From: **Paul Dulberg** pdulberg@comcast.net
Subject: 2007
Date: April 18, 2019 at 10:09 AM
To: Julia WIlliams juliawilliams@clintonlaw.net
Cc: Ed Clinton ed@clintonlaw.net, Mary Winch marywinch@clintonlaw.net

PD

2007.zip

Illinois Department of Revenue

2007 Form IL-1040

tax.illinois.gov ← Individual Income Tax Return or for fiscal year ending ___/0 8

Do not write above this line.

Step 1: Personal Information

A Your Social Security numbers in the order they appear on your federal return

3 2 3 - 7 6 - 4 0 0 1
Your Social Security number

Your spouse's Social Security number

B Print your personal information below

MAKE "GIVING" EASY! Use Line 28

PAUL R	DULBERG
Your first name and initial	Your last name
Your spouse's first name and initial	Your spouse's last name (if different)
4606 HAYDEN CT	
Mailing address	
MCHENRY	IL 60051
City	State ZIP

C Filing status (see instructions)

[X] Single or head of household [ ] Married filing jointly [ ] Married filing separately [ ] Widowed

Step 2: Income

1	Federal adjusted gross income from your U.S. 1040, Line 37; U.S. 1040A, Line 21; or U.S. 1040EZ, Line 4	1	37,272.00
2	Federally tax-exempt interest and dividend income from your U.S. 1040 or 1040A, Line 8b; or U.S. 1040EZ	2	0.00
3	Other additions to your income. **Attach** Schedule M.	3	0.00
4	Add Lines 1 through 3. This is your total income.	4	37,272.00

Step 3: Base Income

5	Income received from Social Security benefits and certain retirement plans if included in Step 2, Line 1. **Attach** federal page 1.	5	18,140.00	
6	Military pay earned if included in Step 2, Line 1. **Attach** military W-2.	6	0.00	
7	Illinois Income Tax overpayment included in U.S. 1040, Line 10	7	245.00	
8	U.S. Treasury bonds, bills, notes, savings bonds, and U.S. agency interest from U.S. 1040, Schedule B, or U.S. 1040A, Schedule 1	8	0.00	
9	Other subtractions to your income. **Attach** Schedule M.	9	0.00	
	Check if Line 9 includes any amount from Schedule 1299-C [ ]			
10	Add Lines 5 through 9. This is the total of your subtractions.	10		18,385.00
11	Subtract Line 10 from Line 4. This is your Illinois **base income**.	11		18,887.00

Step 4: Exemptions

See instructions before completing Line 12.

12	**a** Number of exemptions from your federal return	1 X $2,000	a	2,000.00	
	b If someone else claimed or could have claimed you or your spouse as a dependent on their return, see instructions to figure the number to write here.	0 X $2,000	b	0.00	
	c Check if 65 or older: [ ] You + [ ] Spouse =	0 X $1,000	c	0.00	
	d Check if legally blind: [ ] You + [ ] Spouse =	0 X $1,000	d	0.00	
	Add Lines a through d. This is your total Illinois exemption allowance.		12		2,000.00

Step 5: Net Income

13	***Residents only:*** Subtract Line 12 from Line 11. This is your net income. *Skip Line 14.*	13	16,887.00
14	***Nonresidents and part-year residents only:*** Check the box that applies to you during 2007 [ ] Nonresident [ ] Part-year resident, and write the Illinois base income from Schedule NR. **Attach** Schedule NR.	14	

Step 6: Tax

15	***Residents:*** Multiply Line 13 by 3% (.03). Write the result here. This is your **tax**. ***Nonresidents and part-year residents:*** Write the tax from Schedule NR. **This amount may not be less than zero.**	15	507.00

Staple W-2 and 1099 forms here

Staple your check here

This form is authorized as outlined by the Illinois Income Tax Act. Disclosure of this information is REQUIRED. Failure to provide information could result in a penalty. This form has been approved by the Forms Management Center. IL-492-0065

16 Tax amount from Page 1, Step 6, Line 15 — **16** 507.00

Step 7: Payments and Credits

17 Illinois Income Tax withheld. **Attach** W-2 and 1099 forms. — **17** 567.00

18 Estimated payments from Forms IL-505-I and IL-1040-ES, including overpayment applied from Line 31 of your 2006 return — **18** 0.00

Nonresidents may not claim a credit on Lines 19, 20, or 21.

