104	0	•	ent of the Treasury—Internal Revenue Service	2009	(99)	IRS Use Only—Do n	ot write or	stanla in this and	~~
	-		year Jan. 1–Dec. 31, 2009, or other tax year beginning		()	, 20		OMB No. 1545-	
Label	(.		irst name and initial		, ending	, 20		ocial security n	
(See	Ā						rour o		
instructions	BE	lf a ioi	nt return, spouse's first name and initial	ame			Spouse	's social secu	rity number
on page 14.) Use the IRS	Ľ								
label.	н	Home	address (number and street). If you have a P.O. box,	see page 14.		Apt. no.		You must e	ontor
Otherwise,	Е		······, , , , , , , , , , , , , , , , ,					your SSN(s) a	
please print or type.	R E	City, t	own or post office, state, and ZIP code. If you have a	foreign address, se	ee page 14.	· · · · · · · · · · · · · · · · · · ·		g a box below	
)		your tax or refu	
Presidential Election Camp	paign	► Cł	eck here if you, or your spouse if filing jointly,	want \$3 to go to	this fund (see	e page 14)	∏ Yo	u 🗌	Spouse
		1	☐ Single	4		household (with g	ualifvina	person). (See p	age 15.) If the
Filing State	us	2	Arried filing jointly (even if only one had ir	icome)	qualifying	g person is a child	but not	your dependent	, enter this
Check only or	ne	3	Arried filing separately. Enter spouse's S	SN above	child's na	ame here. 🕨			
box.			and full name here. ►	5	Qualifyir	ng widow(er) with	depend	lent child (see	page 16)
Exemption		6a	Yourself. If someone can claim you as a	dependent, do r	not check box	х6а	.]	Boxes check on 6a and 6b	
Exemption		b	□ Spouse					No. of childre	
		С	Dependents:	(2) Dependent's	(3) Depen	in the second		on 6c who: • lived with y	ou
			(1) First name Last name s	ocial security number	relationship	to you credit (see pa		• did not live v	with
16								you due to div or separation	orce
If more than for dependents, s								(see page 18) Dependents o	
page 17 and	_							not entered al	
check here ►								Add numbers	
		d	•	<u></u>				lines above	
Income		7	Wages, salaries, tips, etc. Attach Form(s) W-				7		
		8a	Taxable interest. Attach Schedule B if requir	1		· · · · ·	8a		
Attach Form(s)	b	Tax-exempt interest. Do not include on line		ib		9a		
W-2 here. Als		9a b	Ordinary dividends. Attach Schedule B if req		 b	· · · · ·	98		
attach Forms W-2G and		10	Qualified dividends (see page 22) Taxable refunds, credits, or offsets of state a	L		23)	10		
1099-R if tax		11	Alimony received		laxes (see pa	ige 23)	11		
was withheld.	•	12	Business income or (loss). Attach Schedule (12					
		13	Capital gain or (loss). Attach Schedule D if re			 here ▶ □	13		
If you did not		14	Other gains or (losses). Attach Form 4797.	14					
get a W-2,		15a	IRA distributions . 15a	b	Taxable amou	nt (see page 24)	15b		
see page 22.		16a	Pensions and annuities 16a	16b					
		17	Rental real estate, royalties, partnerships, S	corporations, trus	sts, etc. Attac	h Schedule E	17		
Enclose, but c		18	Farm income or (loss). Attach Schedule F.				18		
not attach, an payment. Also		19	Unemployment compensation in excess of \$	2,400 per recipie	nt (see page	27)	19		
please use	,	20a	Social security benefits 20a	b	Taxable amou	nt (see page 27)	20b		
Form 1040-V.		21	Other income. List type and amount (see page	/ /			21		
		22	Add the amounts in the far right column for lin	es 7 through 21.	This is your to	otal income 🕨	22		
Adjusted	ı.	23	Educator expenses (see page 29)	2	3		-		
Gross		24	Certain business expenses of reservists, performin	°					
Income			fee-basis government officials. Attach Form 2106 c		24		-		
Income		25	Health savings account deduction. Attach Fo		25		-		
		26	Moving expenses. Attach Form 3903		26		-		
		27	One-half of self-employment tax. Attach Sch		27		-		
		28	Self-employed SEP, SIMPLE, and qualified p		8		-		
		29 20	Self-employed health insurance deduction (s		9		-		
		30 01 -	Penalty on early withdrawal of savings .		1		-		
		31a	Alimony paid b Recipient's SSN ►		1a				
		32 32	IRA deduction (see page 31)		2				
		33 34	Student loan interest deduction (see page 34	<i>,</i>	3 4				
		34 35	Tuition and fees deduction. Attach Form 891		14 15				
		35 36	Domestic production activities deduction. Attach Add lines 23 through 31a and 32 through 35			I	36		
		30 37	Subtract line 36 from line 22. This is your adj			· · · · ·	37		

Tax and	38	Amount from line 37 (adjusted gross income)			38		
	39a	Check ∫ ☐ You were born before January 2, 1945, ☐ Blind.	Total box	es			
Credits		if: Spouse was born before January 2, 1945, Blind.					
Standard	b	If your spouse itemizes on a separate return or you were a dual-status alien, see page	-				
Deduction	40a	Itemized deductions (from Schedule A) or your standard deduction (40a		1
for—	b	If you are increasing your standard deduction by certain real estate					
People who check any		vehicle taxes, or a net disaster loss, attach Schedule L and check here					
box on line	41	Subtract line 40a from line 38		,	41		
39a, 39b, or 40b or who	42	Exemptions. If line 38 is \$125,100 or less and you did not provide h			1		
can be	72	displaced individual, multiply \$3,650 by the number on line 6d. Otherw			42		
claimed as a dependent,	10	Taxable income. Subtract line 42 from line 41. If line 42 is more than		-	43		
see page 35.	43						
All others:	44	Tax (see page 37). Check if any tax is from: a Form(s) 8814		Form 4972 .	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					
\$11,400	50	Retirement savings contributions credit. Attach Form 8880 50			-		
Head of	51	Child tax credit (see page 42)					
household, \$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	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 4137	b 🗌 8	3919	57		
Taxes	58	Additional tax on IRAs, other qualified retirement plans, etc. Attach Form	5329 if requ	uired	58		
	59	Additional taxes: a AEIC payments b Household employment	taxes. Attac	h 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					
¹ ayments	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	64a	Earned income credit (EIC)					
qualifying	b	Nontaxable combat pay election 64b					
child, attach Schedule EIC.	65	Additional child tax credit. Attach Form 8812					
Concodic Elo:	66						
	67 62				-		
	68 60				-		
	69 70	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					
Defend	71	Add lines 61, 62, 63, 64a, and 65 through 70. These are your total pay			71		
Refund	72	If line 71 is more than line 60, subtract line 60 from line 71. This is the	,	• —	72		
Direct deposit? See page 73	73a	Amount of line 72 you want refunded to you. If Form 8888 is attached			73a		
and fill in 73b,	▶ b	Routing number ► c Type: _	Checking	Savings			
73c, and 73d, or Form 8888.	▶ d	Account number					
	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 pa	age 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 (se	e page 75)	? 🗌 Yes. Co	mplete	e the following.	No
Designee		signee's Phone		Personal identifi	cation		
	nar	ne 🕨 no. 🕨		number (PIN)		•	
Sign		ler penalties of perjury, I declare that I have examined this return and accompanying sch					lief,
Here	-	/ are true, correct, and complete. Declaration of preparer (other than taxpayer) is based of		tion of which prepa			
Joint return?	YOL	ir signature Date Your occupa	ation		Daytir	ne phone number	
See page 15. Keep a copy							
for your	Spo	buse's signature. If a joint return, both must sign. Date Spouse's oc	cupation				
records.	/						
Paid	Pre	parer's Date		heck if	Prepa	rer's SSN or PTIN	
	sigi	nature		elf-employed			
Preparer's	Firr	n's name (or	I	EIN			
Use Only		irs if self-employed),		Phone no.			

Cheat Sheet For 2009 Tax Year							
\$	Exemption Amount (per person) Line 42 of 1040						
	Standard Deduction Amount: <i>Line 40a of 1040</i>						
\$	Single or Married Filing Separately						
\$	Married Filing Jointly or Qualifying Widow(er)						
\$	Head of Household						
Fill in the correct amounts to use during your training class.							

