

Label
(See page 17.)

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 Y	Last name S
	If a joint return, spouse's first name and initial R	Last name S
	Home address (number and street). If you have a P.O. box, see page 17. Some Road.	
	City, town or post office, state, and ZIP code. If you have a foreign address, see page 17. Some Town, Tennessee	

OMB No. 1545-0074

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.

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 page 18). 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 page 19)

Exemptions

If more than six dependents, see page 20.

6a Yourself. If someone can claim you as a dependent, do not check box 6a.

b Spouse

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 child tax credit (see page 20)
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

d Total number of exemptions claimed. 2

Income

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

If you did not get a W-2, see page 24.

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	0
b	Tax-exempt interest. Do not include on line 8a.	8b	
9a	Ordinary dividends. Attach Schedule B if required.	9a	0
b	Qualified dividends (see page 25).	9b	
10	Capital gain distributions (see page 25).	10	0
11a	IRA distributions.	11a	0
11b	Taxable amount (see page 25).	11b	0
12a	Pensions and annuities.	12a	0
12b	Taxable amount (see page 26).	12b	0
13	Unemployment compensation in excess of \$2,400 per recipient and Alaska Permanent Fund dividends (see page 28).	13	0
14a	Social security benefits.	14a	0
14b	Taxable amount (see page 28).	14b	0
15	Add lines 7 through 14b (far right column). This is your total income.	15	0

Adjusted gross income

16	Educator expenses (see page 30).	16	0
17	IRA deduction (see page 30).	17	0
18	Student loan interest deduction (see page 32).	18	0
19	Tuition and fees deduction. Attach Form 8917.	19	0
20	Add lines 16 through 19. These are your total adjustments.	20	0
21	Subtract line 20 from line 15. This is your adjusted gross income.	21	0

Tax, credits, and payments	22	Enter the amount from line 21 (adjusted gross income).	22	0
	23a	Check <input type="checkbox"/> You were born before January 2, 1945, <input type="checkbox"/> Blind if: <input type="checkbox"/> Spouse was born before January 2, 1945, <input type="checkbox"/> Blind } Total boxes checked ▶ 23a <input type="checkbox"/>		
	b	If you are married filing separately and your spouse itemizes deductions, see page 34 and check here ▶ 23b <input type="checkbox"/>		
Standard Deduction for— • People who checked any box on line 23a, 23b, or 24b or who can be claimed as a dependent, see page 34. • All others: Single or Married filing separately, \$5,700 Married filing jointly or Qualifying widow(er), \$11,400 Head of household, \$8,350	24a	Enter your standard deduction (see left margin).	24a	11,400
	b	If you are increasing your standard deduction by certain real estate taxes or new motor vehicle taxes, attach Schedule L and check here (see page 34) ▶ 24b <input type="checkbox"/>		
	25	Subtract line 24a from line 22. If line 24a is more than line 22, enter -0-.	25	0
	26	Exemptions. If line 22 is \$125,100 or less and you did not provide housing to a Midwestern displaced individual, multiply \$3,650 by the number on line 6d. Otherwise, see page 34.	26	7,300
	27	Subtract line 26 from line 25. If line 26 is more than line 25, enter -0-. This is your taxable income .	27	0
	28	Tax , including any alternative minimum tax (see page 35).	28	0
	29	Credit for child and dependent care expenses. Attach Form 2441.	29	0
	30	Credit for the elderly or the disabled. Attach Schedule R.	30	0
	31	Education credits from Form 8863, line 29.	31	0
	32	Retirement savings contributions credit. Attach Form 8880.	32	0
33	Child tax credit (see page 38).	33	0	
34	Add lines 29 through 33. These are your total credits .	34	0	
35	Subtract line 34 from line 28. If line 34 is more than line 28, enter -0-.	35	0	
36	Advance earned income credit payments from Form(s) W-2, box 9.	36	0	
37	Add lines 35 and 36. This is your total tax .	37	0	
38	Federal income tax withheld from Forms W-2 and 1099.	38	324	
39	2009 estimated tax payments and amount applied from 2008 return.	39	0	
40	Making work pay and government retiree credits. Attach Schedule M.	40	0	
41a	Earned income credit (EIC).	41a	0	
b	Nontaxable combat pay election. 41b 0			
42	Additional child tax credit. Attach Form 8812.	42	0	
43	Refundable education credit from Form 8863, line 16.	43	0	
44	Add lines 38, 39, 40, 41a, 42, and 43. These are your total payments .	44	324	
Refund	45	If line 44 is more than line 37, subtract line 37 from line 44. This is the amount you overpaid .	45	324
	46a	Amount of line 45 you want refunded to you . If Form 8888 is attached, check here ▶ <input type="checkbox"/> 46a 324		
Direct deposit? See page 64 and fill in 46b, 46c, and 46d or Form 8888.	b	Routing number <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> ▶ c Type: <input type="checkbox"/> Checking <input type="checkbox"/> Savings		
	d	Account number <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>		
47	Amount of line 45 you want applied to your 2010 estimated tax .	47	0	
Amount you owe	48	Amount you owe. Subtract line 44 from line 37. For details on how to pay, see page 66.	48	0
	49	Estimated tax penalty (see page 66).	49	0

