Department of the Treasury—Internal Revenue Service
U.S. Individual Income Tax Return 2009



IRS Use Only—Do not write or staple in this space.

Labal		For the	year Jan. 1-Dec. 31, 2009, or other tax year beginn	ing	, 2009, en	ding	, 20		(OMB No. 1545-0074	
Label	L		Your first name and initial Last name				Y	Your social security number			
(See	Α										
instructions on page 14.)	B	If a joir	f a joint return, spouse's first name and initial Last name					⊟ s	pouse	's social security nu	mber
Use the IRS	L										
label.	н	Home	address (number and street). If you have a P.	┥-	_	You must enter					
Otherwise, please print	E R									your SSN(s) above.	
or type.		City, to	own or post office, state, and ZIP code. If you			g a box below will no your tax or refund.	ot				
Presidential Election Campaign		► Ch	neck here if you, or your spouse if filing jo	/ .	Yo	_	se				
Filing Status		1	☐ Single	y , - <u>-</u> -	4	¬ .			lifvina	person). (See page 15	i.) If the
		2	☐ Married filing jointly (even if only one	•	, ,	your dependent, enter	•				
Check only one		3	Married filing separately. Enter spou	,		child's na	ame here.				
box.			and full name here. ▶		5 [Qualifyir	g widow(er)	with d	epenc	lent child (see page ⁻	16)
Exemption	9	6a	☐ Yourself. If someone can claim yo	ou as a dependent,	do not	check box	к6а		. }	Boxes checked on 6a and 6b	
Lxemptions		b	☐ Spouse	<u>.,</u>						No. of children	
		С	Dependents:	(2) Dependen		(3) Depen		if qualif or child		on 6c who: ● lived with you	
			(1) First name Last name	social security nu	ımber	relationship		see page		 did not live with 	
16										you due to divorce or separation	
If more than for dependents, s										(see page 18)	
page 17 and	_		-					<u> </u>		Dependents on 6c not entered above	
check here ►										Add numbers on	
		Name and Address of the Owner, where the Parket of the Owner, where the Owner, which is the Owner, where the Owner, which is the Owner, w	Total number of exemptions claimed	<u> </u>					• -	lines above ▶	닏
Inco		7	Wages, salaries, tips, e.c. Attach Form					.	7		
Ì		8a	Taxable interest. Attach Schedule B if	•	 I . .				8a		
Attach Form(s	3)	b	Tax-exempt interest. Do not include of		8b			_			
W-2 here. Also	•	9a	Ordinary dividends. Attach Schedule E	•			$\cdot \cdot \cdot \cdot_{1}$	٠	9a		
attach Forms		b	(1 0 ,		9b			-	40		
W-2G and 1099-R if tax		10	Taxable refunds, credits, or offsets of	state and local inco	ome tax	es (see pa	ge 23) .	. -	10		
was withheld.		11 12	Alimony received					. -	11 12		
		13	Business income or (loss). Attach Sche Capital gain or (loss). Attach Schedule			od obook	 horo ► Г	i ⊦	13		
If you did not		14	Other gains or (losses). Attach Form 4	•	require	eu, check	nere 🚩 L	- ⊦	14		
get a W-2,		15a	IRA distributions . 15a	, 9,	h Tav	· · · ·	nt (see page	.	15b		
see page 22.		16a	Pensions and annuities 16a				nt (see page	′ ⊢	16b		
		17	Rental real estate, royalties, partnershi	ins S corporations			,	· /	17		
Enclose, but do not attach, any payment. Also, please use Form 1040-V.		18	Farm income or (loss). Attach Schedul				ii concado	_	18		
		19	Unemployment compensation in excess				27)	: F	19		
		20a	Social security benefits 20a			, , ,	nt (see page		20b		
		21	Other income. List type and amount (s	ee page 29)				_ ^ F	21		
		22	Add the amounts in the far right column		21. This	s is your to	tal income	>	22		
Adjusted		23	Educator expenses (see page 29) .		23						
		24	Certain business expenses of reservists, pe	erforming artists, and							
Gross			fee-basis government officials. Attach Form	2106 or 2106-EZ	24						
Income		25	Health savings account deduction. Att	ach Form 8889 .	25						
		26	Moving expenses. Attach Form 3903		26						
		27	One-half of self-employment tax. Attac	ch Schedule SE .	27			_			
		28	Self-employed SEP, SIMPLE, and qua	lified plans	28						
		29	Self-employed health insurance deduc	tion (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 p	• ,				_			
		34	Tuition and fees deduction. Attach For					_			
		35	Domestic production activities deduction.		35			_			
		36	Add lines 23 through 31a and 32 throu	•				<u> </u>	36		
		37	Subtract line 36 from line 22. This is vo	our adjusted dross	s incom	ie .		-	37		1

