

For the year Jan. 1-Dec. 31, 2009, or other tax year beginning , 2009, ending , 20

Label Use the IRS label. Otherwise, please print or type.

LABEL HERE

Richard Jones
Stephanie Jones
1350 South Main Street
Kaysville UT 84037

Your social security number
525-00-1234

Spouse's social security no.
529-00-6543

▲ You must enter your SSN(s) above. ▲

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 instructions) **You** **Spouse**

Filing Status

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 inst.) If the qualifying person is a child but not your dependent, enter child's name here. ▶

5 Qualifying widow(er) with dependent child (see inst.)

Check only one box.

Exemptions If more than four dependents, see inst. & check here ▶

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 inst.)
Trevor	Jones	646-67-2973	Son	<input checked="" type="checkbox"/>
Anna	Jones	646-89-4649	Daughter	<input checked="" type="checkbox"/>

Boxes checked on 6a and 6b: 2

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

Dependents on 6c not entered above: 2

d Total number of exemptions claimed: 4

Income

7 Wages, salaries, tips, etc. Attach Form(s) W-2: 41,812

8a Taxable interest. Attach Schedule B if required: 577

b Tax-exempt interest. Do not include on line 8a: 8b

9a Ordinary dividends. Attach Schedule B if required: 375

b Qualified dividends (see instructions): 9b 375

10 Taxable refunds, credits, or offsets of state and local income taxes (see instructions): 10

11 Alimony received: 11

12 Business income or (loss). Attach Schedule C or C-EZ: 20,086

13 Capital gain or (loss). Attach Schedule D if required. If not required, check here ▶ : 3,298

14 Other gains or (losses). Attach Form 4797: 14

15a IRA distributions: 15a Taxable amount: 15b

16a Pensions and annuities: 16a Taxable amount: 16b

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 in excess of \$2,400 per recipient: 19

20a Social security benefits: 20a Taxable amount (see inst.): 20b

21 Other income: 21

22 Add the amounts in the far right column for lines 7 through 21. This is your **total income** ▶: 66,148

Adjusted Gross Income

23 Educator expenses (see instructions): 23

24 Certain business expenses of reservists, performing artists, and fee-basis government officials. Attach Form 2106/2106-EZ: 24

