1040		artment of the Treasury—Internal Revenue S 5. Individual Income Tax Re		(99)			t write or	staple in this space.		
	_	the year Jan. 1-Dec. 31, 2008, or other tax year begin		3, ending		20		MB No. 1545-0074		
Label		ur first name and initial	Your social security number							
(See L										
instructions A	lf a	a joint return, spouse's first name and initial	Spouse's social security number							
E		If a joint return, spouse's first name and initial Last name								
label.	Но	Home address (number and street). If you have a P.O. box, see page 14. Apt. no.						ou must enter		
Otherwise, E				our SSN(s) above.						
please print R or type. E	Ci	y, town or post office, state, and ZIP code. If	Checki	ng a box below will	not					
Presidential						ノ		your tax or refund.		
Election Campaig	1 🕨 (Check here if you, or your spouse if filing	jointly, want \$3 to go	o to this fu	nd (see p	age 14) 🕨		🛛 You 🗌 Spous	se	
	1	Single	4	Head	of househ	old (with o	qualifying	g person). (See page	e 15.) li	
Filing Status	2	☐ Married filing jointly (even if only one	had income)	the q	ualifying pe	erson is a	child bu	t not your dependent	t, enter	
Check only	3	Married filing separately. Enter spous								
one box.		and full name here. ► 5 Qualifying widow(er) with dependent child (see page 16)								
Exampliana	6a	Yourself. If someone can claim yo	1 /	o not chec	k box 6a		}	on 6a and 6b -		
Exemptions	b	Spouse			pendent's	 (4)√if qua	<u> </u>	No. of children on 6c who:		
	С	Dependents:	(2) Dependent's social security number	er relati	onship to	child for ch	ild tax	 lived with you _ 		
		(1) First name Last name			you	credit (see pa	age 17)_	 did not live with you due to divorce 		
If more than four								or separation (see page 18)		
dependents, see								Dependents on 6c		
page 17.								not entered above _	_	
	d	Total number of exemptions claimed						Add numbers on lines above ►		
	7	Wages, salaries, tips, etc. Attach Form					7			
Income	, 8a	Taxable interest. Attach Schedule B if	.,				8a			
Attach Form(s)	b	Tax-exempt interest. Do not include o	·	8b						
W-2 here. Also	9a									
attach Forms W-2G and	b	Qualified dividends (see page 21)								
1099-R if tax	10	Taxable refunds, credits, or offsets of s	10							
was withheld.	11	Alimony received	11							
	12	Business income or (loss). Attach Sche	12							
	13	Capital gain or (loss). Attach Schedule D if required. If not required, check here								
If you did not	14	Other gains or (losses). Attach Form 47			• •		14			
get a W-2, see page 21.	15a	IRA distributions 15a		Taxable am	· ·	o ,	15b			
	16a	Pensions and annuities 16a		Taxable am		. ,	16b 17			
Enclose, but do not attach, any payment. Also,	17	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E Farm income or (loss). Attach Schedule F								
	18	I to see also see to see a set to see all see					18 19			
please use Form 1040-V.	19 20a	Social security benefits . 20a	 . b				20b			
Form 1040-v.	20a	Social security benefits . 20a b Taxable amount (see page 26) Other income. List type and amount (see page 28)								
	22	Add the amounts in the far right column					22			
	23	Educator expenses (see page 28)		23						
Adjusted	24	Certain business expenses of reservists, pe	erforming artists, and							
Gross		fee-basis government officials. Attach For	•	24						
Income	25	Health savings account deduction. Atta	ich 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 qual		28			-			
	29	Self-employed health insurance deduc	,	29						
	30	Penalty on early withdrawal of savings		30 31a						
	31a	, i i		312						
	32	IRA deduction (see page 30)		33						
	33 34	Student loan interest deduction (see pa Tuition and fees deduction. Attach For		34						
	34 35	Domestic production activities deduction.		35						
	36	Add lines 23 through 31a and 32 through					36			
	37									

Form 1040 (2008)			Page 2					
Тах	38	Amount from line 37 (adjusted gross income)	38					
and	39a							
Credits	5 5a	if: Spouse was born before January 2, 1944, ☐ Blind. (checked ► 39a						
Orcuits	h	If your spouse itemizes on a separate return or you were a dual-status alien, see page 34 and check here > 39b						
	b							
Standard Deduction	C	Check if standard deduction includes real estate taxes or disaster loss (see page 34) ► 39c	40					
for—	40	Itemized deductions (from Schedule A) or your standard deduction (see left margin).	41					
People who	41	Subtract line 40 from line 38						
checked any box on line	42	If line 38 is over \$119,975, or you provided housing to a Midwestern displaced individual, see						
39a, 39b, or		page 36. Otherwise, multiply \$3,500 by the total number of exemptions claimed on line 6d .	43					
39c or who can be	43	Taxable income. Subtract line 42 from line 41. If line 42 is more than line 41, enter -0-						
claimed as a	44	Tax (see page 36). Check if any tax is from: a Form(s) 8814 b Form 4972 .						
