of savings Alimony paid b Recipient's SSN IRA deduction (see page 31) Student loan interest deduction (see page 34) Tuition and fees deduction. Attach Form 8917 | 24 25 26 27 28 29 30 31a 32 33 34 | | |
| For Disclosure, Privacy Act, and Paperwork Reduction Act Notice, see page 97. Cat. No. 11320B Form 1040 (2009) | Gross | 24 25 26 27 28 29 30 31a 32 33 34 35 | Certain business expenses of reservists, performing artists, and fee-basis government officials. Attach Form 2106 or 2106-EZ Health savings account deduction. Attach Form 8889 Moving expenses. Attach Form 3903 One-half of self-employment tax. Attach Schedule SE Self-employed SEP, SIMPLE, and qualified plans Self-employed health insurance deduction (see page 30) Penalty on early withdrawal of savings Alimony paid b Recipient's SSN IRA deduction (see page 31) Student loan interest deduction (see page 34) Tuition and fees deduction. Attach Form 8917 Domestic production activities deduction. Attach Form 8903 | 24 25 26 27 28 29 30 31a 32 33 34 | 36 | |
| | Gross | 24 25 26 27 28 29 30 31a 32 33 34 35 36 | Certain business expenses of reservists, performing artists, and fee-basis government officials. Attach Form 2106 or 2106-EZ Health savings account deduction. Attach Form 8889 Moving expenses. Attach Form 3903 One-half of self-employment tax. Attach Schedule SE Self-employed SEP, SIMPLE, and qualified plans Self-employed health insurance deduction (see page 30) Penalty on early withdrawal of savings Alimony paid b Recipient's SSN IRA deduction (see page 31) Student loan interest deduction (see page 34) Tuition and fees deduction. Attach Form 8917 Domestic production activities deduction. Attach Form 8903 Add lines 23 through 31a and 32 through 35 | 24 25 26 27 28 29 30 31a 32 33 34 | | |

1040 Page 1 Income Adjusted Gross Income (AGI)

| | | | | _ |
|------------------------------------|-----|---|-----|-------|
| Income | 7 | Wages, salaries, tips, etc. Attach Form(s) W-2 | 7 | |
| moonio | 8a | Taxable interest. Attach Schedule B if required | 8a | |
| A44(-) | b | Tax-exempt interest. Do not include on line 8a . 8b | | |
| Attach Form(s) W-2 here. Also | 9a | Ordinary dividends. Attach Schedule B if required | 9a | |
| attach Forms | b | Qualified dividends (see page 22) | | |
| W-2G and | 10 | Taxable refunds, credits, or offsets of state and local income taxes (see page 23) | 10 | |
| 1099-R if tax | 11 | Alimony received | 11 | |
| was withheld. | 12 | Business income or (loss). Attach Schedule C or C-EZ | 12 | |
| | 13 | Capital gain or (loss). Attach Schedule D if required. If not request, check here | 13 | |
| If you did not get a W-2, | 14 | Other gains or (losses). Attach Form 4797 | 14 | |
| see page 22. | 15a | IRA distributions . 15a b Taxal amount (see page 24) | 15b | |
| | 16a | Pensions and annuities 16a b Taxable mount (see page 25) | 16b | |
| | 17 | Rental real estate, royalties, partnerships, S corporations, trusts, etc. | 17 | |
| Enclose, but do not attach, anv | 18 | Farm income or (loss). Attach Schedule F | 18 | |
| payment. Also, | 19 | Unemployment compensation in excess of \$2,400 per recipient (see page 7) | 19 | |
| please use | 20a | Social security benefits 20a b Taxable amount see page 27) | 20b | |
| Form 1040-V. | 21 | Other income. List type and amount (see page 29) | 21 | |
| | 22 | Add the amounts in the far right column for lines 7 through 21. This is your total come | 22 | |
| A ali a k a al | 23 | Educator expenses (see page 29) 23 | | |
| Adjusted | 24 | Certain business expenses of reservists, performing artists, and | | |
| Gross | | fee-basis government officials. Attach Form 2106 or 2106-EZ | | |
| Income | 25 | Health savings account deduction. Attach Form 8889 . 25 | | |
| | 26 | Moving expenses. Attach Form 3903 | | |
| | 27 | One-half of self-employment tax. Attach Schedule SE . 27 | | |
| | 28 | Self-employed SEP, SIMPLE, and qualified plans 28 | | |
| | 29 | Self-employed health insurance deduction (see page 30) 29 | | |
| | 30 | Penalty on early withdrawal of savings | | |
| | 31a | Alimony paid b Recipient's SSN ▶ 31a | • | |
| | 32 | IRA deduction (see page 31) | | |
| | 33 | Student loan interest deduction (see page 34) 33 | | |
| | 34 | Tuition and fees deduction. Attach Form 8917 34 | | |
| | 35 | Domestic production activities deduction. Attach Form 8903 35 | | |
| | 37 | Subtract line 36 from line 22. This is your adjusted gross income | 37 | |
| | 31 | oubtract line 30 from line 22. This is your adjusted gross income | 3/ | |

Taxes & Credits Page 2

- Taxable Income
 - + Start with "Adjusted Gross Income"
 - Deduct Itemized or Standard Deduction
 - Deduct Personal Exemptions
 - = Arrive at "Taxable Income"
- Calculate Tax on "Taxable income"
- Total Tax
 - + Start with Calculated Tax on Taxable Income
 - + Add Alternative Minimum Tax (Out of Scope)
 - Deduct non-refundable tax credits
 - + Add other taxes
 - Bottom line is "Total Tax"