104	0	•	nent of the Treasury-				20)9	(99)	IRS Use Only	/—Do n	ot write o	r staple in this spa	ce.	
Label			year Jan. 1-Dec. 3					, 2009, er	nding	, 20			OMB No. 1545-	0074	
Laber	L	Your f	irst name and init	ial		Last	name					Your s	ocial security r	number	
(See instructions	A B														
on page 14.) Use the IRS	EL	lf a joi	nt return, spouse'	's first name	and initial	Last	name					Spous	e's social secu	rity nur	nber
label.	н	Home	address (number	r and street).	If you hav	e a P.O. box	, see page 14	1.		Apt. n	o.		You must	enter	
Otherwise,	E R				-								your SSN(s) a		
please print or type.	Ē	City, t	own or post office	e, state, and	ZIP code.	If you have a	a foreign add	ress, see	page 14.			Checkir	ng a box below	v will no	ot
Presidential											ノ	change	your tax or ref	und.	
Election Cam	paign	► Cł	neck here if you	, or your s	oouse if fi	ling jointly,	want \$3 to	go to th	is fund (s	see page 14)		Y	ou 🗌	Spous	e
Filing State	us	1	Single					4 [Head d	of household (with qu	ualifying	person). (See p	age 15.	.) If the
		2	Married filin	ng jointly (e	ven if only	y one had i	ncome)		qualify	ring person is	a child	but not	your dependen	t, enter	this
Check only or	ie	3	3 ☐ Married filing separately. Enter spouse's SSN above child's name here. ►												
box.			and full nan					5			r) with	depend	dent child (see		6)
Exemption	IS	6a		. If someon	e can cla	im you as a	a dependen	t, do no f	t check b	oox 6a		• }	Boxes check on 6a and 6b		
-		b				<u> </u>						<u> </u>	No. of childr	en	
		С	Dependents:				(2) Depende social security		1		🖌 if qua Id for chi		on 6c who: Iived with y	/ou	
			(1) First name		Last name	`		number	Telationsi	cred	it (see pa	<u>iqe 17)</u>	 did not live vou due to div 		
If more than fo	rur												or separation (see page 18)		
dependents, s													Dependents of	on 6c	
page 17 and													not entered a		
check here ►	· 🛄		Tatal works an										Add number		
		d	Total number	•			<u> </u>				• •		lines above		
Income		7 8a	Wages, salari Taxable inter			()			• •		·	7 8a			
		b	Tax-exempt			•		 . 8b	1		· ·	oa			
Attach Form(s)	9a	Ordinary divid									9a			1
W-2 here. Als		b	Qualified divid				uired .	. 9b	1		· ·	54			
attach Forms W-2G and		10	Taxable refun		,					nage 23)		10			1
1099-R if tax		11	Alimony recei						100 (000	page 20) .	•	11			
was withheld.11Alimony received112Business income or (loss).							 C or C-F7				•	12			
		13	Capital gain c							khere.►	Π.	13			
If you did not		14	Other gains o					o i i o quii			_	14			
get a W-2,		15a	IRA distributio	. ,	15a			b Ta	xable amo	ount (see pag	e 24)	15b			
see page 22.		16a	Pensions and		16a					ount (see pag	,	16b			
		17	Rental real es		ties, partn	erships, S	corporatior	⊐ ıs. trusts	, etc. Att	ach Schedu	le E	17			
Enclose, but o		18	Farm income									18			
not attach, an payment. Also		19	Unemployme									19			
please use	,	20a	Social security	/ benefits	20a			b Ta	xable amo	ount (see pag	e 27)	20b			
Form 1040-V		21	Other income	. List type	and amou	unt (see pa	ge 29)	_				21			
		22	Add the amou	ints in the f	ar right co	olumn for lir	nes 7 throug	h 21. Th	is is your	total incom	e 🕨	22			
		23	Educator exp	enses (see	page 29)			. 23							
Adjusted		24	Certain busines	ss expenses	of reservis	sts, performi	ng artists, an	d							
Gross			fee-basis gover	mment offici	als. Attach	Form 2106	or 2106-EZ	24							
Income		25	Health saving	s account	deduction	n. Attach Fo	orm 8889	. 25							
		26	Moving exper	nses. Attac	h Form 3	903		. 26				_			
		27	One-half of se	elf-employi	ment tax.	Attach Sch	nedule SE	. 27							
		28	Self-employe	d SEP, SIN	IPLE, and	d qualified p	olans .	. 28				-			
		29	Self-employe	d health in	surance d	leduction (s	see page 30) 29				-			
		30	Penalty on ea					. 30				-			
		31a	Alimony paid			►	1	31a							
		32	IRA deduction												
		33	Student loan												1
		34	Tuition and fe												
		35	Domestic prod												
		36	Add lines 23 t	•		0						36			
		37	Subtract line	36 from lin	e 22. This	s is your ad	justed gros	ss incon	ne .			37			

Form	1040	(2009
1 01111	10-0	12000

Tax and	38	Amount from line 37 (adjusted gross income)	38
	39a	Check J You were born before January 2, 1945, Blind. Total boxes	
Credits		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	40a	Itemized deductions (from Schedule A) or your standard deduction (see left margin)	40a
for—	b	If you are increasing your standard deduction by certain real estate taxes, new motor	
 People who check any 	-	vehicle taxes, or a net disaster loss, attach Schedule L and check here (see page 35) . ► 40b	1 1
box on line	41	Subtract line 40a from line 38	41
39a, 39b, or 40b or who	42	Exemptions. If line 38 is \$125,100 or less and you did not provide housing to a Midwestern	
can be claimed as a		displaced individual, multiply \$3,650 by the number on line 6d. Otherwise, see page 37	42
dependent,	43	Taxable income. Subtract line 42 from line 41. If line 42 is more than line 41, enter -0-	43
see page 35.	44	Tax (see page 37). Check if any tax is from: a \square Form(s) 8814 b \square Form 4972.	44
All others:			45
Single or Married filing	45	Alternative minimum tax (see page 40). Attach Form 6251	45
separately,	46	Add lines 44 and 45	40
\$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 2441 48	
Qualifying widow(er),	49	Education credits from Form 8863, line 29	
\$11,400	50	Retirement savings contributions credit. Attach Form 8880 50	
Head of	51	Child tax credit (see page 42)	
household, \$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	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	<mark>55</mark>
Other	56	Self-employment tax. Attach Schedule SE	56
Taxes	57	Unreported social security and Medicare tax from Form: \mathbf{a} 4137 \mathbf{b} 8919	57
Takes	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	64a	Earned income credit (EIC)	
qualifying 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	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
Direct deposit?	72 73a	Amount of line 72 you want refunded to you. If Form 8888 is attached, check here	73a
See page 73	► b	Routing number	
and fill in 73b, 73c, and 73d,		Account number	
or Form 8888.	▶ a 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)	13
	De		omplete the following.
Third Party	/ 00		
Designee		signee's Phone Personal ident	ification
Sign		ne no. number (PIN)	
Sign Here		der penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to y are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which prep	
Joint return?		ur signature Date Your occupation	Daytime phone number
See page 15.			
Keep a copy	<u> </u>		
for your		ouse's signature. If a joint return, both must sign. Date Spouse's occupation	
records.			
Paid		Date Check if	Preparer's SSN or PTIN
Preparer's	sig	nature self-employed	<u>ال</u>
Use Only	Firr you	n's name (or urs if self-employed), press, and ZIP code Phone no.	

