

**Label**(See instructions on page 12.)  
Use the IRS label.  
Otherwise, please print or type.

LABEL HERE	For the year Jan. 1-Dec. 31, 2007, or other tax year beginning _____, 2007, ending _____, 20		OMB No. 1545-0074
	Your first name and initial <b>M</b>	Last name <b>H</b>	Your social security number _____
	If a joint return, spouse's first name and initial	Last name	Spouse's social security number _____
	Home address (number and street). If you have a P.O. box, see page 12.		Apt. no.
P. O. Box _____		You must enter your SSN(s) above.	
City, town or post office, state, and ZIP code. If you have a foreign address, see page 12.		Checking a box below will not change your tax or refund.	
State _____ AL _____			

**Presidential Election Campaign** Check here if you, or your spouse if filing jointly, want \$3 to go to this fund (see page 12)  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. **W**  
 4  Head of household (with qualifying person). (See page 13.) If the qualifying person is a child but not your dependant, enter this child's name here. **▶**  
 5  Qualifying widow(er) with dependent child (see page 14)

**Exemptions**

If more than four dependents, see page 15.

- 6a  Yourself. If someone can claim you as a dependent, do not check box 6a  
 b  Spouse
- | c Dependents:  |           | (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 19) |
|----------------|-----------|--|-------------------------------------|--|
| (1) First name | Last name |  |                                     |  |
|                |           |  |                                     | <input type="checkbox"/>   |
|                |           |  |                                     | <input type="checkbox"/>   |
|                |           |  |                                     | <input type="checkbox"/>   |
|                |           |  |                                     | <input type="checkbox"/>   |
- d Total number of exemptions claimed **1**

Boxes checked on 6a and 6b  
 No. of children on 6c who:  
 • lived with you \_\_\_\_\_  
 • did not live with you due to divorce or separation (see page 19) \_\_\_\_\_  
 Dependents on 6c not entered above \_\_\_\_\_

**Income**

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

If you did not get a W-2, see page 19.

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	- 0 -
9a	Ordinary dividends. Attach Schedule B if required	9a	- 0 -
b	Qualified dividends (see page 19)	9b	- 0 -
10	Taxable refunds, credits, or offsets of state and local income taxes (see page 20)	10	- 0 -
11	Alimony received	11	- 0 -
12	Business income or (loss). Attach Schedule C or C-EZ	12	- 0 -
13	Capital gain or (loss). Attach Schedule D if required. If not required, check here <input type="checkbox"/>	13	- 0 -
14	Other gains or (losses). Attach Form 4797	14	- 0 -
15a	IRA distributions	15a	- 0 -
b	Taxable amount (see page 21)	15b	- 0 -
16a	Pensions and annuities	16a	- 0 -
b	Taxable amount (see page 22)	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 page 24)	20b	- 0 -
21	Other income. List type and amount (see page 24)	21	- 0 -
22	Add the amounts in the far right column for lines 7 through 21. This is your total income <b>▶</b>	22	- 0 -

**Adjusted Gross Income**

23	Educator expenses (see page 26)	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	- 0 -
28	Self-employed SEP, SIMPLE, and qualified plans	28	- 0 -
29	Self-employed health insurance deduction (see page 26)	29	- 0 -
30	Penalty on early withdrawal of savings	30	- 0 -
31a	Alimony paid	31a	- 0 -
b	Recipient's SSN <b>▶</b>		
32	IRA deduction (see page 27)	32	- 0 -
33	Student loan interest deduction (see page 30)	33	- 0 -
34	Tuition and fees deduction. Attach Form 8917	34	- 0 -
35	Domestic production activities deduction. Attach Form 8903	35	- 0 -
36	Add lines 23 through 31a and 32 through 35	36	- 0 -
37	Subtract line 36 from line 22. This is your adjusted gross income <b>▶</b>	37	- 0 -



**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  
M [redacted] H [redacted]

2 Social security number (SSN) [redacted]  
3 Address  
P. O. Box [redacted]

4 Enter year in space provided and check one box. For the tax year ending December 31, 2007,  
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 [redacted]  
6 Employer's or payer's identification number (if known) [redacted]

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

a Wages, tips, and other compensation	- 0 -	g State income tax withheld	964.77
b Social security wages	- 0 -	(Name of state) <u>Alabama</u>	
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	1635.63
f Federal income tax withheld	2811.27	j Medicare tax withheld	382.53

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

1 Gross distribution	- 0 -	4 Federal income tax withheld	- 0 -
2a Taxable amount	- 0 -	5 State income tax withheld	- 0 -
2b Taxable amount not determined <input type="checkbox"/>		6 Local income tax withheld	- 0 -
Total distribution <input type="checkbox"/>		7 Employee contributions	- 0 -
3 Capital gain (included in 2e)	- 0 -	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 behind IRC sections 3401 and 3121 and others as well.

9 Explain your efforts to obtain Form W-2, Form 1099-R, or Form W-2c, Corrected Wage and Tax Statement.  
Company has a history of refusal to issue forms correctly, I believe for fear of IRS retaliation. Amounts indicated on the form they submitted 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.  
Signature ▶ [redacted] Date ▶ 2-11-08

**Sign Here**

U.S. POSTAL SERVICE CERTIFIED MAIL:

Item Number: 7002 7 [REDACTED]

Date Mailed: February 11, 2008

RETURN RECEIPT REQUESTED.

THIRD PARTY MAILER \_\_\_\_\_

M. [REDACTED]  
P. O. Box [REDACTED]  
S, Alabama [REDACTED]

Monday, February 11, 2008

Department of the Treasury  
Internal Revenue Service  
Internal Revenue Service Center  
Atlanta, GA 39901-0014

Re: 2007 Tax Return

Dear Sir/Madam,

Please find attached as part of this communication the enclosed 1040 return for tax year 2007. Please note that with the enclosed return, I have attached Form 4852; corrected W-2 form, properly documented. It is being presented to you as my notification that I am rebutting the erroneous information known to have been submitted to you on a form W-2 by my company; alleging the payment to me of IRC Section 3401(a) or 3121(a) "wages".

This as my Sworn Statement that I am a private sector citizen, {non-Federal worker}, and that during 2007, I was in the service of a private sector company, {non-Federal entity}, as defined in IRC Section 3401(c) (d). I was not engaged in a "trade or business", nor am I an "officer of a corporation". Therefore, I had no IRC Section 3401(a) or 3121(a), "wages", paid to me in 2007. However, the amounts indicated on the forms as withheld are correct. The amounts shown in the spaces for "Social security tax withheld", and "Medicare tax withheld", are nothing more than another designation for the income tax. And, as such, are subject to my claim for refund, as they did not emanate from activity on my part subject to IRC Sections 3401(a) or 3121(a).

With this filing, I expect a full resolution of this matter within 30 days, pursuant to IRC Section 6402(a), 26 CFR Section 6402-3(a) (1) (5), and Section 6401(b) (c).

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

[REDACTED]