

Label (See instructions on page 14.) Use the IRS label. Otherwise, please print or type.	For the year Jan. 1-Dec. 31, 2009, or other tax year beginning _____, 2009, ending _____, 20	OMB No. 1545-0074	
	Your first name and initial Bob	Last name Clark	Your social security number 400-00-1901
	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 14.	Apt. no.	You must enter your SSN(s) above.
452 Lake Shore Drive			
City, town or post office, state, and ZIP code. If you have a foreign address, see page 14.	Checking a box below will not change your tax or refund.		
Chicago	IL	60611	

Election Campaign Check here if you, or your spouse if filing jointly, want \$3 to go to this fund (see page 14) 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 page 15.) 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 16)

Exemptions

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) Check if qualifying child for child tax credit (see pg 17)
Anthony	Clark	400-00-1942	SON	<input checked="" type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

If more than four dependents, see page 17 and check here

d Total number of exemptions claimed Add numbers on lines above **2**

Income	7 Wages, salaries, tips, etc. Attach Form(s) W-2	7	19,000
	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 22)	9b	
	10 Taxable refunds, credits, or offsets of state and local income taxes (see page 23)	10	
	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 24)	15b	
	16a Pensions and annuities	16a	
	b Taxable amount (see page 25)	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 (see page 27)	19	
	20a Social security benefits	20a	
	b Taxable amount (see page 27)	20b	
	21 Other income	21	
	22 Add the amounts in the far right column for lines 7 through 21. This is your total income	22	19,000

Adjusted Gross Income	23 Educator expenses (see page 29)	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 30)	29	
	30 Penalty on early withdrawal of savings	30	
	31a Alimony paid b Recipient's SSN	31a	
	32 IRA deduction (see page 31)	32	
	33 Student loan interest deduction (see page 34)	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	19,000	

Tax and Credits

Standard Deduction for—
• People who check any box on line 39a, 39b, or 40b or who can be claimed as a dependent, see page 35.
• All others: Single or Married filing separately, \$5,700
Married filing jointly or Qualifying widow(er), \$11,400
Head of household, \$8,350

Table with 3 columns: Line number, Description, and Amount. Rows include 38 (Amount from line 37), 39a (Check boxes for birth date), 40a (Itemized deductions), 41 (Subtract line 40a), 42 (Exemptions), 43 (Taxable income), 44 (Tax), 45 (Alternative minimum tax), 46 (Add lines 44 and 45), 47-53 (Credits), 54 (Total credits), 55 (Subtract line 54).

Other Taxes

Table with 3 columns: Line number, Description, and Amount. Rows include 56 (Self-employment tax), 57 (Unreported social security and Medicare tax), 58 (Additional tax on IRAs), 59 (Additional taxes), 60 (Total tax).

Payments

If you have a qualifying child, attach Schedule EIC.

Table with 3 columns: Line number, Description, and Amount. Rows include 61 (Federal income tax withheld), 62 (2009 estimated tax payments), 63 (Making work pay and government retiree credits), 64a (Earned income credit), 64b (Nontaxable combat pay election), 65 (Additional child tax credit), 66 (Refundable education credit), 67 (First-time homebuyer credit), 68 (Amount paid with request for extension), 69 (Excess social security and tier 1 RRTA tax withheld), 70 (Credits from Form), 71 (Total payments).

Refund

Direct deposit? See page 73 and fill in 73b, 73c, and 73d, or Form 8888.

Table with 3 columns: Line number, Description, and Amount. Rows include 72 (If line 71 is more than line 60), 73a (Amount of line 72 you want refunded), 74 (Amount of line 72 you want applied to your 2010 estimated tax).

Amount You Owe

Table with 3 columns: Line number, Description, and Amount. Rows include 75 (Amount you owe), 76 (Estimated tax penalty).

Third Party Designee

Do you want to allow another person to discuss this return with the IRS (see page 75)? [X] Yes. Complete the following. [] No

Designee's name: Billi Black, Phone no.: 555-555-5555, Personal identification number (PIN): 12345

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.

Table with 4 columns: Signature, Date, Occupation, and Daytime phone number. Rows include Taxpayer (01901, 01-20-2010, Florist) and Spouse (312-555-1234).