104	0	•	nent of the Treasury-				20)9	(99)	IRS Use Only	/—Do n	ot write o	r staple in this spa	ce.	
Label			year Jan. 1-Dec. 3					, 2009, er	nding	, 20			OMB No. 1545-	0074	
Laber	L	Your f	irst name and init	ial		Last	name					Your s	ocial security r	number	
(See instructions	A B														
on page 14.) Use the IRS	EL	lf a joi	nt return, spouse'	's first name	and initial	Last	name					Spous	e's social secu	rity nur	nber
label.	н	Home	address (number	r and street).	If you hav	e a P.O. box	, see page 14	1.		Apt. n	o.		You must	enter	
Otherwise,	E R				-								your SSN(s) a		
please print or type.	Ē	City, t	own or post office	e, state, and	ZIP code.	If you have a	a foreign add	ress, see	page 14.			Checkir	ng a box below	v will no	ot
Presidential											ノ	change	your tax or ref	und.	
Election Cam	paign	► Cł	neck here if you	, or your s	oouse if fi	ling jointly,	want \$3 to	go to th	is fund (s	see page 14)		Y	ou 🗌	Spous	e
Filing State	us	1	Single					4 [Head d	of household (with qu	ualifying	person). (See p	age 15.	.) If the
		2	Married filin	ng jointly (e	ven if only	y one had i	ncome)		qualify	ring person is	a child	but not	your dependen	t, enter	this
Check only or	ne	3	3 ☐ Married filing separately. Enter spouse's SSN above child's name here. ►												
box.			and full nan					5			r) with	depend	dent child (see		6)
Exemption	IS	6a		. If someon	e can cla	im you as a	a dependen	t, do no f	t check b	oox 6a		• }	Boxes check on 6a and 6b		
-		b				<u> </u>						<u> </u>	No. of childr on 6c who:	en	
		С	Dependents:				(2) Depende social security		1		🖌 if qua Id for chi		 lived with y 	/ou	
			(1) First name		Last name	`		number	Telationsi	cred	it (see pa	<u>iqe 17)</u>	 did not live vou due to div 		
If more than fo	rur												or separation (see page 18)		
dependents, s													Dependents of	on 6c	
page 17 and													not entered a		
check here ►	· 🛄		Tatal works an										Add number		
		d	Total number	•			<u> </u>				• •		lines above		
Income		7 8a	Wages, salari Taxable inter			()			• •		·	7 8a			
		b	Tax-exempt			•		 . 8b	1		· ·	oa			
Attach Form(s)	9a	Ordinary divid									9a			1
W-2 here. Als		b	Qualified divid				uired .	. 9b	1		· ·	54			
attach Forms W-2G and		10	Taxable refun	•	,					nage 23)		10			1
1099-R if tax		11	Alimony recei						100 (000	page 20) .	•	11			
was withheld.11Alimony received112Business income or (loss).							 C or C-F7				•	12			
		13	Capital gain c							khere.►	Π.	13			
If you did not		14	Other gains o					o i i o quii			_	14			
get a W-2,		15a	IRA distributio	. ,	15a			b Ta	xable amo	ount (see pag	e 24)	15b			
see page 22.		16a	Pensions and		16a					ount (see pag	,	16b			
		17	Rental real es		ties, partn	erships, S	corporatior	⊐ ıs. trusts	, etc. Att	ach Schedu	le E	17			
Enclose, but o		18	Farm income									18			
not attach, an payment. Also		19	Unemployme									19			
please use	,	20a	Social security	/ benefits	20a			b Ta	xable amo	ount (see pag	e 27)	20b			
Form 1040-V		21	Other income	. List type	and amou	unt (see pa	ge 29)	_				21			
		22	Add the amou	ints in the f	ar right co	olumn for lir	nes 7 throug	h 21. Th	is is your	total incom	e 🕨	22			
		23	Educator exp	enses (see	page 29)			. 23							
Adjusted		24	Certain busines	ss expenses	of reservis	sts, performi	ng artists, an	d							
Gross			fee-basis gover	mment offici	als. Attach	Form 2106	or 2106-EZ	24							
Income		25	Health saving	s account	deduction	n. Attach Fo	orm 8889	. 25							
		26	Moving exper	nses. Attac	h Form 3	903		. 26				_			
		27	One-half of se	elf-employ	ment tax.	Attach Sch	nedule SE	. 27							
		28	Self-employe	d SEP, SIN	IPLE, and	d qualified p	olans .	. 28				-			
		29	Self-employe	d health in	surance d	leduction (s	see page 30) 29				-			
		30	Penalty on ea					. 30				-			
		31a	Alimony paid			►	1	31a							
		32	IRA deduction												
		33	Student loan												1
		34	Tuition and fe												
		35	Domestic prod												
		36	Add lines 23 t	•		0						36			
		37	Subtract line	36 from lin	e 22. This	s is your ad	justed gros	ss incon	ne .			37			

Form	1040	(2009
1 01111	10-0	12000

Tax and	38	Amount from line 37 (adjusted gross income)	38		
	39a	Check J You were born before January 2, 1945, Blind. Total boxes			
Credits		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	40a	Itemized deductions (from Schedule A) or your standard deduction (see left margin)	40a		1
for—	b	If you are increasing your standard deduction by certain real estate taxes, new motor			
 People who check any 	-	vehicle taxes, or a net disaster loss, attach Schedule L and check here (see page 35) . ► 40b	1		
box on line	41	Subtract line 40a from line 38	41		
39a, 39b, or 40b or who	42	Exemptions. If line 38 is \$125,100 or less and you did not provide housing to a Midwestern			
can be claimed as a		displaced individual, multiply \$3,650 by the number on line 6d. Otherwise, see page 37	42		
dependent,	43	Taxable income. Subtract line 42 from line 41. If line 42 is more than line 41, enter -0-	43		
see page 35.	44	Tax (see page 37). Check if any tax is from: a \square Form(s) 8814 b \square Form 4972.	44		
All others:			44		
Single or Married filing	45	Alternative minimum tax (see page 40). Attach Form 6251	45 46		
separately,	46	Add lines 44 and 45	40		
\$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 2441 48	-		
Qualifying widow(er),	49	Education credits from Form 8863, line 29	-		
\$11,400	50	Retirement savings contributions credit. Attach Form 8880 50	_		
Head of	51	Child tax credit (see page 42)	_		
household, \$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	Add lines 47 through 53. These are your total credits	<mark>54</mark>		
	55	Subtract line 54 from line 46. If line 54 is more than line 46, enter -0	<mark>55</mark>		
Other	56	Self-employment tax. Attach Schedule SE	56		
Taxes	57	Unreported social security and Medicare tax from Form: $\mathbf{a} \square 4137$ $\mathbf{b} \square 8919$	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			
ruymonto	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	64a	Earned income credit (EIC)	-		
qualifying	b	Nontaxable combat pay election 64b	-		
child, attach Schedule EIC.	65	Additional child tax credit. Attach Form 8812			
Ceriedule Elo:	66	Refundable education credit from Form 8863, line 16 66	-		
			-		
	67 69		-		
	68 00		-		
	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		
Direct deposit? See page 73	73a	Amount of line 72 you want refunded to you. If Form 8888 is attached, check here	<mark>73a</mark>		
and fill in 73b,	▶ b	Routing number			
73c, and 73d, or Form 8888.	▶ d				
	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. C	omplete	the following.	No
Designee		signee's Phone Personal ident	ification		
		ne no. number (PIN)			
Sign		der penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to			elief,
Here		y are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer			
Joint return?	Yo	ur signature Date Your occupation	Daytim	e phone number	
See page 15.					
Keep a copy for your	Sp	ouse's signature. If a joint return, both must sign. Date Spouse's occupation			
records.	/				
Deid	Pre	parer's Date Objectivit	Prepar	er's SSN or PTIN	
Paid	sig	Check if self-employed	וב		
Preparer's	Firr	n's name (or EIN			
Use Only	you add	urs if self-employed), dress, and ZIP code Phone no.			