1040 Page 2 Taxes & Credits Adjusted Gross Income (AGI)

| Form 1040 (2009 | 9) | | | | Page 2 |
|--|----------|---|--|----------|--------|
| Tax ar | 38 | Amount from line 37 (adjusted gross income) | <u></u> | 38 | |
| Credits | Sea | | Blind. Total boxes Blind. checked ▶ 39a | | |
| Standard Deduction for— | b 40a | If your spouse itemizes on a separate return or you were a dual-status alien, se Itemized deductions (from Schedule A) or your standard deductions | 1 5 | 40a | |
| People who check any box on line | b | If you are increasing your standard deduction by certain real evehicle taxes, or a net disaster loss, attach Schedule L and check | k here (see page 35) . ► 40b | | |
| 39a, 39b, or 40b or who can be | 41 42 | Subtract line 40a from line 38 | vide housing to a Midwestern | 41 | |
| claimed as a dependent, see page 35. | 43 | Taxable income. Subtract line 42 from line 41. If line 42 is more | · · · · · | 42 43 | |
| All others: | 44 | Tax (see page 37). Check if any tax is from: a Form(s) 88 | _ | 44 | |
| Single or Married filing separately, | 45 46 | Alternative minimum tax (see page 40). Attach Form 6251 . Add lines 44 and 45 | | 45 46 | |
| \$5,700 | 47 | Foreign tax credit. Attach Form 1116 if required | 47 | | |
| Married filing jointly or | 48 | Credit for child and dependent care expenses. Attach Form 2441 | 48 | - | |
| Qualifying widow(er), | 49 | Education credits from Form 8863, line 29 | 49 | - | |
| \$11,400 | 50 | Retirement savings contributions credit. Attach Form 8880 | 50 | - | |
| Head of household, | 51 | Child tax credit (see page 42) | 51 | - | |
| \$8,350 | 52 53 | Credits from Form: a 3896 b 8839 c 5695 Other credits from Form: a 3800 b 8801 c | 52 | - | |
| | 54 | Add lines 47 through 53. These are your total credits | | 54 | |
| | 55 | Subtract line 54 from line 46. If line 54 is more than line 46, enter | | 55 | |
| Other | 56 | | | 56 | |
| | 57 | Unreported social security and Medicare tax from Form: a | | 57 | |
| Taxes | 58 | Additional tax on IRAs, other qualified retirement plans, etc. Attach | _ | 58 | |
| | 59 | Additional taxes: a AEIC payments b Household employ | • | 59 | |
| | 60 | Add lines 55 through 59. This is your total tax | • | 60 | |

1040 Page 2 Taxes & Credits - Deduct Itemized or Standard Deduction

| Form 1040 (2009 | 9) | | | | Page 2 |
|-----------------------------|-------------|---|-------------------------------|----------|--------|
| Tax and | 20 | Amount from line 27 (adjusted gross income) | | 20 | |
| Credit | 39a | Check | Blind. Total boxes | | |
| Credit | | if: Spouse was born before January 2, 1945, | Blind. ∫ checked ▶ 39a | | |
| Standard | b | If your spouse itemizes on a separate return or you were a dual-status alien, se | e page 35 and check here▶ 39b | | |
| Deduction for— | <u>40</u> a | Itemized deductions (from Schedule A) or your standard deductions | ction (see left margin) | 40a | |
| People /ho | b | If you are increasing your standard deduction by certain real e | , <u> </u> | | |
| check an | | vehicle taxes, or a net disaster loss, attach Schedule L and check | | | |
| 39a, 39b, | 41 | Subtract line 40a from line 38 | | 41 | |
| 40b or who can be | 42 | Exemptions. If line 38 is \$125,100 or less and you did not pro | • | | |
| claimed as a dependent, | | displaced individual, multiply \$3,650 by the number on line 6d. O | , , , | 42 | |
| see page 35. | 43 | Taxable income. Subtract line 42 from line 41. If line 42 is more | | 43 | |
| All others: | 44 | Tax (see page 37). Check if any tax is from: a Form(s) 88 | _ | 44 | |
| Single or Married filing | 45 | Alternative minimum tax (see page 40). Attach Form 6251 . | | 45 | |
| separately, | 46 | Add lines 44 and 45 | | 46 | |
| \$5,700 Married filing | 47 | Foreign tax credit. Attach Form 1116 if required | 47 | | |
| jointly or | 48 | Credit for child and dependent care expenses. Attach Form 2441 | 48 | | |
| Qualifying widow(er), | 49 | Education credits from Form 8863, line 29 | 49 | | |
| \$11,400 | 50 | Retirement savings contributions credit. Attach Form 8880 | 50 | | |
| Head of household. | 51 | Child tax credit (see page 42) | 51 | | |
| \$8,350 | 52 | Credits from Form: a 8396 b 8839 c 5695 | 52 | | |
| | 53 | Other credits from Form: a 3800 b 8801 c | 53 | | |
| | 54 55 | Add lines 47 through 53. These are your total credits Subtract line 54 from line 46. If line 54 is more than line 46, enter | | 54 | |
| | | | | 55 | |
| Other | 56 57 | Self-employment tax. Attach Schedule SE | | 56 57 | |
| Taxes | | Unreported social security and Medicare tax from Form: a | <u>—</u> | | |
| | 58 59 | Additional tax on IRAs, other qualified retirement plans, etc. Attach | • | 58 59 | |
| | 60 | Additional taxes: a AEIC payments b Household employ Add lines 55 through 59. This is your total tax | | 60 | |

