

**Income Tax Return for Single and
Joint Filers With No Dependents (O) 2005**

OMB No. 1545-0074

 Form
1040EZ
Label

(See page 11.)

Use the IRS label.

Otherwise, please print or type.

 Presidential
 Election
 Campaign
 (page 12)

LABEL HERE	Your first name and initial <i>LACEY</i>	Last name <i>Thompson</i>
	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 page 11.	
		Apt. no.
City, town or post office, state, and ZIP code. If you have a foreign address, see page 11.		

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 a joint return, want \$3 to go to this fund? You Spouse
Income
 Attach
 Form(s) W-2
 here.

 Enclose, but
 do not attach,
 any payment.

1	Wages, salaries, and tips. This should be shown in box 1 of your Form(s) W-2. Attach your Form(s) W-2.	1	-0-
2	Taxable interest. If the total is over \$1,500, you cannot use Form 1040EZ.	2	-0-
3	Unemployment compensation and Alaska Permanent Fund dividends (see page 13).	3	
4	Add lines 1, 2, and 3. This is your adjusted gross income .	4	-0-
5	If someone can claim you (or your spouse if a joint return) as a dependent, check the applicable box(es) below and enter the amount from the worksheet on back. <input type="checkbox"/> You <input type="checkbox"/> Spouse If someone cannot claim you (or your spouse if a joint return), enter \$8,200 if single ; \$16,400 if married filing jointly . See back for explanation.	5	8,200.00
6	Subtract line 5 from line 4. If line 5 is larger than line 4, enter -0-. This is your taxable income .	6	-0-

Payments and tax

7	Federal income tax withheld from box 2 of your Form(s) W-2.	7	328.89
8a	Earned income credit (EIC).	8a	
8b	Nontaxable combat pay election.	8b	
9	Add lines 7 and 8a. These are your total payments .	9	328.89
10	Tax. Use the amount on line 6 above to find your tax in the tax table on pages 24-32 of the booklet. Then, enter the tax from the table on this line.	10	-0-

Refund
 Have it directly
 deposited! See
 page 18 and fill
 in 11b, 11c,
 and 11d.

11a	If line 9 is larger than line 10, subtract line 10 from line 9. This is your refund .	11a	328.89
b	Routing number	c	Type: <input type="checkbox"/> Checking <input type="checkbox"/> Savings
d	Account number		

Amount you owe

12	If line 10 is larger than line 9, subtract line 9 from line 10. This is the amount you owe . For details on how to pay, see page 19.	12	
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Third party designee
 Do you want to allow another person to discuss this return with the IRS (see page 19)? Yes. Complete the following. No

 Designee's name Phone no. Personal identification number (PIN)
Sign here
 Joint return?
 See page 11.
 Keep a copy
 for your
 records.

Under penalties of perjury, I declare that I have examined this return, and to the best of my knowledge and belief, it is true, correct, and accurately lists all amounts and sources of income I received during the tax year. Declaration of preparer (other than the taxpayer) is based on all information of which the preparer has any knowledge.

Your signature <i>Lacey Thompson</i>	Date 2/28/06	Your occupation Nevada Citizen	Daytime phone number ()
Spouse's signature. If a joint return, both must sign.	Date	Spouse's occupation	

Substitute for Form W-2, Wage and Tax Statement, or Form 1099-R, Distributions From Pensions, Annuities, Retirement or Profit-Sharing Plans, IRAs, Insurance Contracts, etc.
 Attach to Form 1040, 1040A, 1040-EZ or 1040X.

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1 Type or print your first name and middle initial. Last name
Lacey M. Thompson

2 Social security number (SSN)
 [Redacted]

3 Address
 [Redacted]

4 Enter year in space provided and check one box. For the tax year ending December 31, *2015*.
 I have been unable to obtain (or have received an incorrect) Form W-2 OR Form 1099-R.
 I have notified the IRS of this fact. The amounts shown on line 7 are my best estimates for all wages or payments made to me and tax withheld by my employer or payer named on line 5.

5 Employer's or payer's name, address and ZIP code
 6 Employer's or payer's identification number (if any)
 [Redacted]

7(A) Form W-2. Enter wages, tips, other compensation, and taxes withheld.

a Wages, tips, and other compensation	<u>-0-</u>	g State income tax withheld	<u>-0-</u>
b Social security wages	<u>-0-</u>	(Name of state)	
c Medicare wages and tips	<u>-0-</u>	h Local income tax withheld	<u>-0-</u>
d Advance EIC payment		(Name of locality)	
e Social security tips	<u>-0-</u>	i Social security tax withheld	<u>108.76</u>
f Federal income tax withheld	<u>194.69</u>	j Medicare tax withheld	<u>25.44</u>

7(B) Form 1099-R. Enter distributions from pensions, annuities, retirement/profit-sharing plans, IRAs, insurance contracts, etc.

1 Gross distribution	<u>-0-</u>	4 Federal income tax withheld	<u>-0-</u>
2a Taxable amount	<u>-0-</u>	5 State income tax withheld	<u>-0-</u>
2b Taxable amount not determined	<input type="checkbox"/>	6 Local income tax withheld	<u>-0-</u>
Total distribution	<input type="checkbox"/>	7 Employee contributions	<u>-0-</u>
3 Capital gain (included in 2a)	<u>-0-</u>	8 Distribution codes	

8 How did you determine the amounts in lines 7(A) and 7(B) above?
Company provided Records and the Statutory language inherent IRC Sec. 3401(a) + 3121(a) and others.

9 Explain your efforts to obtain Form W-2, Form 1099-R, or Form W-2c, Corrected Wage and Tax Statement.
Request made but company refuses to issue correct forms, listing payment as "wages" defined in 3401(a) + 3121(a). The amounts listed on the W-2, as withheld are correct, however.

Under penalties of perjury, I declare that I have examined this statement, and to the best of my knowledge and belief, it is true, correct, and complete.

Sign Here
 Signature *[Signature]* Date *2/25/06*