104	0	•	ent of the Treasury-			Return	200)9	(99)	IRS Use Only-	—Do no	t write o	r staple in this sp	ace.	
Label			year Jan. 1-Dec. 3					, 2009, er	iding	, 20			OMB No. 1545	-0074	
Laber	L	Your f	irst name and init	ial		Last n	ame					Your s	ocial security	number	r
(See instructions	A B														
on page 14.) Use the IRS	EL	lf a joi	nt return, spouse'	's first name	and initial	Last n	ame					Spouse	e's social sec	urity nui	mber
label.	н	Home	address (number	r and street).	If you have	e a P.O. box,	see page 14			Apt. nc			You must	enter	
Otherwise,	E R				-								your SSN(s)		
please print or type.	Ē	City, t	own or post office	e, state, and	ZIP code.	lf you have a	foreign addr	ess, see	page 14.			Checkir	ng a box belov	w will no	ot
Presidential											ノ	hange	your tax or re	fund.	
Election Cam	paign	► Ch	neck here if you	, or your sp	oouse if fil	ing jointly,	want \$3 to	go to thi	s fund (se	ee page 14)		☐ Yo	bu	Spous	3e
Filing State	us	1	Single					4	Head of	f household (w	vith qu	alifying	person). (See	page 15	.) If the
		2	Married filin	ig jointly (e	ven if only	one had ir	ncome)		qualifyir	ng person is a	child	but not	your depende	nt, enter	this
Check only or	ne	3	3 ☐ Married filing separately. Enter spouse's SSN above child's name here. ►												
box.			and full nan					5		•) with	depend	dent child (see		16)
Exemption	IS	6a	└ Yourself.	If someon	e can clai	m you as a	dependent	, do not	check bo	ox 6a		. }	Boxes chec on 6a and 6		
-		b				<u> </u>				<u> </u>		<u> </u>	No. of child	ren	
		С	Dependents:				(2) Depende ocial security r		(3) Depe relationshi		if qua I for chil		on 6c who: • lived with	you	
			(1) First name	l	.ast name	3		Iumber	Telationshi		(see pa		 did not live vou due to d 		
If more than fo	nur										<u> </u>		or separation (see page 18	า่ั	
dependents, s											<u> </u>		Dependents	•	
page 17 and													not entered		
check here ►			.	<i>.</i> .									Add numbe		
		d	Total number	•									lines above	•	
Income		7	Wages, salari			.,					•	7			
		8a	Taxable inter			•		· · ·	· · ·	· · ·	•	8a			
Attach Form(s)	b	Tax-exempt					. 8b				0			
W-2 here. Als	•	9a	Ordinary divid							· · ·	•	9a			
attach Forms		b	Qualified divid	•	,		••••••••••••••••••••••••••••••••••••••	. 9b		00)		10			
W-2G and 1099-R if tax		10	Taxable refun				na iocai inc	come tax	kes (see p	age 23) .	•	10 11			
was withheld					· · ·				•	12					
		12 13									т	12			
If you did not		14	Capital gain c Other gains o				quirea. Il no	Jurequir	eu, checr			13			
get a W-2,		15a	IRA distributio	` '	15a	111 47 97 .	· · ·	 ь тах	· · · ·	unt (see page	· • 24)	15b			
see page 22.		16a	Pensions and		16a					unt (see page	,	16b			
		17	Rental real es			orshins S	Corporation	_		· · · ·	,	17			
Enclose, but o	do	18	Farm income									18			-
not attach, an		19	Unemployme									19			
payment. Also please use),	20a	Social security	•	20a		_,,	1 .	· · ·	unt (see page		20b			
Form 1040-V		21	Other income			int (see pad	ae 29)	-			,	21			
		22	Add the amou									22			
	_	23	Educator exp												
Adjusted		24	Certain busines	s expenses	of reservis	ts, performir	ig artists, and	d l							
Gross			fee-basis gover	•			-	24							
Income		25	Health saving	s account	deductior	n. Attach Fo	orm 8889	. 25							
		26	Moving exper	nses. Attac	h Form 39	903		. 26							
		27	One-half of se	elf-employr	nent tax.	Attach Sch	edule SE	. 27							
		28	Self-employe	d SEP, SIN	IPLE, and	qualified p	lans .	. 28							
		29	Self-employe	d health ins	surance d	eduction (s	ee page 30) 29							
		30	Penalty on ea	rly withdra	wal of sav	/ings		. 30							
		31a	Alimony paid	b Recipie	nt's SSN	►		31a							
		32	IRA deduction	n (see page	e 31) .			. 32							
		33	Student loan	interest de	duction (s	ee page 34)	. 33							
		34	Tuition and fe	es deducti	on. Attacl	n Form 891	7	. 34							
		35	Domestic prod	luction activ	ities dedu	ction. Attach	Form 8903	35							
		36	Add lines 23 t	0		0						<mark>36</mark>			<u> </u>
		37	Subtract line	36 from lin	e 22. This	is your adj	usted gros	s incon	1 e			<mark>37</mark>			

Form	1040	(2009
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Tax and	38	Amount from line 37 (adjusted gross income)		38	
Credits	39a	Check J You were born before January 2, 1945, Blind. Total boxes			
Credits		if:			
Standard	b	If your spouse itemizes on a separate return or you were a dual-status alien, see page 35 and check here > 39	эь□		
Deduction	40a	Itemized deductions (from Schedule A) or your standard deduction (see left margin) .	. 🧃	40a	
for— ● People who	b	If you are increasing your standard deduction by certain real estate taxes, new motor			
check any		vehicle taxes, or a net disaster loss, attach Schedule L and check here (see page 35) . ► 40	ъ□		
box on line 39a, 39b, or	41	Subtract line 40a from line 38	. (41	
40b or who	42	Exemptions. If line 38 is \$125,100 or less and you did not provide housing to a Midwest			
can be claimed as a		displaced individual, multiply \$3,650 by the number on line 6d. Otherwise, see page 37	. (<mark>42</mark>	
dependent, 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	2. [44	
Single or	45	Alternative minimum tax (see page 40). Attach Form 6251		45	
Married filing	46	Add lines 44 and 45		46	
separately, \$5,700	47	Foreign tax credit. Attach Form 1116 if required 47			
Married filing	48	Credit for child and dependent care expenses. Attach Form 2441 48			
jointly or Qualifying	49	Education credits from Form 8863, line 29			
widow(er),	50	Retirement savings contributions credit. Attach Form 8880 50			
\$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	
O H	56	Self-employment tax. Attach Schedule SE		56	
Other	57	Unreported social security and Medicare tax from Form: $\mathbf{a} \ 4137$ $\mathbf{b} \ 8919$.		57	
Taxes	58	Additional tax on IRAs, other qualified retirement plans, etc. Attach Form 5329 if required		58	
	59	Additional taxes: a \square AEIC payments b \square Household employment taxes. Attach Schedule	-	59	
	60			<u>60</u>	
December	61	Add lines 55 through 59. This is your total tax	-	00	
Payments	62				
	63	2009 estimated tax payments and amount applied from 2008 return 62 Making work pay and government retiree credits. Attach Schedule M 63			
If you have a		Earned income credit (EIC)			
qualifying	<u>64</u> a b				
child, attach Schedule EIC.	_	Nontaxable combat pay election 64b Additional child tax credit. Attach Form 8812 65			
Schedule LIC.	65 66				
	66 67				
	67 69	First-time homebuyer credit. Attach Form 5405 67 Amount paid with request for extension to file (see page 72) . 68			
	68 60				
	69 70	Excess social security and tier 1 RRTA tax withheld (see page 72) 69 Credits from Form: a 2439 b 4136 c 8801 d 8885 70			
	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		If line 71 is more than line 60, subtract line 60 from line 71. This is the amount you overpa		71 70	
Direct deposit?	72 72 -			72	
See page 73	73a	Amount of line 72 you want refunded to you. If Form 8888 is attached, check here		73a	
and fill in 73b,	► b	Routing number	iys		
73c, and 73d, or Form 8888.	► d	Account number			
Amount	74 75	Amount of line 72 you want applied to your 2010 estimated tax ► 74 Amount you owe. Subtract line 71 from line 60. For details on how to pay, see page 74.		75	
You Owe				<mark>75</mark>	
	76	Estimated tax penalty (see page 74)		plete the follo	owing. 🗌 No
Third Party	/ 00		5. Com	piere rue iolic	
Designee		signee's Phone Personal i me ▶ no. ▶ number (F		ation	
Sign		der penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, a		best of my know	ledge and belief
Here		y are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which			
Joint return?	Yo	ur signature Date Your occupation	[Daytime phone	number
See page 15.					
Keep a copy for your	Sp	ouse's signature. If a joint return, both must sign. Date Spouse's occupation			
records.					
	Pre	parer's Date Object if	F	Preparer's SSN	or PTIN
Paid Dremonau's	sig	nature Check if self-employed	d 🔲		
Preparer's Firm's name (or Fin					
Use Only yours if self-employed), address, and ZIP code Phone no.					

2009 Tax Table



See the instructions for line 44 that begin on page 37 to see if you must use the Tax Table below to figure your tax.

Example. Mr. and Mrs. Brown are filing a joint return. Their taxable income on Form 1040, line 43, is \$25,300. First, they find the \$25,300–25,350 taxable income line. Next, they find the column for married filing jointly and read down the column. The amount shown where the taxable income line and filing status column meet is \$2,964. This is the tax amount they should enter on Form 1040, line 44.