19 Income tax paid to another state while an Illinois resident. **Attach** Schedule CR and other states' returns. — **19**

20 Illinois Property Tax credit. **Complete PT Worksheet in instructions.**
PT Worksheet Line 3 amount **20a** 3,977.00
PT Worksheet Line 8 amount — **20b** 199.00

The total of Lines 19, 20b, and 21b may not exceed the tax amount on Line 16.

21 K-12 education expense credit. **Complete ED Worksheet in instructions. or Schedule ED. Attach** receipt or Schedule ED.
ED Worksheet or Schedule ED Line 1 amount **21a** 0.00
ED Worksheet or Schedule ED Line 10 amount — **21b** 0.00

22 Earned Income Credit. **Complete EIC Worksheet in instructions.**
EIC Worksheet Line 1 amount **22a** 0.00
EIC Worksheet Line 4 amount — **22b** 0.00

23 Income tax credit amount from Schedule 1299-C. **Attach** Schedule 1299-C. — **23**

24 Add Lines 17, 18, 19, 20b, 21b, 22b, and 23. This is your payments and credits total. — **24** 766.00

Step 8: Overpayment or Tax Due

25 If Line 24 is greater than Line 16, subtract Line 16 from Line 24. This is your **overpayment**. — **25** 259.00

26 If Line 16 is greater than Line 24, subtract Line 24 from Line 16. This is your **tax due**. — **26** 0.00

Step 9: Penalty

27 Late-payment penalty for underpayment of estimated tax — **27**

a Check if you annualized your income on Form IL-2210, Step 6, or if you are 65 or older and permanently living in a nursing home. **Attach** Form IL-2210. ☐

b Check if at least two-thirds of your federal gross income is from farming. ☐

Step 10: Donations *Any donation will reduce your refund or increase the amount you owe*

28 Amount you wish to donate to one or more of the following voluntary contribution funds:

MAKE "GIVING" EASY!

Wildlife	**a** 0.00	Breast Cancer	**e** 0.00	Diabetes	**i** 0.00
Child Abuse	**b** 0.00	Multiple Sclerosis	**f** 0.00	Autoimmune	**j** 0.00
Alzheimer's	**c** 0.00	Military Family	**g** 0.00	Lung Cancer	**k** 0.00
Homeless	**d** 0.00	IL Veterans' Home	**h** 0.00		

Add Lines **a** through **k**. This is your donations total. — **28** 0.00

29 Add Line 27 and Line 28. This is your penalty and donations total. — **29** 0.00

Step 11: Refund or Amount You Owe

30 If you have an overpayment on Line 25 and this amount is greater than Line 29, subtract Line 29 from Line 25. — **30** 259.00

31 **Amount from Line 30 that you want applied to 2008 estimated tax** — **31** 0.00

32 Subtract Line 31 from Line 30. This is your **refund**. — **32** 259.00

33 Direct Deposit

Complete to direct deposit your refund
Routing number ☐☐☐☐☐☐☐☐☐ ☐ Checking or ☐ Savings
Account number ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐

See instructions for payment options.

34 If you have tax due on Line 26, add Lines 26 and 29. **or**
If you have an overpayment on Line 25 and this amount is less than Line 29, subtract Line 25 from Line 29. This is the **amount you owe**. — **34** 0.00

Step 12: Sign and Date

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

323-76-4001	08852571			
Your signature	Date	Daytime phone number	Your spouse's signature	Date
Confirmation Number: 08IIF000288930				
Paid preparer's signature	Date	Preparer's phone number	Preparer's FEIN, SSN, or PTIN	

If no payment enclosed, mail to:
ILLINOIS DEPARTMENT OF REVENUE
SPRINGFIELD IL 62719-0001

If payment enclosed, mail to:
ILLINOIS DEPARTMENT OF REVENUE
SPRINGFIELD IL 62726-0001

Copy C For EMPLOYEE'S RECORDS (See Notice to Employee on the back of Copy B.)