Form 1040 (2009))		Page 2
Tax and	38	Amount from line 37 (adjusted gross income)	38
Credits	39a	Check ∫ ☐ You were born before January 2, 1945, ☐ Blind. Total boxes	
Orealis		if:	
Standard	b	If your spouse itemizes on a separate return or you were a dual-status alien, see page 35 and check here ▶ 39b□	
Deduction for—	<u>40</u> a	Itemized deductions (from Schedule A) or your standard deduction (see left margin)	40a
People who	b	If you are increasing your standard deduction by certain real estate taxes, new motor	
check any box on line		vehicle taxes, or a net disaster loss, attach Schedule L and check here (see page 35) . ▶ 40b ☐	
39a, 39b, or	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 provide housing to a Midwestern	
claimed as a dependent,		displaced individual, multiply \$3,650 by the number on line 6d. Otherwise, see page 37	42
see page 35.	43	Taxable income. Subtract line 42 from line 41. If line 42 is more than line 41, enter -0	43
All others:	44	Tax (see page 37). Check if any tax is from: a Form(s) 8814 b Form 4972.	44
Single or Married filing	45	Alternative minimum tax (see page 40). Attach Form 6251	45
separately, \$5,700	46	Add lines 44 and 45	46
Married filing	47 48		
jointly or	49		
Qualifying widow(er),	50	Education credits from Form 8863, line 29	
\$11,400	51	Child tax credit (see page 42)	
Head of household,	52	Credits from Form: a □ 8396 b □ 8839 c □ 5695 52	
\$8,350	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	56	Self-employment tax. Attach Schedule SE	56
	57	Unreported social security and Medicare tax from Form: a \square 4137 b \square 8919	57
Taxes	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	
If you have a qualifying	<u>64</u> a	Earned income credit (EIC) 64a	
child, attach	b	Nontaxable combat pay election 64b	
Schedule EIC.	65	Additional child tax credit. Attach Form 8812	
	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 71	Credits from Form: a ☐ 2439 b ☐ 4136 c ☐ 8801 d ☐ 8885 ☐ 70 ☐ Add lines 61, 62, 63, 64a, and 65 through 70. These are your total payments ▶	74
Refund Direct deposit? See page 73	72	If line 71 is more than line 60, subtract line 60 from line 71. This is the amount you overpaid	71 72
	73a	Amount of line 72 you want refunded to you. If Form 8888 is attached, check here \rightarrow	73a
	► b	Routing number	700
and fill in 73b, 73c, and 73d,	▶ d	Account number	
or Form 8888.	74	Amount of line 72 you want applied to your 2010 estimated tax ▶ 74	
Amount	75	Amount you owe. Subtract line 71 from line 60. For details on how to pay, see page 74 .	75
You Owe	76	Estimated tax penalty (see page 74)	
Third Party	, Do	you want to allow another person to discuss this return with the IRS (see page 75)? Yes. Cor	mplete the following.
Designee		signee's Phone Personal identific	cation
		me ► no. ► number (PIN)	L
Sign		der penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the	
Here		y are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer	•
Joint return? See page 15.	10	ur signature Date Your occupation	Daytime phone number
Keep a copy	—		
for your	Sp	ouse's signature. If a joint return, both must sign. Date Spouse's occupation	
records.		Date	Preparer's SSN or PTIN
Paid		Check if	i reparer a con or Filly
Preparer's		mis name (or Self-employed Limits in the control of	
Use Only	you	urs if self-employed),	_ :
	ado	dress, and ZIP code Prone no.	