Sample Table

-					
At least	But less than	Single	Married filing jointly	Married filing sepa- rately	Head of a house- hold
			Your ta	ax is—	
25,250 25,300	25,250 25,300 25,350 25,400	3,366 3,374 3,381 3,389	2,949 2,956 (2,964) 2,971	3,366 3,374 3,381 3,389	3,186 3,194 3,201 3,209

If line 4 (taxable income	e		And yo	u are —		If line 4 (taxabl	13 e		And yo	u are —		If line 4 (taxable income	e		And yo	u are —	
At least	But less than	Single	Married filing jointly Your ta	Married filing sepa- rately ax is—	Head of a house- hold	At least	But less than	Single	Married filing jointly Your ta	Married filing sepa- rately ax is—	Head of a house- hold	At least	But less than	Single	Married filing jointly Your ta	Married filing sepa- rately ax is—	Head of a house- hold
0 5 15	5 15 25	0 1 2	0 1 2	0 1 2	0 1 2	1,300 1,325 1,350	1,325 1,350 1,375	131 134 136	131 134 136	131 134 136	131 134 136	2,700 2,725 2,750	2,725 2,750 2,775	271 274 276	271 274 276	271 274 276	271 274 276
25 50 75	50 75 100	4 6 9	4 6 9	4 6 9	4 6 9	1,375 1,400 1,425	1,400 1,425 1,450	139 141 144	139 141 144	139 141 144	139 141 144	2,775 2,800 2,825	2,800 2,825 2,850	279 281 284	279 281 284	279 281 284	279 281 284
100 125 150	125 150 175	11 14 16	11 14 16	11 14 16	11 14 16	1,450 1,475 1,500	1,475 1,500 1,525	146 149 151	146 149 151	146 149 151	146 149 151	2,850 2,875 2,900	2,875 2,900 2,925	286 289 291	286 289 291	286 289 291	286 289 291
175 200 225	200 225 250	19 21 24	19 21 24	19 21 24	19 21 24	1,500 1,525 1,550 1,575	1,525 1,550 1,575 1,600	151 154 156 159	154 156 159	154 156 159	154 156 159	2,900 2,925 2,950 2,975	2,925 2,950 2,975 3,000	294 296 299	291 294 296 299	294 296 299	291 294 296 299
250 275	275 300	26 29	26 29	26 29	26 29	1,600 1,625	1,625 1,650	161 164	161 164	161 164	161 164	3,00					
300 325 350 375	325 350 375 400	31 34 36 39	31 34 36 39	31 34 36 39	31 34 36 39	1,650 1,675 1,700 1,725	1,675 1,700 1,725 1,750	166 169 171 174	166 169 171 174	166 169 171 174	166 169 171 174	3,000 3,050 3,100 3,150	3,050 3,100 3,150 3,200	303 308 313 318	303 308 313 318	303 308 313 318	303 308 313 318
400 425 450 475	425 450 475 500	41 44 46 49	41 44 46 49	41 44 46 49	41 44 46 49	1,750 1,775 1,800	1,775 1,800 1,825	176 179 181	176 179 181	176 179 181	176 179 181	3,200 3,250 3,300	3,250 3,300 3,350	323 328 333	323 328 333	323 328 333	323 328 333
500 525 550	525 550 575	51 54 56	51 54 56	51 54 56	51 54 56	1,825 1,850 1,875 1,900	1,850 1,875 1,900 1,925	184 186 189 191	184 186 189 191	184 186 189 191	184 186 189 191	3,350 3,400 3,450 3,500	3,400 3,450 3,500 3,550	338 343 348 353	338 343 348 353	338 343 348 353	338 343 348 353
575 600 625	600 625 650	59 61 64	59 61 64	59 61 64	59 61 64	1,925 1,950 1,975	1,950 1,975 2,000	194 196 199	194 196 199	194 196 199	194 196 199	3,550 3,550 3,600 3,650	3,600 3,650 3,700	358 363 368	358 363 368	358 363 368	358 363 368
650 675 700	675 700 725	66 69 71	66 69 71	66 69 71	66 69 71	2,00						3,700 3,750	3,750 3,800	373 378	373 378	373 378	373 378
725 750 775	750 775 800	74 76 79	74 76 79	74 76 79	74 76 79	2,000 2,025 2,050 2,075	2,025 2,050 2,075 2,100	201 204 206 209	201 204 206 209	201 204 206 209	201 204 206 209	3,800 3,850 3,900 3,950	3,850 3,900 3,950 4,000	383 388 393 398	383 388 393 398	383 388 393 398	383 388 393 398
800 825 850	825 850 875	81 84 86	81 84 86	81 84 86	81 84 86	2,100 2,125 2,150	2,125 2,150 2,175	211 214 216	211 214 216	211 214 216	211 214 216	4,00	0	<u> </u>			
875 900 925 950	900 925 950 975	89 91 94 96	89 91 94 96	89 91 94 96	89 91 94 96	2,175 2,200 2,225 2,250	2,200 2,225 2,250 2,275	210 219 221 224 226	210 219 221 224 226	219 221 224 226	210 219 221 224 226	4,000 4,050 4,100 4,150	4,050 4,100 4,150 4,200	403 408 413 418	403 408 413 418	403 408 413 418	403 408 413 418
975 1,00	1,000 0	99	99	99	99	2,275	2,300 2,325	220 229 231	220 229 231	220 229 231	229 231	4,200 4,250 4,300	4,250 4,300 4,350	423 428 433	423 428 433	423 428 433	423 428 433
1,000 1,025	1,025 1,050	101 104	101 104	101 104	101 104	2,325 2,350 2,375	2,350 2,375 2,400	234 236 239	234 236 239	234 236 239	234 236 239	4,350 4,400	4,400 4,450	438 443	438 443	438 443	438 443
1,050 1,075	1,075 1,100	106 109	106 109	106 109	106 109	2,400 2,425	2,425 2,450	241 244	241 244	241 244	241 244	4,450 4,500 4,550	4,500 4,550 4,600	448 453 458	448 453 458	448 453 458	448 453 458
1,100 1,125 1,150 1,175	1,125 1,150 1,175 1,200	111 114 116 119	111 114 116 119	111 114 116 119	111 114 116 119	2,450 2,475 2,500 2,525	2,475 2,500 2,525 2,550	246 249 251 254	246 249 251 254	246 249 251 254	246 249 251 254	4,600 4,650 4,700 4,750	4,650 4,700 4,750 4,800	463 468 473 478	463 468 473 478	463 468 473 478	463 468 473 478
1,200 1,225 1,250 1,275	1,225 1,250 1,275 1,300	121 124 126 129	121 124 126 129	121 124 126 129	121 124 126 129	2,550 2,575 2,600 2,625 2,650 2,675	2,575 2,600 2,625 2,650 2,675 2,700	256 259 261 264 266 269	256 259 261 264 266 269	256 259 261 264 266 269	256 259 261 264 266 269	4,750 4,800 4,850 4,900 4,950	4,800 4,850 4,900 4,950 5,000	478 483 488 493 498	478 483 488 493 498	478 483 488 493 498	478 483 488 493 498

* This column must also be used by a qualifying widow(er).

(Continued on page 78)