This information is being furnished to the Internal Revenue Service. If you are required to file a tax return, a negligence penalty or other sanction may be imposed on you if this income is taxable and you fail to report it.

a Employee's SSN	1 Wages, tips, other compensation	2 Federal income tax withheld
323-76-4001	18887.03	2659.39
d Control number	3 Social security wages	4 Social security tax withheld
	19273.13	1194.91
b Employer ID number	5 Medicare wages and tips	6 Medicare tax withheld
36-1265490	19273.13	279.52

c Employer's name, address, and ZIP code

INTERMATIC INCORPORATED
INTERMATIC PLAZA, 7777 WINN ROAD
SPRING GROVE IL 60081-9698

e Employee's name, address, and ZIP code

PAUL DULBERG
4606 HAYDEN CT
MCHENRY IL 60050

7 Social security tips	8 Allocated tips	9 Advance EIC payment
10 Dependent care benefits	11 Nonqualified plans	

12a D 386.10	13 Stat. Emp.	Ret.plan	3rd-party sick pay
12b		X	
12c	14 Other		
12d	401K		386.10
	SEC125		186.84

15 State	Employer's state I.D. #	16 State wages, tips, etc.	17 State income tax
IL	0186-4769	18887.03	566.61

18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Form W-2 Wage & Tax Statement 2007 Dept. of the Treasury-IRS OMB No. 1545-0008

SCHEDULES A&B (Form 1040)

Department of the Treasury Internal Revenue Service (1)

Schedule A—Itemized Deductions

(Schedule B is on back)

▶ **Attach to Form 1040.** ▶ **See Instructions for Schedules A&B (Form 1040).**

OMB No. 1545-0074

2007

Attachment Sequence No. **07**

Name(s) shown on Form 1040 | **Your social security number**

Medical and Dental Expenses		**Caution.** Do not include expenses reimbursed or paid by others.			
	1	Medical and dental expenses (see page A-1)	1		
	2	Enter amount from Form 1040, line 38	2		
	3	Multiply line 2 by 7.5% (.075)	3		
	4	Subtract line 3 from line 1. If line 3 is more than line 1, enter -0-			4	0
Taxes You Paid (See page A-2.)	5	State and local **(check only one box):** a ☒ Income taxes, **or** b ☐ General sales taxes	5	567	
	6	Real estate taxes (see page A-5)	6	3977	
	7	Personal property taxes	7		
	8	Other taxes. List type and amount ▶	8		
	9	Add lines 5 through 8			9	4537
Interest You Paid (See page A-5.)	10	Home mortgage interest and points reported to you on Form 1098	10	8346	
	11	Home mortgage interest not reported to you on Form 1098. If paid to the person from whom you bought the home, see page A-6 and show that person's name, identifying no., and address ▶	11		
Note. Personal interest is not deductible.	12	Points not reported to you on Form 1098. See page A-6 for special rules	12		
	13	Qualified mortgage insurance premiums (See page A-7)	13		
	14	Investment interest. Attach Form 4952 if required. (See page A-7.)	14		
	15	Add lines 10 through 14			15	
Gifts to Charity If you made a gift and got a benefit for it, see page A-8.	16	Gifts by cash or check. If you made any gift of $250 or more, see page A-8	16	3727	
	17	Other than by cash or check. If any gift of $250 or more, see page A-8. You **must** attach Form 8283 if over $500	17		
	18	Carryover from prior year	18		
	19	Add lines 16 through 18			19	3727
Casualty and Theft Losses	20	Casualty or theft loss(es). Attach Form 4684. (See page A-9.)			20	0
Job Expenses and Certain Miscellaneous Deductions (See page A-9.)	21	Unreimbursed employee expenses—job travel, union dues, job education, etc. Attach Form 2106 or 2106-EZ if required. (See page A-9.) ▶	21		
	22	Tax preparation fees	22		
	23	Other expenses—investment, safe deposit box, etc. List type and amount ▶	23		
	24	Add lines 21 through 23	24		
	25	Enter amount from Form 1040, line 38	25		
	26	Multiply line 25 by 2% (.02)	26		
	27	Subtract line 26 from line 24. If line 26 is more than line 24, enter -0-			27	0
Other Miscellaneous Deductions	28	Other—from list on page A-10. List type and amount ▶			28	0
Total Itemized Deductions	29	Is Form 1040, line 38, over $156,400 (over $78,200 if married filing separately)? ☑ **No.** Your deduction is not limited. Add the amounts in the far right column for lines 4 through 28. Also, enter this amount on Form 1040, line 40. ☐ **Yes.** Your deduction may be limited. See page A-10 for the amount to enter.			29	8264
	30	If you elect to itemize deductions even though they are less than your standard deduction, check here ▶ ☐			

