

Intermediate Advanced

Label

(See instructions on page 14.) Use the IRS label. Otherwise, please print or type.

OMB No. 1545-0074
For the year Jan. 1–Dec. 31, 2009, or other tax year beginning , 2009, ending , 20
Your first name and initial Last name
Your social security number
If a joint return, spouse's first name and initial Last name
Spouse's social security number
Home address (number and street). If you have a P.O. box, see page 14. Apt. no.
City, town or post office, state, and ZIP code. If you have a foreign address, see page 14.
You must enter your SSN(s) above.
Checking a box below will not change your tax or refund.

Presidential Election Campaign

Check here if you, or your spouse if filing jointly, want \$3 to go to this fund (see page 14) You Spouse

Filing Status

Check only one box.

- 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). (See page 15.) If the qualifying person is a child but not your dependent, enter this child's name here.
5 Qualifying widow(er) with dependent child (see page 16)

Exemptions

If more than four dependents, see page 17 and check here

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 qualifying child for child tax credit (see page 17)
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 page 22.

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

Table with 22 rows for income items: 7 Wages, salaries, tips, etc. Attach Form(s) W-2; 8a Taxable interest; 8b Tax-exempt interest; 9a Ordinary dividends; 9b Qualified dividends; 10 Taxable refunds, credits, or offsets of state and local income taxes; 11 Alimony received; 12 Business income or (loss); 13 Capital gain or (loss); 14 Other gains or (losses); 15a IRA distributions; 15b Taxable amount; 16a Pensions and annuities; 16b Taxable amount; 17 Rental real estate, royalties, partnerships, S corporations, trusts, etc.; 18 Farm income or (loss); 19 Unemployment compensation; 20a Social security benefits; 20b Taxable amount; 21 Other income; 22 Total income.

Adjusted Gross Income

Table with 15 rows for adjusted gross income items: 23 Educator expenses; 24 Business expenses of reservists, performing artists, and fee-basis government officials; 25 Health savings account deduction; 26 Moving expenses; 27 Self-employment tax; 28 Self-employed SEP, SIMPLE, and qualified plans; 29 Self-employed health insurance deduction; 30 Penalty on early withdrawal of savings; 31a Alimony paid; 31b Recipient's SSN; 32 IRA deduction; 33 Student loan interest deduction; 34 Tuition and fees deduction; 35 Domestic production activities deduction; 36 Total AGI; 37 Adjusted gross income.

\* If taxable amount not determined

Tax and Credits

38 Amount from line 37 (adjusted gross income) . . . . . 38

39a Check  You were born before January 2, 1945,  Blind. } Total boxes  
 if:  Spouse was born before January 2, 1945,  Blind. } checked ▶ 39a

b If your spouse itemizes on a separate return or you were a dual-status alien, see page 35 and check 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 page 35) . ▶ 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 page 37 . . . . . 42

43 **Taxable income.** Subtract line 42 from line 41. If line 42 is more than line 41, enter -0- . . . . . 43

44 **Tax** (see page 37). Check if any tax is from: a  Form(s) 8814 b  Form 4972 . . . . . 44

45 **Alternative minimum tax** (see page 40). 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 page 42) . . . . . 51

52 Credits from Form: a  8396 b  8839 c  5695 . . . . . 52

53 Other credits 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 through 59. This is your **total tax** . . . . . 60

Payments

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 credits. 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 page 72) . . . . . 68

69 Excess social security and tier 1 RRTA tax withheld (see page 72) . . . . . 69

70 Credits from Form: a  2439 b  4136 c  8801 d  8885 . . . . . 70

71 Add lines 61, 62, 63, 64a, and 65 through 70. These are your **total payments** . . . . . 71

Refund

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 page 74 . ▶ 75

76 Estimated tax penalty (see page 74) . . . . . 76

Third Party Designee

Do you want to allow another person to discuss this return with the IRS (see page 75)?  Yes. Complete the following.  No

Designee's name ▶ NO 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.

Joint return? See page 15. Keep a copy for your records.

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 ▶ NO 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. \_\_\_\_\_

**Standard Deduction for—**

- People who check any box on line 39a, 39b, or 40b or who can be claimed as a dependent, see page 35.
- All others:
  - Single or Married filing separately, \$5,700
  - Married filing jointly or Qualifying widow(er), \$11,400
  - Head of household, \$8,350

*Itemized Standard - Basic*

*NO NO*

*NO*

*NO*

*NO*