Third party designee	Do you want to allow another person to discuss this return with the IRS (see page 67)? <input type="checkbox"/> Yes. Complete the following. <input checked="" type="checkbox"/> No		
	Designee's name ▶	Phone no. ▶	Personal identification number (PIN) ▶ <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>

Sign here Joint return? See page 17. Keep a copy for your records.	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 accurately list 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	Date	Your occupation Mechanic	Daytime phone number
	Spouse's signature. If a joint return, both must sign.	Date	Spouse's occupation Carpenter	

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.

1 Type or print your first name and middle initial. Y	Last name S	2 Social security number (SSN) XXX-XX-XXXX
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3 Address
Tennessee

4 Enter year in space provided and check one box. For the tax year ending December 31, 2009, 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 or line 8 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 LLC Company Tennessee	6 Employer's or payer's identification number (if known) XX-XXXXXXXX
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7 Form W-2. Enter wages, tips, other compensation, and taxes withheld.

a Wages, tips, and other compensation	0	g State income tax withheld	0
b Social security wages	0	(Name of state)	
c Medicare wages and tips	0	h Local income tax withheld	0
d Advance EIC payment	0	(Name of locality)	
e Social security tips	0	i Social security tax withheld	222.89
f Federal income tax withheld	0	j Medicare tax withheld	52.13

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

a Gross distribution		f Federal income tax withheld	
b Taxable amount		g State income tax withheld	
c Taxable amount not determined <input type="checkbox"/>		h Local income tax withheld	
d Total distribution <input type="checkbox"/>		i Employee contributions	
e Capital gain (included in 8b)		j Distribution codes	

9 How did you determine the amounts on lines 7 and 8 above?
 Company provided records and the statutory language behind IRC sections 3401, 3121, and others.

10 Explain your efforts to obtain Form W-2, Form 1099-R, or Form W-2c, Corrected Wage and Tax Statement.
 None, the W-2 had been issued before "wage" errors were noted. I received no "wages", but the amounts identified as withheld were correct as reflected in 7 above.

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 ▶ _____ Date ▶ _____

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.

1 Type or print your first name and middle initial. Last name **2** Social security number (SSN)
R S XXX-XX-XXXX

3 Address
Tennessee

4 Enter year in space provided and check one box. For the tax year ending December 31, 2009, 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 or line 8 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 known)
LLC Company Tennessee XX-XXXXXXX

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

a Wages, tips, and other compensation	0	g State income tax withheld	0
b Social security wages	0	(Name of state)	
c Medicare wages and tips	0	h Local income tax withheld	0
d Advance EIC payment	0	(Name of locality)	
e Social security tips	0	i Social security tax withheld	39.68
f Federal income tax withheld	0	j Medicare tax withheld	9.28

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

a Gross distribution		f Federal income tax withheld	
b Taxable amount		g State income tax withheld	
c Taxable amount not determined <input type="checkbox"/>		h Local income tax withheld	
d Total distribution <input type="checkbox"/>		i Employee contributions	
e Capital gain (included in 8b)		j Distribution codes	

9 How did you determine the amounts on lines 7 and 8 above?
Company provided records and the statutory language behind IRC sections 3401, 3121, and others.

10 Explain your efforts to obtain Form W-2, Form 1099-R, or Form W-2c, Corrected Wage and Tax Statement.
None, the W-2 had been issued before "wage" errors were noted. I received no "wages", but the amounts identified as withheld were correct as reflected in 7 above.

Sign Here
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.
Signature ▶ _____ Date ▶ _____

R and Y S
Some Road
Some Town, Tennessee xxxxx

1/31/2010

Department of the Treasury
Internal Revenue Service

Re: 2009 Tax Return

Dear Sir/Madam:

Please find enclosed our form 1040A for 2009. Please note that we have attached two forms 4852 correcting improperly documented forms W-2.

This is due to the fact that the private-sector company we worked for in the year 2009 erroneously alleged the payment of “wages” and “gains, profit, or income” as defined in the IRC sections 3401 and 3121.

We are rebutting these false claims, stating that we both worked in the private, non-federally privileged sector in 2009, and we were not “employed” in a “trade or business.”

Under the penalty of perjury, we declare these statements to be correct to the best of our knowledge and belief.

We expect a full and complete refund of our overpayments within 30 days, as specified in the IRC sections 6401-3.

We appreciate that you uphold the rule of the law, as we are dedicated to doing the same.

Sincerely,

Names

Date

Attached: form 1040A
2 forms 4852