B240808 60050 IRS USE ONLY WI 36221-105-79319-8 0 0 200819 CP: 12

Department of the Treasury
Internal Revenue Service
Kansas City, MO 64999-0025

For assistance, call:
1-800-829-0922
Your Caller ID: 316007

Notice Number: CP12
Date: May 19, 2008

Taxpayer Identification Number:
323-76-4001
Tax Form: 1040
Tax Year: December 31, 2007

PAUL R DULBERG
4606 HAYDEN CT
MCHENRY IL 60050-7918068

000901

Amount of Refund
$2,273.00

Why We Are Sending You This Notice

We are writing to you because there is an error on your 2007 Federal Income Tax Return. We will explain why we made the change and what you need to do.

Why We Made The Change

- We changed the amount claimed as total interest paid on Line 15 of your Schedule A, *Itemized Deductions,* because it was figured incorrectly.

What You Should Do If You Agree With The Change

- You do not need to do anything. If you owe no other amounts that we are required to collect, you should receive your corrected refund within six weeks.

What You Should Do If You Disagree With The Change

- If you disagree with the change we made or you have additional information that corrects the error we found, please call us at 1-800-829-0922 to discuss your account.
- Our representative will explain the change we made. You can explain why you disagree with the change and provide the representative with any corrective information you have. We will correct any mistakes on your account.
- You also can handle this matter by mail. You may write to us at the address on the stub at the end of this notice. Please attach the stub to your correspondence. The stub will help us process your inquiry quicker.

2007 Tax Return Form 1040 as of May 19, 2008

Line Item On Your Return	Your Figures	IRS Figures
Adjusted Gross Income	$37,272.00	$37,272.00
Taxable Income	$25,608.00	$17,255.00
Total Tax	$5,267.00	$4,014.00
Total Payments		$6,287.00-
Amount of Overpayment		$2,273.00-
Less: Penalties (computed below, if applicable)		$.00
Less: Interest computed through May 19, 2008 (computed below)		$.00
Less: Amount applied to next year's estimated tax		$.00
Total Amount of Refund Per This Notice (Interest added, if any)		$2,273.00

Other Information

- In general, you must file a claim for refund within three years after you filed your return or two years after you paid the tax, whichever is later.
- If you have not already received your refund check, it should arrive within 6 weeks.
- **Estimated Tax Filers Note:** If you pay estimated taxes, check your computation of estimated tax to see if you should adjust your estimated tax payments.

For tax forms, instructions and information visit **www.irs.gov**. Access to this site will not provide you with any taxpayer account information.

☐ CORRECTED (if checked)

Distributions From Pensions, Annuities, Retirement or Profit-Sharing Plans, IRAs, Insurance Contracts, etc.

PAYER'S name, street address, city, state, and ZIP code
FIDELITY INVESTMENTS
INSTITUTIONAL OPERATIONS CO.
82 DEVONSHIRE STREET KW1C
BOSTON, MA 02109
78340
INTERMATIC INC CASH

1 Gross distribution: $18,139.54

2a Taxable amount: $18,139.54

OMB No. 1545-0119

2007

Form **1099-R**

2b Taxable amount not determined ☐ Total distribution ☒

Copy 2
File this copy with your state, city, or local income tax return, when required.