25 Health savings account deduction. Attach Form 8889: 25

26 Moving expenses. Attach Form 3903: 26 1,480

27 One-half of self-employment tax. Attach Schedule SE: 27 1,419

28 Self-employed SEP, SIMPLE, and qualified plans: 28

29 Self-employed health insurance deduction (see instructions): 29 7,280

30 Penalty on early withdrawal of savings: 30

31a Alimony paid b Recipient's SSN ▶: 31a

32 IRA deduction (see instructions): 32 10,000

33 Student loan interest deduction (see instructions): 33

34 Tuition and fees deduction. Attach Form 8917: 34

35 Domestic production activities ded. Attach Form 8903: 35

36 Add lines 23 through 31a and 32 through 35: 20,179

37 Subtract line 36 from line 22. This is your **adjusted gross income** ▶: 45,969

Tax and Credits	38	Amount from line 37 (adjusted gross income)	38	45,969
	39a	Check <input type="checkbox"/> You were born before January 2, 1945, <input type="checkbox"/> Blind. Total boxes checked <input type="checkbox"/> 39a		
		if: <input type="checkbox"/> Spouse was born before January 2, 1945, <input type="checkbox"/> Blind.		
Standard Deduction for --	b	If your spouse itemizes on a separate return or you were a dual-status alien, see inst. and check here 39b		
●People who check any box on line 39a, 39b, or 40b or who can be claimed as a dep., see inst. ●All others: Single or Married filing separately, \$5,700 Married filing jointly or Qualifying widow(er), \$11,400 Head of household, \$8,350	40a	Itemized deductions (from Schedule A) or your standard deduction (see left margin)	40a	12,400
	b	If you are increasing your standard deduction by certain real estate taxes, new motor vehicle taxes, or a net disaster loss, attach Schedule L and check here (see instructions)	40b	<input checked="" type="checkbox"/>
	41	Subtract line 40a from line 38	41	33,569
	42	Exemptions. If line 38 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 the instructions	42	14,600
	43	Taxable income. Subtract line 42 from line 41. If line 42 is more than line 41, enter -0-	43	18,969
	44	Tax (see inst.). Check if any tax is from: a <input type="checkbox"/> Form(s) 8814 b <input type="checkbox"/> Form 4972	44	1,528
	45	Alternative minimum tax (see instructions). Attach Form 6251	45	
	46	Add lines 44 and 45	46	1,528
	47	Foreign tax credit. Attach Form 1116 if required	47	
	48	Credit for child & dependent care expenses. Attach Form 2441	48	1,200
	49	Education credits from Form 8863, line 29	49	
	50	Retirement savings contributions credit. Attach Form 8880	50	328
	51	Child tax credit (see instructions)	51	
	52	Credits from Form: a <input type="checkbox"/> 8396 b <input type="checkbox"/> 8839 c <input type="checkbox"/> 5695	52	
	53	Other credits from Form: a <input type="checkbox"/> 3800 b <input type="checkbox"/> 8801 c <input type="checkbox"/>	53	
54	Add lines 47 through 53. These are your total credits	54	1,528	
55	Subtract line 54 from line 46. If line 54 is more than line 46, enter -0-	55	0	
Other Taxes	56	Self-employment tax. Attach Schedule SE	56	2,838
	57	Unreported social security and Medicare tax from Form: a <input type="checkbox"/> 4137 b <input type="checkbox"/> 8919	57	
	58	Additional tax on IRAs, other qualified retirement plans, etc. Attach Form 5329 if required	58	
	59	Additional taxes: a <input type="checkbox"/> AEIC payments b <input type="checkbox"/> Household employment taxes. Attach Schedule H	59	
	60	Add lines 55 through 59. This is your total tax	60	2,838
Payments	61	Federal income tax withheld from Forms W-2 and 1099	61	6,212
	62	2009 estimated tax payments & amt. applied from 2008 return	62	1,400
	63	Making work pay and government retiree credits, Attach Schedule M	63	
If you have a qualifying child, attach Schedule EIC.	64a	Earned income credit (EIC)	64a	
	b	Nontaxable combat pay election 64b		
	65	Additional child tax credit. Attach Form 8812	65	2,000
	66	Refundable education credit from Form 8863, line 16	66	
	67	First-time homebuyer credit. Attach Form 5405	67	
	68	Amount paid with request for extension to file (see instructions)	68	
	69	Excess social security and tier 1 RRTA tax withheld (see inst.)	69	
	70	Credits from Form: a <input type="checkbox"/> 2439 b <input type="checkbox"/> 4136 c <input type="checkbox"/> 8801 d <input type="checkbox"/> 8885	70	
71	Add lines 61, 62, 63, 64a, and 65 through 70. These are your total payments	71	9,612	
Refund	72	If line 71 is more than line 60, subtract line 60 from line 71. This is the amount you overpaid	72	6,774
Direct deposit? See inst. and fill in 73b, 73c, and 73d, or Form 8888.	73a	Amount of line 72 you want refunded to you . If Form 8888 is attached, check here. <input type="checkbox"/>	73a	6,774
	b	Routing no. 1 2 3 4 5 6 7 8 0 c Type: <input checked="" type="checkbox"/> Checking <input type="checkbox"/> Savings		
	d	Account no. 5 6 7 8 8 7 7		
	74	Amt. of line 72 you want applied to your 2010 estimated tax 74	74	
Amount You Owe	75	Amount you owe. Subtract line 71 from line 60. For details on how to pay, see instructions 75	75	
	76	Estimated tax penalty (see instructions)	76	

Third Party Designee Do you want to allow another person to discuss this return with the IRS (see instructions)? **Yes.** Complete the following. **No**

Designee's name **PREPARER** Phone no. _____ Personal identification number (PIN) _____

Sign Here 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
		Self-Employed	
Spouse's signature. If a joint return, both must sign.	Date	Spouse's occupation	
		Web Designer	

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, & ZIP code _____ EIN _____ Phone no. _____