dependent, see page 34.	45	Alternative minimum tax (see page 39). Attach Form 6251	45					
All others:	46	Add lines 44 and 45	46					
Single or	47	Foreign tax credit. Attach Form 1116 if required	_					
Married filing separately,	48	Credit for child and dependent care expenses. Attach Form 2441						
\$5,450	49	Credit for the elderly or the disabled. Attach Schedule R 49	_					
Married filing	50	Education credits. Attach Form 8863	_					
jointly or Qualifying	51	Retirement savings contributions credit. Attach Form 8880 . 51						
widow(er),	52	Child tax credit (see page 42). Attach Form 8901 if required . 52	_					
\$10,900	53	Credits from Form: a 8396 b 8839 c 5695 .						
Head of household,	54	Other credits from Form: a 3800 b 8801 c 54						
\$8,000	55	Add lines 47 through 54. These are your total credits						
	56	Subtract line 55 from line 46. If line 55 is more than line 46, enter -0	56					
Other	57	Self-employment tax. Attach Schedule SE	57					
Taxes	58	Unreported social security and Medicare tax from Form: \mathbf{a} 4137 \mathbf{b} 8919	58					
Гахоо	59	Additional tax on IRAs, other qualified retirement plans, etc. Attach Form 5329 if required	59					
	60	Additional taxes: a AEIC payments b Household employment taxes. Attach Schedule F						
	61	Add lines 56 through 60. This is your total tax	61					
Payments	62	Federal income tax withheld from Forms W-2 and 1099 62	_					
	63	2008 estimated tax payments and amount applied from 2007 return	_					
If you have a	_64a	Earned income credit (EIC)						
qualifying child, attach	b	Nontaxable combat pay election 64b						
Schedule EIC.	65	Excess social security and tier 1 RRTA tax withheld (see page 61) 65	_					
	66	Additional child tax credit. Attach Form 8812	_					
	67	Amount paid with request for extension to file (see page 61) 67	_					
	68	Credits from Form: a 2439 b 4136 c 8801 d 8885 68	_					
	69	First-time homebuyer credit. Attach Form 5405	_					
	70	Recovery rebate credit (see worksheet on pages 62 and 63). 70						
	71	Add lines 62 through 70. These are your total payments	71					
Refund	72	If line 71 is more than line 61, subtract line 61 from line 71. This is the amount you overpaid	72					
Direct deposit?	73a	Amount of line 72 you want refunded to you. If Form 8888 is attached, check here ►	73a					
See page 63 and fill in 73b,	▶ b	Routing number C Type: C C Checking						
73c, and 73d,	► d	Account number						
or Form 8888.	74	Amount of line 72 you want applied to your 2009 estimated tax						
Amount	75	Amount you owe. Subtract line 71 from line 61. For details on how to pay, see page 65	75					
You Owe	76	Estimated tax penalty (see page 65)						
Third Party	Do	you want to allow another person to discuss this return with the IRS (see page 66)?	s. Complete the following. U No					
Designee		signee's Phone Personal ident ne ► no. ► () number (PIN)	dification					
Sign		name no. () number (PIN) Inder penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and						
Here	bel	ief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of	f which preparer has any knowledge.					
Joint return?	Your signature Date Your occupation Daytime phone number							
See page 15.								
Keep a copy	Sp	ouse's signature. If a joint return, both must sign. Date Spouse's occupation						
for your records.								
	Pre	parer's Date Check if	Preparer's SSN or PTIN					
Paid Dranovar's		nature Check if self-employed]					
Preparer's		n's name (or EIN						
Use Only	you	urs if self-employed), Phone no.	()					