

Label

(See instructions)

Use the IRS label.

Otherwise, please print or type.

L A B E L H E R E	For the year Jan. 1-Dec. 31, 2008, or other tax year beginning _____, 2008, ending _____, 20____		OMB No. 1545-0074
	Your first name and initial	Last name	
	If a joint return, spouse's first name and initial	Last name	
	Home address (number and street). If you have a P.O. box, see instructions.		Apt. no.
City, town or post office, state, and ZIP code. If you have a foreign address, see instructions.			Checking a box below will not change your tax or refund.

Your social security number

Spouse's social security number

▲ You must enter your SSN(s) above. ▲

Presidential Election Campaign

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
- 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 instructions) 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 instructions)

Exemptions

If more than four dependents, see instructions.

6a <input checked="" type="checkbox"/> Yourself. If someone can claim you as a dependent, do not check box 6a				Boxes checked on 6a and 6b 1	
b <input type="checkbox"/> Spouse					No. of children on 6c who: • lived with you 0 • did not live with you due to divorce or separation (see instructions) 0
c Dependents:					
(1) First name	Last name	(2) Dependent's social security number	(3) Dependent's relationship to you	(4) <input type="checkbox"/> X if qualifying child for child tax credit	Dependents on 6c not entered above 0 Add numbers on lines above ▶ 1
				<input type="checkbox"/>	
				<input type="checkbox"/>	
				<input type="checkbox"/>	
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	
b	Tax-exempt interest. Do not include on line 8a	8b	
9a	Ordinary dividends. Attach Schedule B if required	9a	
b	Qualified dividends (see instructions)	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). Attach Schedule D if required. If not required, check here . . . ▶ <input type="checkbox"/>	13	
14	Other gains or (losses). Attach Form 4797	14	
15a	IRA distributions	15a	
b	Taxable amount (see instructions)	15b	
16a	Pensions and annuities	16a	
b	Taxable amount (see instructions)	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	19	
20a	Social security benefits	20a	
b	Taxable amount (see instructions)	20b	
21	Other income. List type and amount (see instructions)	21	
22	Add the amounts in the far right column for lines 7 through 21. This is your total income ▶	22	0.

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 through 31a and 32 through 35	36	0.
37	Subtract line 36 from line 22. This is your adjusted gross income ▶	37	0.

Tax and Credits

Table with 3 columns: Line number, Description, and Amount. Includes lines 38-56 for Tax and Credits, such as 'Amount from line 37', 'Itemized deductions', and 'Total credits'.

Standard Deduction for -

People who checked any box on line 39a or 39b, or 39c or who can be claimed as a dependent, See instr.

All others: Single or Married filing separately, \$5,450; Married filing jointly or Qualifying widow(er), \$10,900; Head of household, \$8,000

Other Taxes

Table with 3 columns: Line number, Description, and Amount. Includes lines 57-61 for Other Taxes, such as 'Self-employment tax', 'Unreported social security and Medicare tax', and 'Additional tax on IRAs'.

Payments

If you have a qualifying child, attach Schedule EIC.

Table with 3 columns: Line number, Description, and Amount. Includes lines 62-71 for Payments, such as 'Federal income tax withheld', 'Earned income credit', and 'Total payments'.

Refund

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

Table with 3 columns: Line number, Description, and Amount. Includes lines 72-74 for Refund, such as 'Amount you overpaid', 'Amount of line 72 you want refunded to you', and 'Amount of line 72 you want applied to your 2009 estimated tax'.

Amount You Owe

Table with 3 columns: Line number, Description, and Amount. Includes lines 75-76 for Amount You Owe, such as 'Amount you owe' and 'Estimated tax penalty'.

Third Party Designee

Do you want to allow another person to discuss this return with the IRS (see instructions)? [X] Yes. Complete the following. [] No

Table with 3 columns: Designee's name, Phone no., and Personal identification number (PIN). Designee name is PREPARER.

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.

Table with 4 columns: Signature, Date, Occupation, and Daytime phone number. Includes fields for 'Your signature' and 'Spouse's signature'.

Paid Preparer's Use Only

Table with 4 columns: Preparer's signature, Date, Check if self-employed, Preparer's SSN or PTIN. Includes fields for 'Firm's name', 'EIN', and 'Phone no.'.