1040 Page 2 Taxes & Credits - Deduct Exemptions

| Form 1040 (2009 |) | | - | Page 2 |
|---|-----------|---|---|--------|
| Tax and Credits | 38 39a | Amount from line 37 (adjusted gross income) Check You were born before January 2, 1945, if: Spouse was born before January 2, 1945 | ☐ Blind. Total boxes ☐ Blind. checked ▶ 39a | 38 |
| Standard Deduction for— | b _40a | If your spouse itemizes on a separate return or you were a dual-star Itemized deductions (from Schedule A) or your standar | , , , , , , , , , , , , , , , , , , , | 40a |
| People who check any box on line 39a, 39b | b | If you are increasing your standard deduction by cert vehicle taxes, or a net disaster loss, attach Schedule L | | |
| 40b or woo can be claimed a a | 42 | Exemptions. If line 38 is \$125,100 or less and you didisplaced individual, multiply \$3,650 by the number on | | 42 |
| dependent, see page 35. | 43 | l axable income. Subtract line 42 from line 41. If line 4 | | 43 |
| All others: | 44 | | Form(s) 8814 b Form 4972. | 44 |
| Single or Married filing | 45 | Alternative minimum tax (see page 40). Attach Form | Ţ | 45 |
| separately, | 46 | Add lines 44 and 45 | 1 1 1 1 1 | 46 |
| \$5,700 Married filing | 47 | Foreign tax credit. Attach Form 1116 if required | | |
| jointly or | 48 | Credit for child and dependent care expenses. Attach Form | | |
| Qualifying widow(er), | 49 | Education credits from Form 8863, line 29 | | |
| \$11,400 | 50 | Retirement savings contributions credit. Attach Form | | |
| Head of household. | 51 | Child tax credit (see page 42) | 51 | |
| \$8,350 | 52 53 | Credits from Form: a 3996 b 8839 c 500 ther credits from Form: a 3800 b 8801 c | 5695 52 53 | |
| | 54 | | | 54 |
| | 55 | Add lines 47 through 53. These are your total credits Subtract line 54 from line 46. If line 54 is more than line | | 55 |
| 011 | 56 | Self-employment tax. Attach Schedule SE | | 56 |
| Other | 57 | Unreported social security and Medicare tax from Form | | 57 |
| Taxes | 58 | Additional tax on IRAs, other qualified retirement plans, e | | 58 |
| | 59 | Additional taxes: a AEIC payments b Househ | · + | 59 |
| | 60 | Add lines 55 through 59. This is your total tax | | 60 |

1040 Page 2 Taxes & Credits = Arrive at Taxable Income

| Form 1040 (2009 |) | | | Page 2 |
|---|----------------|--|---------------------------------------|--------|
| Tax and Credits | 38 39a | Amount from line 37 (adjusted gross income) Check You were born before January 2, 1945, if: Spouse was born before January 2, 194 | = } | |
| Standard Deduction for— | b 40a | If your spouse itemizes on a separate return or you were a dual-st Itemized deductions (from Schedule A) or your standard temperature of the standard standa | | |
| People who check any box on line | b 41 | If you are increasing your standard deduction by ce vehicle taxes, or a net disaster loss, attach Schedule L Subtract line 40a from line 38 | <u> </u> | |
| 39a, 39b, or 40b or who can be | 42 | Exemptions. If line 38 is \$125,100 or less and you of | id N. provide housing to a Midwestern | |
| claimed a da depende , see page 35. | 43 | Taxable income. Subtract line 42 from line 41. If line | · · · · · · · · · · · · · · · · · · · | |
| All others. Single or Married filing separately, | 45 46 | Alternative minimum tax (see page 40). Attach Form Add lines 44 and 45 | | |
| \$5,700 Married filing jointly or | 47 48 | Foreign tax credit. Attach Form 1116 if required Credit for child and dependent care expenses. Attach For | n 2441 48 | |
| Qualifying widow(er), \$11,400 | 49 50 51 | Education credits from Form 8863, line 29 Retirement savings contributions credit. Attach Form Child tax credit (see page 42) | | |
| Head of household, \$8,350 | 52 53 | Credits from Form: a 38396 b 8839 c Other credits from Form: a 3800 b 8801 c | | |
| | 54 | Add lines 47 through 53. These are your total credits | | |
| Othor | 55 56 | Subtract line 54 from line 46. If line 54 is more than line Self-employment tax. Attach Schedule SE | | |
| Other | 57 | Unreported social security and Medicare tax from Form | | |
| Taxes | 58 | Additional tax on IRAs, other qualified retirement plans, | | |
| | 59 | Additional taxes: a \square AEIC payments b \square House | | |
| | 60 | Add lines 55 through 59. This is your total tax | | |