2009 Tax Table-Continued

If line 4 (taxable income	3		<u>Ontinue</u> And you			If line 4 (taxable income	e		And yo	u are —		If line 4 (taxabl income	e		And yo	u are —	
At least	But less than	Single	Married filing jointly Your ta		Head of a house- hold	At least	But less than	Single	Married filing jointly Your ta	filing sepa- rately	Head of a house- hold	At least	But less than	Single	Married filing jointly Your ta	filing sepa- rately	l Head of a house- hold
5,00	0					8,00	0					11,0	00	1			
5,000 5,050 5,100 5,150 5,200 5,250	5,050 5,100 5,150 5,200 5,250 5,300	503 508 513 518 523 528	503 508 513 518 523 528	503 508 513 518 523 528	503 508 513 518 523 528	8,000 8,050 8,100 8,150 8,200 8,250	8,050 8,100 8,150 8,200 8,250 8,300	803 808 813 818 823 828	803 808 813 818 823 828	803 808 813 818 823 828	803 808 813 818 823 828	11,050 11,100 11,150 11,200	11,050 11,100 11,150 11,200 11,250 11,300	1,236 1,244 1,251 1,259 1,266 1,274	1,103 1,108 1,113 1,118 1,123 1,128	1,236 1,244 1,251 1,259 1,266 1,274	1,103 1,108 1,113 1,118 1,123 1,128
5,300 5,350 5,400 5,450 5,500 5,550	5,350 5,400 5,450 5,500 5,550 5,600	533 538 543 543 548 553 558	533 538 543 548 553 558	533 538 543 548 553 558	533 538 543 548 553 558	8,300 8,350 8,400 8,450 8,500 8,550	8,350 8,400 8,450 8,500 8,550 8,600	833 839 846 854 861 869	833 838 843 848 853 858	833 839 846 854 861 869	833 838 843 848 853 858	11,400 11,450 11,500	11,400 11,450 11,500	1,281 1,289 1,296 1,304 1,311 1,319	1,133 1,138 1,143 1,148 1,153 1,158	1,281 1,289 1,296 1,304 1,311 1,319	1,133 1,138 1,143 1,143 1,148 1,153 1,158
5,600 5,650 5,700 5,750 5,800 5,850 5,850 5,900	5,650 5,700 5,750 5,800 5,850 5,900 5,950	563 568 573 578 583 583 588 593	563 568 573 578 583 588 593 593	563 568 573 578 583 583 588 593	563 568 573 578 583 588 593	8,600 8,650 8,700 8,750 8,800 8,850 8,850 8,900	8,650 8,700 8,750 8,800 8,850 8,900 8,950	876 884 891 899 906 914 921	863 868 873 878 883 883 888 893	876 884 891 899 906 914 921	863 868 873 878 883 883 888 893	11,800 11,850 11,900	11,700 11,750 11,800 11,850 11,900 11,950	1,326 1,334 1,341 1,349 1,356 1,364 1,371	1,163 1,168 1,173 1,178 1,183 1,183 1,188 1,193	1,326 1,334 1,341 1,349 1,356 1,364 1,371	1,163 1,168 1,173 1,178 1,183 1,183 1,188 1,193
5,950 6,00	6,000 0	598	598	598	598	8,950 9,00	9,000 0	929	898	929	898	11,950	12,000	1,379	1,198	1,379	1,199
6,000 6,050 6,100 6,150	6,050 6,100 6,150 6,200	603 608 613 618	603 608 613 618	603 608 613 618	603 608 613 618	9,000 9,050 9,100 9,150	9,050 9,100 9,150 9,200	936 944 951 959	903 908 913 918	936 944 951 959	903 908 913 918	12,000 12,050 12,100	12,050 12,100	1,386 1,394 1,401 1,409	1,203 1,208 1,213 1,218	1,386 1,394 1,401 1,409	1,206 1,214 1,221 1,229
6,200 6,250 6,300 6,350	6,250 6,300 6,350 6,400	623 628 633 638	623 628 633 638	623 628 633 638	623 628 633 638	9,200 9,250 9,300 9,350	9,250 9,300 9,350 9,400	966 974 981 989	923 928 933 938	966 974 981 989	923 928 933 938	12,200 12,250 12,300 12,350	12,250 12,300 12,350 12,400	1,416 1,424 1,431 1,439	1,223 1,228 1,233 1,238	1,416 1,424 1,431 1,439	1,236 1,244 1,251 1,259
6,400 6,450 6,500 6,550	6,450 6,500 6,550 6,600	643 648 653 658	643 648 653 658	643 648 653 658	643 648 653 658	9,400 9,450 9,500 9,550	9,450 9,500 9,550 9,600	996 1,004 1,011 1,019	943 948 953 958	996 1,004 1,011 1,019	943 948 953 958	12,400 12,450 12,500 12,550	12,500 12,550 12,600	1,446 1,454 1,461 1,469	1,243 1,248 1,253 1,258	1,446 1,454 1,461 1,469	1,266 1,274 1,281 1,289
6,600 6,650 6,700 6,750 6,800	6,650 6,700 6,750 6,800 6,850	663 668 673 678 683	663 668 673 678 683	663 668 673 678 683	663 668 673 678 683	9,600 9,650 9,700 9,750 9,800	9,650 9,700 9,750 9,800 9,850	1,026 1,034 1,041 1,049 1,056	963 968 973 978 983	1,026 1,034 1,041 1,049 1,056	963 968 973 978 983	12,650 12,700 12,750	12,650 12,700 12,750 12,800 12,850	1,476 1,484 1,491 1,499 1,506	1,263 1,268 1,273 1,278 1,283	1,476 1,484 1,491 1,499 1,506	1,296 1,304 1,311 1,319 1,326
6,850 6,900 6,950	6,900 6,950 7,000	688 693 698	688 693 698	688 693 698	688 693 698	9,850 9,900	9,900 9,950 10,000	1,064 1,071 1,079	988 993 998	1,064 1,071 1,079	988 993 998	12,850 12,900 12,950	12,900 12,950 13,000	1,514 1,521 1,529	1,288 1,293 1,298	1,514 1,521 1,529	1,334 1,341 1,349
7,00						10,0						13,0			1 0 0 0		
7,000 7,050 7,100 7,150 7,200	7,050 7,100 7,150 7,200 7,250	703 708 713 718 723	703 708 713 718 723	703 708 713 718 723	703 708 713 718 723	10,050 10,100 10,150	10,050 10,100 10,150 10,200 10,250	1,086 1,094 1,101 1,109 1,116	1,003 1,008 1,013 1,018 1,023	1,086 1,094 1,101 1,109 1,116	1,003 1,008 1,013 1,018 1,023	13,050 13,100 13,150	13,050 13,100 13,150 13,200 13,250	1,536 1,544 1,551 1,559 1,566	1,303 1,308 1,313 1,318 1,323	1,536 1,544 1,551 1,559 1,566	1,356 1,364 1,371 1,379 1,386
7,250 7,300 7,350 7,400	7,300 7,350 7,400 7,450	728 733 738 743	728 733 738 743	728 733 738 743	728 733 738 743	10,250 10,300 10,350 10,400	10,300 10,350 10,400 10,450	1,124 1,131 1,139 1,146	1,028 1,033 1,038 1,043	1,124 1,131 1,139 1,146	1,028 1,033 1,038 1,043	13,250 13,300 13,350	13,300 13,350 13,400 13,450	1,574 1,581 1,589 1,596	1,328 1,333 1,338 1,343	1,574 1,581 1,589 1,596	1,394 1,401 1,409 1,416
7,450 7,500 7,550 7,600 7,650	7,500 7,550 7,600 7,650 7,700	748 753 758 763 768	748 753 758 763 768	748 753 758 763 768	748 753 758 763 768	10,450 10,500 10,550 10,600 10,650	10,500 10,550 10,600 10,650 10,700	1,154 1,161 1,169 1,176 1,184	1,048 1,053 1,058 1,063 1,068	1,154 1,161 1,169 1,176 1,184	1,048 1,053 1,058 1,063 1,068	13,450 13,500 13,550 13,600 13,650	13,500 13,550 13,600 13,650 13,700	1,604 1,611 1,619 1,626 1,634	1,348 1,353 1,358 1,363 1,368	1,604 1,611 1,619 1,626 1,634	1,424 1,431 1,439 1,446 1,454
7,700 7,750 7,800 7,850 7,900 7,950	7,750 7,800 7,850 7,900 7,950 8,000	773 778 783 788 793 798	773 778 783 788 793 798	773 778 783 788 793 798	773 778 783 788 793 798	10,700 10,750 10,800 10,850 10,900	10,750 10,800 10,850 10,900 10,950 11,000	1,191 1,199 1,206 1,214 1,221 1,229	1,073 1,078 1,083 1,088 1,093 1,098	1,191 1,199 1,206 1,214 1,221 1,229	1,073 1,078 1,083 1,088 1,093 1,098	13,700 13,750 13,800 13,850 13,900	13,750 13,800 13,850 13,900 13,950 14,000	1,641 1,649 1,656 1,664 1,671 1,679	1,373 1,378 1,383 1,388 1,393 1,398	1,641 1,649 1,656 1,664 1,671 1,679	1,461 1,469 1,476 1,484 1,491 1,499

* This column must also be used by a qualifying widow(er).