PAYER'S Federal identification number: 04-6568107

RECIPIENT'S identification number: 323-76-4001

3 Capital gain (included in box 2a): $0.00

4 Federal income tax withheld: $3,627.91

RECIPIENT'S name, street address (including apt. no.), city, state, and ZIP code

PAUL DULBERG
4606 HAYDEN CT.
MCHENRY, IL 60050

5 Employee contrib/desig Roth contrib or insurance premiums: $0.00

6 Net unrealized appreciation in employer's securities: $0.00

7 Distribution code(s): 1 IRA/SEP/SIMPLE ☐

8 Other: $ %

1st year of desig Roth contribution

9a Your percentage of total distribution: %

9b Total employee contributions: $

10 State tax withheld: $0.00

11 State/Payer's state no.: IL 046568107

12 State distribution: $

Account number (see instructions): 20080108051101163837

13 Local tax withheld: $

14 Name of locality

15 Local distribution: $

Form **1099-R**

Department of Treasury - Internal Revenue Service

600D00003464-01

CRYSTAL LAKE BANK & TRUST CO., N.A.
70 N. WILLIAMS STREET
CRYSTAL LAKE IL 60014-4444

Tax Statement for Forms 1098, 1099, 5498 for Tax Year 2007

1098 - Copy B - For Payer - OMB # 1545-0901		1099 - DIV - Copy B - For Recipient - OMB # 1545-0110	
1098 - E - Copy B - For Borrower - OMB # 1545-1576		1099 - INT - Copy B - For Recipient - OMB # 1545-0112	
1099 - A - Copy B - For Borrower - OMB # 1545-0877		1099 - MISC - Copy B - For Recipient - OMB # 1545-0115	
1099 - B - Copy B - For Recipient - OMB # 1545-0715		1099 - OID - Copy B - For Recipient - OMB # 1545-0117	
1099 - C - Copy B - For Debtor - OMB # 1545-1424		1099 - S - Copy B - For Transferor - OMB # 1545-0997	
1099 - Q - Copy B - For Recipient - OMB # 1545-1760		1099 - SA - Copy B - For Recipient - OMB # 1545-1517	
		5498 - Copy B - For Participant - OMB # 1545-0747	

DEPARTMENT OF THE TREASURY - INTERNAL REVENUE SERVICE.
(keep for your records)

"For Form 1099-B, DIV, INT, MISC, OID, and Q: This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported."

PAUL R DULBERG
4606 HAYDEN CT
MCHENRY IL 60050

Payer's Federal ID# 36-4196863
Questions? (815) 479-5200

TAXPAYER ID#
323-76-4001

2007 FORM 1099-INT: INTEREST INCOME

Account Type	Account Number	Deposit ID	IRS Description	IRS Box#	Amount
NOW Account	02600005528 00001		Interest income	1	20.60
CD/Time Deposit	02630005208 00002	00000001618	Interest income	1	223.84
CD/Time Deposit	02630005208 00003	00000006218	Interest income	1	49.94
Savings	02640012320 00004		Interest income	1	26.64

TOTALS:	Interest income	1	321.02
	Early withdrawal penalty	2	0.00
	Interest on U.S. Savings Bonds and Treasury obligations	3	0.00
	Federal income tax withheld	**4**	**0.00**
	Investment expenses	5	0.00
	Foreign tax paid	6	0.00
	Tax-exempt interest	8	0.00
	Specified private activity bond interest	9	0.00

*Form 1099 OID: This may not be the correct figure to report on your income tax return. See instructions on the back.

Form 1098 - Caution: *The amount shown may not be fully deductible by you. Limits based on the loan amount and the cost and value of the secured property may apply. Also, you may only deduct interest to the extent it was incurred by you, actually paid by you, and not reimbursed by another person.*

Form 1098 - The information in boxes 1, 2, 3, and 4 is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or sanction may be imposed on you if the IRS determines that an underpayment of tax results because you overstated a deduction for this mortgage interest or for these points or because you did not other report this refund of interest on your return.

Form 1098-E - This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if the IRS determines that an underpayment of tax results because you overstated a deduction for student loan interest.