1040 Page 2 Taxes & Credits

Calculated Tax

| Form 1040 (2009 |) | | | | | | | Page 2 |
|--|--------------------------------|---|------------|----------|--------------------|----------|----------|--------|
| Tax and Credits | 38 39a | Amount from line 37 (adjusted gross income) Check \[\bigcup \text{You were born before January 2, 1945} \] if: \[\bigcup \text{Spouse was born before January 2, 19} \] | _ | | | | 38 | |
| Standard Deduction for— | b 40a | If your spouse itemizes on a separate return or you were a dual-s Itemized deductions (from Schedule A) or your stan | _ | | | 39b□ | 40a | |
| People who check any box on line | b 41 | If you are increasing your standard deduction by covehicle taxes, or a net disaster loss, attach Schedule Subtract line 40a from line 38 | | | , | 40b | 41 | |
| 40b or who can be claimed as a | Subtract line 40a from line 38 | | | | | | | |
| see page 5. • All others: Single or | 44 | Tax (see page 37). Check if any tax is from: a | Form(s) 88 | 314 | b ☐ Form 49 | 72 . | 44 | |
| Married filing separately, \$5,700 | 46 47 | Add lines 44 and 45 | | 47 | | • | 46 | |
| Married filing jointly or Qualifying | 48 49 | Credit for child and dependent care expenses. Attach For Education credits from Form 8863, line 29 | rm 2441 | 48 | | | | |
| widow(er), \$11,400 Head of | 50 51 | Retirement savings contributions credit. Attach For Child tax credit (see page 42) | | 50 51 | | | | |
| household, \$8,350 | 52 53 | Credits from Form: a 3896 b 8839 c C Other credits from Form: a 3800 b 8801 c | 5695 | 52 53 | | | | |
| ı | 54 55 | Add lines 47 through 53. These are your total credits Subtract line 54 from line 46. If line 54 is more than line | | | | | 54 55 | + |
| Other | 56 | | | | | | 56 | |
| Taxes | 57 58 | Unreported social security and Medicare tax from For Additional tax on IRAs, other qualified retirement plans, | _ | | b 8919 . | : | 57 58 | - |
| | 59 | Additional taxes: a AEIC payments b Hous | | | | | 59 | + |
| | 60 | Add lines 55 through 59. This is your total tax | | | | | 60 | |

1040 Page 2 Taxes & Credits + Add Alternative Minimum Tax (005)

| Form 1040 (2009 | 9) | | | | | | | Page 2 |
|--|--|--|--|--------------------------------|---|-------------------|----------------------|--------|
| Tax and Credits | 38 39a | Amount from line 37 (adjusted gross income) Check | | | Total boxes checked ▶ 39a | | 38 | |
| Standard Deduction for— People who check any box on line 39a, 39b, or 40b or who can be | b 40a b 41 42 | If your spouse itemizes on a separate return or you were a dual-s Itemized deductions (from Schedule A) or your stan If you are increasing your standard deduction by or vehicle taxes, or a net disaster loss, attach Schedule Subtract line 40a from line 38 Exemptions. If line 38 is \$125,100 or less and you displaced individual, multiply \$3,650 by the number of | dard deducertan real e Land check did ot pro | estate k here vide h | (see left margin) taxes, new motor (see page 35) . ► tousing to a Midwe | 40b□ estern | 40a 41 | |
| claimed as a dependent, see page 35. • All other | 43 | Taxable income. Subtract line 42 from line 41. If line | | | | | 43 | |
| Single or Married fing separate \$5,700 | 45 46 | Alternative minimum tax (see page 40). Attach Form Add lines 44 and 45 | | | | . > | 45 46 | |
| Married filing jointly or Qualifying widow(er), \$11,400 Head of household, \$8,350 | 48 49 50 51 52 53 54 55 | Credit for child and dependent care expenses. Attach For Education credits from Form 8863, line 29 | m 8880 | | | | 54 55 | |
| Other Taxes | 56 57 58 59 | Self-employment tax. Attach Schedule SE Unreported social security and Medicare tax from For Additional tax on IRAs, other qualified retirement plans, Additional taxes: a AEIC payments b Hous | rm: a | 4137 Form | | | 56 57 58 59 | |
| | 60 | Add lines 55 through 59. This is your total tax | <u></u> . | | | . 🕨 | 60 | |

1040 Page 2 Taxes & Credits - Deduct Non-Refundable Credits

| Form 1040 (2009 |)) | | | | | | | F | age 2 |
|--|-----------|--|-------------|----------|------------------|-----------------|----------|---|-------|
| Tax and Credits | 38 39a | Amount from line 37 (adjusted gross income) Check | | | Total boxes | | 38 | | |
| Standard Deduction for— | b 40a | If your spouse itemizes on a separate return or you were a dual-s Itemized deductions (from Schedule A) or your stan | d rd dedu | ction (| (see left margi | n) | 40a | | |
| People who check any box on line | 41 | If you are increasing your standard deduction by ovehicle taxes, or a net disaster loss, attach Schedule Subtract line 40a from line 38 | | | | | 41 | | |
| 39a, 39b, or 40b or who can be claimed as a | 42 | Exemptions. If line 38 is \$125,100 or less and you displaced individual, multiply \$3,650 by the number of | | | • | | 42 | | |
| dependent, see page 35. • All others: | 43 44 | Taxable income. Subtract line 42 from line 41. If line Tax (see page 37). Check if any tax is from: | 42 more | | line 41, enter b | | 43 44 | | |
| Single or Married filing | 45 | Alternative minimum tax (see page 40). Attach Form | n 62 . | | | | 45 | | |
| \$5,700 Married fing | 47 48 | Foreign tax credit. Attach Form 1116 if required Credit for child and dependent care expenses. Attach Foreign tax credits and dependent care expenses. | | 47 48 | | | | | |
| jointly or Qualifying widow(er | 49 | Education credits from Form 8863, line 29 | | 49 | | | - | | |
| \$11,400 Head of househol | 50 51 | Retirement savings contributions credit. Attach For Child tax credit (see page 42) | | 50 51 | | | | | |
| \$8,350 | 52 53 | Credits from Form: a 3839 b 8839 c Other credits from Form: a 3800 b 8801 c | | 52 53 | | | | | |
| | 54 55 | Add lines 47 through 53. These are your total credits Subtract line 54 from line 46. If line 54 is more than line | | | | > | 54 55 | | |
| Other | 50 57 | Unreported social security and Medicare tax from Fo | | | b □ 891 | 9 | 57 | | |
| Taxes | 58 | Additional tax on IRAs, other qualified retirement plans, | etc. Attach | Form | 5329 if require | d | 58 | | |
| | 59 60 | Additional taxes: a AEIC payments b House Add lines 55 through 59. This is your total tax | | | | | 59 60 | | - |