		1						1					20	09 Ta	x Tabl	e–Cor	ntinued
If line 4 (taxable income	9		And yo	u are —		If line 4 (taxable income	e		And yo	u are—		If line (taxab incom			And yo	u are —	
At least	But less than	Single	Married filing jointly * Your ta	Married filing sepa- rately ax is—	Head of a house- hold	At least	But less than	Single	Married filing jointly Your t a	filing sepa- rately	Head of a house- hold	At least	But less than	Single	Married filing jointly Your t a	Married filing sepa- rately ax is—	Head of a house- hold
14,0	00					17,0	17,000					20,0	000	1			
14,050	14,050 14,100 14,150 14,200	1,686 1,694 1,701 1,709	1,403 1,408 1,413 1,418	1,686 1,694 1,701 1,709	1,506 1,514 1,521 1,529	17,050	17,050 17,100 17,150 17,200	2,136 2,144 2,151 2,159	1,719 1,726 1,734 1,741	2,136 2,144 2,151 2,159	1,956 1,964 1,971 1,979	20,000 20,050 20,100 20,150	20,100 20,150	2,586 2,594 2,601 2,609	2,169 2,176 2,184 2,191	2,586 2,594 2,601 2,609	2,406 2,414 2,421 2,429
14,200 14,250 14,300 14,350	14,250 14,300 14,350 14,400	1,716 1,724 1,731 1,739	1,423 1,428 1,433 1,438	1,716 1,724 1,731 1,739	1,536 1,544 1,551 1,559	17,200 17,250 17,300 17,350	17,350	2,166 2,174 2,181 2,189	1,749 1,756 1,764 1,771	2,166 2,174 2,181 2,189	1,986 1,994 2,001 2,009	20,200 20,250 20,300 20,350	20,300 20,350	2,616 2,624 2,631 2,639	2,199 2,206 2,214 2,221	2,616 2,624 2,631 2,639	2,436 2,444 2,451 2,459
14,400 14,450 14,500 14,550	14,450 14,500 14,550 14,600	1,746 1,754 1,761 1,769	1,443 1,448 1,453 1,458	1,746 1,754 1,761 1,769	1,566 1,574 1,581 1,589	17,400 17,450 17,500 17,550	17,550	2,196 2,204 2,211 2,219	1,779 1,786 1,794 1,801	2,196 2,204 2,211 2,219	2,016 2,024 2,031 2,039	20,400 20,450 20,500 20,550	20,500 20,550	2,646 2,654 2,661 2,669	2,229 2,236 2,244 2,251	2,646 2,654 2,661 2,669	2,466 2,474 2,481 2,489
14,600 14,650 14,700 14,750	14,650 14,700 14,750 14,800	1,776 1,784 1,791 1,799	1,463 1,468 1,473 1,478	1,776 1,784 1,791 1,799	1,596 1,604 1,611 1,619	17,600 17,650 17,700 17,750	17,750	2,226 2,234 2,241 2,249	1,809 1,816 1,824 1,831	2,226 2,234 2,241 2,249	2,046 2,054 2,061 2,069	20,600 20,650 20,700 20,750	20,700 20,750	2,676 2,684 2,691 2,699	2,259 2,266 2,274 2,281	2,676 2,684 2,691 2,699	2,496 2,504 2,511 2,519
14,800 14,850 14,900 14,950	14,850 14,900 14,950 15,000	1,806 1,814 1,821 1,829	1,483 1,488 1,493 1,498	1,806 1,814 1,821 1,829	1,626 1,634 1,641 1,649	17,850 17,900		2,256 2,264 2,271 2,279	1,839 1,846 1,854 1,861	2,256 2,264 2,271 2,279	2,076 2,084 2,091 2,099	20,800 20,850 20,900 20,950	20,900 20,950	2,706 2,714 2,721 2,729	2,289 2,296 2,304 2,311	2,706 2,714 2,721 2,729	2,526 2,534 2,541 2,549
15,0	00					18,0	00					21,0	000	J			
15,000 15,050 15,100 15,150	15,050 15,100 15,150 15,200	1,836 1,844 1,851 1,859	1,503 1,508 1,513 1,518	1,836 1,844 1,851 1,859	1,656 1,664 1,671 1,679	18,050	18,050 18,100 18,150 18,200	2,286 2,294 2,301 2,309	1,869 1,876 1,884 1,891	2,286 2,294 2,301 2,309	2,106 2,114 2,121 2,129	21,000 21,050 21,100 21,150	21,150	2,736 2,744 2,751 2,759	2,319 2,326 2,334 2,341	2,736 2,744 2,751 2,759	2,556 2,564 2,571 2,579
15,200 15,250 15,300 15,350	15,250 15,300 15,350 15,400	1,866 1,874 1,881 1,889	1,523 1,528 1,533 1,538	1,866 1,874 1,881 1,889	1,686 1,694 1,701 1,709	18,200 18,250 18,300 18,350	18,350	2,316 2,324 2,331 2,339	1,899 1,906 1,914 1,921	2,316 2,324 2,331 2,339	2,136 2,144 2,151 2,159	21,200 21,250 21,300 21,350	21,300 21,350	2,766 2,774 2,781 2,789	2,349 2,356 2,364 2,371	2,766 2,774 2,781 2,789	2,586 2,594 2,601 2,609
15,400 15,450 15,500 15,550	15,450 15,500 15,550 15,600	1,896 1,904 1,911 1,919	1,543 1,548 1,553 1,558	1,896 1,904 1,911 1,919	1,716 1,724 1,731 1,739	18,450 18,500 18,550	18,600	2,346 2,354 2,361 2,369	1,929 1,936 1,944 1,951	2,346 2,354 2,361 2,369	2,166 2,174 2,181 2,189	21,400 21,450 21,500 21,550	21,500 21,550 21,600	2,796 2,804 2,811 2,819	2,379 2,386 2,394 2,401	2,796 2,804 2,811 2,819	2,616 2,624 2,631 2,639
	15,650 15,700 15,750 15,800	1,926 1,934 1,941 1,949	1,563 1,568 1,573 1,578	1,926 1,934 1,941 1,949	1,746 1,754 1,761 1,769		18,700 18,750 18,800	2,376 2,384 2,391 2,399	1,959 1,966 1,974 1,981	2,376 2,384 2,391 2,399	2,196 2,204 2,211 2,219		21,700 21,750 21,800	2,826 2,834 2,841 2,849	2,409 2,416 2,424 2,431	2,826 2,834 2,841 2,849	2,646 2,654 2,661 2,669
15,850	15,850 15,900 15,950 16,000	1,956 1,964 1,971 1,979	1,583 1,588 1,593 1,598	1,956 1,964 1,971 1,979	1,776 1,784 1,791 1,799	18,850 18,900	18,850 18,900 18,950 19,000	2,406 2,414 2,421 2,429	1,989 1,996 2,004 2,011	2,406 2,414 2,421 2,429	2,226 2,234 2,241 2,249	21,850	21,850 21,900 21,950 22,000	2,856 2,864 2,871 2,879	2,439 2,446 2,454 2,461	2,856 2,864 2,871 2,879	2,676 2,684 2,691 2,699
16,0	00	1				19,0	00					22,0	000				
16,050 16,100 16,150 16,250 16,300 16,350 16,350 16,400 16,550 16,500 16,550	16,050 16,100 16,150 16,200 16,250 16,350 16,400 16,450 16,500 16,550 16,600 16,550 16,670	1,986 1,994 2,001 2,009 2,016 2,024 2,031 2,039 2,046 2,054 2,061 2,069 2,076 2,084	1,603 1,608 1,613 1,618 1,623 1,628 1,638 1,638 1,643 1,648 1,653 1,658 1,658 1,663 1,668	1,986 1,994 2,001 2,009 2,016 2,024 2,024 2,023 2,046 2,054 2,054 2,061 2,069 2,076 2,084	1,806 1,814 1,821 1,829 1,836 1,844 1,851 1,859 1,866 1,874 1,881 1,889 1,896 1,904	19,050 19,100 19,200 19,250 19,300 19,350 19,400 19,450 19,500 19,600 19,650	19,050 19,100 19,150 19,200 19,250 19,300 19,300 19,400 19,400 19,550 19,600 19,650 19,650	2,436 2,444 2,451 2,459 2,466 2,474 2,481 2,489 2,496 2,504 2,511 2,519 2,526 2,534	2,019 2,026 2,034 2,041 2,049 2,056 2,064 2,071 2,079 2,086 2,094 2,101 2,109 2,116	2,436 2,444 2,451 2,459 2,466 2,474 2,481 2,489 2,496 2,504 2,511 2,519 2,526 2,534	2,256 2,264 2,271 2,279 2,286 2,294 2,301 2,309 2,316 2,324 2,331 2,339 2,346 2,354	22,050 22,100 22,150 22,250 22,250 22,350 22,400 22,450 22,550 22,550 22,600 22,650	22,050 22,100 22,150 22,200 22,250 22,300 22,350 22,400 22,450 22,550 22,500 22,550 22,600 22,650 22,700	2,886 2,894 2,901 2,909 2,916 2,924 2,939 2,946 2,954 2,954 2,961 2,969 2,976 2,984	2,469 2,476 2,484 2,491 2,509 2,514 2,521 2,529 2,536 2,544 2,551 2,559 2,566	2,886 2,894 2,901 2,909 2,916 2,924 2,939 2,946 2,954 2,954 2,961 2,969 2,976 2,984	2,706 2,714 2,721 2,729 2,736 2,744 2,751 2,759 2,766 2,774 2,781 2,789 2,796 2,804
16,700 16,750 16,800 16,850 16,900 16,950	16,750 16,800 16,850 16,900 16,950 17,000	2,091 2,099 2,106 2,114 2,121 2,129	1,674 1,681 1,689 1,696 1,704 1,711	2,091 2,099 2,106 2,114 2,121 2,129	1,911 1,919 1,926 1,934 1,941 1,949	19,750 19,800 19,850 19,900	19,750 19,800 19,850 19,900 19,950 20,000	2,541 2,549 2,556 2,564 2,571 2,579	2,124 2,131 2,139 2,146 2,154 2,161	2,541 2,549 2,556 2,564 2,571 2,579	2,361 2,369 2,376 2,384 2,391 2,399	22,750 22,800 22,850 22,900	22,750 22,800 22,850 22,900 22,950 23,000	2,991 2,999 3,006 3,014 3,021 3,029	2,574 2,581 2,589 2,596 2,604 2,611	2,991 2,999 3,006 3,014 3,021 3,029	2,811 2,819 2,826 2,834 2,841 2,849

* This column must also be used by a qualifying widow(er).