Paid Preparer's Use Only

Table with 4 columns: Preparer's signature, Date, Check if self-employed, Preparer's SSN or PTIN, Firm's name, address, and ZIP code, EIN, and Phone no. Row includes Billi Black, 12-03-2009, Drake Education, 123 Main St, Rock Hill, SC 29734, EIN 12-3456789, Phone no. 555-555-5555.

**SCHEDULE A
(Form 1040)**

Itemized Deductions

OMB No. 1545-0074

2009

Attachment
Sequence No. **07**

Department of the Treasury
Internal Revenue Service (99)

▶ **Attach to Form 1040.** ▶ **See Instructions for Schedule A (Form 1040).**

Name(s) shown on Form 1040

Bob Clark

Your social security number

400-00-1901

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
Taxes You Paid (See page A-2.)	5 State and local (check only one box):			
	a	<input type="checkbox"/> Income taxes, or	5	277
	b	<input checked="" type="checkbox"/> General sales taxes		
	6	Real estate taxes (see page A-5)	6	625
	7	New motor vehicle taxes from line 11 of the worksheet on page 2. Skip this line if you checked box 5b.	7	
	8	Other taxes. List type and amount ▶ _____	8	
	9	Add lines 5 through 8		9 902
Interest You Paid (See page A-6.) Note. Personal interest is not deductible.	10	Home mortgage interest and points reported to you on Form 1098.	10	
	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-7 and show that person's name, identifying no., and address ▶ _____	11	
	12	Points not reported to you on Form 1098. See page A-7 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-8.)	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	
	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
Casualty and Theft Losses	20	Casualty or theft loss(es). Attach Form 4684. (See page A-10.)		20
Job Expenses and Certain Miscellaneous Deductions (See page A-10.)	21	Unreimbursed employee expenses - job travel, union dues, job education, etc. Attach Form 2106 or 2106-EZ if required. (See page A-10.) ▶ _____	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
Other Miscellaneous Deductions	28	Other - from list on page A-11. List type and amount ▶ _____		28
Total Itemized Deductions	29	Is Form 1040, line 38, over \$166,800 (over \$83,400 if married filing separately)? <input checked="" type="checkbox"/> 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 40a. } <input type="checkbox"/> Yes. Your deduction may be limited. See page A-11 for the amount to enter. }		29 902
	30	If you elect to itemize deductions even though they are less than your standard deduction, check here <input type="checkbox"/>		

SCHEDULE EIC
(Form 1040A or 1040)

Earned Income Credit

OMB No. 1545-0074

Qualifying Child Information

2009

Department of the Treasury
Internal Revenue Service (99)

Complete and attach to Form 1040A or 1040
only if you have a qualifying child.

Attachment
Sequence No. **43**

Name(s) shown on return

Your social security number

Bob Clark

400-00-1901

- Before you begin:**
- See the instructions for Form 1040A, lines 41a and 41b, or Form 1040, lines 64a and 64b, to make sure that **(a)** you can take the EIC, and **(b)** you have a qualifying child.
 - Be sure the child's name on line 1 and social security number (SSN) on line 2 agree with the child's social security card. Otherwise, at the time we process your return, we may reduce or disallow your EIC. If the name or SSN on the child's social security card is not correct, call the Social Security Administration at 1-800-772-1213.

- CAUTION!**
- If you take the EIC even though you are not eligible, you may not be allowed to take the credit for up to 10 years. See instructions for details.
 - It will take us longer to process your return and issue your refund if you do not fill in all lines that apply for each qualifying child.

