

Label

(See instructions.)

Use the IRS label. Otherwise, please print or type.

Presidential Election Campaign

L
A
B
E
L

H
E
R
E

Your first name and initial DAVID M		Last name GUTE	
If a joint return, spouse's first name and initial		Last name	
Home address (number and street). If you have a P.O. box, see instructions. [REDACTED]			Apt. no.
City, town or post office, state, and ZIP code. If you have a foreign address, see instructions. [REDACTED] IL [REDACTED]			

Your social security number

Spouse's social security number

▲ You must enter your SSN(s) above. ▲

Checking a box below will not change your tax or refund

Check here if you, or your spouse if filing jointly, want \$3 to go to this fund (see page 16) ▶ You Spouse

Filing Status

Check only one box.

- 1 Single
- 2 Married filing jointly (even if only one had income)
- 3 Married filing separately. Enter spouse's SSN above and full name here. ▶
- 4 Head of household (with qualifying person). (See instr.) if the qualifying person is a child but not your dependent, enter this child's name here. ▶
- 5 Qualifying widow(er) with dependent child (see instructions)

Exemptions

6a <input checked="" type="checkbox"/> Yourself. If someone can claim you as a dependent, do not check box 6a	Boxes checked on 6a and 6b	1			
b <input type="checkbox"/> Spouse	No. of children on 6c who:	1			
c Dependents:					
(1) First name	Last name	(2) Dependent's social security number	(3) Dependent's relationship to you	(4) <input checked="" type="checkbox"/> If qualifying child for credit (see instr.)	
[REDACTED]	[REDACTED]	[REDACTED]	Daughter		
d Total number of exemptions claimed					
				Add numbers on lines above	2

Income

Attach Form(s) W-2 here. Also attach Form(s) W-2G and 1099-R if tax was withheld.

If you did not get a W-2, see instructions.

Enclose, but do not attach, any payment. Also, please use Form 1040-V.

7 Wages, salaries, tips, etc. Attach Form(s) W-2	7	0
8a Taxable interest. Attach Schedule B if required	8a	13
b Tax-exempt interest. Do not include on line 8a	8b	0
9a Ordinary dividends. Attach Schedule B if required	9a	0
b Qualified dividends (see instructions)	9b	0
10 Taxable refunds, credits, or offsets of state and local income taxes (see instructions)	10	0
11 Alimony received	11	0
12 Business income or (loss). Attach Schedule C or C-EZ	12	26,748
13 Capital gain or (loss). Attach Schedule D if required. If not required, check here	13	0
14 Other gains or (losses). Attach Form 4797	14	0
15a IRA distributions	15a	0
b Taxable amount (see instructions)	15b	0
16a Pensions and annuities	16a	0
b Taxable amount (see instructions)	16b	0
17 Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E	17	0
18 Farm income or (loss). Attach Schedule F	18	0
19 Unemployment compensation	19	0
20a Social security benefits	20a	0
b Taxable amount (see instructions)	20b	0
21 Other income. List type and amount (see instructions)	21	0
22 Add the amounts in the far right column for lines 7 through 21. This is your total income	22	26,761
23 Educator expenses (see instructions)	23	0
24 Certain business expenses of reservists, performing artists, and fee-basis government officials. Attach Form 2106 or 2106-EZ	24	0
25 Health savings account deduction. Attach Form 8889	25	0
26 Moving expenses. Attach Form 3903	26	0
27 One-half of self-employment tax. Attach Schedule SE	27	1,890
28 Self-employed SEP, SIMPLE, and qualified plans	28	0
29 Self-employed health insurance deduction (see instructions)	29	3,238
30 Penalty on early withdrawal of savings	30	0
31a Alimony paid b Recipient's SSN ▶	31a	0
32 IRA deduction (see instructions)	32	501
33 Student loan interest deduction (see instructions)	33	0
34 Tuition and fees deduction (see instructions)	34	0
35 Domestic production activities deduction. Attach Form 8903	35	0
36 Add lines 23 through 31a and 32 through 35	36	5,629
37 Subtract line 36 from line 22. This is your adjusted gross income	37	21,132

Tax and Credits

Standard Deduction for—

• People who checked any box on line 39a or 39b or who can be claimed as a dependent, see instructions.

