

Label (See instructions.)

Use the IRS label. Otherwise, please print or type.

Presidential Election Campaign

For the year Jan 1 - Dec 31, 2009, or other tax year beginning, 2009, ending, 20. OMB No. 1545-0074. Your first name MI Last name. Your social security number. If a joint return, spouse's first name MI Last name. Spouse's social security number. Home address (number and street). If you have a P.O. box, see instructions. Apartment no. You must enter your social security number(s) above. City, town or post office. If you have a foreign address, see instructions. State ZIP code. Checking a box below will not change your tax or refund. Check here if you, or your spouse if filing jointly, want \$3 to go to this fund? (see instructions) [ ] You [ ] Spouse

Filing Status

Check only one box.

1 [ ] Single 4 [ ] Head of household (with qualifying person). (See instructions.) If the qualifying person is a child but not your dependent, enter this child's name here. 2 [ ] Married filing jointly (even if only one had income) 3 [ ] Married filing separately. Enter spouse's SSN above & full name here. 5 [ ] Qualifying widow(er) with dependent child (see instructions)

Exemptions

If more than four dependents, see instructions and check here [ ]

6a [ ] Yourself. If someone can claim you as a dependent, do not check box 6a. 6b [ ] Spouse. 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 instrs). Dependents on 6c not entered above. Add numbers on lines above. c Dependents: (1) First name Last name (2) Dependent's social security number (3) Dependent's relationship to you (4) [x] if qualifying child for child tax credit (see instrs). d Total number of exemptions claimed.

Income

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

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

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

7 Wages, salaries, tips, etc. Attach Form(s) W-2. 7 8a Taxable interest. Attach Schedule B if required. 8a 8b Tax-exempt interest. Do not include on line 8a. 8b 9a Ordinary dividends. Attach Schedule B if required. 9a 9b Qualified dividends (see instrs). 9b 10 Taxable refunds, credits, or offsets of state and local income taxes (see instructions). 10 11 Alimony received. 11 12 Business income or (loss). Attach Schedule C or C-EZ. 12 13 Capital gain or (loss). Att Sch D if reqd. If not reqd, ck here. [ ] 13 14 Other gains or (losses). Attach Form 4797. 14 15a IRA distributions. 15a 15b Taxable amount (see instrs). 15b 16a Pensions and annuities. 16a 16b Taxable amount (see instrs). 16b 17 Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E. 17 18 Farm income or (loss). Attach Schedule F. 18 19 Unemployment compensation in excess of \$2,400 per recipient (see instructions). 19 20a Social security benefits. 20a 20b Taxable amount (see instrs). 20b 21 Other income. 21 22 Add the amounts in the far right column for lines 7 through 21. This is your total income. 22

Adjusted Gross Income

23 Educator expenses (see instructions). 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 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 instructions). 29 30 Penalty on early withdrawal of savings. 30 31a Alimony paid b Recipient's SSN. 31a 32 IRA deduction (see instructions). 32 33 Student loan interest deduction (see instructions). 33 34 Tuition and fees deduction. Attach Form 8917. 34 35 Domestic production activities deduction. Attach Form 8903. 35 36 Add lines 23 - 31a and 32 - 35. 36 37 Subtract line 36 from line 22. This is your adjusted gross income. 37

Tax and Credits

Standard Deduction for - People who check any box on line 39a, 39b, or 40b or who can be claimed as a dependent, see instructions. All others: Single or Married filing separately, \$5,700 Married filing jointly or Qualifying widow(er), \$11,400 Head of household, \$8,350

38 Amount from line 37 (adjusted gross income) 38
39a Check if: You were born before January 2, 1945, Blind. Total boxes checked 39a
Spouse was born before January 2, 1945, Blind. 39b
b If your spouse itemizes on a separate return, or you were a dual-status alien, see instrs and ck here 39b
40a Itemized deductions (from Schedule A) or your standard deduction (see left margin) 40a
b If you are increasing your standard deduction by certain real estate taxes, new motor vehicle taxes, or a net disaster loss, attach Schedule L and check here (see instructions) 40b
41 Subtract line 40a from line 38 41
42 Exemptions. If line 38 is \$125,100 or less and you did not provide housing to a Midwestern displaced individual, multiply \$3,650 by the number on line 6d. Otherwise, see instructions 42
43 Taxable income. Subtract line 42 from line 41. If line 42 is more than line 41, enter -0- 43
44 Tax (see instrs). Check if any tax is from: a Form(s) 8814 44
b Form 4972 45
45 Alternative minimum tax (see instructions). Attach Form 6251 45
46 Add lines 44 and 45 46
47 Foreign tax credit. Attach Form 1116 if required 47
48 Credit for child and dependent care expenses. Attach Form 2441 48
49 Education credits from Form 8863, line 29 49
50 Retirement savings contributions credit. Attach Form 8880 50
51 Child tax credit (see instructions) 51
52 Credits from Form: a 8396 b 8839 c 5695 52
53 Other crs from Form: a 3800 b 8801 c 53
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 -0- 55

Other Taxes

56 Self-employment tax. Attach Schedule SE 56
57 Unreported social security and Medicare tax from Form: a 4137 b 8919 57
58 Additional tax on IRAs, other qualified retirement plans, etc. Attach Form 5329 if required 58
59 Additional taxes: a AEIC payments b Household employment taxes. Attach Schedule H 59
60 Add lines 55-59. This is your total tax 60

Payments

If you have a qualifying child, attach Schedule EIC.

61 Federal income tax withheld from Forms W-2 and 1099 61
62 2009 estimated tax payments and amount applied from 2008 return 62
63 Making work pay and government retiree credit. Attach Schedule M 63
64a Earned income credit (EIC) 64a
b Nontaxable combat pay election 64b
65 Additional child tax credit. Attach Form 8812 65
66 Refundable education credit from Form 8863, line 16 66
67 First-time homebuyer credit. Attach Form 5405 67
68 Amount paid with request for extension to file (see instructions) 68
69 Excess social security and tier 1 RRTA tax withheld (see instructions) 69
70 Credits from Form: a 2439 b 4136 c 8801 d 8885 70
71 Add lns 61-63, 64a, & 65-70. These are your total prmts 71

Refund

Direct deposit? See instructions and fill in 73b, 73c, and 73d or Form 8888.

72 If line 71 is more than line 60, subtract line 60 from line 71. This is the amount you overpaid 72
73a Amount of line 72 you want refunded to you. If Form 8888 is attached, check here 73a
b Routing number c Type: Checking Savings
d Account number
74 Amount of line 72 you want applied to your 2010 estimated tax 74

Amount You Owe

75 Amount you owe. Subtract line 71 from line 60. For details on how to pay, see instructions 75
76 Estimated tax penalty (see instructions) 76

Third Party Designee

Do you want to allow another person to discuss this return with the IRS (see instructions)? Yes. Complete the following. No
Designee's name Phone no. Personal identification number (PIN)

Sign Here

Joint return? See instructions. Keep a copy for your records.

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

Paid Preparer's Use Only

Preparer's signature Date Check if self-employed Preparer's SSN or PTIN
Firm's name (or yours if self-employed) address, and ZIP code EIN Phone no.