Qualifying Child Information	Child 1	Child 2	Child 3			
	First name	Last name	First name	Last name	First name	Last name
1 Child's name If you have more than three qualifying children, you only have to list three to get the maximum credit.	Anthony Clark					
2 Child's SSN The child must have an SSN as defined on page 45 of the Form 1040A instructions or page 51 of the Form 1040 instructions unless the child was born and died in 2009. If your child was born and died in 2009 and did not have an SSN, enter "Died" on this line and attach a copy of the child's birth certificate, death certificate, or hospital medical records.	400-00-1942					
3 Child's year of birth	Year <u>2004</u> <small>If born after 1990 and the child was younger than you (or your spouse, if filing jointly), skip lines 4a and 4b; go to line 5.</small>		Year _____ <small>If born after 1990 and the child was younger than you (or your spouse, if filing jointly), skip lines 4a and 4b; go to line 5.</small>		Year _____ <small>If born after 1990 and the child was younger than you (or your spouse, if filing jointly), skip lines 4a and 4b; go to line 5.</small>	
4a Was the child under age 24 at the end of 2009, a student, and younger than you (or your spouse, if filing jointly)?	<input type="checkbox"/> Yes. <input type="checkbox"/> No. Go to line 5. Continue.	<input type="checkbox"/> Yes. <input type="checkbox"/> No. Go to line 5. Continue.	<input type="checkbox"/> Yes. <input type="checkbox"/> No. Go to line 5. Continue.	<input type="checkbox"/> Yes. <input type="checkbox"/> No. Go to line 5. Continue.	<input type="checkbox"/> Yes. <input type="checkbox"/> No. Go to line 5. Continue.	<input type="checkbox"/> Yes. <input type="checkbox"/> No. Go to line 5. Continue.
b Was the child permanently and totally disabled during any part of 2009?	<input type="checkbox"/> Yes. <input type="checkbox"/> No. Continue. The child is not a qualifying child.	<input type="checkbox"/> Yes. <input type="checkbox"/> No. Continue. The child is not a qualifying child.	<input type="checkbox"/> Yes. <input type="checkbox"/> No. Continue. The child is not a qualifying child.	<input type="checkbox"/> Yes. <input type="checkbox"/> No. Continue. The child is not a qualifying child.	<input type="checkbox"/> Yes. <input type="checkbox"/> No. Continue. The child is not a qualifying child.	<input type="checkbox"/> Yes. <input type="checkbox"/> No. Continue. The child is not a qualifying child.
5 Child's relationship to you (for example, son, daughter, grandchild, niece, nephew, foster child, etc.)	SON					
6 Number of months child lived with you in the United States during 2009 <ul style="list-style-type: none">If the child lived with you for more than half of 2009 but less than 7 months, enter "7."If the child was born or died in 2009 and your home was the child's home for the entire time he or she was alive during 2009, enter "12."	<u>12</u> months Do not enter more than 12 months.		_____ months Do not enter more than 12 months.		_____ months Do not enter more than 12 months.	

Additional Child Tax Credit

2009

Department of the Treasury
Internal Revenue Service (99)

Complete and attach to Form 1040, Form 1040A, or Form 1040NR.

Attachment
Sequence No. **47**

Name(s) shown on return

Bob Clark

Your social security number

400-00-1901

Part I All Filers

1	1040 filers: Enter the amount from line 6 of your Child Tax Credit Worksheet (see the Instructions for Form 1040, line 51). 1040A filers: Enter the amount from line 6 of your Child Tax Credit Worksheet (see the Instructions for Form 1040A, line 33). 1040NR filers: Enter the amount from line 6 of your Child Tax Credit Worksheet (see the Instructions for Form 1040NR, line 47). If you used Pub. 972, enter the amount from line 8 of the worksheet on page 4 of the publication.			
		1	1,000	
2	Enter the amount from Form 1040, line 51, Form 1040A, line 33, or Form 1040NR, line 47.	2	286	
3	Subtract line 2 from line 1. If zero, stop ; you cannot take this credit	3	714	
4a	Earned income (see instructions)	4a	19,000	
b	Nontaxable combat pay (see instructions)	4b		
5	Is the amount on line 4a more than \$3,000? <input type="checkbox"/> No. Leave line 5 blank and enter -0- on line 6. <input checked="" type="checkbox"/> Yes. Subtract \$3,000 from the amount on line 4a. Enter the result.	5	16,000	
6	Multiply the amount on line 5 by 15% (.15) and enter the result Next. Do you have three or more qualifying children? <input checked="" type="checkbox"/> No. If line 6 is zero, stop; you cannot take this credit. Otherwise, skip Part II and enter the smaller of line 3 or line 6 on line 13. <input type="checkbox"/> Yes. If line 6 is equal to or more than line 3, skip Part II and enter the amount from line 3 on line 13. Otherwise, go to line 7.	6	2,400	