1040 Page 2 Taxes & Credits

+ Add Other Taxes

| Form 1040 (2009 | 9) | | Page | 2 |
|---|----------------|--|---|----------|
| Tax and Credits | 38 39a | Amount from line 37 (adjusted gross income) Check \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ | | _ |
| Standard Deduction for— • People who check any box on line 39a, 39b, or 40b or who | b 40a b | If your spouse itemizes on a separate return or you were a dual-s Itemized deductions (from Schedule A) or your stan If you are increasing your standard deduction by covehicle taxes, or a net disaster loss, attach Schedule Subtract line 40a from line 38 | tus alien, see page 35 and check here ► 39b ☐ ard deduction (see left margin) | _ |
| can be claimed as a dependent, see page 35. • All others: Single or | 43 44 45 | displaced individual, multiply \$3,650 by the number of Taxable income. Subtract line 42 from line 41. If line | n ne 6d. Otherwise, see page 37 | |
| Married filing separately, \$5,700 Married filing jointly or | 46 47 48 | Add lines 44 and 45 | | _ |
| Qualifying widow(er), \$11,400 Head of household, \$8,350 | 50 51 52 | Education credits from Form 8863, line 29 | m 8 80 50 51 51 556 52 | |
| | 53 54 | Other credits from Form: a 3800 b 8801 c Add lines 47 through 53. These are your total credits | 53 54 | |
| Other Taxes | 56 57 58 | Unreported social security and Medicare tax from Fo Additional tax on IRAs, other qualified retirement plans, | etc. Attach Form 5329 if required 58 | <u> </u> |
| | 59 | Additional taxes: a AEIC payments b House Add lines 35 through 39. This is your total tax | | |

1040 Page 2 Taxes & Credits = Bottom List is "Total Tax"

| Form 1040 (2009 | 9) | | | | | | | | Page 2 | | |
|--|----------------|---|---|----------------|---|-----------|----------------|--|--------|--|--|
| Tax and Credits | 38 39a | Amount from line 37 (adjusted gross income) Check | | } | | | 38 | | | | |
| Standard Deduction for— • People who | 40a b | Itemized deductions (from Schedule A) or your stan | on a separate return or you were a dual-set us alien, see page 35 and check here > 39 k ns (from Schedule A) or your stan ard deduction (see left margin) ng your standard deduction by ce ain real estate taxes, new motor | | | | | | | | |
| check any box on line 39a, 39b, or 40b or who can be | 41 42 | vehicle taxes, or a net disaster loss, attach Schedule Subtract line 40a from line 38 | | | ee page 35) . • · · · · · · · · · · · · · · · · · · | | 41 | | | | |
| claimed as a dependent, see page 35. | 43 44 | displaced individual, multiply \$3,650 by the number of Taxable income. Subtract line 42 from line 41. If line Tax (see page 37). Check if any tax is from: | is more | than line | e, see page 37 . e 41, enter -0 b | | 42 43 44 | | | | |
| Single or Married filing separately, \$5,700 | 45 46 47 | Alternative minimum tax (see page 40). Attach Form Add lines 44 and 45 | n €251 . | | | | 45 46 | | | | |
| Married filing jointly or Qualifying widow(er), \$11,400 | 48 49 50 | Credit for child and dependent care expenses. Attach For Education credits from Form 8863, line 29 Retirement savings contributions credit. Attach For | | 48 49 50 | | | | | | | |
| Head of household, \$8,350 | 51 52 53 | Child tax credit (see page 42) | | 51 52 53 | | | | | | | |
| | 54 55 | Add lines 47 through 53. These are your total credits Subtract line 54 from line 46. If line 54 is more than line | | r-0 | | | 54 55 | | | | |
| Other Taxes | 56 57 58 | Self-employment tax. Attach Schedule SE Unreported social security and Medicare tax from For Additional tax on IRAs, other qualified retirement plans, | etc. ach | | b ☐ 8919 . 29 if required . | • . | 56 57 58 | | | | |
| | 60 | Additional taxes: a AFIC payments b Usual Add lines 55 through 59. This is your total tax | | | | lo H ▶ | 60 | | | | |

Payments/Refund/Owe/Sign

- Refund / Owe
 - + Start with "Total Tax"
 - Apply tax withheld and estimated payments
 - Deduct refundable credits
 - = Bottom line
 - A refund
 - You owe
- Direct deposit information
- Signature line

