Department of the Treasury—Internal Revenue Service Form Income Tax Return for Single and 2007 1040EZ Joint Filers With No Dependents OMB No. 1545-0074 Your first name and initial Your social security number Last name Label (See page 8.) If a joint return, spouse's first name and initial Last name Spouse's social security number Use the IRS label. Home address (number and street). If you have a P.O. box, see page 9. Apt. no. You must enter Otherwise, your SSN(s) above. please print E City, town or post office, state, and ZIP code. If you have a foreign address, see page 9. or type. Checking a box below will not Presidential change your tax or refund. Election Campaign (page 9) Check here if you, or your spouse if a joint return, want \$3 to go to this fund . Spouse Wages, salaries, and tips. This should be shown in box 1 of your Form(s) W-2. Income Attach your Form(s) W-2. 0 00 Attach Form(s) W-2 2 Taxable interest. If the total is over \$1,500, you cannot use Form 1040EZ. 69 00 here. Enclose, but Unemployment compensation and Alaska Permanent Fund dividends (see page 10). 3 0 00 do not attach, any payment. Add lines 1, 2, and 3. This is your adjusted gross income. 4 69 00 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. You Spouse If no one can claim you (or your spouse if a joint return), enter \$8,750 if single; \$17,500 if married filing jointly. See back for explanation. 8750 00 Subtract line 5 from line 4. If line 5 is larger than line 4, enter -0-. This is your taxable income. 00 Federal income tax withheld from box 2 of your Form(s) W-2. 7 663 00 **Payments** 8a Earned income credit (EIC). 8a 0 00 and tax b Nontaxable combat pay election. 8b 0 00 Add lines 7 and 8a. These are your total payments. 9 663 00 Tax. Use the amount on line 6 above to find your tax in the tax table on pages 18-26 of the booklet. Then, enter the tax from the table on this line. 10 00 11a If line 9 is larger than line 10, subtract line 10 from line 9. This is your refund. Refund If Form 8888 is attached, check here 11a 663 00 Have it directly deposited! See page 15 and fill b Routing number Checking in 11b, 11c, and 11d or d Account number Form 8888. Amount If line 10 is larger than line 9, subtract line 9 from line 10. This is you owe the amount you owe. For details on how to pay, see page 16. Do you want to allow another person to discuss this return with the IRS (see page 16)? Yes. Complete the following. V No Third party designee Designee's Personal identification name Sign 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 here on all information of which the preparer has any knowledge. Date Your occupation Daytime phone number Joint return? See page 6. 6-6-2010 Кеер а сору Spouse's signature. If a joint return, both must sign. Date Spouse's occupation for your records.

Form 4852

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.

OMB No. 1545-0074

(Rev. January 2007) Department of the Treasu

spartment of the Treasury ternal Revenue Service		Profit-Sharing Plans, IRAs, Insurance Contracts, etc. ► Attach to Form 1040, 1040A, 1040-EZ, or 1040X.					
	Type or print your f	irst name and middle initial.	Last name ,		2	Social	security number (SSN)
3 /	Address						
he	have been unable	e to obtain (or have receive	ed an incorrect) A F shown on line 7 or I	rear ending December 31, _20 orm W-2 OR ☐ Form 1099-F ine 8 are my best estimates for the 5.	₹.	100	or payments
		er's name, address, and ZI			6		yer's or payer's cation number (if known)
7	Form W.2 Ent	or wages tips other comp	onestion and tower	withheld			
•	 a Wages, tips, b Social secu 	er wages, tips, other comp and other compensation rity wages,	<u>0</u> g				
	 d Advance El 	rages and tips	h	Local income tax withheld (Name of locality)	• •		1
	Social secu Federal income	rity tips	\$305.00	Social security tax withheld Medicare tax withheld		: :	\$68.00
8	Form 1099-R. I	Enter distributions from per	nsions, annuities, ret	irement/profit-sharing plans, IF	RAs, in	suran	ce contracts, etc.
	a Gross distri	bution	f	Federal income tax withheld			
	b Taxable am	ount	g	State income tax withheld			
	c Taxable am	ount not determined .	h	Local income tax withheld			
	d Total distrib	oution	i	Employee contributions .			8
	e Capital gair	(included in 8b)	j	Distribution codes			2
9		ermine the amounts on line		. S.			
0		rts to obtain Form W-2, Fo		W-2c, Corrected Wage and T	ax Sta	temer	nt.
	11.	market and a second control of the second			Market Company	7 TO 17 Co 17	

Sign Here

Signature >

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.