Part II Certain Filers Who Have Three or More Qualifying Children

7	Withheld social security and Medicare taxes from Form(s) W-2, boxes 4 and 6. If married filing jointly, include your spouse's amounts with yours. If you worked for a railroad, see instructions			
8	1040 filers: Enter the total of the amounts from Form 1040, lines 27 and 57, plus any taxes that you identified using code "UT" and entered on the dotted line next to line 60. 1040A filers: Enter -0-. 1040NR filers: Enter the total of the amounts from Form 1040NR, line 53, plus any taxes that you identified using code "UT" and entered on the dotted line next to line 57.	8		
9	Add lines 7 and 8.	9		
10	1040 filers: Enter the total of the amounts from Form 1040, lines 64a and 69. 1040A filers: Enter the total of the amount from Form 1040A, line 41a, plus any excess social security and tier 1 RRTA taxes withheld that you entered to the left of line 44 (see instructions). 1040NR filers: Enter the amount from Form 1040NR, line 63.	10		
11	Subtract line 10 from line 9. If zero or less, enter -0-.	11		
12	Enter the larger of line 6 or line 11 Next, enter the smaller of line 3 or line 12 on line 13.	12		

Part III Additional Child Tax Credit

13	This is your additional child tax credit			714
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Enter this amount on
Form 1040, line 65,
Form 1040A, line 42, or
Form 1040NR, line 61.

**SCHEDULE L
(Form 1040A or 1040)**

Department of the Treasury
Internal Revenue Service (99)

Standard Deduction for Certain Filers

▶ **Attach to Form 1040A or 1040.**

▶ **See Instructions.**

OMB No. 1545-0074

2009

Attachment
Sequence No. **57**

Name(s) shown on return

Bob Clark

Your social security number

400-00-1901

Caution! File this form **only** if you are increasing your standard deduction by certain state or local real estate taxes, new motor vehicle taxes, or a net disaster loss. It may be better for you to itemize your deductions instead. See the Instructions for Schedule A (Form 1040).

1 Enter the amount shown below for your filing status.					
<ul style="list-style-type: none"> • Single or married filing separately - \$5,700 • Married filing jointly or Qualifying widow(er) - \$11,400 • Head of household - \$8,350 		1	8,350		
2 Can you (or your spouse if filing jointly) be claimed as a dependent on someone else's return?					
<input checked="" type="checkbox"/> No. Skip line 3; enter the amount from line 1 on line 4, and go to line 5. <input type="checkbox"/> Yes. Go to line 3.					
3 Is your earned income more than \$650 (see instructions)?					
<input type="checkbox"/> Yes. Add \$300 to your earned income. Enter the total <input type="checkbox"/> No. Enter \$950		3			
4 Enter the smaller of line 1 or line 3		4	8,350		
5 Multiply the number on Form 1040, line 39a, or Form 1040A, line 23a, by \$1,100 (\$1,400 if single or head of household). If blank, enter -0-		5			
6 Form 1040 filers only, enter any net disaster loss from Form 4684, line 18		6			
7 Enter the state and local real estate taxes you paid. Do not include foreign real estate taxes (see instructions)		7	625		
8 Enter \$500 (\$1,000 if married filing jointly)		8	500		
9 Enter the smaller of line 7 or line 8		9	500		
10 Did you (or your spouse if filing jointly) pay any state or local sales or excise taxes in 2009 for the purchase of a new motor vehicle after February 16, 2009 (see instructions)?					
<input checked="" type="checkbox"/> No. Skip lines 10 through 19 and go to line 21. <input type="checkbox"/> Yes. If Form 1040, line 38, or Form 1040A, line 22, is less than \$135,000 (\$260,000 if married filing jointly), enter the amount of these taxes paid. Otherwise, skip lines 10 through 19, enter -0- on line 20, and go to line 21		10			
11 Enter the purchase price (before taxes) of the new motor vehicles (see instructions)		11			
12 Is the amount on line 11 more than \$49,500?					
<input type="checkbox"/> No. Enter the amount from line 10. <input type="checkbox"/> Yes. Figure the portion of the tax from line 10 that is attributable to the first \$49,500 of the purchase price of each new motor vehicle and enter it here (see instructions)		12			
13 Enter the amount from Form 1040, line 38, or Form 1040A, line 22		13			
14 Form 1040 filers only, enter the total of any -					
<ul style="list-style-type: none"> • Amounts from Form 2555, lines 45 and 50; Form 2555-EZ, line 18; and Form 4563, line 15, and • Exclusion of income from Puerto Rico 		14			
15 Add lines 13 and 14		15			
16 Enter \$125,000 (\$250,000 if married filing jointly)		16			
17 Is the amount on line 15 more than the amount on line 16?					
<input type="checkbox"/> No. Skip lines 17 through 19, enter the amount from line 12 on line 20, and go to line 21. <input type="checkbox"/> Yes. Subtract line 16 from line 15		17			
18 Divide the amount on line 17 by \$10,000. Enter the result as a decimal (rounded to at least three places). If the result is 1.000 or more, enter 1.000		18			
19 Multiply line 12 by line 18		19			
20 Subtract line 19 from line 12		20			
21 Add lines 4, 5, 6, 9, and 20. Enter the total here and on Form 1040, line 40a, or Form 1040A, line 24a. Also check the box on Form 1040, line 40b, or Form 1040A, line 24b.		21	8,850		