00003313

Informational Statement
This is not a bill or a refund notice. Keep for your tax records.

1099-G Certain Government Payments 2007

OMB NO. 1545-0120 Department of the Treasury - Internal Revenue Service

Payer
Illinois Department of Revenue
101 West Jefferson Street
Springfield, IL 62702
Federal ID# 37-6002057

Copy B – For recipient
This is important tax information and was furnished to the Internal Revenue Service (IRS). If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.

Box 2 – Refunds, credits, or offsets from your state or local income tax
This amount was reported to the IRS and may be taxable to you if you deducted the tax paid as an itemized deduction on your federal income tax return. Even if you did not receive the amount shown (*e.g.*, credited to your estimated tax), it still may be taxable to you. See the Form U.S. 1040 instructions for more information.

$245.00

Box 3 – Tax year
Box 2 amount is for tax year

2006

Recipient
XXX-XX-4001
PAUL R DULBERG
4606 HAYDEN CT
MCHENRY IL 60050-7918

Remove this label.

citimortgage

IMPORTANT TAX RETURN INFORMATION BELOW

Account Number: 0619247987

PAUL R DULBERG
4606 HAYDEN CT
MCHENRY IL 60051-7918

For Information Call: 1-800-283-7918 *
Customer Service Hours:
Mon - Fri 8:00 a.m. - 12:00 Midnight ET
Sat - 9:00 a.m. - 6:00 p.m. ET
Or visit our website at www.citimortgage.com

Property Address: 4606 HAYDEN CT MCHENRY IL 60050

CITIMORTGAGE IS THE SERVICING AGENT. *
CALLS ARE RANDOMLY MONITORED AND RECORDED TO ENSURE QUALITY SERVICE.

YNNY*NNYN*NNNN*NNNN
26414008017384000 2

☐ CORRECTED (if checked)

RECIPIENT'S/LENDER'S name, address, and telephone number	* Caution: *The amount shown may not be fully deductible by you. Limits based on the loan amount and the cost and value of the secured property may apply. Also, you may only deduct interest to the extent it was incurred by you, actually paid by you, and not reimbursed by another person.*	OMB No. 1545-0901 **2007** Form **1098**	**Mortgage Interest Statement**
CITIMORTGAGE, INC. P.O. BOX 9438 GAITHERSBURG, MD 20898-9438 CUSTOMER SERVICE: 1-800-283-7918 *			

RECIPIENT'S federal identification no.	PAYER'S social security number	1 Mortgage interest received from payer(s)/borrower(s)*	**Copy B For Payer**
13-3222578	323-76-4001	$ 8,346.03	The information in boxes 1, 2, 3 and 4 is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if the IRS determines that an underpayment of tax results because you overstated a deduction for this mortgage interest or for these points or because you did not report this refund of interest on your return.
PAYER'S/BORROWER'S name PAUL R DULBERG 4606 HAYDEN CT MCHENRY IL 60051-7918		2 Points paid on purchase of principal residence $ 0.00	
		3 Refund of overpaid interest $ 0.00	
		4 Mortgage insurance premiums $ 0.00	
Account number (see instructions) 0619247987		5 Real Estate Taxes Paid $ 0.00	

Form **1098** (keep for your records) Department of the Treasury - Internal Revenue Service

ANNUAL TAX AND INTEREST STATEMENT

SEE REVERSE SIDE FOR ADDITIONAL INFORMATION

PRINCIPAL BALANCE INFORMATION

BEGINNING	$153,252.80
PAID	$3,044.57
ENDING	$150,208.23

INTEREST INFORMATION

GROSS INTEREST APPLIED	$8,346.03
NET INTEREST PAID (SEE BOX 1)	$8,346.03

IMPORTANT MESSAGES

This statement contains important tax information for year ending 12/31/07. Please refer to the back of this statement for other important notices and for instructions.

As required, your 2007 Form 1098 Statement information will be reported to the Internal Revenue Service. Please consult with your Tax Advisor or the Internal Revenue Service for any tax related questions.

