1040A	U.S	5. Individual Income T	ax Return	(99)	200	16 IRS U	lse Only-	–Do	not wri	te or staple in this s	space.		
Label	Your fir	rst name and initial	Last name				,	`	(OMB No. 1545-007	4		
Label (See page 18.)								Υ	our so	cial security number	er		
Α													
B	If a joir	nt return, spouse's first name and initial	Last name					S	pouse's	social security nun	nber		
Use the								<u> </u>					
Otherwise,		address (number and street). If you have a P	P.O. box, see page 18	l.		Ap	ot. no.			u must enter			
please print	-								you	ur SSN(s) above.			
or type.	City, to	own or post office, state, and ZIP code. If you have a foreign address, see page 18.								Checking a box below will not change your tax or refund.			
Presidential Campaign	Cha	al bare if you are your analyse if f	filing injusts was	+ ¢0 +0 00	to this	fund (ass no		cn	Ĕ,				
		ck here if you, or your spouse if f	ning jointly, war	it \$3 to go						You U Spor			
Filing	1 _	☐ Single ☐ Marriad filling in inth (over if on	محمدا لمحمل مصما		4 📙	Head of nouse	TIW) DION	n qu	ialitying Lehild k	person). (See pag out not your deper	19.) ndent		
status	2	☐ Married filing jointly (even if on	•			enter this child				out not your deper	iuciii,		
Check only one box.	3 L	Married filing separately. Enter full name here. ►	spouse's 33N	above and					_	ent child (see page	e 20)		
Exemptions	6a		can claim vo	ıı as a d			. ,		<u> </u>	Boxes			
Exemplions	, Ju	box 6a.	carr clairr yo	u uo u u	оролю	2011t, 40 110	• 01100		}	checked on 6a and 6b			
	b	□ Spouse							<u>J</u>	No. of children			
	С	Dependents:	(2) Depender	nt'e encial	(3) [Dependent's	(4) √if child			on 6c who:			
		(1) First name Last name	security n		rela	ationship to	tax c	redit	(see	lived with you			
If more than six		(1) First flame Last flame				you	pa	ge 2	21)	 did not live 			
dependents, see page 21.			1 1					$\frac{\sqcup}{\Box}$		with you due to divorce or			
13								$\frac{\sqcup}{\sqcap}$		separation (see page 22)			
								H					
								H		Dependents on 6c not			
								Ħ		entered above			
										Add numbers			
	d	Total number of exemption	ns claimed.							on lines above ▶	<u> </u>		
Income													
Attach	_7_	Wages, salaries, tips, etc.	Attach Form	n(s) W-2.					7				
Form(s) W-2													
here. Also		Taxable interest. Attach S Tax-exempt interest. Do			1. 8b				8a				
attach Form(s)		Ordinary dividends. Attach				1			- 9a				
1099-R if tax		Qualified dividends (see p		required	9b	<u> </u>			Ju				
was withheld.	10	Capital gain distributions		i).	- 00	<u> </u>			10				
If you did not	11a	IRA		,	11b	Taxable an	nount						
get a W-2, see page 24.		distributions. 11a				(see page 2			11b				
-	12a	Pensions and			12b	Taxable an	nount						
Enclose, but do not attach, any		annuities. 12a				(see page 2	26).		12b				
payment.	13	Unemployment compensa	ation, Alaska	Perman	ent Fu	und dividen	ds, an	d					
		jury duty pay.							13		-		
	14a	Social security			14b	Taxable an			4.41				
		benefits. 14a				(see page 2	∠0).		14b				
	15	Add lines 7 through 14b (fa	ar riaht colum	n). This i	s vour	total incor	ne.		15				
Adjusted	16	Penalty on early withdraw			o you	10101		_	10				
gross	20\												
income	17	IRA deduction (see page 28).							_				
iiicoiii c	18	Student loan interest deduction (see page 31). 18							_				
	19	Jury duty pay you gave	your emplo	yer (see		<u> </u>							
		page 31).			19				_				
	20	Add lines 16 through 19.	These are yo	ur total	adjus	tments.			20				
	04	Subtract line 20 from line	15 This is u	our odi	icto 4	aroce inco	mc		21				
	21	Subtract line 20 from line	io. iilis is y	our auju	เอเซน	gross IIICO	iiie.		21				