SCHEDULE M
(Form 1040A or 1040)

Department of the Treasury
Internal Revenue Service (99)

**Making Work Pay and Government
Retiree Credits**

▶ **Attach to Form 1040A, 1040, or 1040NR.**

▶ **See separate instructions.**

OMB No. 1545-0074

2009
Attachment
Sequence No. **166**

Name(s) shown on return

Bob Clark

Your social security number

400-00-1901

1a Important: See the instructions if you can be claimed as someone else's dependent or are filing Form 1040NR. Check the "No" box below and see the instructions if **(a)** you have a net loss from a business, **(b)** you received a taxable scholarship or fellowship grant not reported on a Form W-2, **(c)** your wages include pay for work performed while an inmate in a penal institution, **(d)** you received a pension or annuity from a nonqualified deferred compensation plan or a nongovernmental section 457 plan, or **(e)** you are filing Form 2555 or 2555-EZ.

Do you (and your spouse if filing jointly) have 2009 wages of more than \$6,451 (\$12,903 if married filing jointly)?

Yes. Skip lines 1a through 3. Enter \$400 (\$800 if married filing jointly) on line 4 and go to line 5.

No. Enter your earned income (see instructions) **1a**

b Nontaxable combat pay included on line 1a (see instructions) **1b**

2 Multiply line 1a by 6.2% (.062) **2**

3 Enter \$400 (\$800 if married filing jointly) **3**

4 Enter the **smaller** of line 2 or line 3 (unless you checked "Yes" on line 1a) **4** 400

5 Enter the amount from Form 1040, line 38*, or Form 1040A, line 22 **5** 19,000

6 Enter \$75,000 (\$150,000 if married filing jointly) **6** 75,000

7 Is the amount on line 5 more than the amount on line 6?

No. Skip line 8. Enter the amount from line 4 on line 9 below.

Yes. Subtract line 6 from line 5 **7**

8 Multiply line 7 by 2% (.02) **8**

9 Subtract line 8 from line 4. If zero or less, enter -0- **9** 400

10 Did you (or your spouse, if filing jointly) receive an economic recovery payment in 2009? You may have received this payment if you received social security benefits, supplemental security income, railroad retirement benefits, or veterans disability compensation or pension benefits (see instructions).

No. Enter -0- on line 10 and go to line 11.

Yes. Enter the total of the payments received by you (and your spouse, if filing jointly). Do not enter more than \$250 (\$500 if married filing jointly) **10** 0

11 Did you (or your spouse, if filing jointly) receive a pension or annuity in 2009 for services performed as an employee of the U.S. Government or any U.S. state or local government from work **not** covered by social security? Do not include any pension or annuity reported on Form W-2.

No. Enter -0- on line 11 and go to line 12.

Yes.

- If you checked "No" on line 10, enter \$250 (\$500 if married filing jointly and the answer on line 11 is "Yes" for both spouses)
- If you checked "Yes" on line 10, enter -0- (exception: enter \$250 if filing jointly and the spouse who received the pension or annuity did not receive an economic recovery payment described on line 10)

. **11**

12 Add lines 10 and 11 **12**

13 Subtract line 12 from line 9. If zero or less, enter -0- **13** 400

14 Making work pay and government retiree credits. Add lines 11 and 13. Enter the result here and on Form 1040, line 63; Form 1040A, line 40; or Form 1040NR, line 60. **14** 400

*If you are filing Form 2555, 2555-EZ, or 4563 or you are excluding income from Puerto Rico, see instructions.

Paid Preparer's Earned Income Credit Checklist

▶ **Do not send to the IRS. Keep for your records.**

For the definitions of the following terms, see **Pub. 596** for the year for which you are completing this form.

