

Form 1040

Department of the Treasury—Internal Revenue Service U.S. Individual Income Tax Return 2006

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

Label

(See instructions on page 16.)

Use the IRS label.

Otherwise, please print or type.

Label Here

For the year Jan. 1–Dec. 31, 2006, or other tax year beginning , 2006, ending , 20 OMB No. 1545-0074

Your first name and initial Last name Your social security number

[Redacted]

Home address (number and street). If you have a P.O. box, see page 16. 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 page 16) [] You [Redacted]

Filing Status

Check only one box.

1 [] Single 4 [] Head of household (with qualifying person). (See page 17.) If the qualifying person is a child but not your dependent, enter this child's name here.

[Redacted]

5 [] Qualifying widow(er) with dependent child (see page 17)

Exemptions

6a [] Yourself. If someone can claim you as a dependent, do not check box 6a Boxes checked on 6a and 6b

b [] Spouse

c Dependents:

(1) First name Last name (2) Dependent's social security number (3) Dependent's relationship to you

[Redacted]

[Redacted]

[Redacted]

[Redacted]

[Redacted]

d Total number of exemptions claimed Add numbers on lines above []

If more than four dependents, see page 19.

Income

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

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

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

[Redacted]

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

b Qualified dividends (see page 23) 9b

[Redacted]

If you did not get a W-2, see page 23.

15a IRA distributions 15b

16a Pensions and annuities 16b

[Redacted]

Enclose, but do not attach, any payment. Also, please use Form 1040-V.

20a Social security benefits 20b

21 Other income. List type and amount (see page 29) 21

22 Add the amounts in the far right column for lines 7 through 21. This is your total income 22

Adjusted Gross Income

[Redacted]

32 IRA deduction (see page 31) 32

33 Student loan interest deduction (see page 33) 33

34 Jury duty pay you gave to your employer 34

[Redacted]

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

Tax and Credits

38	Amount from line 37 (adjusted gross income)	38	
39a	Check <input type="checkbox"/> You were born before January 2, 1942, <input type="checkbox"/> Blind. Total boxes if: [redacted] checked 39a		
40	Itemized deductions (from Schedule A) or your standard deduction (see left margin)	40	
41	Subtract line 40 from line 38	41	
42	[redacted] multiply \$3,300 by the total number of exemptions claimed on line 6d	42	
43	Taxable income. Subtract line 42 from line 41. If line 42 is more than line 41, enter -0-	43	
44	Tax (see page 36).	44	
45	[redacted]		
46	Add lines 44 and 45	46	
47	Foreign tax credit.	47	
48	[redacted]		
49	[redacted]		
50	Education credits.	50	
51	[redacted]		
52	[redacted]		
53	[redacted]		
54	[redacted]		
55	[redacted]		
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	

Other Taxes

58	Self-employment tax. Attach Schedule SE	58	
59	Social security and Medicare tax on tip income not reported to employer.	59	
60	[redacted]		
61	[redacted]		
62	[redacted]		
63	Add lines 57 through 62. This is your total tax	63	

Payments

64	Federal income tax withheld from Forms W-2 and 1099	64	
65	2006 estimated tax payments and amount applied from 2005 return	65	
66a	[redacted]		
b	[redacted]		
67	[redacted]		
68	[redacted]		
69	[redacted]		
70	[redacted]		
71	[redacted]		
72	Add lines 64, 65, 66a, and 67 through 71. These are your total payments	72	

Refund

Direct deposit? See page 61 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	
74a	[redacted]		
b	[redacted]		
d	[redacted]		
75	[redacted]		

Amount You Owe

76	Amount you owe. Subtract line 72 from line 63. For details on how to pay, see page 62	76	
77	[redacted]		

Third Party Designee

Do you want to allow another person to discuss this return with the IRS (see page 63)? **Yes.** Complete the following. **No**

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

Joint return? See page 17. 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 <input type="checkbox"/>	Preparer's SSN or PTIN
Firm's name (or yours if self-employed), address, and ZIP code	EIN	Phone no. ()	