Payments/Refund/Owe/Sign

- Apply tax withheld and estimated payments

| Payments 61 62 | Federal income tax withheld from Forms W-2 an 2009 estimated tax payments and amount applied fr | | | |
|---|--|--|--|------------------------|
| If you have a qualifying child, attach Schedule EIC. 65 66 67 68 69 70 71 | Earned income credit (EIC) Nontaxable combat pay election Additional child tax credit. Attach Form 8812 Refundable education credit from Form 8863, lir First-time homebuyer credit. Attach Form 5408 Amount paid with request for extension to file (see Excess social security and tier 1 RRTA tax withhele Credits from Form: a 2439 b 4136 c 88 Add lines 61, 62, 63, 64a, and 65 through 70. The | 5 67 ee page 72) . 68 d (see page 72) 69 801 d 8885 70 | | 71 |
| Refund 72 Direct deposit? 73a See page 73 and fill in 73b, 73c, and 73d, or Form 8888. 74 | If line 71 is more than line 60, subtract line 60 fr Amount of line 72 you want refunded to you. If Routing number Account number Amount of line 72 you want applied to your 2010 e | Form 8888 is attached, check he | re ► 🗆 | 72 73a |
| Amount 75 You Owe 76 | Amount you owe. Subtract line 71 from line 60. Estimated tax penalty (see page 74) | | age 74 . ▶ | 75 |
| Designee De | me ▶ no | none ▶ | Personal identific | <u> </u> |
| Here Joint return? See page 15. Keep a copy | ider penalties of perjury, I declare that I have examined this relep are true, correct, and complete. Declaration of preparer (other signature) Dai Dai Dai Dai Dai Dai Dai Da | her than taxpayer) is based on all informa te Your occupation | | |
| Preparer's sign | eparer's ynature m's name (or urs if self-employed), dress, and ZIP code | | check if elf-employed EIN Phone no. | Preparer's SSN or PTIN |

Payments/Refund/Owe/Sign

- Deduct refundable credits

| Payments | 61 | Federal income tax withheld from Forms W-2 | 2 and 1099 . | | 61 | | | | | | | |
|--|--|--|------------------------------|-------------|--|----------|-------------------|---------------|---------|----------|-----------------|--------|
| If you have a qualifying child, attach Schedule EIC. | 63 64a b | Making work pay and government retiree credits. Earned income credit (EIC) Nontaxable combat pay election Additional child tax credit. Attach Form 8812 Refundable education credit from Form 8863 First-time homebuyer credit. Attach Form 5 Amount paid with request for extension to fill Excess social security and tier 1 RRTA tax with Credits from Form: a 2439 b 4136 c | Attach Schedul | ule M (| 61 63 64a 65 66 67 68 69 70 | | | | | | | |
| | 71 | Add lines 61, 62, 63, 64a, and 65 through 70 | . These are you | ur total | payment | s |) | > 7 | 1 | | | |
| | | | | | | | | | | | | |
| Direct deposit? See page 73 and fill in 73b, 73c, and 73d, or Form 8888. | and fill in 73b, Account number Checking | | | | | | | 7: | 3a | | | |
| Amount | 75 | Amount you owe. Subtract line 71 from line | 60. For details | s on hov | v to pay, s | see pag | e 74 . | > 7 | 5 | | | |
| You Owe | 76 | Estimated tax penalty (see page 74) | | | 76 | | | | | | | |
| Third Part Designee | y Des | you want to allow another person to discuss signee's ne ▶ | this return with Phone no. ▶ | h the IR | e IRS (see page 75)? Yes. Co Personal identifi number (PIN) | | | | | e follow | ing. [| □ No |
| Sign Here Joint return? | Und the | by are true, correct, and complete. Declaration of prepare ir signature | is return and acco | ayer) is ba | | and stat | ements, and | to the b | has any | | e. | elief, |
| See page 15. Keep a copy for your records. | Spo | ouse's signature. If a joint return, both must sign. | Date | Spouse | 's occupati | ion | | | | | | |
| Paid Preparer's | sigr | parer's hature has not a second to the control of t | | Date | | | ck if employed | PI | eparer' | s SSN or | PTIN | |
| Use Only | VOU | rs if self-employed), iress, and ZIP code | | | | | Phone no. | i | | | rm 104 0 | |

Payments/Refund/Owe/Sign = Bottom Line (A refund / You owe)