- **Investment Income**
- **Qualifying Child**
- **Earned Income**

A Taxpayer's name ▶ Bob Clark

B If joint return, spouse's name ▶ _____

Part I All Taxpayers

<p>1 Year after 2007 for which you are completing this form ▶ <u>2009</u></p>	
<p>2 Is the taxpayer's filing status married filing separately?</p> <p style="padding-left: 20px;">▶ If you checked "Yes" on line 2, stop; the taxpayer cannot take the EIC. Otherwise, continue.</p>	<p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>
<p>3 Does the taxpayer (and the taxpayer's spouse if filing jointly) have a social security number (SSN) that allows him or her to work or is valid for EIC purposes? See the instructions before answering</p> <p style="padding-left: 20px;">▶ If you checked "No" on line 3, stop; the taxpayer cannot take the EIC. Otherwise, continue.</p>	<p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>
<p>4 Is the taxpayer filing Form 2555 or Form 2555-EZ (relating to the exclusion of foreign earned income)?</p> <p style="padding-left: 20px;">▶ If you checked "Yes" on line 4, stop; the taxpayer cannot take the EIC. Otherwise, continue.</p>	<p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>
<p>5a Was the taxpayer a nonresident alien for any part of the year on line 1?</p> <p style="padding-left: 20px;">▶ If you checked "Yes" on line 5a, go to line 5b. Otherwise, skip line 5b and go to line 6.</p>	<p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>
<p>b Is the taxpayer's filing status married filing jointly?</p> <p style="padding-left: 20px;">▶ If you checked "Yes" on line 5a and "No" on line 5b, stop; the taxpayer cannot take the EIC. Otherwise, continue.</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>
<p>6 Is the taxpayer's investment income more than the limit that applies to the year on line 1? See Pub. 596 for the limit.</p> <p style="padding-left: 20px;">▶ If you checked "Yes" on line 6, stop; the taxpayer cannot take the EIC. Otherwise, continue.</p>	<p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>
<p>7 Could the taxpayer, or the taxpayer's spouse if filing jointly, be a qualifying child of another person for the year on line 1?</p> <p style="padding-left: 20px;">▶ If you checked "Yes" on line 7, stop; the taxpayer cannot take the EIC. Otherwise, go to Part II or Part III, whichever applies.</p>	<p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>

Part II Taxpayers With a Child	Child 1	Child 2
<p>Caution. If there are two children, complete lines 8 through 14 for one child before going to the next column.</p> <p>8 Child's name</p>	Anthony Clark	
<p>9 Is the child the taxpayer's son, daughter, stepchild, foster child, brother, sister, stepbrother, stepsister, or a descendant of any of them?</p>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
<p>10 Is either of the following true?</p> <ul style="list-style-type: none"> • The child is unmarried, or • The child is married and can be claimed as the taxpayer's dependent 	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
<p>11 Did the child live with the taxpayer in the United States for over half of the year? See the instructions before answering</p>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
<p>12 Was the child (at the end of the year on line 1) -</p> <ul style="list-style-type: none"> • Under age 19, • Under age 24 and a full-time student (see definition in Pub. 596), or • Any age and permanently and totally disabled? <p>▶ If you checked "Yes" on lines 9, 10, 11, and 12, the child is the taxpayer's qualifying child; go to line 13a. If you checked "No" on line 9, 10, 11, or 12, the child is not the taxpayer's qualifying child. If there is more than one child, complete lines 8 through 14 for the other child(ren) (but for no more than two qualifying children). If the taxpayer does not have a qualifying child, go to Part III to see if the taxpayer can take the EIC for taxpayers who do not have a qualifying child.</p>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
<p>13a Could any other person check "Yes" on lines 9, 10, 11, and 12 for the child?</p> <p>▶ If you checked "No" on line 13a, go to line 14. Otherwise, go to line 13b.</p>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
<p>b Enter the child's relationship to the other person(s)</p>		
<p>c If the tiebreaker rules apply, would the child be treated as the taxpayer's qualifying child? See the instructions before answering</p> <p>▶ If you checked "Yes" on line 13c, go to line 14. Otherwise, explain to the taxpayer that if both the taxpayer and the other person(s) claim any of the six tax benefits listed on page 4, the IRS will apply the tiebreaker rules, and the taxpayer's benefits may be disallowed. Then, if the taxpayer wants to take the EIC based on this child, complete lines 14 and 15. If not, and there are no other qualifying children, the taxpayer cannot take the EIC, including the EIC for taxpayers without a qualifying child; do not complete Part III. If there is more than one child, complete lines 8 through 14 for the other child(ren) (but for no more than two qualifying children).</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Don't know	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Don't know
<p>14 Does the qualifying child have an SSN that allows him or her to work or is valid for EIC purposes? See the instructions before answering</p> <p>▶ If you checked "No" on line 14, the taxpayer cannot take the EIC based on this child and cannot take the EIC for taxpayers who do not have a qualifying child. If there is more than one child, complete lines 8 through 14 for the other child(ren) (but for no more than two qualifying children). If you checked "Yes" on line 14, continue.</p>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
<p>15 Are the taxpayer's earned income and adjusted gross income each less than the limit that applies to the taxpayer for the year on line 1? See Pub. 596 for the limit.</p> <p>▶ If you checked "No" on line 15, stop; the taxpayer cannot take the EIC. If you checked "Yes" on line 15, the taxpayer can take the EIC. Complete Schedule EIC and attach it to the taxpayer's return. If there are two qualifying children with valid SSNs, list them on Schedule EIC in the same order as they are listed here. If the taxpayer's EIC was reduced or disallowed for a year after 1996, see Pub. 596 to see if Form 8862 must be filed. Go to line 20.</p>		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