• All others:

Single or Married filing separately \$5,000

Married filing jointly or Qualifying widow(er), \$10,000

Head of household, \$7,300

38	Amount from line 37 (adjusted gross income)		38	21,132
39a	Check <input type="checkbox"/> You were born before January 2, 1941, <input type="checkbox"/> Blind, <input type="checkbox"/> Total boxes checked <input type="checkbox"/> 0 if <input type="checkbox"/> Spouse was born before January 2, 1941, <input type="checkbox"/> Blind, <input type="checkbox"/> Total boxes checked <input type="checkbox"/> 0			
b	If your spouse itemizes on a separate return, or you were a dual-status alien, see instructions and check here <input type="checkbox"/> 39b			
40	Itemized deductions (from Schedule A) or your standard deduction (see left margin)		40	21,999
41	Subtract line 40 from line 38		41	-867
42	If line 38 is over \$109,475, or you provided housing to a person displaced by Hurricane Katrina, see instructions. Otherwise, multiply \$3,200 by the total number of exemptions claimed on line 6d.		42	6,400
43	Taxable income. Subtract line 42 from line 41. If line 42 is more than line 41, enter -0-		43	0
44	Tax (see instructions). Check if any tax is from a <input type="checkbox"/> Form(s) 8814 b <input type="checkbox"/> Form 4872		44	0
45	Alternative minimum tax (see instructions). Attach Form 6251		45	0
46	Add lines 44 and 45		46	0
47	Foreign tax credit. Attach Form 1116 if required	47	0	
48	Credit for child and dependent care expenses. Attach Form 2441	48		
49	Credit for the elderly or the disabled. Attach Schedule R	49		
50	Education credits. Attach Form 8863	50		
51	Retirement savings contributions credit. Attach Form 8880	51	0	
52	Child tax credit (see instructions). Attach Form 8901 if required	52		
53	Adoption credit. Attach Form 8839	53		
54	Credits from: a <input type="checkbox"/> Form 8396 b <input type="checkbox"/> Form 8859	54	0	
55	Other credits. Check applicable box(es): a <input type="checkbox"/> Form 3800 b <input type="checkbox"/> Form 8801 c <input type="checkbox"/> Form	55	0	
56	Add lines 47 through 55. These are your total credits		56	0
57	Subtract line 56 from line 46. If line 56 is more than line 46, enter -0-		57	0

Other Taxes

58	Self-employment tax. Attach Schedule SE		58	3,779
59	Social security and Medicare tax on tip income not reported to employer. Attach Form 4137		59	0
60	Additional tax on IRAs, other qualified retirement plans, etc. Attach Form 5329 if required		60	0
61	Advance earned income credit payments from Form(s) W-2		61	0
62	Household employment taxes. Attach Schedule H		62	0
63	Add lines 57 through 62. This is your total tax		63	3,779

Payments

If you have a qualifying child, attach Schedule EIC.

64	Federal income tax withheld from Forms W-2 and 1099	64	0	
65	2005 estimated tax payments and amount applied from 2004 return	65	0	
66a	Earned income credit (EIC)	66a	984	
b	Nontaxable combat pay election <input type="checkbox"/> 66b 0			
67	Excess social security and tier 1 RRTA tax withheld (see instructions)	67	0	
68	Additional child tax credit. Attach Form 8812	68		
69	Amount paid with request for extension to file (see instructions)	69		
70	Payments from: a <input type="checkbox"/> Form 2439 b <input type="checkbox"/> Form 4136 c <input type="checkbox"/> Form 8885	70	0	
71	Add lines 64, 65, 66a, and 67 through 70. These are your total payments		71	984

Refund

Direct deposit? See instructions and fill in 73b, 73c, and 73d.

72	If line 71 is more than line 63, subtract line 63 from line 71. This is the amount you overpaid		72	
73a	Amount of line 72 you want refunded to you		73a	
b	Routing number XXXXXXXXXXXX <input type="checkbox"/> c Type: <input type="checkbox"/> Checking <input type="checkbox"/> Savings			
d	Account number XXXXXXXXXXXXXXXXXXXX			
74	Amount of line 72 you want applied to your 2006 estimated tax	74		

Amount You Owe

75	Amount you owe. Subtract line 71 from line 63. For details on how to pay, see the instructions		75	2,795
76	Estimated tax penalty (see instructions)	76	0	

Third Party Designee

Do you want to allow another person to discuss this return with the IRS (see instructions)? Yes. Complete the following No

Designee's name Phone no. Personal identification number (PIN)

Sign Here

Joint return? See instructions.

Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Your signature Date Your occupation **BILINGUAL TRANSLATOR** Daytime phone number