

Label

(See instructions on page 14.)

Use the IRS label.

Otherwise, please print or type.

Presidential

Election Campaign

L A B E L H E R E	For the year Jan. 1-Dec. 31, 2009, or other tax year beginning _____, 2009, ending _____, 20____		OMB No. 1545-0074
	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.

 You Spouse**Filing Status**

Check only one box.

1 <input type="checkbox"/> Single	4 <input type="checkbox"/> 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. ►
2 <input type="checkbox"/> Married filing jointly (even if only one had income)	
3 <input type="checkbox"/> Married filing separately. Enter spouse's SSN above and full name here. ►	5 <input type="checkbox"/> Qualifying widow(er) with dependent child (see page 16)

ExemptionsIf more than four dependents, see page 17 and check here ►

6a <input type="checkbox"/> Yourself. If someone can claim you as a dependent, do not check box 6a	6b <input type="checkbox"/> Spouse	6c Dependents:	(2) Dependent's social security number (3) Dependent's relationship to you (4) <input checked="" type="checkbox"/> if qualifying child for child tax credit (see page 17)			Boxes checked on 6a and 6b
(1) First name	Last name					
d Total number of exemptions claimed						

 Add numbers on lines above ►
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.

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	
9a Ordinary dividends. Attach Schedule B if required	9a
b Qualified dividends (see page 22)	9b
10 Taxable refunds, credits, or offsets of state and local income taxes (see page 23)	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 page 24)	15b
16a Pensions and annuities 16a b Taxable amount (see page 25)	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 page 27)	19
20a Social security benefits 20a b Taxable amount (see page 27)	20b
21 Other income. List type and amount (see page 29)	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 page 29)	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 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 page 34)	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
37 Subtract line 36 from line 22. This is your adjusted gross income ►	37