| | | | | _ | | | | | | | | |
|----|--------------------------------|----------------|---|--------------------------|--------------|---------------|-----------------|-------------|----------|----------------|------|--------|
| F | Payments | 61 | Federal income tax withheld from Forms W- | 2 and 1 99 | 6 | 1 | | | | | | |
| | | 62 | 2009 estimated tax payments and amount appli | ed from 008 re | eturn 6 | 2 | | | | | | |
| | | 63 | Making work pay and government retiree credits | s. Attach chedu | ıle M 6 | 3 | | | | | | |
| | f you have a ualifying | <u>64</u> a | Earned income credit (EIC) | | 64 | 4a | | | | | | |
| | hild, attach | b | Nontaxable combat pay election 64b | | | | | | | | | |
| S | Schedule EIC. | 65 | Additional child tax credit. Attach Form 8812 | | 6 | 55 | | | | | | |
| | | 66 | Refundable education credit from Form 886 | 3, line 1 🛑 . | 6 | 6 | | | | | | |
| | | 67 | First-time homebuyer credit. Attach Form | 5405 . | 6 | 7 | | | | | | |
| | | 68 | Amount paid with request for extension to fi | le (see p e ge 72 | 2) . 6 | 8 | | | | | | |
| | | 69 | Excess social security and tier 1 RRTA tax wit | hheld e rege | e 72) 6 | 9 | | | | | | |
| | | 70 | Credits from Form: a 2439 b 4136 c | 8801 | 8885 7 | 0 | | | | | | |
| | | | | | | | | | | | | |
| F | Refund | 72 | If line 71 is more than line 60, subtract line | 60 from line 71 | 1. This is t | the amount y | ou overp | aid | 72 | | | |
| | irect deposit? | 73a | Amount of line 72 you want refunded to you | u. If Form 8888 | 3 is attach | ned, check he | ere . 🕨 | | 73a | | | |
| | see page 73 nd fill in 73b. | ▶ b | Routing number | | | | | | | | | |
| | | ▶ d | Account number | | | | | . | | | | |
| _ | r Form 8888. | 74 | Amount of line 72 you want applied to your 20 | | _ | | | Ш | | | | |
| | Amount | 75 | Amount you owe. Subtract line 71 from line | 60. For details | s on how | to pay, see p | page 74 . | ▶ | 75 | | | |
| 1 | ou Owe | 76 | Estimated tax penalty (see page 74) | | 7 | 6 | | | | | | |
| 7 | hird Party | , | you want to allow another person to discuss | uns return witi | i tile ino | (See page 7 | //: L | | IIIpiete | trie ioliowiri | g | , NO |
| [| Designee | De | signee's | Phone | | | Personal | identific | cation | | | - 1 |
| _ | | | me ► | no. 🕨 | | | number (| | <u> </u> | | | |
| | Sign | | der penalties of perjury, I declare that I have examined the yare true, correct, and complete. Declaration of prepare | | | | | | | | | ief, |
| _ | Here | | y are tide, correct, and complete. Declaration of prepare ur signature | Date | Your occ | | ation of willo | Пріераі | | ie phone numi | | |
| _ | oint return? See page 15. | N [™] | ai signature | Date | Tour ooo | арилоп | | | Daytiii | e priorie rium | DCI | |
| | (eep a copy | _ | | 5. | | | | | | | | |
| | or your | Sp | ouse's signature. If a joint return, both must sign. | Date | Spouse's | occupation | | | | | | |
| re | ecords. | | | | Date | <u> </u> | | | Dropar | er's SSN or P | TIN | |
| F | Paid | | eparer's nature | | Date | | Check if | | riepai | ei 3 33N UI P | THN | |
| F | Preparer's | | ignature self-employed self-employed Firm's name (or | | | | | | 1 | | | |
| ι | Jse Only | VOL | urs if self-employed). | | | | Phone i | 20 | <u> </u> | | | |
| - | | ad | dress, and ZIP code | | | | FIIOITE | IU. | | E | 1040 | (2000) |
| | | | | | | | | | | | | |

Payments/Refund/Owe/Sign Direct Deposit Information

| Payments | 61 | Federal income tax withheld from Forms W-2 | 2 and 1 99 | 6 [.] | | | | | | | |
|------------------------------|------|---|------------------------------|----------------|------------|---------------------|----------|----------|-------------|-------------|---------------|
| . ayments | 62 | 2009 estimated tax payments and amount applie | | | | | | | | | |
| | 63 | Making work pay and government retiree credits. | _ | | 3 | | | | | | |
| If you have a | 64a | Earned income credit (EIC) | | 64 | a | | | | | | |
| qualifying child, attach | b | Nontaxable combat pay election 64b | | | | | | | | | |
| Schedule EIC. | 65 | Additional child tax credit. Attach Form 8812 | | 6 | 5 | | | | | | |
| | 66 | Refundable education credit from Form 8863 | 3, lir a 16 . | 60 | 6 | | | | | | |
| | 67 | First-time homebuyer credit. Attach Form 5 | 540 | 6 | 7 | | | | | | |
| | 68 | Amount paid with request for extension to file | e (<mark>e</mark> e page 72 | 2) . 68 | 3 | | | | | | |
| | 69 | Excess social security and tier 1 RRTA tax with | nhed (see page | 72) 69 | 9 | | | | | | |
| | 70 | Credits from Form: a 2439 b 4136 c | 301 d □ | 8885 70 |) | | | | | | |
| | 71 | Add lines 61, 62, 63, 64a, and 65 through 7 | se are yo | ur total p | ayments | | • | 71 | | | |
| Refund | 72 | If line 71 is more than line 60, subtract line 6 | rom line 71 | . This is t | he amour | nt you overp | aid | 72 | | | |
| Direct deposit? | अव | Amount or line 72 you want retunded to you | ı. II FONII 8888 | ıs attacıı | еа, спеск | riere . | | 73a | | | |
| See page 73 and fill in 73b. | b | Routing number | | c Type: | Chec | king 🗌 Sav | ings | | | | |
| 73c, and 73d, or Form 8888. | d | Account number | | | | | | | | | |
| Amount | 75 | Amount you owe. Subtract line 71 from line | 60. For details | s on how | o pay, se | e page 74. | | 75 | | | |
| You Owe | 76 | Estimated tax penalty (see page 74) | | 70 | 3 | | | | | | |
| Third Party | Do | you want to allow another person to discuss | this return with | the IRS | see page | 75)? Y | es. Co | mplete | the follow | ving. | □ No |
| Designee | | ignee's | Phone | | | Personal | | cation | | | \Box |
| Cian | | ne ► | no. ► | | | number | | <u> </u> | <u> </u> | | _ |
| Sign Here | | er penalties of perjury, I declare that I have examined the are true, correct, and complete. Declaration of prepare | | | | | | | | | oelief, |
| Joint return? | You | r signature | Date | Your occu | pation | | | Daytin | ne phone ni | umber | |
| See page 15. | | | | | | | | | | | |
| Keep a copy | Spo | puse's signature. If a joint return, both must sign. | Date | Spouse's | occupation | n | | | | | |
| for your records. | Sp. | acc c organization in a joint rotain, wour mact organi | Date | орошоо | oooupuno. | | | | | | |
| Paid | Pre | parer's | | Date | | Check if | | Prepa | rer's SSN o | r PTIN | |
| Preparer's | sigr | ature | | | | self-employ | ed | | | | |
| Use Only | | n's name (or | | | | EIN | | | | | |
| Use Only | ado | rs if self-employed), ress, and ZIP code | | | | Phone | no. | | | | |
| | | | | | | | | | | | |