On September 1st, 2007, ABN AMRO Mortgage Group, Inc. merged with CitiMortgage, Inc. As a result, CitiMortgage, Inc. will provide you with a Form 1098 Statement which reflects all payments made to CitiMortgage, Inc. and ABN AMRO Mortgage Group, Inc.

Form **1040** Department of the Treasury—Internal Revenue Service **U.S. Individual Income Tax Return** **2007**

(1) IRS Use Only—Do not write or staple in this space.

OMB No. 1545-0074

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

Your first name and initial | Last name | **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.

▲ 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.

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. ▶
4 ☐ Head of household (with qualifying person). (See page 13.) 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 14)

Exemptions

6a ☒ **Yourself.** If someone can claim you as a dependent, **do not** check box 6a
b ☐ **Spouse**

Boxes checked on 6a and 6b 1

c **Dependents:**

(1) First name Last name	(2) Dependent's social security number	(3) Dependent's relationship to you	(4) ✓ if qualifying child for child tax credit (see page 15)
			☐
			☐
			☐
			☐

If more than four dependents, see page 15.

No. of children on 6c who:
- **lived with you**
- **did not live with you due to divorce or separation (see page 16)**

Dependents on 6c not entered above

d Total number of exemptions claimed — **Add numbers on lines above ▶** 1

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	18887
8a	**Taxable** interest. Attach Schedule B if required	8a	
b	**Tax-exempt** interest. **Do not** include on line 8a — 8b		
9a	Ordinary dividends. Attach Schedule B if required	9a	
b	Qualified dividends (see page 19) — 9b		
10	Taxable refunds, credits, or offsets of state and local income taxes (see page 20)	10	245
11	Alimony received	11	
12	Business income or (loss). Attach Schedule C or C-EZ	12	
13	Capital gain or (loss). Attach Schedule D if required. If not required, check here ▶ ☐	13	
14	Other gains or (losses). Attach Form 4797	14	
15a	IRA distributions — 15a — b Taxable amount (see page 21)	15b	
16a	Pensions and annuities — 16a — b Taxable amount (see page 22)	16b	18190
17	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E	17	
18	Farm income or (loss). Attach Schedule F	18	
19	Unemployment compensation	19	
20a	Social security benefits — 20a — b Taxable amount (see page 24)	20b	
21	Other income. List type and amount (see page 24)	21	
22	Add the amounts in the far right column for lines 7 through 21. This is your **total income** ▶	22	37272

Adjusted Gross Income

23	Educator expenses (see page 26)	23	
24	Certain business expenses of reservists, performing artists, and fee-basis government officials. Attach Form 2106 or 2106-EZ	24	
25	Health savings account deduction. Attach Form 8889	25	
26	Moving expenses. Attach Form 3903	26	
27	One-half of self-employment tax. Attach Schedule SE	27	
28	Self-employed SEP, SIMPLE, and qualified plans	28	
29	Self-employed health insurance deduction (see page 26)	29	
30	Penalty on early withdrawal of savings	30	
31a	Alimony paid b Recipient's SSN ▶	31a	
32	IRA deduction (see page 27)	32	
33	Student loan interest deduction (see page 30)	33	
34	Tuition and fees deduction. Attach Form 8917	34	
35	Domestic production activities deduction. Attach Form 8903	35	
36	Add lines 23 through 31a and 32 through 35	36	
37	Subtract line 36 from line 22. This is your **adjusted gross income** ▶	37	37272