2009 Tax Computation Worksheet—Line 44



See the instructions for line 44 that begin on page 37 to see if you must use the worksheet below to figure your tax.

Note. If you are required to use this worksheet to figure the tax on an amount from another form or worksheet, such as the Qualified Dividends and Capital Gain Tax Worksheet, the Schedule D Tax Worksheet, Schedule J, Form 8615, or the Foreign Earned Income Tax Worksheet, enter the amount from that form or worksheet in column (a) of the row that applies to the amount you are looking up. Enter the result on the appropriate line of the form or worksheet that you are completing.

Taxable income. If line 43 is—	(a) Enter the amount from line 43	(b) Multiplication amount	(c) Multiply (a) by (b)	(d) Subtraction amount	Tax. Subtract (d) from (c). Enter the result here and on Form 1040, line 44
At least \$100,000 but not over \$171,550	\$	× 28% (.28)	\$	\$ 6,280.00	\$
Over \$171,550 but not over \$372,950	\$	× 33% (.33)	\$	\$ 14,857.50	\$
Over \$372,950	\$	× 35% (.35)	\$	\$22,316.50	\$

Section A—Use if your filing status is Single. Complete the row below that applies to you.

Section B—Use if your filing status is Married filing jointly or Qualifying widow(er). Complete the row below that applies to you.

Taxable income. If line 43 is—	(a) Enter the amount from line 43	(b) Multiplication amount	(c) Multiply (a) by (b)	(d) Subtraction amount	Tax. Subtract (d) from (c). Enter the result here and on Form 1040, line 44
At least \$100,000 but not over \$137,050	\$	× 25% (.25)	\$	\$ 7,625.00	\$
Over \$137,050 but not over \$208,850	\$	× 28% (.28)	\$	\$ 11,736.50	\$
Over \$208,850 but not over \$372,950	\$	× 33% (.33)	\$	\$ 22,179.00	\$
Over \$372,950	\$	× 35% (.35)	\$	\$ 29,638.00	\$

Section C—Use if your filing status is Married filing separately. Complete the row below that applies to you.

Taxable income. If line 43 is—	(a) Enter the amount from line 43	(b) Multiplication amount	(c) Multiply (a) by (b)	(d) Subtraction amount	Tax. Subtract (d) from (c). Enter the result here and on Form 1040, line 44
At least \$100,000 but not over \$104,425	\$	× 28% (.28)	\$	\$ 5,868.25	\$
Over \$104,425 but not over \$186,475	\$	× 33% (.33)	\$	\$ 11,089.50	\$
Over \$186,475	\$	× 35% (.35)	\$	\$ 14,819.00	\$

Section D—Use if your filing status is Head of household. Complete the row below that applies to you.

Taxable income. If line 43 is—	(a) Enter the amount from line 43	(b) Multiplication amount	(c) Multiply (a) by (b)	(d) Subtraction amount	Tax. Subtract (d) from (c). Enter the result here and on Form 1040, line 44
At least \$100,000 but not over \$117,450	\$	× 25% (.25)	\$	\$ 5,147.50	\$
Over \$117,450 but not over \$190,200	\$	× 28% (.28)	\$	\$ 8,671.00	\$
Over \$190,200 but not over \$372,950	\$	× 33% (.33)	\$	\$ 18,181.00	\$
Over \$372,950	\$	× 35% (.35)	\$	\$ 25,640.00	\$

Itemized Deductions

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service (99)	
Name(s) shown on Form 10	40

SCHEDULE A

(Form 1040)

Attach to Form 1040.

► See Instructions for Schedule A (Form 1040).

). Attachment Sequence No. 07 Your social security number

Medical		Caution. Do not include expenses reimbursed or paid by others.				
and	1	Medical and dental expenses (see page A-1)				
Dental	2	Enter amount from Form 1040, line 38 2				
Expenses	3	Multiply line 2 by 7.5% (.075)				
	4	Subtract line 3 from line 1. If line 3 is more than line 1, enter -0		4		
Taxes You	5	State and local (check only one box):				
Paid		a Income taxes, or	;	-		
(See		b General sales taxes J				
page A-2.)	6	Real estate taxes (see page A-5) . . . 6	;	-		
	7	New motor vehicle taxes from line 11 of the worksheet on				
		back. Skip this line if you checked box 5b	,	-		
	8	Other taxes. List type and amount ►				
	•	Add lines 5 through 9				
	9	Add lines 5 through 8		9		
Interest		Home mortgage interest and points reported to you on Form 1098	5	-		
You Paid	11	Home mortgage interest not reported to you on Form 1098. If				
(See		paid to the person from whom you bought the home, see page				
page A-6.)		A-7 and show that person's name, identifying no., and address ►				
Note.			1			
Personal	40		1	-		
interest is not	12	Points not reported to you on Form 1098. See page A-7 for special rules	2			
deductible.	13	Qualified mortgage insurance premiums (see page A-7)		-		
	14	Investment interest. Attach Form 4952 if required. (See page A-8.)		-		
		Add lines 10 through 14	· · · · · · · ·	15		
Gifts to		Gifts by cash or check. If you made any gift of \$250 or				
Charity		more, see page A-8	6			
If you made a	17	Other than by cash or check. If any gift of \$250 or more, see				
gift and got a		page A-8. You must attach Form 8283 if over \$500 17	7			
benefit for it,	18	Carryover from prior year	8			
see page A-8.	19	Add lines 16 through 18		19		
Casualty and						
Theft Losses	20	Casualty or theft loss(es). Attach Form 4684. (See page A-10.) .		20		
Job Expenses	21	Unreimbursed employee expenses—job travel, union dues, job				
and Certain		education, etc. Attach Form 2106 or 2106-EZ if required. (See				
Miscellaneous		page A-10.) ► 2*		-		
Deductions		Tax preparation fees .	2	-		
(See	23	Other expenses-investment, safe deposit box, etc. List type				
page A-10.)		and amount				
	04		-	-		
	24	Add lines 21 through 23 24 Enter amount from Form 1040, line 38 25	+	-		
	25	Multiply line 25 by 2% (.02) 25 26	2			
	26 27	Subtract line 26 from line 24. If line 26 is more than line 24, enter -		27		
Other	28	Other—from list on page A-11. List type and amount	0	21		
Miscellaneous	20					
Deductions				28		
Total	29	Is Form 1040, line 38, over \$166,800 (over \$83,400 if married filing	separately)?	20		
Itemized		\Box No. Your deduction is not limited. Add the amounts in the far rig				
Deductions		lines 4 through 28. Also, enter this amount on Form 1040, line		29		
		☐ Yes. Your deduction may be limited. See page A-11 for the amoun				
	30	If you elect to itemize deductions even though they are less that				
		deduction, check here				

Schedule A (Form 1	040)	2009 Page 2
Worksheet for Line 7—		Before you begin: ✓ You cannot take this deduction if the amount on Form 1040, line 38, is equal to or greater than \$135,000 (\$260,000 if married filing jointly).
New motor vehicle		See the instructions for line 7 on page A-6.
taxes	1	Enter the state and local sales and excise taxes you paid in 2009 for the purchase of any new motor vehicle(s) after February 16, 2009 (see page A-6)
Use this worksheet to figure the	2	Enter the purchase price (before taxes) of the new motor vehicle(s)
amount to enter on line 7.	3	Is the amount on line 2 more than \$49,500? No. Enter the amount from line 1. Yes. Figure the portion of the tax from
(Keep a copy for your records.)		Ine 1 that is attributable to the first \$49,500 of the purchase price of each new motor vehicle and enter it here (see page A-6). 3
	4	Enter the amount from Form 1040, line 38
	5	Enter the total of any—
		 Amounts from Form 2555, lines 45 and 50; Form 2555-EZ, line 18; and Form 4563, line 15, and Exclusion of income from Puerto Rico
	6	Add lines 4 and 5
	7	Enter \$125,000 (\$250,000 if married filing jointly) 7
	8	Is the amount on line 6 more than the amount on line 7? No. Enter the amount from line 3 above on Schedule A, line 7. Do not complete the rest of this worksheet.
		Yes. Subtract line 7 from line 6 8
	9	Divide the amount on line 8 by \$10,000. Enter the result as a decimal (rounded to at least three places). If the result is 1.000 or more, enter 1.000
	10	Multiply line 3 by line 9
	11	Deduction for new motor vehicle taxes. Subtract line 10 from line 3. Enter the result here and on Schedule A, line 7
		here and on Schedule A, line 7