Payments/Refund/Owe/Sign Signature Line

| | Payments Payments | 61 | Federal income tax withheld from Forms W-2 | 2 and 1 99 | | 61 | | | | | | | |
|---|---------------------------------|------------|--|--------------------------------|----------------|---------|-------------|-------------------------|----------|------------|--------------|------|--------|
| | | 62 | 2009 estimated tax payments and amount applie | ed from 008 re | eturn | 62 | | | | | | | |
| | | 63 | Making work pay and government retiree credits. | . Attach chedu | ule M | 63 | | | | | | | |
| | If you have a qualifying | 64a | Earned income credit (EIC) | | , . L | 64a | | | | | | | |
| | child, attach | b | Nontaxable combat pay election 64b | | | | | | | | | | |
| | Schedule EIC. | 65 | Additional child tax credit. Attach Form 8812 | | [| 65 | | | | | | | |
| | | 66 | Refundable education credit from Form 8863 | 3, line 1 | [| 66 | | | | | | | |
| | | 67 | First-time homebuyer credit. Attach Form 5 | | | 67 | | | | | | | |
| | | 68 | Amount paid with request for extension to file | e (see p e ge 72 | 2) . | 68 | | | | | | | |
| | | 69 | Excess social security and tier 1 RRTA tax with | nheld (see page | e 72) | 69 | | | | | | | |
| | | 70 | Credits from Form: a 2439 b 4136 c | 8801 | 8885 | 70 | | | | | | | |
| | | 71 | Add lines 61, 62, 63, 64a, and 65 through 70 | . These re yo | our tota | al payr | nents . | | • | 71 | | | |
| | Refund | 72 | If line 71 is more than line 60, subtract line 6 | 60 from ne 71 | 1. This i | is the | amount yo | ou <mark>overp</mark> a | aid | 72 | | | |
| | Direct deposit? | 73a | Amount of line 72 you want refunded to you | ı. If Forr <mark>e</mark> 8888 | 3 is atta | ached, | check her | e . 🕨 | | 73a | | | |
| | See page 73 and fill in 73b. | ▶ b | Routing number | | ⊳ с Тур | oe: | Checking | Savi | ngs | | | | |
| | 73c, and 73d,) | ▶ d | Account number | | | | | | | | | | |
| | or Form 8888. | 74 | Amount of line 72 you want applied to your 20 | 10 estin e ted 1 | tax ► | 74 | | | | | | | |
| | Amount | 75 | Amount you owe. Subtract line 71 from line | 60. For etail | s on ho | w to p | oay, see pa | age 74 . | • | 75 | | | |
| | You Owe | 76 | Estimated tax penalty (see page 74) | | | 76 | | | | | | | |
| | Third Party | , Do | you want to allow another person to discuss t | this Curr t | h the IF | RS (see | e page 75) | ? 🗌 Y e | es. Co | mplete | the followin | g. | No |
| | Designee | | signee's | Phone | | | | Personal | identifi | cation | | | _ |
| 4 | | | <u> </u> | | | | | | | | | ' ' | |
| | Sign | | der penalties of perjury, I declare that I have examined the | | | | | | | | | | ief, |
| | Here | | y are true, correct, and complete. Declaration of preparer | • | | | | ion of which | n prepa | | , , | | |
| | Joint return? See page 15. | 100 | ır signature | Date | Your o | occupat | lion | | | Dayun | ne phone num | ber | |
| | Keep a copy | \ _ | | | | | | | | | | | |
| | for your | Spo | ouse's signature. If a joint return, both must sign. | Date | Spous | e's occ | cupation | | | | | | |
| V | records. | | | | | | | | | | | | |
| | Paid | | parer S | | | | | heck if | | | | | |
| | Preparer's | | nature | | | | se | elf-employe | ed L | <u>_</u> , | | | |
| | Use Only | Firr | n's name (or ars if self-employed). | | EIN | | | | | | | | |
| | | ado | rrs if self-employed), dress, and ZIP code | | | | | Phone r | 10. | | | | |
| | | | | | | | | | | | Form | 1040 | (2009) |