Tax and Credits

	38	Amount from line 37 (adjusted gross income)		38 37272
	39a	Check if: ☐ You were born before January 2, 1943, ☐ Blind. ☐ Spouse was born before January 2, 1943, ☐ Blind. Total boxes checked ▶ 39a		
	b	If your spouse itemizes on a separate return or you were a dual-status alien, see page 31 and check here ▶39b ☐		
Standard Deduction for— • People who checked any box on line 39a or 39b or who can be claimed as a dependent, see page 31. • All others: Single or Married filing separately, $5,350 Married filing jointly or Qualifying widow(er), $10,700 Head of household, $7,850	40	**Itemized deductions** (from Schedule A) **or** your **standard deduction** (see left margin)		40 8264
	41	Subtract line 40 from line 38		41 29008
	42	If line 38 is $117,300 or less, multiply $3,400 by the total number of exemptions claimed on line 6d. If line 38 is over $117,300, see the worksheet on page 33		42 3400
	43	**Taxable income.** Subtract line 42 from line 41. If line 42 is more than line 41, enter -0-		43 25608 20662
	44	**Tax** (see page 33). Check if any tax is from: a ☐ Form(s) 8814 b ☐ Form 4972 c ☐ Form(s) 8889		44 3453 2710
	45	**Alternative minimum tax** (see page 36). Attach Form 6251		45
	46	Add lines 44 and 45 ▶		46 3453 2710
	47	Credit for child and dependent care expenses. Attach Form 2441	47	
	48	Credit for the elderly or the disabled. Attach Schedule R	48	
	49	Education credits. Attach Form 8863	49	
	50	Residential energy credits. Attach Form 5695	50	
	51	Foreign tax credit. Attach Form 1116 if required	51	
	52	Child tax credit (see page 39). Attach Form 8901 if required	52	
	53	Retirement savings contributions credit. Attach Form 8880	53	
	54	Credits from: a ☐ Form 8396 b ☐ Form 8859 c ☐ Form 8839	54	
	55	Other credits: a ☐ Form 3800 b ☐ Form 8801 c ☐ Form ____	55	
	56	Add lines 47 through 55. These are your **total credits**		56
	57	Subtract line 56 from line 46. If line 56 is more than line 46, enter -0- ▶		57 3453 2710

Other Taxes

58	Self-employment tax. Attach Schedule SE		58
59	Unreported social security and Medicare tax from: a ☐ Form 4137 b ☐ Form 8919		59
60	Additional tax on IRAs, other qualified retirement plans, etc. Attach Form 5329 if required		60 1814
61	Advance earned income credit payments from Form(s) W-2, box 9		61
62	Household employment taxes. Attach Schedule H		62
63	Add lines 57 through 62. This is your **total tax** ▶		63 5267 4524

Payments

If you have a qualifying child, attach Schedule EIC.

64	Federal income tax withheld from Forms W-2 and 1099	64 6287	
65	2007 estimated tax payments and amount applied from 2006 return	65	
66a	**Earned income credit (EIC)**	66a	
b	Nontaxable combat pay election ▶ 66b		
67	Excess social security and tier 1 RRTA tax withheld (see page 59)	67	
68	Additional child tax credit. Attach Form 8812	68	
69	Amount paid with request for extension to file (see page 59)	69	
70	Payments from: a ☐ Form 2439 b ☐ Form 4136 c ☐ Form 8885	70	
71	Refundable credit for prior year minimum tax from Form 8801, line 27	71	
72	Add lines 64, 65, 66a, and 67 through 71. These are your **total payments** ▶		72 6287

Refund

Direct deposit? See page 59 and fill in 74b, 74c, and 74d, or Form 8888.

73	If line 72 is more than line 63, subtract line 63 from line 72. This is the amount you **overpaid**		73 1020 1763
74a	Amount of line 73 you want **refunded to you.** If Form 8888 is attached, check here ▶ ☐		74a
▶ b	Routing number ▶ c Type: ☐ Checking ☐ Savings		
▶ d	Account number		
75	Amount of line 73 you want **applied to your 2008 estimated tax** ▶	75	

Amount You Owe

76	**Amount you owe.** Subtract line 72 from line 63. For details on how to pay, see page 60 ▶		76
77	Estimated tax penalty (see page 61)	77	

Third Party Designee

Do you want to allow another person to discuss this return with the IRS (see page 61)? ☐ **Yes.** Complete the following. ☐ **No**

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

Sign Here

Joint return? See page 13. 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 complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Your signature	Date	Your occupation	Daytime phone number
			( )
Spouse's signature. If a joint return, **both** must sign.	Date	Spouse's occupation	

Paid Preparer's Use Only

Preparer's signature	Date	Check if self-employed ☐	Preparer's SSN or PTIN
Firm's name (or yours if self-employed), address, and ZIP code		EIN	
		Phone no. ( )	