Date > June 6, 2010

1040EZ	Income Tax Return for Single and Joint Filers With No Dependents (99)		OMB No. 1545-0074	
Label (See page 9.) Use the	Your first name and initial Last name Karl If a joint return, spouse's first name and initial Last name	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.		
IRS label. Otherwise,	Home address (number and street). If you have a P.O. box, see page 9. Apt. no.			
please print or type. Presidential Election	R E City, town or post office, state, and ZIP code. If you have a foreign address, see page 9.			
Campaign (page 9)	Check here if you, or your spouse if a joint return, want \$3 to go to this fund	You You	☐ Spouse	
Income	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 00	
Attach Form(s) W-2 here.	2 Taxable interest. If the total is over \$1,500, you cannot use Form 1040EZ.	2	11 00	
Enclose, but do not	3 Unemployment compensation and Alaska Permanent Fund dividends (see page 11).	3	0 00	
attach, any payment.	 Add lines 1, 2, and 3. This is your adjusted gross income. 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. 	4	11 00	
	You Spouse If no one can claim you (or your spouse if a joint return), enter \$8,950 if single; \$17,900 if married filing jointly. See back for explanation.	5	8950 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 00	
Payments	7 Federal income tax withheld from box 2 of your Form(s) W-2.	7	328 00	
and tax	8a Earned income credit (EIC) (see page 12).	8a	0 00	
	b Nontaxable combat pay election. 8b 0 0	-		
	9 Recovery rebate credit (see worksheet on pages 17 and 18). 10 Add lines 7, 8a, and 9. These are your total payments.	9	328 00	
	11 Tax. Use the amount on line 6 above to find your tax in the tax table on pages 28–36 of the booklet. Then, enter the tax from the table on this line.	11	0 00	
Refund	12a If line 10 is larger than line 11, subtract line 11 from line 10. This is your refund. If Form 8888 is attached, check here ▶ □	12a	220 00	
Have it directly deposited! See page 18 and fill in 12b, 12c,	▶ b Routing number		328 00	
and 12d or Form 8888.	▶ d Account number			
Amount you owe	13 If line 11 is larger than line 10, subtract line 10 from line 11. This is the amount you owe. For details on how to pay, see page 19.	- 13		
Third party designee	Designee's Phone Personal id	lentification	e following. 🗹 No	
Sign here	name no. () number (PII Under penalties of perjury, I declare that I have examined this return, and to the best of my knowledge and b accurately lists all amounts and sources of income I received during the tax year. Declaration of preparer (other on all information of which the preparer has any knowledge.	belief, it is true, co		
Joint return? See page 6.	Your signature Date 6~6-ZOIO Your occupation	Daytime (phone number	
Keep a copy for your records.	Spouse's signature. If a joint return, both must sign. Date Spouse's occupation			

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(Rev. January 2007)

Department of the Treasury Internal Revenue Service

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.

OMB No. 1545-0074

have n	sa notifie		all wages or payments 6 Employer's or payer's
11	identification number (f know		
8	Form W-2. Enter wages, tips, other competa Wages, tips, and other compensation	g State income tax withheld . (Name of state) . h Local income tax withheld . (Name of locality) i Social security tax withheld . j Medicare tax withheld sions, annuities, retirement/profit-sharing plans, IRAs f Federal income tax withheld . g State income tax withheld . h Local income tax withheld . i Employee contributions .	\$266.00 \$62.00 s, insurance contracts, etc
	Records reported by		
	Records reported by splain your efforts to obtain Form W-2, For None.	m 1099-R, or Form W-2c, Corrected Wage and Tax	Statement.