Department of the Treasury-Internal Revenue Service

Form

Form 1040A	(2006			F	age :
Tax,	22	Enter the amount from line 21 (adjusted gross income).		22	
credits, and		Check]	
payments Standard	b	If you are married filing separately and your spouse itemizes deductions, see page 32 and check here ▶ 23b			
Deduction for—	24	Enter your standard deduction (see left margin).			
People who	25	Subtract line 24 from line 22. If line 24 is more than line 22, enter -0		25	
checked any	26	If line 22 is over \$112,875, or you provided housing to a person displaced by Hurricane I	Katrina.		
box on line 23a or 23b or		see page 32. Otherwise, multiply \$3,300 by the total number of exemptions claimed on li		26	
	27	Subtract line 26 from line 25. If line 26 is more than line 25, enter -0 This is your taxable income .	27		
see page 32.	28	Tax, including any alternative minimum tax (see page 32).		28	
All others:	29	Credit for child and dependent care expenses.			
Single or Married filing separately, \$5,150		Attach Schedule 2. 29	\perp	_	
	30	Credit for the elderly or the disabled. Attach Schedule 3. 30		_	
Married filing	31	Education credits. Attach Form 8863.		_	
jointly or Qualifying	32	Retirement savings contributions credit. Attach Form 8880. 32		_	
widow(er),	33	Child tax credit (see page 37). Attach			
\$10,300		Form 8901 if required. 33		_	
Head of household,	34	Add lines 29 through 33. These are your total credits.		34	
\$7,550	35	Subtract line 34 from line 28. If line 34 is more than line 28, enter -0		35	
	36	Advance earned income credit payments from Form(s) W-2, box 9.		36	
	37	Add lines 35 and 36. This is your total tax.	<u> </u>	37	
	38	Federal income tax withheld from Forms W-2 and 1099. 38		_	
	39	2006 estimated tax payments and amount			
If you have		applied from 2005 return. 39		_	
a qualifying child, attach	40a		\bot	_	
Schedule	b	Nontaxable combat pay election. 40b			
EIC.	41	Additional child tax credit. Attach Form 8812. 41	+	_	
	42	Credit for federal telephone excise tax paid. Attach Form 8913 if required. 42			
	43	Add lines 38, 39, 40a, 41, and 42. These are your total payments.		43	
Refund	44	If line 43 is more than line 37, subtract line 37 from line 43. This is the amount you overpaid.		44	
Direct	45a	Amount of line 44 you want refunded to you. If Form 8888 is attached, check here		45a	
deposit? See page 53 and fill in 45b, 45c, and 45d or Form 8888.	▶ b	Routing number			•
	▶ d	Account number			
	46	Amount of line 44 you want applied to your 2007 estimated tax. 46		-	
Amount	47	Amount you owe. Subtract line 43 from line 37. For details on how	•	_	
you owe		to pay, see page 54.		47	
you owe	48	Estimated tax penalty (see page 54). 48			
Third party	. [Do you want to allow another person to discuss this return with the IRS (see page 55)?	Yes. C	Complete the following.	N
		Designee's Phone Pers	onal ider	ntification	
designee			ber (PIN)	► L	
Sign		Under penalties of perjury, I declare that I have examined this return and accompanying schedules and s knowledge and belief, they are true, correct, and accurately list all amounts and sources of income I receive			
here	(of preparer (other than the taxpayer) is based on all information of which the preparer has any knowledge		•	
Joint return?	•	our signature Date Your occupation		Daytime phone numb	oer
See page 18.	-			()	
Keep a copy for your records.	5	Spouse's signature. If a joint return, both must sign. Date Spouse's occupation			
Paid		Preparer's Date Check if		Preparer's SSN or PTIN	
preparer's	_	self-employ			
use only)	Firm's name (or vours if self-employed),		1	
		address, and ZİP code Phor	ne no.	()	