Part III Taxpayers Without a Qualifying Child

<p>16 Was the taxpayer's main home, and the main home of the taxpayer's spouse if filing jointly, in the United States for more than half the year? (Military personnel on extended active duty outside the United States are considered to be living in the United States during that duty period. See Pub. 596.)</p> <p> ▶ If you checked "No" on line 16, stop; the taxpayer cannot take the EIC. Otherwise, continue.</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>
<p>17 Was the taxpayer, or the taxpayer's spouse if filing jointly, at least age 25 but under age 65 at the end of the year on line 1?</p> <p> ▶ If you checked "No" on line 17, stop; the taxpayer cannot take the EIC. Otherwise, continue.</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>
<p>18 Is the taxpayer, or the taxpayer's spouse if filing jointly, eligible to be claimed as a dependent on anyone else's federal income tax return for the year on line 1?</p> <p> ▶ If you checked "Yes" on line 18, stop; the taxpayer cannot take the EIC. Otherwise, continue.</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>
<p>19 Are the taxpayer's earned income and adjusted gross income each less than the limit that applies to the taxpayer for the year on line 1? See Pub. 596 for the limit</p> <p> ▶ If you checked "No" on line 19, the taxpayer cannot take the EIC. If you checked "Yes" on line 19, the taxpayer can take the EIC. If the taxpayer's EIC was reduced or disallowed for a year after 1996, see Pub. 596 to find out if Form 8862 must be filed. Go to line 20.</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>

Part IV Due Diligence Requirements

<p>20 Did you complete Form 8867 based on information provided by the taxpayer or reasonably obtained by you?</p>	<p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>
<p>21 Did you complete the EIC worksheet found in the Form 1040, 1040A, or 1040EZ instructions (or your own worksheet that provides the same information as the 1040, 1040A, or 1040EZ worksheet)?</p>	<p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>
<p>22 Did you comply with the knowledge requirements? (To comply with the knowledge requirements, you must not know or have reason to know that any information used to determine the taxpayer's eligibility for, and the amount of, the EIC is incorrect. You may not ignore the implications of information furnished to or known by you, and you must make reasonable inquiries if the information furnished appears to be incorrect, inconsistent, or incomplete.)</p>	<p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>
<p>23 Did you keep the following records?</p> <ul style="list-style-type: none"> ● Form 8867 (or your own form or files), ● The EIC worksheet(s) or your own worksheet(s), and ● A record of how, when, and from whom the information used to prepare the form and worksheet(s) was obtained <p> ▶ If you checked "Yes" on lines 20, 21, 22, and 23, and keep the records described on line 23 for 3 years (see instructions), you have complied with all the due diligence requirements.</p> <p> ▶ If you checked "No" on line 20, 21, 22, or 23, you have not complied with all the due diligence requirements and may have to pay a \$100 penalty for each failure to comply.</p>	<p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>

Under penalties of perjury, I declare that I have examined the above information and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Your signature	Date <u>12-03-2009</u>	Spouse's signature. If joint return, BOTH must sign.	Date
Paid preparer's signature	Date <u>12-03-2009</u>		